

PERSONNEL POLICY MANUAL



SAWYER COUNTY

STATE OF WISCONSIN

Approved by County Board: 12/16/14

The Sawyer County Personnel Policy Manual expresses the guidelines of Sawyer County regarding County Policy, but it is not a contract with employees. The County may modify this policy at any time.

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INTRODUCTION

PURPOSE

This Manual sets forth Sawyer County employee policies. Its purpose is to familiarize employees with the personnel policies of the County.

Because all employees are considered "at-will" employees, nothing contained in this document is to be construed by any employee as establishing, creating or constituting a written, oral or implied contract of employment. Furthermore, nothing herein will be construed as a guarantee of continued employment nor as a guarantee of any benefits or conditions of employment.

The provisions set forth in this Manual supersede all prior personnel policies and procedures, whether written or established by past practice. Because this Employee Manual is based on County operational policies and procedures, federal and state mandated policies and procedures, and present employee fringe benefit programs which are all to some degree subject to change, this manual is also subject to change. The County reserves the right to revise, add, subtract, correct, delete or update any part or all of the materials in this Manual. For employees who are covered under a collective bargaining agreement, the terms of the bargaining agreement supersede the terms of the Manual.

EQUAL EMPLOYMENT OPPORTUNITY

Sawyer County shall comply with the principles and practices of equal opportunity employment applicable by Federal, State and local laws and regulations prohibiting employment discrimination on the basis of race, color, age, religion, sex, sexual orientation, national origin, disability, marital status, veteran status, political affiliation, arrest, social media and conviction record or other non-job related factors protected by law to all qualified employees and applicants for employment. Equal consideration to all qualified persons includes, but is not limited to hiring, placement, promotion, transfer, or demotion; recruitment; compensation for employment; conditions of employment; training; and, involuntary layoff or separation from employment.

Sawyer County does not discriminate against individuals with disabilities and will make reasonable accommodations for individuals with disabilities provided they are able to perform the essential functions of the position. In all cases, the County will comply with the provisions required by the Americans with Disabilities Act of 1990.

ROLE OF MANAGEMENT

Certain rights and responsibilities are imposed by state and federal laws and regulations. Many of these rights and responsibilities have implications for policies and procedures governing employment. For this reason, the County reserves any and all management rights regarding employees' employment status.

These rights and responsibilities include, but not limited to, the right to:

- Maintain efficiency of County operations;
- Manage and direct the employees;
- Establish reasonable work rules and standards;
- Hire, promote, schedule, transfer and assign employees;
- Lay off employees;
- Take corrective disciplinary action;
- Discharge employees or take disciplinary action;
- Schedule overtime;
- Develop job descriptions;
- Assign work duties;

- Introduce new or improved methods or facilities or change existing methods or facilities;
- Contract out for goods and services;
- Discontinue certain operations;
- Direct all operations of the County

ACKNOWLEDGMENT FORM

The “*Sawyer County Personnel Policy Manual*” is available either in paper format, or in electronic format on the County’s Intranet server. Those employees with access to the Intranet server will not be supplied with paper copies, but will be granted electronic access to the policies.

I acknowledge that I have either received a copy of, or have been granted electronic access to, the revised “*Sawyer County Personnel Policy Manual*” dated 3/19/2015 7:08 PM.

I acknowledge that revisions to the Manual may occur, and I understand that revised information shall supersede, modify, or eliminate existing policies.

Furthermore, I acknowledge that this Manual is neither a contract of employment nor a legal document. I understand that it is my responsibility to read, review, and comply with the policies contained in this Manual and any revisions made to it.

Signature

Date

GENERAL PROVISIONS

Definitions

Purpose – to provide clarity and consistency when referencing employee positions and any associated employment benefits.

Definitions - the following words and phrases as utilized in this policy manual will be the definitions set forth, unless a different meaning is specifically afforded to the word or phrase via definition established in the policy.

Full-time Employees An employee who regularly works equivalent to the department's normal, full-time work period on a regular basis.

Part-time Employees An employee who regularly works equivalent to the department's normal, part-time work period on a regular basis.

Limited-Term Employees Employment in a short-term position for a period not to exceed 1,200 hours. Limited term employees will not be entitled to any fringe benefits, unless required by law, and shall not accrue seniority rights. Such employment shall be for the purpose of temporary replacement of employees on leave, for completion of special short-term projects, or for assisting with work overloads during peak periods in the County's departments.

Seasonal Employees Employment in a position not more than 180 continuous calendar days, including weekends, County-observed holidays and other days incorporating both voluntary and/or involuntary leave. Seasonal employees are not eligible for any employee benefits.

Anniversary date the date an employee begins regular employment.

Appointing authority the person, governing body or designee which has the authority granted by law or ordinance to appoint an individual to or remove an individual from positions in county service. The county committee of jurisdiction and County Board will appoint heads of all departments and offices and the head of each department or office will appoint all subordinate personnel.

Harassment Unwelcome conduct, whether verbal, physical, or visual, that is based on a person's protected status as defined by law.

Immediate family the employee's spouse, child, parent, brother, sister, mother-in-law, father-in-law, sister-in-law, brother-in-law, son-in-law or daughter-in-law, or any family member residing in the employee's household.

Position A combination of duties and responsibilities assigned to be performed by an employee.

Promotion A change in status whereby an employee is advanced from one position to a position of a higher class and for which a higher rate of pay is prescribed.

Sexual harassment Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature which affect an individual's work performance or work environment and which infringe on an individual's personal rights.

Supervisor The governing body, department head or designee which is responsible for the work product, control, direction of work assignments and the evaluation of subordinate employees.

Termination Voluntary or involuntary separation of an employee from employment with the County due to retirement, dismissal, death or resignation.

Work Week Period of time in which employees are compensated for the amount of hours worked. The County uses the work week beginning Sunday through Saturday.

CHAPTER 1 - RECRUITMENT, HIRING and SEPARATION FROM EMPLOYMENT POLICY 101 Recruitment and Selection

1. Purpose

Sawyer County seeks to recruit and select the best quality and qualified individuals who fits the needs and culture of the County. Recruitment, selection and interview guidelines shall be conducted in compliance with all applicable laws and Sawyer County policies including equal employment opportunity laws, regulations and Affirmative Action Plans. The selection process will include an evaluation of the applicant's relative abilities, skills, knowledge and experience.

2. Authorization

All positions for hire are subject to the review and approval of the Committee of Jurisdiction, Administration Committee and County Board.

3. Vacancies

When the County determines that a vacancy or new position will be filled, the County will normally post a notice of such vacancy or new position in all designated areas. Job openings will normally be posted for a minimum of five (5) working days. When in the interests of the County, the County may attempt to fill a job vacancy by promotion from within and in doing so the County may consider both internal and external candidates.

4. Recruitment and Selection

Recruitment and selection will be conducted in a manner to ensure competition, provide equal employment opportunity, and prohibit illegal discrimination.

5. Pre-Employment Testing and Background Checks

County Administrator will make recommendations with regard to the structure of pre-employment selection tests. In order to ensure that all pre-employment tests are work-related and non-discriminatory in nature, County Administrator will administer, or make the decision to delegate, the testing process.

Sawyer County requires candidates passing a background investigation prior to employment.

Recruitment and selection will be conducted in a manner to ensure competition, provide equal employment opportunity, and prohibit discrimination.

POLICY 102 Nepotism

1. Purpose

In order to avoid situations that create potential or perceived favoritism, or perceived or actual conflict of interest, the County prohibits having an employee supervise close relatives, employees dating or otherwise involved in an intimate relationship within the same department, shift and/or work unit.

2. Definitions of "Related"

For purposes of this policy, related persons will mean spouse, mother, father, son, daughter, sister, brother, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother-in-law, father-in-law, aunt, uncle, niece, nephew, stepchild, stepparent, grandchild and grandparent.

3. County Administrator Review

While the above-definition identifies relationships that are likely to be perceived as a conflict of interest in an immediate superior-subordinate relationship, employees should also guard against other superior-subordinate relationships that could be perceived as creating a conflict of interest. In order to safeguard the interests of both employees and the County, County Administrator should be alerted to any employee relationships that pose, or potentially pose, a conflict of interest.

POLICY 103 Residency Requirement

1. Purpose

To provide employees and candidates for employment information pertaining to the requirements of residency while employed with Sawyer County.

2. Policy

In general, most County employees do not need to reside within the County boundaries per Wisconsin State Statutes 66.0502.

To provide for efficiency of operations employees in key positions who are required to be available for emergency duty or who, by the nature of their position, must be available for work on very short notice, shall reside within a designated travel time or distance from their work site.

3. Department Policies

The following departments or positions will have the following requirements:

- a. Highway Department employees will need to live within 30 minutes of their reporting shop.
- b. Sheriff Office Deputy employees will need to live within 15 miles of the county line. However, if an employee does not reside within the County boundaries the county squad car must remain within County boundaries.
- c. Sheriff Office Jail and Dispatch employees will need to live within 60 miles of the Law Enforcement Building.

Newly hired employees in these departments will be required to meet the residency requirements as a condition of employment and the requirement will need to be met within one year of hire.

POLICY 104 Orientation

1. Policy

All new employees of the County will be scheduled to meet with County Administrator, Payroll and the Department Head on or near their first day of work for general orientation and to complete necessary payroll and benefit paperwork.

2. Information

Each employee will be provided with information on employee benefits, policies and operations, position descriptions and other related materials.

3. Department Orientation

Each employee will be provided with department information, work rules and operations by the Department Head and/or Unit Supervisor.

POLICY 105 Personnel Records

1. Policy

Access to personnel records will be authorized in accordance with public records laws and regulations.

2. Procedure

County Administrator maintains the official files of all County employees and is the exclusive file of the County. The files include all records required by law and other information as deemed appropriate by Human Resources.

POLICY 106

Position Classifications/Descriptions

1. Policy

All employees will have an official position classification and job description.

2. Position Descriptions

Each approved position will have a written position description. It is recommended that position descriptions be reviewed annually.

3. Approval of position descriptions

All position descriptions will be approved by Committee of Jurisdiction. When a position is being reviewed and requested to be filled all position descriptions will be reviewed and approved by the Committee of Jurisdiction, Administration Committee and County Board.

POLICY 107

Separation of Employment

1. Policy

Separation from employment includes but is not limited to resignation, retirement, reduction in workforce, failure to return from approved leave, discharge from employment, or disability. Such employment separations may be voluntary or involuntary.

2. Notice

Non-Exempt employees who voluntarily choose to terminate their employment with the County shall be required to provide at least two calendar weeks advance notice, excluding any use of paid benefit leave time or any other like time.

Exempt employees wishing to resign in good standing with the County, will provide at least 30 calendar days advance notice of their resignation, excluding any use of paid benefit leave time or any other like time, and will be effective upon receipt by the appointing authority or upon the date specified.

Retiring employees may extend their final date of retirement using unused vacation days, provided they satisfy the adequate notice provisions. Employee benefits are not paid beyond the employee's last day of actual work, which is the last day the employee is physically at work.

3. Separation Procedures

Upon any separation from employment, compensation and benefits which have been earned and accrued will be credited pursuant to law. Resigning employees should make an appointment with County Administrator for separation information and an exit interview.

Shorter notice may be accepted if agreed to by the employee, Department Head.

4. Layoff/Reduction in Workforce

Reductions in the workforce may occur through layoffs or furloughs, in addition to attrition or position elimination or modification. The County will determine the Departments, number of positions and persons impacted by any reduction in workforce.

In the event of a reduction in workforce through layoff or furlough, affected employees will be laid off or furloughed based on skills, abilities, qualifications, and the interests and needs of the County.

5. Return of County Equipment

Prior to separation from employment, County equipment that was assigned to the employee must be returned to the County. Such equipment includes, but is not limited to, Identification/Key Card, Keys, Tape Recorders, Laptop Computers, Calculators, Radio, Phone/Pager.

Department Head or designee will coordinate to have all access to County buildings and Computer systems removed immediately.

6. Notice of Resignation

When an employee resigns, a notice of resignation must be provided to their supervisor or department head in writing, which needs to be forwarded within one working day to County Administrator.

When a Department Head resigns, a notice of resignation must be provided to County Administrator and their Committee of Jurisdiction in writing.

The written notice of resignation should contain:

- The employee's full name;
- The accurate position title and department;
- The current date of the letter;
- The effective date of the resignation; and
- The date of the last day to be worked

CHAPTER 2 – EMPLOYEE CONDUCT

POLICY 201 Employee Conduct and Workplace Rules/Standards

1. Purpose

It is Sawyer County's policy that employees maintain a working environment that encourages mutual respect, promotes civil and congenial relationships among employees and is free from all forms of harassment and violence.

2. Policy

The County expects all employees to demonstrate professional, competent and reasonable behavior, and to continually serve, both on-duty and off-duty, as positive examples of the high-quality personnel affiliated with this organization and consistent with the high expectations of the public.

Compliance with the policies, rules and general expectations of conduct is of paramount importance in order to fulfill these objectives and for the employee to have a successful career in the County. Failure to comply with these policies, rules and general expectations of conduct can undermine these objectives, and the trust and confidence that the public, businesses, employees and officers of the County must have in that employee.

The County treats all violations of policy, the rules and general expectations of conduct very seriously. Violations of these policies, the rules, and general expectations of conduct can subject an employee to discipline, up to and including discharge.

3. Examples of Behaviors or Actions.

Listed below are examples of behaviors or actions, which may result in discipline or discharge. No list of rules or types of unacceptable conduct can substitute for the sound and reasonable judgment expected of each employee. It is impossible to list every conceivable type of unacceptable conduct contrary to the interests of the County. While it is impossible to list all types of unacceptable conduct, the County believes certain acts of misconduct, standing alone, warrant serious discipline up to and including discharge, such as the following:

- a) Circumventing the chain of command or undermining the authority of a supervisor;
- b) Failing to cooperate with others;
- c) Incompetence or inefficiency in the performance of duties, substandard quality or quantity of work, including deliberate reduction of output, or failure to complete assignments promptly and accurately;
- d) Possession, use, or being under the influence of drugs or alcohol while on duty;
- e) Violation of smoke, alcohol, and drug-free workplace policies or regulations;
- f) Conviction of a felony or misdemeanor directly related to the employee's duties;
- g) Insubordination or failure to perform duties or directives as instructed; arguing, verbal abuse or assault of others;
- h) Unauthorized possession of weapons or firearms during work time or on County premises or property;
- i) Fighting, disturbing or violent behavior, threatening, humiliating, intimidation or harassment of others;
- j) Retaliation and/or reprisal against an employee who genuinely, and in good faith, reports threats of bullying or workplace violence;

- k)** Use of offensive, profane or abusive language, disrespectful discourteous, insulting, abusive or inflammatory conduct toward others;
- l)** Unauthorized or inappropriate use of identification cards or keys, or unauthorized access to data, e-mails, or restricted areas;
- m)** Failing to completely and accurately document relevant information, including falsification of a time card or other records;
- n)** Theft or misappropriation of County property or the property of others, including theft of work time, excessive time at break periods, misuse of sick leave or other designated leave, misrepresenting work time, or failing to accurately record work time;
- o)** Failure to work scheduled overtime, or overtime worked without prior authorization from the supervisor.
- p)** Misuse, excessive personal use, carelessness, negligence, or unauthorized use in the handling or control of County property;
- q)** Careless or sloppy work resulting in poor quality, or concealing defective work;
- r)** Damage or defacing of County or employee property;
- s)** Absence of two work days without notice;
- t)** Excessive absenteeism or tardiness, including excessive unscheduled or unexcused absences;
- u)** Failing to promptly report absence or tardiness;
- v)** Working another job while absent due to an unscheduled or unexcused absence;
- w)** Engaging in illegal or immoral conduct;
- x)** Unauthorized solicitations or distributions;
- y)** Dishonest, misleading, or deceptive conduct;
- z)** Horseplay, violating of safety rules, or engaging in conduct that creates an unsafe work environment;
- aa)** Engaging in conduct or activities which serve to lengthen the healing period for a work-related injury;
- bb)** Failure to promptly report defective equipment, safety hazards, or failure to report and injury or accident immediately;
- cc)** Excessive use of personal property or technology during working hours;
- dd)** Loafing or sleeping during working hours;
- ee)** Leaving the job without permission;
- ff)** Engaging in illegal discrimination or harassing conduct;
- gg)** Unauthorized release or disclosure of confidential information;
- hh)** Where applicable, violation of state or federal laws pertaining to duties as a caregiver;
- ii)** Gambling on County property;
- jj)** Making intimidating, threatening, hostile, false or malicious statements, including rumor-mongering, gossiping, and false reports for harassment or violence;
- kk)** Conducting personal business on County time or property;

- II) Failing to fully comply with, or violation of, expectations of conduct, County or departmental policies, regulations, or procedures.

The County reserves the right to modify this list at any time or determine whether any other conduct is contrary to the interests of the County and warranting of disciplinary action up to and including discharge.

POLICY 202 Disciplinary Procedures

1. Purpose

While employees are at will, corrective and disciplinary action may be taken for violations of standards of conduct, violations of policies and procedures, or for unsatisfactory work performance

2. Disciplinary Procedure

Discipline may be applied to County employees for violation of this Manual, or other reasonable work standards not specifically defined herein, but only after consultation with the County Administrator. As part of the disciplinary process, the County may conduct an investigation to review the allegations and conduct any necessary interviews. The action chosen by the County may involve varying degrees of disciplinary action up to and including immediate termination, if warranted. Repeated infractions of even minor offenses can and will result in increasingly severe disciplinary actions. The County reserves the right to take any such disciplinary action it considers appropriate.

3. Demotion, Suspension or Termination. The Department Head shall discuss all demotion, suspension or termination actions with the County Administrator, who will then obtain approval of the County Administrator before taking any such action. Any administrative leave suspension pending the outcome of an investigation may be with or without pay as determined jointly by County Administrator, Administrative Coordinator and Labor Counsel.

POLICY 203 Grievance Procedures

1. Purpose

This grievance procedure is established pursuant to Wis. Stat. § 66.0509(1m). Eligible employees shall use the procedure to resolve disputes with Sawyer County regarding covered employee termination, employee discipline or workplace safety issues. This grievance procedure may be modified or eliminated by the County at any time, with or without prior notice. This policy is not a guarantee of employment, a guarantee of any rights or benefits, does not create or grant covered employees with a property interest in their employment or tenure rights of any kind and does not constitute a contract of employment, express or implied. Unless specifically required by another statute or code, the County's employment relationship with employees eligible to use this procedure is at will and employment may be terminated at any time for any reason, with or without cause and with or without notice, at the option of the County or the employee.

2 Definitions

The following definitions shall apply to this grievance procedure:

“Employee” for purposes of a grievance of Discipline and Termination (as defined in this grievance procedure) means a regular full-time employee or a part-time employee who has worked one thousand two hundred hours (1200) for the County in the year preceding the event which is being grieved. “Employee” does not include, without limitation, any of the following: elected officials, other part-time employees, temporary employees, seasonal employees, contract employees, limited term employees, contractors or their respective employees, employees covered by a collective bargaining agreement which contains a grievance procedure covering Discipline or Termination (as defined in this grievance procedure) or any

employees, officials or officers that serve at the pleasure of an appointing authority as provided by Wisconsin statutes.

“Employee” for purposes of Workplace Safety (as defined in this procedure) means any employee of the County.

“Discipline” is defined as any of the following adverse employment actions: disciplinary suspension of employment, disciplinary reduction in base pay; and disciplinary reduction in rank or demotion with a reduction in pay. “Discipline” does not include, without limitation, any of the following actions: layoffs or workforce reduction activities; non-disciplinary wage, benefit or salary adjustments or reductions; non-disciplinary reductions in rank or demotions; plans of correction or performance improvement; performance evaluations or reviews; documentation of employee acts or omissions in an employment file; oral or written reprimands; administrative suspensions pending investigation of misconduct or nonperformance; or change in assignment or assignment location.

“Termination” is defined as an involuntary separation of employment initiated by the County that is not a layoff, furlough or workforce reduction or termination arising from disability.

“Working day” means a day when the Sawyer County Courthouse is open for business.

“Workplace safety” means any condition of employment related to the physical health and safety of employees, including the safety of the physical work environment, the safe operation of workplace equipment and tools, provision of personal protective equipment, and accident risks. Workplace Safety does not include conditions of employment unrelated to physical health and safety matters, including, but not limited to, hours, overtime, and work schedules.

3. GRIEVANCE PROCEDURE FOR DISCIPLINE AND TERMINATION.

A. Filing Procedure.

1. Who May File A Grievance For Discipline Or Termination.

A grievance may only be filed by the “Employee” who is the subject of the Discipline or Termination.

2. Initiating A Grievance; Extensions Of Time; Impact Of An Untimely Filing.

An Employee may initiate a grievance relating to Discipline or Termination by presenting a written grievance on the form attached to this policy as Appendix A to the County Administrator within five (5) working days of the event giving rise to the grievance or the date upon which the Employee should have reasonably known the facts giving rise to the grievance. The Employee must sign and date the grievance. A grievance will not be considered filed until the employee signs the grievance and the grievance is received by the County Administrator.

The County Administrator may, in his or her sole and absolute discretion, agree to extend the time for filing a grievance for Discipline or Termination for up to an additional five (5) working days based upon receipt of a written request for an extension from the Employee prior to the expiration of the original filing deadline. An Employee’s written request for an extension of time must identify the extenuating circumstances which prevent the Employee from complying with the original filing deadline. The decision of the County Administrator regarding a request for an extension of time shall be final and binding and not subject to appeal. Failure to timely file a grievance with the County Administrator within five (5) working days or any period of extension granted by the County Administrator shall constitute a waiver of the Employee’s right to use the grievance procedure and an abandonment of the grievance.

3. Incomplete Grievance; Impact Of Failure To Provide Complete Information.

If a timely filed grievance is missing information or is incomplete, the County Administrator shall issue a written request to the Employee identifying the information needed to complete the grievance form and proceed with the grievance procedure. The Employee shall have five (5) working days from receipt of the written request to provide the County Administrator with the missing information.

If the Employee timely responds, and the County Administrator finds that the information provided by the Employee is complete, the grievance shall move forward in the grievance procedure. Failure of the Employee to timely provide the requested information to the County Administrator shall constitute a waiver of the right to use this grievance procedure and an abandonment of the grievance.

4. Grievance Verification.

By signing the grievance, the Employee is declaring under penalty of law that the statements contained in a grievance relating to Discipline or Termination are true and correct to the Employee's knowledge and belief. Any employee who files a grievance that is false or misleading or for the purposes of intimidation, annoyance or harassment or who otherwise files a grievance in bad faith is subject to disciplinary action.

B. County Answer

Upon receipt of a *timely and complete* grievance form, the County Administrator shall have five (5) working days to provide a written response to the Employee either granting the grievance or denying the grievance. In the event that the County Administrator fails to answer within five (5) working days, the grievance shall be deemed denied.

C. Request For Hearing.

An Employee shall have five (5) working days from receipt of the County's Answer denying the grievance or, in the event the County does not answer, ten (10) working days from the date the grievance was filed, in which to file a written request for hearing with the County Administrator. The County Administrator may, in his or her sole and absolute discretion, agree to extend the time for requesting a hearing for up to an additional five (5) working days based upon receipt of a written request for an extension from the Employee prior to the expiration of the original filing deadline. An Employee's written request for an extension of time must identify the extenuating circumstances which prevent the Employee from complying with the original filing deadline. The decision of the County Administrator regarding a request for an extension of time shall be final and binding and not subject to appeal. Failure of the Office of County Administrator to receive a written request for hearing from the Employee within five (5) working days of the deadlines set forth above or any extension granted by the County Administrator shall constitute a waiver of the employee's right to use the grievance procedure and an abandonment of the grievance.

D. Hearing Procedure.

1. Selection Of An Impartial Hearing Officer.

As soon as reasonably possible following the receipt of a timely request for hearing, the County shall appoint an Impartial Hearing Officer and provide the grievant with the name of the individual appointed. The County shall pay any cost associated with the service of the Impartial Hearing Officer unless the Impartial Hearing Officer deems that the grievance is frivolous as provided herein.

2. Hearing Date.

Upon notification of his or her selection, the Impartial Hearing Officer shall schedule a hearing within a period of not less than twenty (20) working days nor greater than (40) working days from the date of appointment. Within ten (10) working days of the date of the appointment of the Impartial Hearing Officer, the Impartial Hearing Officer shall conduct a pre-hearing conference

with the Employee and the County's representative. Once a hearing date is scheduled, it may be adjourned only upon written request by the Employee or the County to the Impartial Hearing Officer and a finding by the Impartial Hearing Officer that there is "good cause" for an adjournment. The decision of the Impartial Hearing Officer regarding a request for adjournment shall be final, binding and not subject to appeal.

3. Discovery; grievance amendment; witnesses and documents; pre-hearing statement; no mediation.

There shall be no formal pre-hearing discovery. The Employee and the County shall exchange a list of witnesses they intend to call at the hearing and any documents and exhibits they intend to introduce at the hearing no less than ten (10) working days before the hearing. Any amendments to the grievance by the Employee shall be made in connection with the witness list and exchange of documents.

The parties shall provide a copy of the witness list, documents and exhibits to the Impartial Hearing Officer. No witness, exhibit or document which was not identified or exchanged by a party may be introduced in the hearing absent a written finding by the Impartial Hearing Officer that there was good cause for the failure of the party to identify a witness or document within the deadline for exchanging witnesses or documents. The Impartial Hearing Officer shall have the authority to issue subpoenas and administer oaths. Each party may file a pre-hearing statement of no more than two (2) type written single space pages outlining their position relative to any issues related to the grievance. The Impartial Hearing Officer may, with the consent of both the County and the Grievant, serve as a mediator or make an attempt to mediate the dispute.

4. Hearing.

a. Recording; Closed Hearing.

The hearing before the Impartial Hearing Officer will be digitally recorded upon the request of the Employee or the County. The County shall maintain any digital recording for the period required by law. A copy of the recording shall be provided at no cost to the Employee, the County and the Impartial Hearing Officer. The hearing shall be closed to the public.

b. Representation; fees and costs.

The Employee and the County may be represented by an attorney of their choice. Neither party shall be responsible for the attorneys' fees, witness fees or costs of the other.

c. Order Of Case; Cross-Examination.

The Employee shall call witnesses and present testimony and exhibits that are relevant to the grievance. At the close of the Employee's case, the County shall call its witnesses and present testimony and exhibits that are relevant to the grievance. The parties may cross-examine witnesses presented by the other party. The Impartial Hearing Officer may allow for opening or closing statements at the discretion of the Impartial Hearing Officer.

d. Rules of Evidence; Exclusion of evidence.

The Impartial Hearing Officer is not bound by rules of evidence and may admit all evidence that the Impartial Hearing Officer determines is relevant and may exclude immaterial, irrelevant or unduly repetitious testimony or evidence. The Impartial Hearing Officer shall recognize the rules of privilege. The Impartial Hearing Officer may not base any finding or conclusion based solely on hearsay evidence.

e. Right Of Impartial Hearing Officer To Question.

During the hearing, the Impartial Hearing Officer may ask questions as the Impartial Hearing Officer deems necessary.

f. Close of the Hearing; No briefs.

After the Employee and the County have finished introducing evidence, the Impartial Hearing Officer shall close the hearing. The parties shall have no right to file briefs or position statements following the hearing.

E. Burden Of Proof; Impartial Hearing Officer's Decision; Remedies

1. Burden Of Proof; Standard Of Review.

Unless specifically required by another statute or code, the Employee bears the burden of proof to persuade the Impartial Hearing Officer by clear and convincing and satisfactory evidence that the County's decision to Discipline/Terminate the Employee did not have a rational basis. If the Employee does not meet his or her burden of proof, the Impartial Hearing Officer shall deny the grievance.

In determining whether an Employee has proved by clear, convincing and satisfactory evidence that the County's decision to Discipline/Terminate did not have a rational basis, the Impartial Hearing Officer may only consider the evidence introduced at the hearing and the weight of that evidence. The Impartial Hearing Officer may not overturn the County's decision to Discipline/Terminate based upon his or her own personal judgment or opinion regarding the matter. Moreover, the Impartial Hearing Officer may not determine a decision to Discipline/Terminate did not have a rational basis based on the County's failure to implement or follow concepts of progressive discipline or just cause, in whole or in part, in making the decision to Discipline/Terminate the Employee. Finally, the Impartial Hearing Officer must recognize all County policies, rules, procedures and regulations and may not modify or disregard the same in determining whether the County's decision to Discipline/Terminate has a rational basis.

In cases involving a Termination based upon an Employee's failure to maintain the required certifications or licenses necessary to perform the job in question, the Employee shall bear the burden of showing by clear and convincing and satisfactory evidence that the Employee, at the time of Termination, was properly certified and licensed to perform the job the Employee held at the time of Termination.

2. Decision.

Unless otherwise agreed to by the parties, the Impartial Hearing Officer shall issue a written decision within ten (10) working days of the close of the record. The decision of the Impartial Hearing Officer shall, at a minimum, contain a statement of issues, standard of review, findings, and a remedy for the Employee if appropriate. If the Impartial Hearing Officer sustains the grievance, in whole or in part, the Impartial Hearing Officer's decision must include a detailed explanation as to why the County's decision to Discipline/Terminate has no rational basis as well as a detailed description of the Impartial Hearing Officer's reasons for reducing or modifying the Discipline/Termination imposed by the County.

3. Remedies.

If the grievance is sustained, the Impartial Hearing Officer may only award the Employee one or more of the following remedies: (a) reinstatement; (b) a lesser adverse employment action consisting of a suspension, reduction in the length of a suspension, written reprimand or documentation of employee acts and/or omissions in an employment file; (c) back pay; and (d) in the event of a reinstatement following termination, reimbursement of the County's applicable percentage of any payments made by the Employee for continuation of health insurance under the **Consolidated Omnibus Budget Reconciliation Act (COBRA)**. The Employee shall have a duty to mitigate damages and shall be required to submit proof of mitigation measures, if applicable.

4. GRIEVANCE PROCEDURE – WORKPLACE SAFETY

A. Preconditions To Filing.

1. Report Of An Unsafe Condition.

An employee may not file a grievance relating to a condition that the Employee believes constitutes a Workplace Safety violation unless the employee has first reported the condition to the County Administrator in writing on the attached Unsafe Condition Or Hazard form, Appendix B.

2. County Response.

Upon receiving written notice of an alleged Workplace Safety violation from an Employee in accordance with paragraph 1.04(A)(1) above, the County shall refer the matter to the County Board's Safety/Wellness Committee. The Safety/Wellness Committee shall, within fifteen (15) working days, investigate the condition and advise the employee in writing that the County: (a) has determined that the condition does not constitute a Workplace Safety violation and will not be taking corrective action; or (b) is taking corrective action in accordance with law to address the condition.

3. Grievance Filing Limitation.

If the County advises the employee in writing within fifteen (15) working days that it is taking corrective action to address an alleged Workplace Safety violation in accordance with law, an Employee may not initiate a Workplace Safety grievance.

4. Dissatisfaction With The County's Corrective Action.

If, at completion of the County's corrective action, the Employee believes a Workplace Safety violation continues to exist, the Employee must resubmit a new Unsafe Condition or Hazard Report and follow the procedures in this paragraph prior to proceeding with a Workplace Safety grievance.

B. Filing Procedure.

1. Who May File A Workplace Safety Grievance.

A grievance may only be filed by an "Employee." The Employee need not be personally impacted by a condition alleged to constitute a Workplace Safety violation.

2. Initiating A Grievance.

An Employee may initiate a grievance relating to Workplace Safety by presenting a written grievance to the County Administrator within five (5) working days of: (a) the Employee's receipt of written notice from the County that the County will not be taking corrective action with respect to an alleged Workplace Safety violation; (b) the County's failure to begin corrective action relative to a Workplace Safety violation within ten (10) working days of providing notice to the Employee that it is taking corrective action as set forth in section 1.04(A)(2) above; (c) the failure of the County to respond to a report of a Workplace Safety violation within fifteen (15) working days.

3. Extensions Of Time; Impact of Untimely Filing.

The County Administrator may, in his or her sole and absolute discretion, agree to extend the time for filing a grievance up to an additional five (5) working days based upon a written request for an extension received from the Employee prior to the expiration of the five (5) working day deadline to file the grievance. Any written request for an extension of time must explain the reasons why the Employee cannot meet the grievance filing deadline. Failure to timely file a grievance with the Office of the County Administrator within five (5) working days or any period of extension granted by the County Administrator shall constitute a waiver of the right to use the grievance procedure and an abandonment of the grievance.

4. Incomplete Grievance; Impact Of Failure To Provide Complete Information.

If a timely filed grievance is missing information or is incomplete, the Administrative Coordinator shall issue a written request to the Employee identifying the information needed to complete the grievance form and proceed with the grievance procedure. The Employee shall have five (5) working days from receipt of the written request to provide the County Administrator with the missing information.

If the Employee timely responds, and the County Administrator finds that the information provided by the Employee is complete, the grievance shall move forward in the grievance procedure. Failure of the Employee to timely provide the requested information shall constitute a waiver of the right to use this grievance procedure and an abandonment of the grievance.

5. Grievance Verification.

By signing the grievance, the Employee is verifying and affirming that the statements contained in a grievance relating to Workplace Safety are true and accurate to the best of the Employee's knowledge. Any employee who files a grievance that is false or misleading or for the purposes of intimidation, annoyance or harassment or who otherwise files a grievance in bad faith is subject to disciplinary action.

C. County Response.

Upon receipt of a *timely and complete* grievance form, the County Administrator shall have five (5) working days to provide a written response to the Employee either granting the grievance or denying the grievance. In the event that the County Administrator fails to respond within five (5) working days the grievance shall be deemed denied.

D. Request For Hearing.

An Employee shall have five (5) working days from receipt of the County's Response denying the grievance or, in the event the County does not answer, ten (10) working days from the date the grievance was filed, in which to file a written request for hearing with the County Administrator. The County Administrator may, in his or her sole and absolute discretion, agree to extend the time for requesting a hearing for up to an additional five (5) working days based upon receipt of a written request for an extension from the Employee prior to the expiration of the original filing deadline. An Employee's written request for an extension of time must identify the extenuating circumstances which prevent the Employee from complying with the original filing deadline. The decision of the County Administrator regarding a request for an extension of time shall be final and binding and not subject to appeal. Failure of the Office of County Administrator to receive a written request for hearing from the Employee within five (5) working days of the deadlines set forth above or any extension granted by the County Administrator shall constitute a waiver of the employee's right to use the grievance procedure and an abandonment of the grievance.

E. Hearing Procedure.

The selection of an Impartial Hearing Officer and hearing on a Workplace Safety violation shall be conducted in accordance with the Hearing Procedure in section 3.(D) above.

F. Burden Of Proof; Impartial Hearing Officer's Decision; Remedies

1. Burden Of Proof; Standard Of Review.

The County bears the burden of proving by a preponderance of the evidence that the condition identified by the Employee does not constitute a Workplace Safety violation and that no corrective action is required. If the County does not meet its burden of proof, the Impartial Hearing Officer shall grant the grievance.

2. Decision.

Unless otherwise agreed to by the parties, the Impartial Hearing Officer shall issue a written decision within ten (10) working days of the close of evidence. The decision of the

Impartial Hearing Officer shall, at a minimum, contain a statement of: (a) the standard of review; (b) the particular workplace conditions that are implicated by the Workplace Safety grievance; (c) the Impartial Hearing Officer's findings as to whether a Workplace Safety violation exists; and (d) a remedy, if any.

3. Remedies.

If the grievance is sustained, the Impartial Hearing Officer may order the County take corrective action in accordance with law to address the Workplace Safety violation. The Impartial Hearing Officer shall have no authority to require the County to take any specific corrective action or provide any specific remedy in response to the Workplace Safety violation.

5. COUNTY BOARD APPEAL OF DISCIPLINE, TERMINATION AND WORKPLACE SAFETY MATTERS

A. Who May File An Appeal.

An appeal of the Impartial Hearing Officer's decision may be filed by the Employee or the County.

B. Requesting An Appeal.

An appeal may be initiated to the County Board by filing an appeal with the Administrative Coordinator on the form attached as Appendix D within five (5) working days of the date of the Impartial Hearing Officer's decision. Failure to file a written appeal by the filing deadline will result in the waiver of the right to an appeal and the outcome of the proceedings before the hearing officer shall be final.

C. County Board Appeal.

When the County Administrator receives a timely request for appeal, the Administrative Coordinator shall forward the appeal to the chair of the County Board along with a copy of the hearing record inclusive of any exhibits introduced at the grievance hearing. The Chair shall schedule the appeal before the County Board for purposes of reviewing the hearing record and the Impartial Hearing Officer's decision as soon as reasonably possible. The County Board shall not take testimony, accept additional evidence, accept briefing, or otherwise conduct a hearing of any sort in relation to an appeal. The County Board may allow no more than twenty (20) minutes to the County and the Grievant to orally argue their respective position.

D. Standard Of Review.

The Board may overturn or otherwise modify the Impartial Hearing Officer's decision if the County Board finds the decision of the Impartial Hearing Officer to be arbitrary, oppressive or unreasonable and represented his or her will and not judgment.

E. Decision.

The County Board shall deliver a written decision to the Employee and the County Administrator no later than ten (10) working days from the date of the County Board meeting. The written decision shall contain: (1) a statement of the issues; (2) findings along with an explanation as to why any findings differ from the Impartial Hearing Officer; and (3) a remedy, if applicable, along with an explanation as to why any remedy differs from the remedy granted by the hearing examiner.

F. Remedies On Appeal; Discipline And Termination.

The County Board may award the following remedies to the Employee on appeal in a matter involving Discipline or Termination: (a) reinstatement; (b) a lesser adverse employment action consisting of a suspension, reduction in the length of a suspension, written reprimand or documentation of employee acts and/or omissions in an employment file; (c) back pay; and (d) in the event of a reinstatement following termination, reimbursement of the County's applicable percentage of any payments made by the Employee for continuation of health insurance under the **Consolidated Omnibus Budget Reconciliation Act (COBRA)**. The Employee shall have a duty to mitigate damages and shall be required to submit proof of mitigation measures, if applicable.

G. Remedies On Appeal; Workplace Safety.

If the County Board determines on appeal that a violation of Workplace Safety has occurred, the County Board may order that corrective action be taken by the County according to law.

H. Final Decision.

The decision of the County Board shall be final. Any judicial review of the County Board's decision shall be only as provided by law.

6. Appendices

Grievance Form - Appendix

POLICY 204 Performance Management

1. Purpose

To improve employee performance, strengthen supervisor-employee relationships, and recognize employee accomplishments and good work. Employee performance management will be considered in decisions affecting placement, employment, salary adjustment, promotions, transfers, corrective action or discipline, reemployment, and training.

2. Policy

TO BE DEVELOPED

CHAPTER 3 - TIME AT WORK AND TIME AWAY FROM WORK

POLICY 301 Hours of Work

1. Purpose

To provide employees with regular work hours and work schedules while ensuring staffing coverage necessary for effective operations.

2. Business Hours

County offices should generally be open from 8:00 a.m. until 4:00 p.m. Monday through Friday except for established holidays or as established by County Board. Departments may have modified hours as approved by the Committee of Jurisdiction.

3. Policy

Normal work hours are 8:00 a.m. to 4:00 p.m., however, scheduling may be adjusted by Department heads according to operational needs within a given department in order to run effectively and efficiently. Therefore, the exact starting and quitting times may vary and may be set by the Department Head designee. The Department Head should keep the Committee of Jurisdiction apprised of time changes.

With the excepting of employees working 24/7 work schedules, the workweek covers seven consecutive days beginning Sunday and ending Saturday.

4. Schedules and shifts

The following are exceptions to the policy:

- Highway – the regular work schedule will be set by the Highway Commissioner for hours worked for summer and winter seasons

- Sheriff – Jail – The regular work hours and rotation for jail division of the Sheriff Department will be determined by the Jail Administrator, with consultation with the Sheriff and Chief Deputy, per FLSA Standards.

- Sheriff – Dispatch – The regular work hours and rotation for dispatch division of the Sheriff Department will be determined by the Dispatch Supervisor, with consultation with the Sheriff and Chief Deputy, per FLSA Standards.
 - o Jail and Dispatch employees will be allowed to make a written request to their supervisor by November 1 of each year to change the shift they are working for the next year. The Supervisor will then review all requests to make a determination if changes can be made.

5. Flexible Schedules

The purpose of flexible schedules is to enhance the ability of the County to fulfill its responsibilities, to render services to the public, and to enhance employee morale.

A flexible schedule may be worked out with the prior approval of the department head, or designee, and affected employee(s).

The department head, or designee, may discontinue the flexible schedule. When discontinuing or altering an established flexible schedule, the department head will normally provide the employee with two (2) weeks advance notice of such change.

POLICY 302 Meals and Break Periods

1. Purpose

To provide employees with regular meal and break periods throughout the normal workday.

2. Meal Periods

Meal periods are required and must be scheduled midway in an eight-hour workday. Employees scheduled to work six hours or less are not required to take a meal period.

Meal periods are normally one hour, but exceptions may occur in departments required to provide shift coverage or where one-half hour lunch periods are available. Meal periods must not be less than one-half hour in length.

Meal periods will not be included in hours worked, except when the job requires that the employee remain on duty.

Employees are not allowed to work through the meal period to make up lost work time or in order to leave work early without supervisor approval.

3. Break or Rest Periods

Employees may leave their workstation for a break period of no more than fifteen (15) minutes in duration during each half of an eight-hour work shift, except when the job requires that the employee remain on duty.

Rest periods should be staggered to ensure continuous coverage and operation.

Employees who miss a break period may not take an extended meal period, arrive at work later than the normal starting time, or leave work before the normal quitting time.

It is the employee's responsibility to ensure they receive their rest periods; rest periods do not accumulate if not taken nor are they paid if not taken.

4. Scheduling Meal and Break Periods

Department Heads or their designees are responsible for scheduling meal and break periods to ensure that adequate staff coverage is provided.

POLICY 303 Holidays and Leaves around Holiday

1. Purpose

To identify employee holidays and to establish a consistent procedure for scheduling and payment.

2. Holidays Observed

The following holidays will be observed.

- | | |
|-------------------|----------------------------|
| New Year's Day | Friday before Easter |
| Memorial Day | Independence Day |
| Labor Day | Veterans Day |
| Thanksgiving Day | Day after Thanksgiving Day |
| Christmas Eve Day | Christmas Day |
| | 1 Floating Holiday |

The following holiday will be observed by non-represented law enforcement (Eight hours).

- | | |
|----------------|----------------------|
| New Year's Day | Friday before Easter |
| Memorial Day | Independence Day |

Labor Day
Thanksgiving Day

Veterans Day
Christmas Day
3 Floating Holidays

3. Eligibility

Regular full-time employees and part-time employees who are working at least half time are eligible to receive compensation for holidays.

In order to receive holiday pay, employees must work the day before and the day after each holiday with the exception of normal days off, excused absences or paid time off.

4. Compensation

Employees will receive their regularly classified rate for their regularly scheduled number of hours for holiday pay one time per observed holiday except for the following:

- Regular part-time employees are paid a pro-rated/percentage of full-time hours for holiday pay.
- Highway employees will receive 8 hours of holiday pay for any holiday falling during the time frame they are normally scheduled to work four (4) 10 hour days per week.
- Departments required to be open or are considered 24/7 operations (Sheriff Office) shall receive holiday payouts at 8 hours for each holiday one time per year (before December 15th) and employees in such departments who are required to work on these days, shall be paid straight time for their regular hours worked.

5. Work on Holiday

In cases where a full time employee is required to work on a holiday due to unforeseeable circumstances, or required to work on a, except as noted above with Sheriff Department, the employee will receive pay for the holiday and pay at time and one half the hourly rate for all hours worked.

In cases where a part time employee is required to work on a holiday due to unforeseeable circumstances, or required to work on a holiday as part of their normal work schedule, the employee will receive pay at time and one half the hourly rate for all hours worked.

6. Leaves Around Holidays

Unpaid leave time should not be granted unless all accrued paid time off and extended leave bank if applicable is exhausted. Holidays falling within any unpaid period of absence, will be without pay.

Full or part-time regular employees, who take excused unpaid leave immediately before and/or after a holiday, will not be paid for that holiday.

7. Holidays Falling on a Weekend

Whenever any of the observed holidays falls on a Saturday, the preceding Friday will be observed as the holiday, and when falling on a Sunday, the succeeding Monday will be observed as the holiday. When Christmas Eve falls on Friday and Christmas Day on Saturday, the proceeding Thursday and Friday will be observed as the holiday. When Christmas Eve falls on Sunday and Christmas Day on Monday, the following Monday and Tuesday will be observed as the holiday.

POLICY 304

Vacation and Sick Time

1. Purpose

To provide employees with a traditional means of utilizing vacation and sick leave time.

2. Eligibility

Regular employees working thirty-five (35) or more hours per week are eligible for all the full-time benefits documented herein.

Part-time employees working at least 50% time hours per week are eligible for pro-rated benefits documented herein.

Limited term and seasonal employees are not eligible.

3. Minimum Usage Requirements

Employees will use vacation and/or sick leave in increments of no less than ¼ hours.

4. Vacation Accrual

Vacation will accrue monthly and after six months of employment employees may use vacation once it is accrued.

The maximum amount of accrued vacation hours in an employee's vacation bank on their anniversary date ~~at any one time~~ may not exceed 5 days more than the yearly accrual.

Vacation will accrue according to the following accrual rates for all employees hired on or before December 31, 2014:

Length of Service	Hours of Vacation 35 hour week	Hours of Vacation 40 hour week
At least 6 months, but less than 1 year	42	48
After 1 year	84	96
After 5 years	91	104
After 6 years	98	112
After 7 years	105	120
After 8 years	112	128
After 9 years	119	136
After 10 years	126	144
After 11 years	133	152
After 12 years	140	160
After 13 years	147	168
After 15 years	154	176
After 20 years	161	184
After 24 years	168	192
After 25 years	175	200

Part-time employees will accrue Vacation on a prorated percentage of full-time basis according to the above accrual rates.

Temporary and seasonal employees will not accrue nor be given Vacation leave.

Vacation will accrue according to the following accrual rates for all employees hired on or after January 1, 2015:

Length of Service	Hours of Vacation 35 hour week	Hours of Vacation 40 hour week
At least 6 months, but less than 1 year	35	40
Years 1-5	70	80
Years 6-10	84	90

Length of Service	Hours of Vacation 35 hour week	Hours of Vacation 40 hour week
Years 11-15	105	120
Years 16-20	126	144
After 20 Years	140	160

Part-time employees will accrue Vacation on a prorated percentage of full-time basis according to the above accrual rates.

Temporary and seasonal employees will not accrue nor be given Vacation leave.

5. Planned Vacation

Employees must request vacation as far in advance as practicable and must be approved in advance by the Department Head or designee, but not less than 24 hours in advance. Individual departments may require more advance notice for scheduled absences. Employees will follow written department procedures for requesting vacation. Vacation requests may be denied based on the needs of the department and the scheduled time off of other department employees.

Department Heads or designees may approve planned vacation requests of less than 24 hours' notice on a case by case basis.

Vacation will not accrue during unpaid leaves and vacation cannot be taken before it is earned.

The maximum amount of accrued vacation hours in an employee's vacation bank on their anniversary date ~~at any one time~~ may not exceed 5 days more than the yearly accrual. The time frame for which this carryover is to be used is at the discretion of the department heads. Any request to carry over more than the yearly accrual plus the 5 days of vacation will need to be submitted and approved by the Administration Committee.

Sheriff Department employees will schedule vacation with their unit Supervisor each year according to Department/unit policy and procedure.

6. Sick leave and accrual

Sick leave will accrue at 1 day per month for all employees hired on or before December 31, 2014 and will accrue at .75 day per month for all employees hired on or after January 1, 2015.

Employees will be granted sick leave with pay for illness, injury or physician's appointments, except for illness, injury or physician's covered by the Wisconsin Worker's Compensation Law.

Employees must report the use of sick leave at least one (1) hour prior to the start of the employee's scheduled shift, or as soon as practicable in cases of emergency or development of illness during the employee's work shift. Individual departments may require more advance notice for unscheduled absences.

- If an employee is aware in advance that sick leave benefits will be needed, the employee must notify the Department Head as far in advance as possible in writing including the anticipated time/duration

of the sick leave needed, the reason for the sick leave and the anticipate date of return to work. Medical certification that the employee will be unable to perform his/her regular duties is necessary.

- For all employees, at the end of the each calendar year, unused sick leave shall carry over and be added to the next year's accumulation until a maximum of the following has occurred:
 - o Employees hired before January 1, 2015 will accrue to a maximum of one hundred ten (110) days.
 - o Employees hired on/or after January 1, 2015 will accrue to a maximum of ninety (90) days.

7. Medical Certification/Returning to Work after Medical Absence

The employer may require verification of illness.

After a medical absence, a physician's statement may be required to be submitted to County Administrator on the employee's first day back to work, indicating the nature of the illness or medical condition and attesting to the employee's ability to return to work and safely perform the essential functions of the job with or without reasonable accommodation.

A physician's statement will be required for unplanned absences after five consecutive days of illness and will be required prior to returning to work.

Any work restrictions must be stated clearly upon the employee's return to work. Employees who have been asked to provide such a statement may not be allowed to return to work until they comply with this provision. Vacation and sick leave time may be denied for any employee required to provide a doctor's statement until such a statement is provided.

The County has the right to obtain a second medical opinion to determine the validity of an employee's worker's compensation or illness claim, or to obtain information related to restrictions or an employee's ability to work. The County will arrange and pay for an appropriate medical evaluation when it has been required by the County.

If an employee on sick leave is required to notify his/her Department Head at the earliest possible time of the anticipated date on which the employee will be able to resume his/her duties. If an employee on sick leave fails to return to work as soon as he/she is medically able to perform their duties, they may be deemed to have resigned their position and have waived all employment rights.

If the absence qualifies as FMLA, Sawyer County Policy 309, Leaves – Family, Medical Leave will apply. The appropriate medical certification form(s) will be required.

8. Unpaid Leave

With the exception of qualified FMLA leave, unpaid leave may not be taken until such time that the vacation and sick leave accounts have been exhausted. At no point will an employee's vacation and/or sick leave balance be allowed to fall below zero. Should this happen, the employee will revert to unpaid time, and if this occurs without the prior authorization of the Department Head, the employee may be subject to corrective or disciplinary action.

Vacation and/or sick leave will not accrue during unpaid leaves. Unpaid leaves may be approved in accordance with the County personnel policies.

9. FMLA

See POLICY 309

Leaves – Family Medical Leave Act (FMLA) on page 34

10. Job Related Injury or Illness

Employees are expected to adhere to the policies and procedures outlined in Sawyer County Policy 605a, Workers Compensation - Illness/Injuries.

11. Payment upon Separation

Regular employees who leave the employ of the county in good standing and upon giving notice or employees separated by the county for other than disciplinary or performance reasons will receive payment for unused vacation and sick leave as outlined below.

- Vacation – all vacation periods for the current year of service will be pro-rated to the date of separation for pay purposes. Such payments shall be made in a lump sum based upon the last day of work.
- Sick Leave will be paid out according to the following:
 - Regular employees hired before January 1, 2015 who leave their position in good standing will be eligible for Sick Leave separation pay as follows:
 - Less than 10 years of employment - For an employee with less than 10 years of creditable employment in a regular position – nothing will be paid out to the employee.
 - Ten (10) or more years of employment - For an employee with 10 years or more years of creditable employment in a regular position the employee should receive one-half (1/2) of the unused sick leave remaining in the employee's account, not to exceed fifty-five (55) days, to be paid at the average hourly rate of pay on December 31st of the prior 3 years.
 - Regular employees hired after January 1, 2015 who leave their position in good standing will be eligible for Sick Leave separation pay as follows:
 - Less than 15 years of employment - For an employee with less than 15 years of creditable employment in a regular position – nothing will be paid out to the employee.
 - Fifteen (15) or more years of employment - For an employee with 15 years or more years of creditable employment in a regular position the employee should receive one-half (1/2) of the unused sick leave remaining in the employee's account not to exceed forty-five (45) days, to be paid at the average hourly rate of pay on December 31st of the prior 3 years.
 - In the event an employee leaves a position with the County that is entitled to a sick leave payout and accepts an elected position with the County (Sheriff, County Clerk, Clerk of Circuit Court, Register of Deeds, County Treasurer, County Coroner), his/her sick leave balance shall be paid out according to the policy providing the employee meets all the defined eligibility criteria.

12. Non-payment upon Separation

Employees separated for disciplinary or performance reasons will receive no separation benefit.

13. Vacation Service Credit at Hire

A Department Head may recommend that a new hire be given credit for length of service for employment experience directly related to the position.

POLICY 305 Leaves – Funeral and Bereavement

1. Purpose

The County recognizes the importance of leave for funerals and family.

To identify and establish a consistent procedure for scheduling and payment a bereavement leave.

2. Allowable bereavement/funeral days

An employee shall be allowed up to three (3) days paid bereavement/funeral leave for each incident for the following family members:

- Spouse
- Mother-in-law
- Child/grandchild
- Father-in-law
- Mother
- Brother
- Father
- Sister

An employee shall be allowed up to one (1) days paid bereavement/funeral leave for each incident for the following family members:

- Grandparent
- Brother-in-law
- Aunt
- Sister-in-law
- Uncle
- Son-in-law
- Daughter-in-law

3. Compensation for bereavement/funeral days

Pay for bereavement/funeral hours shall be paid at the employee’s regular scheduled hours worked and at their regular rate of pay

POLICY 306 Leaves – Jury Duty and Witness Duty

1. Purpose

Employees are encouraged to appear before a court, public body, or commission in connection with County business or for witness duty when subpoenaed to do so. Employees are excused from work to fulfill their civic responsibilities when required.

2. Compensation for Jury Duty

Employees who are excused for jury duty will receive the regular County wages that normally would have been paid during the period required for jury duty, up to a maximum of twenty (20) days per year. Employees will return any jury duty or witness fees less travel allowance and any jury duty pay earned to the Treasurer’s Office.

If a second-or third-shift employee is selected to serve on a jury panel, the employee will not be required to work their next scheduled shift, if such shift begins on the same calendar day.

First-shift employees will not be required to report for work before the jury selection.

Should an employee not be selected to serve on a jury panel, the employee will report back to work within one hour of dismissal by the court. Employees whose work location is at the Courthouse will report back to work within 30 minutes of dismissal by the court.

Time spent on jury duty shall not be considered hours worked for purposed of overtime, nor will the County pay for any jury duty beyond the employee’s normal work day.

3. Compensation for Witness Duty

If employees have been subpoenaed or otherwise requested to testify as witnesses in connection to business with Sawyer County, they will receive time off with pay for the entire period of witness duty.

Employees will be granted unpaid time off to appear in court as a witness when requested or subpoenaed to appear in litigation which is not connected with County business.

Employees may use any available paid leave benefit to receive compensation for the period of this absence.

4. Documentation

Employees are required to provide copies of the jury duty summons, or the subpoena to their supervisors as soon as possible.

5. Reporting to Work

When possible, employees are to work any of their regularly scheduled hours that do not conflict with the jury or witness duty.

POLICY 307 Leaves – Volunteer Firefighter/EMT/First Responder Leave

1. Purpose

The County recognizes the importance of volunteering for positions as firefighters, emt and first responders.

To identify and establish a consistent procedure for volunteering as firefighters, EMTs, or First Responders leave.

2. Allowable leave

An employee is allowed to attend a fire or a medical emergency as a Volunteer Firefighter/EMT/First Responder as permitted by Department approval.

If the emergency doesn't require the employee's attendance for the entire workday, the employee shall return to work as soon as practical.

Employees shall inform their immediate Supervisor of their status at least an hour before the start of their shift or as soon as practical.

3. Compensation for Volunteer Leave

Employees will need to use paid benefit leave for their time away from work for volunteering as a firefighter/EMT/first responder.

4. Permission

Sawyer County and the Department Supervisor reserves the right to deny the use of this leave based on the needs of the County and/or Department.

POLICY 308 Leaves – Military/Guard Leave

1. Purpose

The County recognizes the importance of leave for military/guard leave for employees.

To identify and establish a consistent procedure for scheduling military/guard leave.

2. Allowable Leave

Any employee called out for active duty with the armed forces of the United States of America for National Guard, Military Reserves or other Military Service shall be granted temporary unpaid leave for tours of duty.

Employees shall be granted an unpaid leave of absence for the period outlined in the orders, in accordance with applicable laws.

3. Permission

Permission for unpaid leave for duty will be granted upon receipt of copies of employee's military order to the County Administrator Department.

4. Return from duty

All employees must return to work within ninety (90) days from the day of release from such active duty or as such time may be extended if the employee is hospitalized for, or convalescing from, an injury occurring in, or aggravated during, the performance of service, as set forth in the Regulations under the Uniformed Services Employment and Reemployment Rights Act of 1994, as may be amended, in order to be reemployed with such continued service status, or as otherwise may be required pursuant to current state or federal law.

5. USERRA Law

The Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) protects the job rights of individuals who leave employment (voluntarily or involuntarily) to undertake military service. USERRA provides retirement credit, based on what the employee would have earned from their employer had they not been absent from work. USERRA also provides a right to continuation of existing employer-based health plan coverage for the employee and dependents up to 24 months while in the military. If continuation coverage is not elected, the employee shall have the right to be reinstated with no waiting period or exclusions except for service-connected illnesses or injuries.

POLICY 309 Leaves – Family Medical Leave Act (FMLA)

1. Purpose

Child rearing, family illness, employee medical leave, and military call-to-duty and military caregiver leave are available to employees as specified below. The intent of this Policy is to comply with both the Wisconsin and federal Family and Medical Leave Acts. Should this policy conflict in any way with the applicable federal and state statutes or regulations, the statutes, or regulations will control.

2. Eligibility

Employees who have been employed by the County for twelve (12) months and who have worked one thousand (1,000) hours during the preceding fifty two (52) weeks are eligible for the leaves provided under federal and Wisconsin law.

3. Length of Leave

The federal Family and Medical Leave Law provides a combined total of twelve (12) weeks of family and medical leave for various purposes described below in a rolling calendar year and an additional fourteen (14) weeks of military caregiver leave as described below.

Wisconsin law provides six (6) weeks of child-rearing leave, two (2) weeks of family illness leave, and two (2) weeks of employee medical leave in a calendar year.

Wisconsin, Federal, and County leaves provided for the same purposes run concurrently; that is, they do not "stack." If the leave is a County provided leave, plus federal and state FMLA leave as well, the leaves run concurrently. For example, an absence for a work or non-work related illness or injury that qualifies as employee paid time off is also deducted from an employee's FMLA leave entitlements under the state and federal laws if the medical condition qualifies as a "serious health condition" under those laws.

4. Notice of Eligibility for and Designation of FMLA Leave

Employees requesting FMLA leave are entitled to receive written notice from the County telling them whether they are eligible for FMLA leave and, if not eligible, the reasons why they are not eligible. When eligible for FMLA leave, employees are entitled to receive written notice of: (1) their rights and responsibilities in connection with such leave; (2) the County's designation of leave as FMLA

qualifying or non-qualifying, and if not FMLA qualifying, the reasons why; and (3) the amount of leave, if known, that will be counted against the employee's leave entitlement

The County may retroactively designate leave as FMLA leave with appropriate written notice to employees provided the County's failure to designate leave as FMLA qualifying at an earlier date did not cause harm or injury to the employee. In all cases where leaves qualify for FMLA protection, the County and employee can mutually agree that leave be retroactively designated as FMLA leave.

5. Employee FMLA Leave Obligations

Notice of the Need for Leave. Employees who take FMLA leave must timely notify the County of their need for FMLA leave. Employees should request FMLA leave in writing by completing a FMLA Request Form whenever possible. The following describes the content and timing of such employee notices.

Content of Employee Notice (FMLA Request Form)

To trigger FMLA leave protections, employees must inform the County of the need for FMLA qualifying leave and the anticipated timing and duration of the leave, if known. Employees may do this by either requesting FMLA leave specifically, or explaining the reasons for leave on the form so as to allow the County to determine that the leave is FMLA qualifying. For example, employees might explain that.

- A specific medical condition renders them unable to perform the functions of their job;
- They or a covered family member are under the continuing care of a health care provider for a specific medical condition;
- A specific medical condition renders the family member unable to perform daily activities or that the family member is a covered servicemember with a serious injury or illness incurred in the line of duty;
- They are pregnant or have been hospitalized overnight; or
- The leave is due to a qualifying exigency caused by a covered military member being on active duty or called to active duty.

- Calling in "sick," without providing the reasons for the needed leave, will NOT be considered sufficient notice for FMLA leave.
- Employees must respond to the County's questions to determine if absences are potentially FMLA qualifying. If an employee fails to explain the reasons for FMLA leave, the leave may be denied. When an employee seeks leave due to FMLA-qualifying reasons for which the County has previously provided FMLA-protected leave, he or she must specifically reference the qualifying reason for the leave or the need for FMLA leave.

Timing of Employee Notice. Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days' notice is not possible, or the approximate timing of the need for leave is not foreseeable, employees must provide the County with notice of the need for leave as soon as practicable under the facts and circumstances of the particular case. Employees who fail to give 30 days' notice for foreseeable leave, without a reasonable excuse for the delay, or otherwise fail to satisfy FMLA notice obligations, may have FMLA leave delayed or denied.

6. Basic FMLA Leave Entitlements

A. Childbirth/Adoption Leave

- The birth of the employee's natural child; or
- The placement of a child with the employee for adoption or as a precondition to adoption under section 48.90(2) of the Wisconsin Statutes, but not both; or
- The placement of a child with the employee for twenty-four (24) hour foster care that is made by or with agreement of a government agency

Purpose - Unpaid child rearing leave may normally be used within sixteen (16) weeks prior to, or within twelve (12) months following.

Length of Child Rearing Leave - No employee may take more than twelve (12) weeks of federal child rearing leave in a rolling calendar year. In addition, no more than twelve (12) weeks leave can be taken for the birth of any one child. If both the mother and father of a child are employed by the County, and they both desire child rearing leave, they are generally only entitled to a combined total leave of twelve (12) weeks. Child-rearing leave provided under federal law runs concurrently with the six (6) weeks of child-rearing leave provided under Wisconsin law.

Intermittent/Partial Leave Absences - For the first six (6) weeks of leave within sixteen (16) weeks prior to or after the child-rearing event (e.g., birth of child), an employee may take child rearing leave as an intermittent or as a partial absence from employment in increments of less than their full normal work day. An employee who does so will schedule the intermittent or partial absence so it does not unduly disrupt the County's operations. To comply with this requirement, an employee is to provide the County, in writing, with the employee's proposed schedule of intermittent or partial absences no less than one (1) week before the schedule of absences is to commence. The schedule must be of a sufficient definiteness that the County is able to schedule replacement employees, if necessary, to cover the absences. Partial or intermittent leave must commence within sixteen (16) weeks before or after the birth, adoption, or foster placement of a child. Leave cannot be taken intermittently or as a partial absence before or beyond sixteen (16) weeks of the event, unless previously approved in advance. Rather, any remaining child-rearing leave must be taken in a single block.

Scheduling Child Rearing Leave - An employee is expected to submit a written request for child rearing leave no less than thirty (30) calendar days before the leave is to commence and must schedule the leave after reasonably considering the County's needs. If the date of the birth, adoption, or foster care placement requires leave to begin sooner, the employee will provide notice as soon as practicable.

B. Family Illness Leave

Purpose - Unpaid family illness leave may be used to care for the employee's spouse, child, parents, or spouse's parent (i.e., parent-in-law), or domestic partner as defined by law or a domestic partner's parent as defined by law, who have a serious health condition

Length of Family Illness Leave - No employee may take more than twelve (12) weeks of federal family illness leave for the employee's spouse, child, or parents in a rolling calendar year. The federal leave generally runs concurrently with the two (2) weeks of family illness leave provided under state law in a calendar year. A maximum of two (2) weeks of family illness leave may be taken for a spouse's parent (i.e., a parent-in-law), a domestic partner, or a domestic partner's parent, in a calendar year, in addition to the twelve (12) weeks of federal FMLA leave.

C. Employee Medical Leave

Purpose - Unpaid medical leave may be used by an employee who has a serious health condition which renders the employee unable to perform his or her job duties.

Length of Medical Leave - No employee may take more than twelve (12) weeks of federal employee medical leave in a rolling calendar year. This leave generally runs concurrently with the two (2) weeks of employee medical leave provided under state law in a calendar year.

D. Military Call to Duty Leave

Purpose - Federal unpaid call-to-duty leave may be used as a result of a qualifying exigency arising from an employee's spouse, son, daughter or parent being on active duty or having been notified of an impending call or order to active duty status in the National Guard or Reserves in support of a contingency operation.

- Qualifying exigencies may include attending certain military events, arranging for alternative child-care, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

Length of Leave - An eligible employee is entitled to twelve (12) weeks of call-to-duty leave in a twelve (12) month period.

E. Injured/Ill Service member Caregiver Leave

Purpose - In addition to the basic FMLA leave entitlements discussed above, an eligible employee who is the spouse, son, daughter, parent or next of kin of a covered service member is entitled to take up 26 weeks of military caregiver leave during a single 12-month period to care for the service member with a serious injury or illness incurred in the line of duty.

- A "covered service member" means a member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation, or therapy, is otherwise in outpatient status, or is on the temporary retired list, for a serious injury or illness. A member of the Armed Forces would have a serious injury or illness if he/she has incurred an injury or illness in the line of duty while on active duty in the Armed Forces provided that the injury or illness renders the service member medically unfit to perform duties of the member's office, grade, rank or rating.
- "Next of kin" of a covered service member means the nearest blood relative other than the covered service member's spouse, parent, son, or daughter, in the following order of priority. Blood relatives who have been granted legal custody of the covered service member by court decree or statutory provisions; brothers and sisters; grandparents; aunts and uncles; and first cousins; unless the covered service member has specifically designated in writing another blood relative as his or her nearest blood relative for purposes of military caregiver leave under the FMLA. When no such designation is made, and there are multiple family members with the same level of relationship to the covered service member, all such family members will be considered the covered service member's next of kin and may take FMLA leave to provide care to the covered service member, either consecutively or simultaneously. When such designation has been made, the designated individual will be deemed to be the covered service member's only next of kin.

Length of Leave. Leave to care for a service member will only be available during a single 12-month period and, when combined with other FMLA-qualifying leave, may not exceed 26 weeks during the single 12-month period. For purposes of military caregiver leave, the single 12-month period begins on the first day an eligible employee takes leave to care for the injured service member. A separate caregiver leave can be taken for each covered service member and/or for each new injury/illness

7. Scheduling Family Illness/Employee Medical/and Military Caregiver Leave

Medical Necessity. An employee may schedule family illness, employee medical, or military caregiver leave as medically necessary. An employee must consider the needs of the County when scheduling leave. When medically necessary, an employee may take the leave as an intermittent or as a partial absence from employment in increments of less than their full normal work day. The lowest increment may be the lowest increment that the County permits for any other type of leave, paid or unpaid. An employee who does so will schedule the intermittent or partial absence so it does not unduly disrupt the County's operations. To comply with this requirement, an employee is to provide the County, in writing, with the employee's proposed schedule of partial absences as soon as possible after the employee learns of the probable necessity of such leave.

Planned Treatment. When planning medical treatment, employees must consult with the County and make a reasonable effort to schedule treatment so as not to unduly disrupt the County's operations, subject to the approval of the health care provider. Employees should consult with the County prior to the scheduling of treatment to work out a treatment schedule that best suits the needs of both the County and the employee, subject to the approval of the health care provider. If an employee providing notice of the need to take FMLA leave on an intermittent basis for planned medical treatment neglects to fulfill this obligation, the County may require the employee to attempt to make such arrangements, subject to the approval of the health care provider.

Intermittent/Reduced Schedule Leave. When employees seek intermittent leave or a reduced leave schedule for reasons unrelated to the planning of medical treatment, employees must, upon request, advise the County of the reason why such leave is medically necessary. In such instances, the County and employee will attempt to work out a leave schedule that meets the employee's needs without unduly disrupting the County's operations, subject to the approval of the health care provider.

8. Serious Health Condition/Medical Certification Supporting Need for Leave

- Submission of Certifications. Depending on the nature of FMLA leave sought, employees may be required to submit medical certifications establishing that a "serious health condition" (described below) is involved and supporting their need for FMLA leave. As described below, there generally are three types of FMLA medical certifications: an initial certification, a recertification, and a return to work/fitness for duty certification
- It is the employee's responsibility to provide the County with timely, complete and sufficient medical certifications. Whenever the County requests an employee to provide a FMLA medical certification, the employee must provide the requested certification within 15 calendar days after the County's request, unless it is not practicable to do so despite the employee's diligent, good faith, efforts. The County will inform the employee if a submitted medical certification is incomplete or insufficient and provide the employee with at least seven calendar days to cure deficiencies. The County may deny FMLA leave to an employee who fails to timely cure deficiencies or otherwise fails to timely submit requested medical certifications.
 - o With the employee's permission, the County (through individuals other than an employee's direct supervisor) may contact the employee's health care provider to authenticate or clarify medical certifications. If an employee chooses not to provide the County with authorization allowing it to clarify or authenticate a certification with a health care provider, the County may deny FMLA leave if the certification is unclear and a serious health condition cannot be verified.
- Whenever the County deems it appropriate to do so, it may waive its right to receive timely, complete and/or sufficient FMLA medical certifications.

9. Types of Certifications

- Initial Medical Certifications. Employees requesting leave because of their own, or a covered relative's, serious health condition, or to care for a covered service member, must supply a medical certification supporting the need for such leave from their health care provider or, if applicable, the health care provider of their covered family or service member. If an employee provides at least 30 days' notice of medical leave, he or she should submit the medical certification before leave begins. A new initial medical certification will be required on an annual basis for serious medical conditions lasting beyond a single leave year.

A "serious health condition" is considered to be a disabling physical or mental illness, injury, impairment, or condition involving any of the following.

- Inpatient care in a hospital, nursing home, hospice, or residential medical facility; or outpatient care that requires continuing treatment or supervision by a health care provider.
- The federal FMLA leave includes a more detailed and expansive definition of a "serious health condition" described in the medical certification form, which is provided to an employee if the employee is required to submit a medical certification form from his/her physician, certifying that a "serious health condition" within the meaning of law is involved.
- If the County has reason to doubt an initial medical certification, it may require an employee to obtain a second opinion at the County's expense. If the opinions of the initial and second health care providers differ, the County may, at its expense, require an employee to obtain a third, final and binding, certification from a health care provider designated or approved jointly by the County and the employee.

Medical Recertification. Depending on the circumstances and duration of FMLA leave, the County may require an employee to provide a recertification of a medical condition giving rise to the need for leave. The County will notify the employee if recertification is required and will give the employee at least 15 calendar days to provide medical recertification.

Return to Work/Fitness for Duty Medical Certifications. An employee returning to work from FMLA leave that was taken because of the employee's own serious health condition that made the employee unable to perform his/her job duties must provide the County with a medical certification confirming the employee is able to return to work and the employee's ability to perform the essential functions of the employee's position. The County may delay and/or deny job restoration until an employee provides a requested return to work/fitness-for-duty certification.

10. Certifications Supporting Need for Military Family Leave

Upon request, the first time an employee seeks leave due to a qualifying exigency arising out of the active duty or call to active duty status of a covered military member, the County may require the employee to provide. (1) a copy of the covered military member's active duty orders or other documentation issued by the military indicating the covered military member is on active duty or called to active duty status and the dates of the covered military member's active duty service; and (2) a certification from the employee setting forth information concerning the nature of the qualifying exigency for which leave is requested. An employee will provide a copy of new active duty orders or other documentation issued by the military for qualifying exigency leaves arising out of a different active duty or call to active duty status of the same or a different covered military member.

When leave is taken to care for a covered service member with a serious injury or illness, the County may require the employee to obtain certifications completed by an authorized health care provider of the covered service member. In addition, the County may request that the certification submitted by the employee set forth additional information provided by the employee and/or the covered service member confirming entitlement to such leave.

11. Using Paid Leave While on Unpaid FMLA Leave

Wisconsin FMLA. While on Wisconsin FMLA leave (including when running concurrently with federal FMLA leave), an employee may elect to use any accrued County provided paid time while taking unpaid FMLA leave.

Federal FMLA. When solely utilizing federal FMLA leave, an employee may elect, or the County may require, an employee to utilize certain accrued County provided paid leave while on FMLA leave. For example, an employee may elect, or the County may require, the use of accrued paid time off while on any

type of FMLA leave. However, an employee's use of County provided paid time off must comply with the terms and conditions of the County's paid time off policy.

The substitution of paid time for unpaid FMLA leave time does not extend the length of FMLA leave the paid time runs concurrently with an employee's FMLA entitlement.

Leaves of absence taken in connection with a paid or unpaid disability leave plan or worker's compensation injury/illness run concurrently with any FMLA leave entitlement. Upon written request, the County may allow employees to use accrued paid time to supplement any paid disability or worker's compensation benefits.

12. Insurance and Benefits

Payment of Premiums. While an employee is on FMLA leave, the County will maintain group health insurance coverage under the conditions that applied before the leave began. If prior to the leave, the employee was required to participate in the premium payments, the employee is required to continue with payment of his/her share of the premiums while on leave. An employee's failure to make the required payments may result in termination of the employee's insurance coverage.

Unless the County notifies employees of other arrangements, whenever employees are receiving pay from the County during FMLA leave, the County will deduct the employee portion of the group health plan premium from the employee's paycheck in the same manner as if the employee was actively working. If FMLA leave is unpaid, employees must pay their portion of the group health premium through a method determined by the County.

Termination of Benefits. The County's obligation to maintain health benefits will stop if and when. (1) an employee informs the County of intent not to return to work at the end of the leave period; (2) the employee fails to return to work when the leave entitlement is used up; or (3) the employee fails to make any required payments while on leave after appropriate waiting periods and time periods as specified by law. The County's obligation to maintain health care coverage ceases if an employee's premium payment is more than 30 days late. If an employee's payment is more than 15 days late, the County will send a letter notifying the employee that coverage will be dropped on a specified date unless the co-payment is received before that date.

Recovery of Premium Payments. If the County chooses to do so, it may pay an employee's required premium payments while the employee is on leave. If the County does so and an employee does not immediately repay the County upon the employee's return to work, the County will deduct the amount of the payments from the employee's paycheck.

- The County has the right to collect from an employee the health insurance premiums the County paid during a period of unpaid leave if the employee does not return to work after the leave entitlement has been exhausted or expired. Such premium amounts may be deducted from any compensation owed to the employee upon termination of employment. An employee must return to work for at least thirty (30) calendar days in order to be considered to have "returned" to work
- However, an employee's liability to repay health insurance premiums does not apply if his/her failure to return to work is due to a serious health condition or specific circumstances beyond the control of the employee.

13. Return from Leave

An employee returning from family and/or medical leave can return to his or her old position, if vacant, at the time the employee returns to work. If the position is no longer vacant, the employee may be offered an equivalent position with equivalent benefits, pay, and other terms and conditions of employment.

The determination as to how an employee is to be restored to "an equivalent position" upon return from FMLA leave is made on the basis of established policies and practices, and provisions of the federal FMLA.

14. Outside Employment

An employee who is solely utilizing federal FMLA leave (i.e., Wisconsin FMLA leave has been exhausted) and/or a County provided and approved leave, is prohibited from working for another employer while on federal FMLA leave.

15. Appendices

FMLA Leave Request Form

FMLA Designation Notice Form

FMLA Physician Certification Form

FMLA Examples of Application of FMLA-Leave Provisions; Interactions between leaves

Employees should contact County Administrator if they have any questions regarding this policy

POLICY 310 Leaves – Emergency Closings

1. Purpose

To provide a plan for employees in the event of an emergency closing due to inclement weather or other emergency situation.

As a general practice, Sawyer County makes every effort to maintain its normal schedule of operations. Sawyer County will close all or part of its operations only in cases of extreme emergency caused by impassible roads, restricted visibility, violent weather, energy loss, or other conditions seriously endangering the health and safety of employees and the general public.

2. Reporting to Work

Each employee accepts the responsibility for reporting to work at the regularly scheduled time, regardless of prevailing weather conditions.

Employees not reporting to work will not be paid, however, such employees may use paid time off, compensatory time or flexible schedule to minimize or avoid a loss of wages as a result of absence.

3. Responsibility for the Decision to Close

In the event that Sawyer County is forced to close, or delay the opening, the decision will be made by the County Administrator and County Board Chair.

4. Official Announcements

When the County determines that it is necessary to close or delay the opening of various operations, the starting time will be communicated to department heads and the employees by way of the Code Red System.

A Code Red Message and/or the Courthouse Alert Paging System will be used to send out a message to all employees by phone, email or page over the alert system stating what the emergency is and actions to take.

5. Delaying Starting Times

In the event that the County announces a delayed opening of various operations, all employees that report to work at their normal starting time or on or before the delayed starting time will be paid for the full day.

Employees reporting for work after the delayed starting time will be paid for actual hours worked. Employees may use paid time off, compensatory time or flexible time to minimize or avoid a loss of wages as a result of absence.

6. Partial Closings

The County may order certain departments providing non-essential services to be closed or staffing curtailed due to emergency conditions or inability to provide a work site. Announcement will be made on the CODE RED System.

7. Closing after the Normal Business Day has Begun

When the County determines that weather is sufficiently severe to close various operations, this information will be provided to department heads by email.

If employees are sent home early, they will receive full pay for the day.

Employees working in operations where they cannot be released early, due to the nature of their service being provided will be required to complete the normal workday.

8. Closing before the Normal Business Day has Begun

When the County determines that weather is sufficiently severe or other emergency situation is significant enough to close various operations before the normal business day has begun, this information will be given to department heads and employees by email and CODE RED System.

Employees working in operations where they must report to work, due to the nature of their service being provided will be required to complete the normal workday.

Employees not reporting to work will not be paid, however, such employees may use paid time off, compensatory time or flex their schedule to minimize or avoid a loss of wages as a result of absence

9. Employees Who Desire to Leave Early

Employees who desire to leave early when operations have not been shut down may do so with approval of the Department Head. Employees will be paid only for the time actually worked and/or be allowed by Department Head/Supervisor approval to use paid time off, comp time or do a flexible schedule.

POLICY 311 Leaves – Unpaid Leave of Absence

1. Purpose

To provide an option for employees to be off without pay due to extenuating circumstances for an extended period of time.

2. Policy

An unpaid leave may only be granted when it is reasonably expected that the employee will return to employment when the condition(s) necessitating the leave permit, subject to the staffing needs of the department, and when granting a leave is in the best interest of the county.

Unpaid leaves are without pay and may be requested after all compensatory time and paid time off have been exhausted.

Paid time off and holiday benefits will be suspended during the leave and will resume upon the employee's return to their normal work schedule for one full pay period.

3. Authorization

Short Term - Leaves of 30 days or less.

May be granted by the department head.

Extended Leave - Leaves of over 30 Days.

Any leave request extending over 30 days will be submitted in writing to the department head. The department head will submit their recommendation to County Administrator for review and sent to Personnel/Administration Committee for approval or denial.

Employees who are not eligible for participation under the Family Medical Leave Act and have exhausted their accumulated paid time off will be granted a leave of absence, supportable by medical evidence, of up to six (6) months inclusive of paid time off or extended leave bank.

Personal leave

Personal leave may be granted by the director for up to 3 months for the employee's personal convenience or to relieve hardship to the employee and his or her immediate family.

Educational leave

The director may grant employees an unpaid leave to further their education. Any expenses incurred will not be reimbursed by the county. Such leaves in aggregate will not exceed 24 months in any 5-year period.

Political leave

- Any employee becoming a candidate for any publicly elected office will be entitled to unpaid political leave of up to 6 months to be effective no later than the date the board of canvassers certifies that the employee has won the primary election and will expire upon said board's certification of the general election results. Any employee assuming a county elected office will be considered to have resigned from their former position

4. Procedure

Any employee request for an unpaid leave will be submitted in writing to the department head at least 30 days in advance and will state the reason for such leave and the period of time to be absent. The 30-day notice may be waived under emergency circumstances by the director.

Advance notice of military service is required, unless military necessity prevents such notice or it is otherwise impossible or unreasonable.

5. Benefits

Employees will make their own arrangements in advance for payment of benefits for any full calendar month or any amount that will not be covered while they are on leave of absence by remitting premium payments to the Treasurer's Office. Insurances will be cancelled if the employee fails to remit payment upon notice of delinquency.

6. Return to Active Employment

An employee may return to work at an earlier date than scheduled if approved by the department head.

Any employee failing to return to work upon expiration of unpaid leave will be considered to have resigned, not in good standing.

The employee will be eligible for reinstatement to a vacant position or equivalent position, provided stated qualifications are met. If no vacant position is available the employee is qualified for, the employee will be terminated.

7. Leave restrictions

Unpaid leave of absence will not be granted to permit an employee to seek other employment or work at some other paid employment, except as provided in the above provision for political leave.

8. Appendices

Unpaid Leave of Absence Request Form

CHAPTER 4 - WAGES/COMPENSATION

POLICY 401 EMPLOYEE COMPENSATION

1. Purpose

To provide standardized payroll procedures in accordance with applicable State and Federal guidelines.

2. Pay Periods

Paychecks are deposited by direct deposit. Employees will receive their pay advice of deposit by the email that is provided to payroll.

3. Errors.

Errors on timecards or paychecks must be immediately reported by the employee. Employees should never assume a supervisor or Finance Department would notice or edit any time discrepancy, as this is the employee's responsibility.

4. Daylight Savings Time.

Employees who are required to work during the change of Daylight Savings Time shall be paid for the hours actually worked.

POLICY 402 Personal Data Changes

1. Purpose

To ensure accurate and up-to-date personal information is on file within County Administrator for all employees.

2. Policy

Each employee must promptly notify Sawyer County of any changes in personal data. Personal mailing addresses, telephone numbers, number and names of dependents, individuals to be contacted in the event of an emergency, educational accomplishments, marital status, certification achievements, and other such status reports must be accurate and current at all times. To provide such notice employees shall complete and submit the Personal Data Change form to County Administrator.

3. Change in Educational Accomplishments

Submit certificates received from trainings, transcripts from continuing education coursework, diplomas, or other educational materials obtained while employed by Sawyer County to County Administrator for placement in their personnel file.

Employees in positions that require renewal of licenses or certifications must provide updated copies to County Administrator upon expiration of the license or certification.

4. Appendices

County Administrator Personal Data Change Form and Personal Data Confidential Form

POLICY 403 Timekeeping

1. Purpose

To provide time reporting requirements for all employees of Sawyer County.

2. Policy

This policy provides each department the information needed to accurately record and submit their time sheets.

3. Procedures

The pay period covers fourteen consecutive days beginning on a Sunday and ending on the second Saturday. The usual pay period is 70 to 80 hours.

Each employee is responsible for and accurately recording their own time on a daily basis.

Time sheets must show all time worked and absence from work with appropriate benefit leave incurred for the pay period.

Employees will mark their time sheets with actual time in and time out for the purpose of computing regular hours.

Time sheets should not be completed in advance unless you will be absent for the time period a time sheet covers.

Employees on official business outside the normal work schedule should note it on their timekeeping records.

Supervisors will review time records for accuracy and completeness and verify overtime entries prior to submission for data input, sign the timesheet and forward to Payroll.

4. Overtime and Compensatory Time

Overtime and compensatory time earned must be approved in advance by the supervisor to whom the employee reports unless it is an emergency situation; if not, an employee is not authorized to work the overtime or compensatory time.

All overtime or compensatory time earned must be recorded on the time sheet.

When an employee transfers to a different position, any compensatory time balance is paid at the time of the transfer.

Working unauthorized overtime or compensatory time may subject employees to disciplinary action

5. Time Worked

All employees are expected to record all hours worked to the nearest quarter hour (15 minutes).

Work time seven (7) minutes or less is to be rounded down to nearest one quarter hour; work time eight (8) minutes or more is rounded up to nearest one quarter hour.

Example: If you work 2 hours and 22 minutes you would record 2.25 hours. If you work 2 hours and 29 minutes you would record 2.50 hours.

The following provisions are included as time worked:

- a. Work Away From Premises or at Home. A non-exempt employee is not permitted to perform work away from the premises, job site, or at home, unless approved in advance in writing by his or her department head and the director. If approved, work performed off the premises, job site, or at home by a non-exempt employee will be counted as time worked, unless such time is de minimis.
- b. Break Time. Authorized rest periods of 15 minutes or less are counted as time worked.
- c. Travel/Training Time. Travel and training time is to be considered and included in actual time worked. Time begins when departing for work destination if other than to County offices. Time ends when employee arrives back to starting position or to County office.

6. Time Not Worked

Per the Fair Labor Standards Act, Sawyer County does not count the following provisions as time worked:

- a. Paid Leave. Approved paid absences, including but not limited to paid time off, personal holiday leave, Family Medical Leave Act leave, military leave, jury and witness duty are not counted as time worked.
- b. Meal Periods. Uninterrupted time off for lunch or dinner is not counted as time worked.
- c. All meal periods, paid or unpaid, should be noted accordingly on the time sheet

7. Exempt Employee Salaries. The salary paid by Sawyer County to salaried employees is specifically intended to compensate for their service to the County. By law, the predetermined amount cannot be reduced because of variations in the quality or quantity of the salaried employee's work. Subject to limited exceptions, an exempt employee receives their full salary for any workweek in which the employee performs any work, regardless of the number of days or hours worked.

POLICY 404 Classification/Compensation Plan

1. Purpose

The purpose of this policy is to administer an internally equitable and externally competitive Classification/Compensation Plan

NOTE: TO BE DEVELOPED WITH ADOPTION OF CLASS/COMP STUDY

POLICY 405 Overtime and Compensatory Time

1. Purpose

To provide a consistent system for distributing overtime in compliance with the overtime-pay provisions of the Fair Labor Standards Act (FLSA).

2. Definitions

Each position is designated as either "Non-exempt" or "Exempt" from the federal Fair Labor Standards Act and state wage and hour laws. Employees should contact their supervisor if they are unsure of their position's designation.

- o Non-Exempt. Positions that are paid on an hourly basis and are entitled to overtime pay for hours worked in excess of 40 hours per week.
- o Exempt. Positions that are generally paid on a salary basis and are excluded from specific provisions of federal and state wage and hour laws and are not eligible for overtime pay.

3. Overtime

All overtime will need to be approved in advance by Supervisor and/or Department Head. Increased Work Hours (overtime) will be authorized by the Supervisor and/or Department Head

- a. Non-exempt employees may receive pay for overtime hours. This will be paid at time and one half the hourly rate of pay for any hours worked in excess of 40 hours per week.
- b. Paid benefit time (paid time off, personal holiday hours, etc.) will not be considered as hours worked for purposes of determining overtime hours and pay.
- c. Employees on conference, convention or seminar leave may be eligible for overtime for hours exceeding their normal workweek schedule resulting from travel time.

Highway Overtime

The County shall pay overtime at the rate of time and one-half (1½) for hours worked outside the regular work schedule.

4. Compensatory Time, Accrual and Usage

All earned compensatory time will need to be approved in advance by Supervisor and/or Department Head

- a. Non-exempt employees may elect to earn and use compensatory time. Compensatory time will be earned at one hour compensatory time for one hour worked up to forty(40) hours and then will be earned at time and one half for hours worked over forty(40).
- b. An employee can earn a maximum accrual amount of a normal two-week pay period of compensatory time a year. Once the maximum accrual amount has been met, employees will be paid for any time worked outside a 40-hour work week at a rate of one and half times per hour.
- c. Comp time shall be accrued in ¼ hour intervals.
- d. The scheduling of comp time shall be subject to the approval of the employee's supervisor
- e. Paid benefit time (paid time off, personal holiday hours, etc.) will not be considered as hours worked for purposes of determining compensatory hours. However, employees on conference, convention or seminar leave may be eligible for compensatory time for hours exceeding their normal workweek schedule resulting from travel time.
- f. Compensatory time balances will be paid out when an employee is promoted, changes positions, or changes departments.
- g. Employee compensatory time earned and banked, but unused as of December 15 will be paid out on the last check of the year.

5. Increased Work Hours – a declared emergency

Department Heads or the designated Emergency Operations Center (EOC) Director may schedule employees as they deem necessary to address the emergency situation. Employees may be assigned to work outside their normal department, outside their normal work duties, and/or outside their normal work hours. Such assignments may initially be offered on a volunteer basis, but will be mandatory if there is not a sufficient number of volunteers or if need dictates forced assignments. Employees will be paid for hours according to policies included.

6. Approval

Except in emergencies, all overtime and compensatory time must be approved in advance by management. Management has sole right to approve or deny overtime and compensatory time requests.

POLICY 406 On-Call, Call-In or Stay-Over Pay

1. Purpose

To ensure employees are available at any time to respond to emergency situations as they arise and to ensure employees are compensated for being called in or stay over to work.

2. On-Call Policy

- a. Departments included in on-call policy** – Weekend and after hours on-call pay rates for Social Workers, Home Health Nurses, Public Health Nurses, AODA Counselors, and Long Term Care Caseworkers:

\$150 weekly (7-day) rate for primary person. On-call will be rotated among the eligible employees. Employees who are on-call on a holiday will receive an additional \$.50 per hour.

3. Call-In or Stay-Over Policy

Employees called in to work outside of their regular work shift shall only be paid for actual time worked except for the Highway and Maintenance Department.

- a. Reporting Pay for Highway Department employees** – If an employee is called in to work outside of his/her normal work schedule, he/she shall be entitled to a minimum of two (2) hours of pay. In the event an employee reports for his/her regular scheduled shift and is then sent home prior to starting work, he/she shall be paid a minimum of two (2) hours of pay.
- b. Called-in early or stay-over late for Jail/Dispatch employees** – In the event an employee is called in for work before or after the normal work schedule has been completed, or on his/her day off, the employee shall receive a minimum payment of two (2) hours pay at the rate of one and one-half times his/her regular rate of pay or the actual number of hours worked, whichever is greater.
- c. Reporting Pay for Maintenance Department employees** – If an employee is called in to work outside of his/her normal work schedule, he/she shall be entitled to a minimum of two (2) hours of pay. In the event an employee reports for his/her regular scheduled shift and is then sent home prior to starting work, he/she shall be paid a minimum of two (2) hours of pay

POLICY 407 Shift Differential

1. Purpose

To provide an incentive to employees working hours for their shifts between the hours of 6 p.m. to 6 a.m.

2. Policy

Employees in the Sheriff Office scheduled to work after 6 p.m. or before 6 a.m. will receive an additional forty-five (\$.45) per hour for the hours between 6 p.m. and 6 a.m. and for all time worked on Saturdays and Sundays each week.

POLICY 408 Clothing, Tool and Safety Allowance

1. Policy

To provide guidelines to employees in Departments where certain specific items or uniforms are mandatory.

2. Procedure

The following Departments will have the following allowances for clothing, tools and safety allowance per different departments.

3. Sheriff's Department

The Sheriff's Office employees are expected to maintain a clean, pressed, and professional looking uniforms at all times. The County will provide an annual allowance to employees in the Sheriff's Office to assist in the expense of the required uniform.

a. Clothing Allowance

The Sheriff will provide and purchase the necessary list of equipment and uniforms for jail staff employees and replace them as needed due to normal wear or if damaged, ripped or torn in the line of duty.

- The replacement of eyeglasses shall be allowed if broken in the line of duty and reported by inclusion in the official report of the incident.

4. Highway Department

a. Mechanics – Tool Allowance

The County will reimburse up to one hundred fifty (\$150) dollars annually to the Highway Department Mechanics for the purchase of tools necessary for their position, subject to the submission of receipts.

d. Mechanics – Clothing Allowance

The County shall furnish and launder coveralls for the mechanics.

e. Clothing Allowance – Rubber Gloves Allowance

The County shall furnish rubber gloves for all personnel working with oil but to get a second pair the first pair must be turned in.

f. Safety Allowance

All field and shop employees are required to wear safety toe boots; therefore they are eligible for an annual allowance of one hundred fifty (\$150) dollars for the purchase of steel or safety fiber toe boots, prescription safety glasses, or other safety-related clothing or equipment approved by the Highway Commissioner, subject to the submission of receipt(s) as proof of purchase.

5. Maintenance Department

a. Mechanics – Tool Allowance

The County will reimburse up to one hundred fifty (\$150) dollars annually to the Maintenance Department Mechanic for the purchase of tools necessary for their position, subject to the submission of receipts.

b. Mechanic - Clothing Allowance

The County shall furnish and launder pants, shirts and jacket weekly.

c. Maintenance Personnel – Clothing Allowance

The County shall provide a \$100 clothing allowance for approved shirts ordered through an approved vendor.

POLICY 409

Out-of-Title-Work-Job Transfer & Promotion

1. Purpose

Some vacated positions may require an interim appointment, job transfer or promotion be made in order to continue effective operations of the department or work unit.

Employees may be assigned an interim position, a job transfer or promotion to assist in carrying out those duties which must be continued.

2. Policy

Assignment of job transfers or promotions would normally be made by the employee's Department Head and County Administrator, with the approval of the committee of jurisdiction, administration committee and final board approval.

3. Determination of Pay Status

The Department Head and County Administrator will make a recommendation to the Committee of Jurisdiction and Administration Committee whether such employee will receive additional pay for out-of-title work, job transfer and/or promotion.

If it is determined the employee will receive additional compensation, the effective date will be the first day where the exact duration of the assigned duties is known, or retroactive to the first day when the exact duration of the assignment was known.

Where the Department Head and County Administrator determine that the assigned duties have a value at or below the employee's regularly assigned duties, there will be no additional pay.

4. Time Worked

The out-of-title or job transfer assignment can be for any length of time consistent with the work to be completed.

POLICY 410

Training and Development

1. Purpose

To provide organized training programs for the purpose of increasing the knowledge, proficiency, ability and skills of Sawyer County employees.

2. Definitions

- a. Required training. Training that employees and volunteers are required to have by Department Heads and/or the County to maintain their current position.
- b. Optional training. Training that is offered, but is not required by law or Sawyer County Policy.

3. Training Day

Training consists of organized training programs that are conducted on-site, off-site, or on the Internet, regardless of duration. Training should be directly related to the position duties and/or the enhancement of specific related skills.

4. Cost and Scheduling of Training and Development

- a. Required training - Cost of training and development shall be made in the request for funds as set forth in the annual budget.

Department Head and, where designated, immediate supervisor approval is required to attend optional training events.

Work schedules will be determined in advance of the training event.

b. Optional training – There shall be no cost to the County of advancement opportunities for professional or career development training that includes credited courses or programs taken by the employee that are not required to keep the employee at an acceptable performance level.

If the departmental workload allows and prior approval is obtained, employee may take the classes on their own time by making up the time, take paid time off or unpaid time if approved.

5. Recording Training Hours

All educational job-related training is to be recorded as time worked on the timesheet.

a. Travel - When travel is required, travel time will also be recorded on the time sheet.

b. Lunches – When time is offered for lunch during training it will be recorded as unpaid meal/lunch period on the time sheet. Lunch hours will be taken and office work will not be done during this period unless approved in advance by the supervisor

POLICY 411 Travel and Expense Reimbursement

1. Purpose

To establish a uniform system for determining county responsibility for expenses incurred by employees and officers while performing official county business.

2. Definitions

a. Authorizing party - The committee of jurisdiction with respect to department heads and the department heads with respect to subordinate employees

b. Budgeted - Appropriated by the county board or otherwise allocated in the department budget.

c. Person - All public officials and employees of the county.

d. Vehicles - All motor drive surface forms of transportation.

Personal Automobile Insurance - All county employees who drive their personal vehicles on county business will be required to maintain, at a minimum, personal automobile insurance in the amount of \$100,000/\$300,000/\$50,000 or \$300,000 combined single limit auto coverage.

- o The employee will provide their insurance documentation verifying such insurance amounts annually to their Department who will provide it to County Administrator.
- o Mileage will not be reimbursed to any employee who has not provided the current insurance documentation.
- o Sawyer County Insurance Coverage can be excluded if you are engaged in gross or willful negligence.
- o Sawyer County coverage is considered secondary coverage when an employee is driving their personal vehicles on county business.

3. General Travel Policy

Each person will be reimbursed for reasonable, necessary and actual travel expenses incurred in the performance of authorized official duties as long as reimbursement requests are made on the appropriate county forms and receipts must be shown and attached for all expenses, excluding alcoholic beverages.

Department heads and the Committee of Jurisdiction will determine departmental travel and training needs and authorize expenditures.

All Out-of county travel at county expense must have the prior approval of the Department Head and Committee of Jurisdiction.

4. Hotel/Motel Registration and Lodging Expense

When registering in hotels or motels or signing for any official purposes, persons will use their business address.

The choice of lodging will be based primarily on cost with consideration given to accessibility in conducting business. When traveling alone, a person will make use of a single room rate. Only travel expenses for the authorized person will be reimbursed, and at the rate for a single room.

- Lodging at convention, seminar, or meeting sites will be fully paid for by the County up to the state rate currently in effect or an amount pre-approved based on the seminar or meeting arrangements.
- All lodging expenses will be supported by the original receipts.

5. Transportation Expenses

Employees are eligible for mileage reimbursement for any position related duties and conference or training that they are required and/or allowed to attend per policy.

Employees using their personal vehicle will be reimbursed mileage from home or their worksite whichever is closer.

Transportation should first be to use a County Fleet vehicle before attempting personal owned vehicles or the next most economical type or route.

Employees will follow all state and local traffic laws at all times whether a County or Personal Vehicle while on County business.

- a. Fleet Car Rate will be \$.10 less the current county rate per mile for official county use, chargeable against the requisitioning department, and the state rate for incidental personal use.
- b. Private Vehicle Mileage Rate - County employees will use a fleet car, if available.

Privately owned automobiles may be used when fleet cars are not available or the trip is less than 50 miles and will be reimbursed at the county rate as established by the County Board .

If a fleet car is available and the person elects to use his or her own car, the mileage will be at the fleet car or private vehicle mileage allowance, whichever is less.

6. Meals

Employees will be reimbursed for meals if the employee is attending an approved meeting, convention or seminar.

The claim for meals will represent actual, reasonable and necessary costs expended for meals as established by the County Board.

Paid under the following guidelines:

- a. Breakfast – the employee must leave before 6:00 a.m.
- b. Lunch – the employee must leave prior to 11:30 a.m. and return after 1:30 p.m.
- c. Supper – the employee must leave prior to 4:30 p.m. and return after 6:00 p.m.
- d. Expenses may be paid in aggregate of a maximum daily total of \$25. If the employee is required to purchase one meal while on county business, they will be limited to the amount stated per meal. If more than one meal is purchased, the employee will be allowed the total of these meals with the total being split among the meals at the employee's option.
- e. County Credit Card(s) or purchase cards cannot be used to pay for employee meals.
- f. Receipts are required for all meal reimbursement requests.
- g. No reimbursement will be made for the cost of alcoholic beverages.
- h. No meal advancements will be made except for Sheriff Department training for three or more consecutive days.

7. Claiming Reimbursement of Authorized Expenditures

All claims for reimbursement of authorized expenses must be submitted within 30 days on a Travel and/or Meal Expense Reimbursement Form provided by the Accounting Department.

8. Appendices

Travel Expense Reimbursement Form

Meal Reimbursement Form

POLICY 412 Use of County Vehicles

1. Purpose

To provide guidelines and assign responsibility for the safe operation and use of all vehicles operated by authorized individuals. It is the intent of this policy to ensure that County vehicles are safe, and that operators adhere to all local, state, and federal laws.

2. Scope

This policy applies to all regular full-time, part-time, and temporary employees of Sawyer County and all owned, non-owned, rented, or leased vehicles with the exceptions of special or heavy equipment or law enforcement vehicles.

3. Use of Vehicles

Only authorized employees working within the scope and purpose of County business will use County vehicles. County-owned vehicles are not assigned for, nor will they be used for, the convenience of the employee with regard to personal transportation needs or other non-County-related business.

Passengers in County vehicles must be engaged in County business. Only official, authorized passengers are allowed in County-owned vehicles. Employees may not use a County-owned vehicle to transport individuals, including family members, who are not performing services for the County unless prior authorization is requested and approved by the County. This policy shall not prohibit ride-sharing with volunteers, employees or officials from other government or private agencies, providing they are in the vehicle in an official capacity for Sawyer County or their own agency.

Drivers of County vehicles are responsible for operating vehicles in a safe and prudent manner and are responsible for their own actions when occupying a vehicle, including responsibility for violations of the law.

4. Commuting for Sheriff and Highway Department Employees:

Use of County vehicles for purposes of commuting between an employee's residence and principal place of work, provided such use is in the best interests of the County, will require authorization of the department head and Committee of Jurisdiction. In order to ensure appropriate fiscal control, a reporting system including: vehicle identification, vehicle mileage, purpose, principal operator of the vehicle, and business and commuting mileage driven, will be developed and used by each employee.

There may be occasions when it is advantageous to the County for an employee to take a County-owned vehicle to his/her home with Department Head or Supervisor's permission. This typically occurs when a worksite is closer to the employee's home than the County Courthouse or employee's work-base and will save significant transportation time during the workday. If an employee takes a County-owned vehicle home the use of the vehicle at that point is taxable under applicable IRS regulations, he/she must report the trip(s) on his/her payroll sheet for that pay period.

Employee use of County vehicles for purposes of commuting between an employee's residence and principal place of work will be subject to the applicable provisions of the Internal Revenue Code and Regulations as may be subsequently amended or modified.

5. Department Head or Supervisor Responsibilities

Ensure vehicle operators maintain a current Wisconsin Driver's License for the class of vehicle they are assigned to operate.

All vehicle use is in accordance with this policy.

Vehicles are maintained in accordance with County Policy and Operating Procedures.

6. Authorized Employee Responsibilities

Possess and maintain the proper Wisconsin Driver's License.

In the event more than one eligible person is traveling to the same destination, such persons shall, whenever reasonably possible, share a vehicle, or vehicles to reduce travel expense.

Notify their supervisor and department head of any changes in their driver's license if it is pertinent to their position (i.e. revocation, suspension).

Notify their supervisor and department head of any traffic citations, etc. received while operating a County-owned vehicle or personal vehicle if it is pertinent to their position.

Comply with all federal, state, and local traffic laws relative to the operation of a County vehicle including wearing seat belts when driving a County vehicle or their own vehicle on County Business.

- Report and assume responsibility for all citations or moving violations while operating the County vehicle;
- Cost to repair any damage to a personal vehicle is the responsibility of the employee/owner.
- Employees using a personal vehicle for County Business purposes must have personal vehicle insurance.
- Do not use or allow the use of tobacco products in a County vehicle.

Report all accidents or incidents within 48 hours of the accident. Accidents involving personal injury or significant property damage must be reported to the employee's supervisor, Accounting Manager and Human Manager immediately. Failing to report accidents will result in disciplinary action.

Employees using a County vehicle for overnight travel may use the vehicle for limited personal use incidental to travel away from home such as going to and from a restaurant or to purchase personal care items.

Do not drive under the influence of alcohol, prescription medicines that warn against operating a vehicle, sleepiness, or illegal drugs. Alcoholic beverages or any illegal drugs are not permitted in County vehicles at any time.

Do not drive while operating a cell phone, PDA, or other electronic communication device. Law Enforcement personnel with County issued cell phones are exempt from this requirement.

7. Documentation

Each vehicle shall have a vehicle maintenance/use log. As a minimum, the log shall track: start and return mileage for each trip, trip miles, vehicle operator and daily maintenance. Use logs shall be maintained for 2 years. All documentation on maintenance shall be retained as long as the County owns/leases the vehicle

8. Compliance

Abuse of the vehicle or policies may result in, but not be limited to: disciplinary action up to and including termination, a departmental cost of repair and/or cleaning, or suspension of vehicle usage

CHAPTER 5 - INSURANCE, RETIREMENT AND OTHER BENEFIT

POLICY 501 BENEFITS - HEALTH INSURANCE

1. Purpose

The County offers a group health insurance program for regular full-time and qualifying part-time employees.

2. Coverage

The design and selection of health care plans is determined by the Committee on an annual basis consistent with applicable state, federal and insurance regulations. Employees will receive notification of the health plan(s) as adopted by the Committee.

3. Eligibility

Full-time employees who qualify for coverage may participate in the Health Insurance Plan(s). Eligible employees will contribute, and the County will contribute, to the costs for the Health Insurance Plan.

~~Ineligible part-time employees may participate in the health insurance plan by paying the entire cost of the premium.~~

The County will make an offer of Health Insurance to any part-time employee eligible under the Affordable Care Act. The measurement period will be defined as ~~November~~ October 1 through ~~October~~ September 31.

4. Effective Date

Health insurance coverage will be effective the 1st day of the month following 30 days of hire, provided the employee has completed an application.

5. Payment of Employee Share of Premium

Any employee required to pay all or any portion of the health insurance premium will make such payment by payroll deduction, except as provided in 8.

6. Spouse also Employee

The county will provide coverage under only 1 family plan, 2 limited family or 2 single plans when spouses are county employees.

7. Coverage upon separation

Employees separating employment will have insurance coverage ~~only~~ through the month ~~for in~~ which the ~~employee premium was withheld. separation is effective.~~

Employees on unpaid leave or layoff, and retired employees or their surviving spouses may continue insurance under the county plans by remitting monthly premiums by check or money order to the County for the full premium amount. Insurance will be canceled if the employee or retiree fails to remit payment upon notice of delinquency.

Employees on FMLA will continue to pay their contribution, but will be allowed a 30-day grace period to pay and the county will give a 15 day notice of intent to cancel.

Employees receiving worker's compensation payments will have the employer share of the health insurance premium paid by the County for the time the employee is on total temporary disability or partial temporary disability not to exceed twelve (12) months.

8. Waiver of Coverage

Any employee who is eligible to be covered by group health insurance who fails to apply for coverage by filling out the application within the time framed allowed will be considered to have waived coverage.

Any employee may elect to decline health insurance coverage by signing a waiver form provided by the County Administrator Department and filing it with the County Administrator Department. A waiver will be effective upon receipt by the County Administrator Department.

9. Open enrollment period and cancellation of coverage

Each October the County Administrator Department will send out a letter of open enrollment period for health insurance for January 1 coverage changes each year.

Each October, any employee may change or cancel their benefits for January 1 the next year.

10. Insurance Continuation (“COBRA”)

Under state law and the Federal Consolidated Omnibus Budget Reconciliation Act of 1985 ("COBRA") and subsequent amendments to the Act, employees covered under an employer's group health care plan are eligible for continuation of health care coverage under the group plan upon the employee's termination (except for gross misconduct) or reduction in hours. COBRA regulations also allow the employee's spouse and covered dependents to elect continuation coverage upon the employee's death, divorce or legal separation, an employee's entitlement to Medicare, a dependent's loss of dependent status under family coverage, or the employer's filing of a bankruptcy proceeding.

All employees, as well as their qualified dependents, will receive notice of mandated insurance continuation benefits at the time of hire or whenever the plan coverage for the employee begins. If a qualifying event occurs which entitles the employee and/or qualified dependents to continuation coverage, the plan administrator will notify the qualified beneficiaries of their right to elect continuation coverage. Unless otherwise agreed, continued participation is solely at the participant's expense.

11. RETIREE BENEFITS

Employees who were hired before January 1, 2015 and are enrolled in the County's health Insurance plan at the time of retirement and are at least age fifty-five (55) and have at least fifteen (15) years of service may continue in the plan, at their own expense, until the age of eligibility for Medicare or the expiration of continuation rights provided by state and federal law, whichever occurs later.

Employees who were hired on or after January 1, 2015 and retire are no longer eligible for insurance benefits under the County Plan.

For additional details regarding coverage and premium contributions, contact the County Administrator Department.

12. HEALTHCARE REIMBURSEMENT ACCOUNT:

Employees may use the funds in their HRA account for any IRS-qualifying expense. Unused funds will roll-over from year-to-year. If an employee leaves employment with at least fifteen (15) years of service or reaches the age of Wisconsin Retirement eligibility, or is disabled as defined by Wisconsin State Statute 40.63 or 40.65, he/she shall be entitled to use any remaining funds in his/her HRA account for IRS-qualifying expenses. The County shall retain any interest earned and shall pay the administrative fees for

the HRA for active employees and for employees who meet the above-stated criteria for entitlement to use remaining funds in the HRA.

The County shall comply with IRS regulations regarding continuation rights for employees who do not meet the above-stated criteria. If an employee is exercising these continuation rights, he/she shall be required to pay the administrative fees for the HRA.

POLICY 502 BENEFITS – DENTAL AND VISION INSURANCE AND COBRA

1. Purpose

To provide dental and vision insurance to those employees who qualify for coverage.

2. Coverage

The design and selection of dental and vision plans is reviewed by County Administrator on an annual basis consistent with applicable state, federal and insurance regulations to determine if changes should be made for eligible employees. Employees will receive notification of the dental and vision plans as determined by County Administrator.

3. Eligibility

All employees may participate in the Dental and Vision Insurance Plan(s). Eligible employees will contribute the full costs of the dental and vision plans.

4. Effective Date

Dental and Vision insurance coverage will be effective the 1st day of the month following 30 days of hire, provided the employee has completed an application.

5. Payment of Employee Share of Premium

Any employee electing dental and/or vision insurance coverage will be required to pay the premium payment by payroll deduction, except as provided in 8.

6. Coverage upon separation

Employees discharged will have insurance coverage only through the month in which the discharge is effective.

Employees on unpaid leave or layoff, and retired (prior to December 31, 2014) employees or their surviving spouses may continue insurance under the county plans by remitting monthly premiums by check or money order to the County for the full premium amount. Insurance will be canceled if the employee or retiree fails to remit payment upon notice of delinquency.

Employees on FMLA and Workers Compensation will continue to pay their contribution, but will be allowed a 30-day grace period to pay and the county will give a 15 day notice of intent to cancel.

7. Waiver of Coverage

Any employee who is eligible to be covered by dental or vision insurance who fails to apply for coverage by filling out the application within the time framed allowed will be considered to have waived coverage for the time frame and will be allowed to open enroll each year for the next year.

Any employee may elect to decline dental and/or vision insurance coverage by signing a waiver form provided by the County Administrator Department and filing it with the County Administrator Department. A waiver will be effective upon receipt by the County Administrator Department.

8. Open enrollment period and cancellation of coverage

Each October the County Administrator Department will send out a letter of open enrollment period for dental and/or vision insurance for January 1 coverage changes each year.

Each October, any employee may change or cancel their benefits for January 1 the next year.

9. Insurance Continuation (“COBRA”)

Under state law and the Federal Consolidated Omnibus Budget Reconciliation Act of 1985 ("COBRA") and subsequent amendments to the Act, employees covered under an employer's group health care plan are eligible for continuation of health care coverage under the group plan upon the employee's termination (except for gross misconduct) or reduction in hours. COBRA regulations also allow the employee's spouse and covered dependents to elect continuation coverage upon the employee's death, divorce or legal separation, an employee's entitlement to Medicare, a dependent's loss of dependent status under family coverage, or the employer's filing of a bankruptcy proceeding.

All employees, as well as their qualified dependents, will receive notice of mandated insurance continuation benefits at the time of hire or whenever the plan coverage for the employee begins. If a qualifying event occurs which entitles the employee and/or qualified dependents to continuation coverage, the plan administrator will notify the qualified beneficiaries of their right to elect continuation coverage. Unless otherwise agreed, continued participation is solely at the participant's expense.

POLICY 503 BENEFITS - OTHER

1. Purpose

The Administrative Committee will determine the design and selection of benefits. The Committee retains the right to change these benefits. Employees will be notified of any such changes.

2. Types of Benefits that may be provided

AFLAC

Sawyer County provides AFLAC benefits to employees at the employee's expense.

Social security

The county will provide social security coverage to all employees under the Federal Old Age, Survivors, Disability and Health Insurance System pursuant to the provisions of Wis. Stat. § 40.41 (1), except for exemptions provided by law.

Flexible Spending

Pretax deductions for flexible spending accounts for dependent care expenses and unreimbursed medical expenses will be allowed.

Group disability plans

The County will offer a group short-term and long-term disability plans. Employees will be solely responsible for making all premium payments. Employees will be eligible to participate the first of the month following 30 days of employment. Thereafter enrollment will only be available during the annual open enrollment period.

Group life insurance

The county will participate in the Wisconsin Group Life Insurance Program as provided in Wis. Stat. § 40.70 through 40.74. All regular employees and elected officers will be eligible to participate, except those who have elected to waive said insurance.

Also under the Wisconsin Group Life Insurance Program the County will participate in the following:

- The Spouse and Dependent Life Insurance Program pursuant to the provisions of Wis. Admin. Code Ch. ETF 60 for its eligible employees and elected officers with the total cost paid by the employee or elected officer
- The additional group life insurance program pursuant to the provisions of Wis. Stat. § 40.03(6)(b) for its eligible employees and elected officials with the total cost paid by the employee or elected official.
- The supplemental group life insurance program pursuant to the provisions of Wis. Stat. § 40.03(6)(b) for its eligible employees and elected officials with the total cost paid by the employee or elected official.

The employee or elected officer share of the premium for insurance provided in this section will be paid by payroll deduction.

POLICY 504 BENEFITS – RETIREMENT and DEFERRED COMPENSATION

1. Purpose

To provide retirement contributions to eligible employees in accordance with State law and provide voluntary Deferred Compensation Programs.

2. Wisconsin Retirement System

- Employee qualifications
- In order to qualify for participation in the Wisconsin Retirement System, employees hired after July 1, 2011, must normally work at least 1,200 hours. See Wisconsin Retirement System’s website for more information.
- Employee Contribution.
- Once eligible for coverage under Wisconsin Retirement System, coverage is mandatory and an employee may not "opt out" of Wisconsin Retirement System. Employers and employees are required to pay the employer/employee portion as determined by the ETF.

3. Deferred Compensation

All eligible county employees and elected officers will be afforded the opportunity to voluntarily participate in the Sawyer County employees deferred compensation plans/programs pursuant to the rules, terms and conditions outlined in the plan which allow employees to defer a portion of income and taxes on that income to supplement retirement benefits and or ROTH retirement plan with post tax dollars.

More information is available from County Administrator.

CHAPTER 6 - WORKPLACE HEALTH, SAFETY AND SECURITY

POLICY 601 EMPLOYEE IDENTIFICATION CARDS

1. Purpose

To provide a safe and secure workplace for the public and all County staff, photo identification cards (ID cards) or key cards are issued to all Sawyer County employees. The ID and key cards serve to identify those who work for the County and in County buildings.

2. Definitions

Identification Card (ID Card). A hard plastic card used to identify employees of Sawyer County. The face of the card reflects the county name, an accurate photograph of the employee, and the employee's name.

Key Card. A hard plastic card used to identify employees of Sawyer County. The face of the card reflects the county name, an accurate photograph of the employee, and the employee's name. Key cards are differentiated from ID cards in that they are programmed to allow authorized employees access to designated Sawyer County buildings and facilities outside of normal working hours or areas that are secured during normal working hours.

3. Policy

Information Technology or the Sheriff's Office will photograph each new employee and issue an ID or key card to each new employee on the first day of employment.

Employees and non-employees must sign the Identification/Key Card Policy Acknowledgement Form prior to receiving their ID or key cards.

The ID or key card must be carried at all times and be visibly displayed at waist height or above unless doing so risks personal safety.

- Department heads may temporarily suspend the requirement for an employee to display the ID or key card if there is a significant chance of loss due to the nature of the work being done.

Employees will not give or lend their ID or key card to another individual.

Any misuse, alteration, or fabrication of the card will subject the holder to disciplinary action, up to and including termination by the County.

Cards may also be issued to non-employee persons participating in special programs sponsored by the County.

4. Key Cards Regular Employees

- All regular employees will be issued a key card through either the County Administrator Department or Sheriff's Office.
- Key cards will be programmed to allow employees into areas within the control of their respective department heads and/or work requirements.
- Requests for access to areas outside the control of the areas of their respective department heads will require review and approval by the Department Head and the Maintenance Director.
- Employees will not use a key card to allow an unauthorized person entry or exit from County buildings or other County property.

5. Non-Employees

All non-county employees approved for an ID Card will not be provided key cards or access to locations secured throughout the courthouse by the Key Card Security System.

- Department heads may request review and approval by the Maintenance Director for a key card to be issued to a non-county employee.

6. Replacing Lost or Damaged Cards

Employees will contact County Administrator immediately to replace lost, stolen or damaged ID or key cards. County Administrator will issue a replacement ID or key card only with approval of the employee's department head.

If the ID or key card should become damaged or lost, one new ID or key card will be issued by County Administrator per calendar year at no charge.

If the second ID or key card issued is damaged or lost within the calendar year, the employee will be charged \$10 for a replacement ID or key card.

If, at no fault of the employee, a key card should stop working, County Administrator will issue a new card to the employee at no charge. The old key card must be returned before a new one will be issued.

7. Appendices

Identification/Key Card Acknowledgement Form

POLICY 602 EMPLOYEE ASSISTANCE PROGRAM

1. Purpose

To provide assistance to Sawyer County employees for problems that may adversely affect an employee's employment performance.

2. Procedure

Assistance is provided by Sawyer County Health and Human Services Department relating to mental health, alcohol, and drug abuse and other personal issues.

Employees may contact the Sawyer County Health and Human Services Department for assistance in all spectrums of problems on their own or they may be referred to the Agency by Supervisors and/or Department Heads. Referrals by Department Heads and/or Supervisors shall be based primarily on job performance; the initial goal is to assist employees with job performance and to identify the problem and make help available to employees seeking assistance.

Diagnosis of problems shall be done by professionals and all records shall be treated like all other medical records.

POLICY 603 HARRASSMENT AND DISCRIMINATION

1. Purpose

The County is committed to maintaining a work environment that is free of illegal harassment. The County will not tolerate harassing conduct that affects tangible job benefits, that interferes unreasonably with an individual's work performance, or that creates an intimidating, hostile, or offensive working environment.

2. Scope

This policy applies to all elected officials, and to all employees, including regular, limited term or contracted personnel. It also includes others who do business with the County such as outside contractors, vendors or customers.

3. Complaint Procedure

Any employee who believes they are being harassed by another person subject to this policy will promptly take the following steps:

- If at all possible, the employee will politely but firmly inform the harasser how she or he feels about the actions and request that the person ceases the harassment.
- If the harassment continues, or if the employee believes some employment consequence may result from such a confrontation, the employee will report it to his immediate supervisor, or Department Head. Regardless of the outcome at this step, the supervisor or Department Head will provide a report to the County Administrator regarding the complaint.
- If the employee feels a Resolution has not been reached in the previous steps, or if the employee believes some employment consequence may result from making such a complaint, the employee will ask the County Administrator, or designee, to investigate the complaint.

4. Reporting

All employees will notify their supervisor whenever they have witnessed, experienced, or become aware of any act or threat of harassment. As an alternative, an employee may report such incidents of harassment to their Department Head, a supervisory employee in any other County department, to the County Administrator.

Supervisors receiving employee reports of harassment, or who have knowledge of a situation, shall report such information to their Department Head. The Department Head shall verbally inform the County Administrator, complete a confidential memorandum, and submit the memorandum to the County Administrator. The memorandum should include:

- Identity of persons engaging in workplace harassment.
- Detailed description of what happened, where it happened, and when it happened.
- Identity of persons reporting or witnessing the incident/harassment.
- How matter was resolved, or if it is ongoing.
- Suggestions for minimizing the reoccurrence of this incident/harassment.

5. Confidentiality

Confidentiality will be maintained to the greatest extent possible in order to protect the reporting person's identity as well as potential defamation of a wrongfully accused person. However, in most instances it will be necessary, at some point, to identify the reporting person so a thorough investigation can be completed. Only persons with a need to know will be informed.

6. Non-Retaliation

There will be no retaliatory action taken against any employee who, in good faith, raises or reports a legitimate issue of sexual harassment, or other harassment, or other discriminatory practice.

7. Investigation

All harassment claims shall be investigated as promptly and as thoroughly as possible by those conducting the investigation.

Accurate and complete records of all interviews shall be maintained.

Normally, interviews shall be conducted with the reporting employee, alleged harasser, and witnesses.

The reporting employee and accused harasser shall be notified in writing of the decisions reached.

POLICY 604 BULLYING AND WORKPLACE VIOLENCE

1. Purpose

To provide a preventative plan to address violent or aggressive behavior in the workplace and to establish procedures to respond to acts of violence by or against County employees.

2. Policy Statement

It shall be the policy of the County to provide a workplace that is free from violence, intimidation and other disruptive behavior. The County does not tolerate acts of bullying or workplace violence committed by or against employees and strictly prohibits employees from making threats, possession, use, or threat of use of any weapon in the workplace, or engaging in violent acts and intimidation. This is a zero-tolerance policy, meaning that the County will discipline or terminate any employee found to have violated this policy. Workplace violence does not include the use of reasonable force in the defense of oneself or others.

- Exceptions to Weapons Prohibition. The weapons prohibition policy does not apply to individuals who, within the normal scope of the individual's employment, is required to use a device that is, or would be considered, a weapon and who is authorized to use such a device by the employee's Department Head or by the Department Head in which the device is used.

3. Employee Responsibilities

Employees will treat all other employees with dignity and respect. Department Heads and Supervisors will provide a working environment as safe as possible by having preventative measures in place and by dealing immediately with threatening or potentially violent situations. No employee will engage in threatening, violent, intimidating or other abusive conduct or behaviors.

4. Restraining Orders

Employees who are seeking or have obtained restraining orders or injunctions against abusive persons should notify their supervisor so that appropriate measures can be taken. When an injunction or restraining order lists County facilities as being protected areas, employees must provide their supervisor with a copy of any injunction or restraining order which is granted, and a copy of any injunction or restraining order which is made permanent.

5. Reporting

Notification of Supervisor. All employees shall notify their supervisor whenever they have witnessed, experienced, or become aware of any act or threat, physical or verbal, and/or any abusive, disruptive or intimidating behavior from any individual. No attempt to engage or antagonize a person threatening violence shall be made. As an alternative means of reporting acts or threats of violence, an employee is authorized to bypass the chain of command and may report such incidents of workplace violence and bullying to their Department Head, a supervisory employee in any other County department (including the Sheriff's Department), to the County Administrator, or to the County Administrator Department. Employees shall cooperate with any subsequent investigation of their complaints.

Supervisor Responsibility. Supervisors receiving employee reports of bullying or workplace violence, or who have knowledge of a situation which may affect the security of Calumet County and its assets shall report such information to their Department Head. The Department Head shall verbally inform the County Administrator, complete a confidential memorandum, and submit the memorandum to the County Administrator. The memorandum should include:

- o Detailed description of what happened, where it happened, and when it happened.
- o Identity of persons reporting or witnessing the incident.
- o How matter was resolved.
- o Suggestions for minimizing the reoccurrence of this incident.

- While every effort will be made to keep reports and records made pursuant to this policy confidential, such reports and records may be subject to public disclosure under the Open Records Law.

6. Investigation of Reports

The County Administrator will receive, evaluate, intervene, and respond to reports of bullying and workplace violence with the assistance of the appropriate parties.

Privacy rights will be observed in the investigation of bullying and workplace violence incidents. Only those individuals with a clear need to know of the potential risk will be notified in cases where a person is, or is perceived to be, a threat to others. Anonymity of employees reporting violence, threats of violence, intimidating or other abusive conduct will be maintained during the investigation to the greatest extent possible by those investigating and resolving the complaint. However, there is no right to or guarantee of anonymity since it is often necessary to make the employee or customer against whom the allegation has been made aware of the complaint in order to ascertain the facts.

POLICY 605 DRUG FREE AND SMOKE FREE WORKPLACE

1. Purpose

The County declares any location at which the County conducts its business to be a smoke, alcohol, and drug-free workplace.

2. Smoke/Tobacco and Electronic Cigarette Free Workplace

Smoke Free Workplace. There is no smoking, as provided by Wisconsin Statutes 101.123(2)(a)(8r), or the use of or vaping with electronic cigarettes (or any electronic smoking devices designed to resemble a cigarette, cigar, cigarillo or pipe) in any enclosed County building, or in vehicles that are owned, leased or rented by Sawyer County

3. Smoking Cessation Education

The County will assist anyone who wishes to quit. Public Health will provide smoking cessation information, referral to treatment services including those offered by local health care providers and the Wisconsin Tobacco Quitline.

4. Alcohol Free Workplace

Alcoholic beverages are not allowed in any building or vehicle owned, leased or rented by Sawyer County at any time with the exception of the storage of alcohol as evidence in the Sheriff's Department. All employees are prohibited from being under the influence of, or consuming alcohol during the employee's work hours.

5. Drug Free Workplace

All employees are prohibited from unlawfully manufacturing, distributing, dispensing, possessing, being under the influence of, or using a controlled substance in the workplace.

- a. Use of Prescription Medication. This Policy, however, does not prohibit an employee from ingesting a legally obtained prescription drug that was legally issued to said employee. Because prescription medication can also affect an individual's demeanor and job performance, it is the employee's responsibility to notify their immediate supervisor if they are taking legal prescription drugs that may affect performance or ability to perform the position duties. Such prescription drugs must be given under medical supervision and may not interfere with the performance of job duties.
- b. Drug-Related Convictions. Any employee convicted of violating a Wisconsin or Federal Criminal Drug Statute must inform the County of such conviction (including a plea of guilty and no contest) within five (5) days of the conviction occurring. When the federal government requires a County to notify the federal contracting office of an employee's drug conviction in a workplace, the County

will provide such notification to the federal contracting office within ten (10) days of receiving such notice of conviction from an employee or otherwise receiving notice of such conviction.

6. Drug and/or Alcohol Testing

- a. New Employees. As a condition of employment, all new employees must successfully complete a County drug test. In certain circumstances, as authorized by the County Administrator, applicants may be required to submit to a drug test.
- b. Current Employees. In certain circumstances, as authorized by the County Administrator, the County may conduct reasonable suspicion and/or post-accident drug or alcohol testing as it deems appropriate.
- c. DOT Drug Testing. As a condition of employment, employees required to possess a Commercial Driver's License (CDL) as part of their job duties are required to comply with, and submit to, drug and alcohol testing in accordance with County policy and all applicable state and federal regulations. As part of its compliance with the regulations, the County maintains a more comprehensive policy which is available in the Personnel Department. Each affected employee will receive a copy of that policy.

POLICY 606 SAFETY POLICY – RIGHT TO KNOW

1. Purpose

To promote a clean, safe and healthy work environment for all employees of Sawyer County and to eliminate accidents and increase the efficiency of the Departments of Sawyer County.

2. Policy

The County shall comply with Wisconsin Department of Commerce regulation Comm 32, Public Employee Health and Safety Code, to develop and implement a Safety and Health Program that describes the procedures, methods, processes and practices used to manage workplace safety and health.

The program shall include, but not be limited to, elements for hazard identification and assessment, hazard prevention and control, and information and training. For the purposes of compliance with Comm 32, the County Administrator Manager shall be the designated contact employee for the Safety and Health Program.

All County personnel shall maintain clean and sanitary work places and shall not litter or contribute to unsafe work conditions. Work practices and environment will be examined following accidents and near misses to determine if changes are necessary.

All employees, under the Wisconsin public employee Right-To-Know Law, have the right to information about any hazardous chemical or substance that is used in their workplace.

Please see Sawyer County Safety Policy

POLICY 607 EMERGENCY RESPONSE PLANS

1. Purpose

The purposes of these plans are (a) to establish and maintain a safer, emergency response time; (b) to help reduce the number of and potential for injuries.

2. Policy

All Emergency Response Plans including Fire Response, Tornado Policy, Threats Response Plans and all other safety plans with all evacuation routes/plans are in the Safety Manual.

Employee Responsibilities

- Keep all procedures and processes by your phone for easy access
- Offer assistance to the degree you are capable and notify appropriate personnel
- Post or program the emergency phone number on the office phone; know if silent alarms are in your area.
- Ensure protection from injury or illness – wear personal protective equipment and consider or know your surroundings
- Report all work-related injuries and injuries experienced by the public.
- Know evacuation procedures.
- Keep calm and follow directions; stay in safe areas until told restrictions are lifted.

Please see Sawyer County Safety Policy

POLICY 608 SAFETY EQUIPMENT POLICY

1. Purpose

To ensure that employees wear safety equipment that will provide the necessary support and protection required of the job they are assigned.

2. Employees Required to Wear Uniforms

Highway Department

- Employees whose positions warrant safety protection such as steel-toed safety work boots meeting the standards outlined in the latest Safety Manual for Sawyer County Employees will be reimbursed \$150.00 per year upon receipt of the actual purchase receipt. All employees reimbursed for safety items will be expected to wear them at all times.
- The County shall also furnish and launder coveralls for the mechanics, rubber gloves will be furnished for all personnel working with oil, and all highway field staff shall be required to wear safety toe boots while on the job.

Sheriff Department

- The Sheriff will provide and purchase the necessary list of equipment and uniforms for jail staff employees and replace them as needed due to normal wear or if damaged, ripped or torn in the line of duty. The replacement of eyeglasses shall be allowed if broken in the line of duty and reported by inclusion in the official report of the incident.

POLICY 609 WORKERS COMPENSATION

1. Purpose

To provide policy and procedures to all employees concerning on the job injuries and workers compensation information.

2. NOTICE OF INJURY TO EMPLOYEE

All injuries MUST be reported within 48 hours after the injury occurs, including weekends and holidays. It is very important that you report any injury or potential injury as soon as possible so that the proper forms can be filed. Please do this even if you are not sure a claim will result – file the injury so that it is on record and Sawyer County will be in compliance with the 72-hour reporting.

If an employee requires medical attention, a Return to Work Form should also be obtained and returned to the Supervisor or Department Head prior to returning to work or if accommodations need to be made due to temporary work restrictions. No employee who seeks medical attention for a work related injury will be allowed to return to duty without clearance from a health care provider.

3. WORKER'S COMPENSATION

Medical expense and wage loss are covered by provisions of the State's Worker's Compensation Act. For an injury requiring medical attention, documentation must be provided by the physician to the County Administrator Department concerning the injury. At the time the physician indicates the employee is able to return to work, the Return to Work Form provided by the County shall be completed. If an employee suffers an injury or illness as a result of his employment, the employee must contact his Department Head or supervisor immediately.

4. Light Duty

Some departments or divisions are able to offer employees injured in work related incidents continued active employment that is within their medical restrictions. This program is called "Light Duty" and is intended to keep the employee gainfully employed while recovering from a work related injury. Employees are expected to participate in the Light Duty Program as long as the duties to be performed are within their medical restrictions. Employees who refuse Light Duty Program assignment may be risking disciplinary action and/or termination of future Worker's Compensation benefits.

5. Benefits while on Workers Compensation

If an employee is unable to work due to a Worker's Compensation injury or illness, and is covered under the County's health insurance policy, the County shall continue paying the same employer share of the health insurance premium that was paid before the injury for the time the employee is on total temporary disability or partial temporary disability, not to exceed twelve (12) months. The continuation of the health insurance benefit under this worker's compensation provision shall include any continuation of health insurance benefit the employee may be eligible for under FMLA-qualifying leave. No sick leave or vacation time shall accrue during a worker's compensation related leave. No holiday pay or funeral leave shall be paid during a worker's compensation related leave.

Please see Sawyer County Safety Policy - Workers Compensation

6. Appendices

Employee Report of Injury Incident Form – Claims kit from Insurance

Please see Sawyer County Safety Policy - Workers Compensation

POLICY 610 ADA ACCOMMODATIONS

1. Purpose

To provide equal employment opportunities to all qualified individuals, including those with disabilities.

2. Policy

Sawyer County's policy is to fully comply with the reasonable accommodation requirements of the American's with Disabilities Act.

CHAPTER 7 - TECHNOLOGY AND COMMUNICATIONS
POLICY 701 INFORMATION TECHNOLOGY RESOURCES

1. Purpose

To provide employees with a variety of information technology resources such as computers, printers, scanners, electronic mail, voicemail, Internet access, and application software in an effort to allow them to be more productive and have the information necessary to do their jobs.

2. Policy

Sawyer County provides information technology (IT) resources consisting of a computer information system and networks for employees in an effort to allow them to be more productive and have the information necessary for them to do their job. The use of these resources is intended for County business related purposes, except as prohibited or allowed by this or another State or Sawyer County policy.

IT resources may not be used for commercial or profit-making purposes, for political purposes, or for personal benefit where such use incurs a cost to the Department and is not work related.

Employees will follow Sawyer County's Information Technology Policy as adopted and/or modified by the County Board. POLICY TO BE DEVELOPED IN 2015.

CHAPTER 8 - WORKPLACE POLICIES – OTHER

POLICY 801 ETHICS AND CONFIDENTIALITY

1. Purpose

To ensure the privacy of all clients and to protect the confidentiality of personal, health, and other related information and assure the confidentiality of Sawyer County's County Administrator, payroll, fiscal, and information systems (collectively "Confidential Information").

2. Policy

Throughout the course of employment, employees may come into the possession of confidential information. It is the policy of Sawyer County that the information will not be disclosed to others, including friends or family, who do not have a need to know it.

This policy applies to all Sawyer County employees, temporary employees, volunteers, and interns.

Anyone who intentionally causes a breach in confidentiality will be held accountable and disciplinary action may result up to and including termination. Some circumstances may warrant legal action and criminal penalties for failure to maintain required confidentiality.

3. Appendices

Confidentiality Agreement

POLICY 802 CONFLICT OF INTEREST

1. Purpose

In order to ensure that County decisions be made in proper channels of the governmental structure; that public office not be used for improper personal gain, and that conflicts between private interests and public responsibilities be avoided, employees are expected to adhere to the following conflict of interest guidelines.

2. Specific Conflicts Defined

Incompatible employment

- No employee will engage in or accept private employment or render services to any other governmental body or to anyone in the private sector which would tend to be incompatible with the proper discharge of his or her duties, unless otherwise permitted by law or unless disclosure is made.

Representing private interests before agencies or court

- No employee who is admitted to practice law will represent, as an advocate any private interests, other than his or her own or that of his or her own family, in any proceeding adverse to the county before any federal or state court or agency.

Disclosure of confidential information

- No employee will, without proper authorization, disclose confidential information, nor use such information to advance the actual or anticipated financial or personal interests for him or herself to others.

Gratuities or Kickbacks

- An employee will not accept anything of value whether in the form of a gift, service, loan or promise from any person, which may impair his or her independence of judgment or action in the performance of his or her official duties.

- No payment of a gratuity or kickback will be made by or on behalf of any person and be accepted by any employee as an inducement or reward for the latter's action in procuring the award of any contract or order.
- It is not a conflict of interest for an employee to receive a gift or gratuity that is an unsolicited item of insignificant value or anything which is given to them independent of their position as an official or employee.

Failure to disclose interest in legislation before the County Board

- Employees or public officials who have been asked to render official opinions or recommendations to the county board on legislation must disclose the nature and extent of any personal or financial interest in the proposed legislation on behalf of themselves or their families.
- The disclosure must be made before any debate commences on the particular legislation and will consist of an announcement to be recorded in the journal of proceedings and a request to abstain from voting. Notwithstanding abstention from voting as may be allowed by the board, it is the responsibility of each employee or public official to personally ascertain that such actions do not conflict with Wis. Stat. § 946.13.

Nepotism forbidden

- Employees will not engage in nepotism as outlined in Policy 102.
- Employees will not use their positions to influence the county to employ a member of their immediate family or to retain the services of a member of their immediate family as an independent contractor or agent.

Conducting private business on county premises and time

- Employees will not conduct their personal or private business while on county premises and engaged in their public duties.

3. Prohibited Contracts with the County

An official, employee, or business in which an official or employee holds a 10% or greater interest will not enter into a contract with the county involving a payment of or payments of more than \$3,000 within a 12 month period unless the official or employee has made written disclosure of the nature and extent of such relationship or interest to the County Board.

Pursuant to Wis. Stat. §946.13, an official or employee will not participate in the formation of a contract(s) with the County involving receipts or disbursements of more than \$15,000 in any year.

An employee or agent acting on behalf of Sawyer County will not directly or indirectly participate in or benefit from Procurement when the employee, agent or their immediate family has a financial interest in the Business or organization, or has a potential for financial gain as a direct result of their actions.

4. "Anything of Value" Defined

Any money or property, favor, service, payment, advance forbearance, loan or promise of future employment, but DOES NOT INCLUDE such things as compensation and expenses paid by the state or county, fees, honorariums and expenses, unsolicited advertising or promotional material such as pens, pencils, notepads, calendars, informational or educational materials or unexceptional value, plaques, other advertising giveaways or any other thing which is not likely to influence the judgment of individuals.

The County's working definition of "anything of value" is anything with a value in excess of twenty-five dollars (\$25.00). When an employee receives something of value, the employee should take one of the following three steps.

- Return the item and document return of item;
- Donate the item to charity and document the donation;

- If the item is of potential use to the County, consult with Administration on appropriate disposition.

POLICY 803 CODE OF ETHICS

1. Purpose

It is the intention of Sawyer County to inspire employees to secure and maintain the respect and confidence of Sawyer County citizens. State statute 19.41 sets forth various forms of unlawful conduct. The below is not an exhaustive list. The items in this policy do not require a specific intention to do wrong; rather they are mere acts, which in doing, cast substantial doubt upon the integrity of the County and the person involved. This policy covers all employees and local government officials; including county board supervisors and candidates.

2. Policy

The following conduct on the part of an employee shall be deemed unethical and any violation of this section may result in disciplinary action being taken against the employee(s) involved, up to and including termination of employment.

- No County official or employee shall use their position to obtain preferential treatment or obtain financial gain for their immediate family or for any business with which they are associated.
- No County official or employee shall use or disclose inside information concerning Sawyer County gained in the course of, or by reason of, their official position or activities in any way that could result in receipt of anything of value for themselves or their immediate family as defined by Section 19.42, Wisconsin Statutes, or for any other person or organization, if the information has not been communicated to the public or is not public information.
- The receipt of any gift, gratuity, or anything of value as denoted above is contrary to the public policy of the County. No County official or employee shall receive or offer to receive, either directly or indirectly, any gift, gratuity or thing of value which they are not authorized to receive from any person if such person:
- Has or is seeking to obtain contractual or other business or financial relationships with the County or subunits of the County; or
- Conducts operations or activities which are regulated by the County or its subunits; or
- Has interest which may be substantially affected by the County.
- No public official or employee may use or attempt to use their public position to influence or gain unlawful benefits, advantages or privileges for themselves or others.
- No official or employee shall use or knowingly permit the use of County services or County-owned vehicles, equipment or materials for unauthorized non-governmental purposes or for unauthorized personal convenience or for profit, unless such service or use are available to the public generally.
- No County official or employee shall grant any special consideration, treatment or advantage to any citizen beyond that which is available to every other citizen. This section does not affect the duty of County supervisors to diligently represent their constituency.
- No County official or employee shall engage in or accept any private employment or render any services for a private interest when such employment or service is incompatible with the proper discharge of their official duties or which may impair their independence of judgment or action in the performance of their official duties unless otherwise permitted by law or unless disclosure is made as hereinafter provided.

POLICY 804 OUTSIDE EMPLOYMENT

1. Purpose

To ensure employees are not engaging in outside employment that conflicts with or affects performance of county duties.

2. Policy

Employees may hold outside employment as long as they continue to meet performance standards of their county position, and provided the outside employment does not create a conflict of interest with the county position or affects the performance of county duties.

Employees will be held to the same performance standards and work schedules, regardless of existing outside employment demands.

Outside employment that creates a conflict of interest is prohibited. The determination of whether a conflict of interest exists is the sole discretion of the employer.

Employees must make Supervisors or Committee of Jurisdiction aware of outside employment.

3. Prohibited Conduct

Use of county-assigned work number for any business purpose other than Sawyer County business.

Use of county-assigned telephones for incoming or outgoing telephone calls for outside employment purposes.

Storage of personal business records on county computers or use of any county equipment or property in conducting an outside business or outside employment.

POLICY 805 PERSONAL APPEARANCE

1. Purpose

County employees are in the forefront of providing service to the general public. Personal appearance is an essential element of good public relations.

2. Policy

Employees must be well groomed and are expected to dress in a professional manner befitting their jobs with due consideration to the needs of the County, the perceptions of the public, clients, customers, vendors, and fellow employees and leaders. Department supervisors may establish specific dress code requirements for each Department that are designed to reflect the professionalism of the workplace.

Employees who fail to dress in a professional manner will be expected to immediately change their appearance, and which may include returning home to change clothing or groom and which shall be without compensation.

3. Consequences of Policy Violation

In addition to corrective or disciplinary action, up to and including termination depending on the severity of the dress violation the supervisor reserves the right to send the employee home (without pay) until they dress appropriately for their position.

POLICY 806 POLITICAL ACTIVITY OF EMPLOYEES

1. Purpose

The County recognizes that, as a governmental entity, its operations do occasionally include items/issues that are political in nature. To that end, the County respects the right of its employees, as individuals, to become involved in the political process.

2. Hatch Act

Employees whose principal employment is in a federally grant-aided program are subject to prohibitions in the Federal Hatch Political Activities Act as amended. The Act may prohibit an employee in such a

program from becoming a candidate for an elective office, unless the employee is an incumbent elected official. Any employee who is running for elective office assume all legal responsibility for their decision and are advised to seek legal advice to assure there is no prohibition under the Hatch Act.

3.Prohibited Conduct

For those that choose to become involved in the political process, the following principles shall be followed:

- No County employee or elected official may engage in political activity, except for that which relates directly to County business, in their workplace.
- No County employee or elected official may use County supplies or equipment in support of partisan political activity.
- No County employee may include their County title in an endorsement of any candidate for political office.
- No candidate for elected County office, County employee or County official may require any County employee or official to endorse, assist, finance or support a candidate for political office, or retaliate against any employee or official in any manner because of that employee or official's personal political activity.
- This section does not prohibit any County official or employee from engaging in political activity if the activity is conducted on the employee or official's own time and at their own expense. This section does not prohibit an employee or elected official from seeking elective office. This section does not prohibit any County employee or elected official seeking elective office from making reference to their County employment or service in their campaign for office.

POLICY 807 SOLICITATION

1. Authorization for Solicitation & Sales

No employee or group of employees will on behalf of the County solicit funds or other things of value from any person, nor solicit funds or sell things of value to persons on County property without first obtaining permission from County Administrator. This will not apply to internal departmental solicitations such as farewell gifts, shower gifts, length of service gifts or donations for employee social gatherings.

2. Outside Solicitation & Sales

There is a non-business no-solicitation policy in County Buildings. This means that vendors of any kind are not allowed to solicit county employees to purchase goods and services for their personal use during working hours on county property.

No solicitation of any kind or distribution of written materials or products is allowed on county property without first obtaining permission from County Administrator

SIDE LETTER OF AGREEMENT
Highway Vacation Three Year Phase In 2015-2017

The maximum amount of accrued vacation hours in a highway employee's vacation bank for 2015 may not exceed 15 days or 120 hours more than the yearly accrual on their anniversary date. The time frame for which this carryover is to be used is at the discretion of the department heads

The maximum amount of accrued vacation hours in a highway employee's vacation bank for 2016 may not exceed 10 days or 80 hours more than the yearly accrual on their anniversary date. The time frame for which this carryover is to be used is at the discretion of the department heads

The maximum amount of accrued vacation hours in a highway employee's vacation bank for 2017 may not exceed 5 days or 40 hours more than the yearly accrual on their anniversary date. The time frame for which this carryover is to be used is at the discretion of the department heads. Any request to carry over more than the yearly accrual plus the 5 days or 40 hours of vacation will need to be submitted and approved by the Administration Committee.

This document will be removed from the Policy Manual after year 2017.

Approved: County Board 2/19/15

APPENDICES

The following are attached as separate files

Appendix A DISCIPLINE/TERMINATION GRIEVANCE FORM

Appendix B Unsafe Condition Or Hazard Repor

Appendix C WORKPLACE SAFETY GRIEVANCE FORM

Appendix D GRIEVANCE PROCEDURE APPEAL FORM

Appendix E Travel Expense Reimbursement Form

Appendix F Meal Reimbursement Form

Appendix G FMLA Forms

Appendix G1 Leave Request Forms

Appendix G2 Designation Notice Form

Appendix G3 Physician Certification Form

Appendix H Worker Compensation Claim Form

APPENDICES TO BE DEVELOPED

IT Policy

Volunteer Policy

Records Retention Policy

Public Records Policy

Appendix 202 General Complaint Form

Appendix 204 Grievance Form

Appendix 311 Unpaid Leave of Absence Form

Appendix 402 Employee Information - Confidential Form

Appendix 601 Identification/Key card Acknowledgment Form

Appendix 603 Harassment Complaint and Investigation Form

Appendix 607a Employee Report of Injury Incident Forms

Appendix 801 Confidentiality Agreement Form

Appendix 808 Records Retention Schedule

Appendix 809 Volunteer Waiver Form

APPENDIX A
SAWYER COUNTY DISCIPLINE/TERMINATION GRIEVANCE FORM

Please fill out this form completely. If you need more space, use a separate sheet of paper.

Name of Grievant: Job Title:	Work Phone: Home Phone:
Home Mailing Address:	DATE AND TIME RECEIVED <i>(for County use only)</i>
1. Discipline/Termination Being Grieved. Provide a description of the discipline/termination being grieved.	
2. Basis For Grievance. Provide a detailed description of the reason or reasons why you believe that the County's decision to discipline or terminate you was incorrect and should be overturned and a detailed description of any facts or information which support your belief.	
3. Witnesses. Identify by name, telephone number and address of all witnesses that you believe will support your claim that the County's decision to discipline or terminate you was incorrect and should be overturned. Provide a summary of the facts and/or information known by each witness.	
4. Documents. Attach any documents which support your claim that the County's decision to discipline or terminate you was incorrect. If you do not have a document, provide a description of the document which includes date of the document, the source of the document and the content of the document.	
5. Remedy Requested. Describe in detail how you believe the County's disciplinary action or termination should be modified.	
6. Certification and Signature. By my signature below, I certify that I have read the above complaint and, under penalty of law, I declare that this complaint is true and correct to my knowledge and belief. Signature of Grievant: _____ Date Signed: _____	

INSTRUCTIONS

1. USE: This Discipline/Termination grievance form is for use in connection with the Sawyer County (County) Grievance Procedure (Grievance Procedure). Only regular full-time employees and part-time employees who have worked at least one thousand two hundred hours (1200) for the County in the year preceding the event which is being grieved may use this procedure. This grievance form may be used only in connection with “discipline” and “termination” as defined by the Grievance Procedure. Please refer to the Grievance Procedure for additional definitions, rules and restrictions.

2. FILING DEADLINE: In accordance with section 1.03(A)(2) of the Grievance Procedure, this grievance form must be completely filled out, signed and filed with the County Administrative Coordinator within five (5) working days of the event giving rise to the grievance or the date upon which the Employee should have reasonably known the facts giving rise to the grievance. The Employee must sign and date the grievance. A grievance will not be considered filed until the employee signs the grievance and the grievance is received by the County Administrative Coordinator. An Employee may obtain an extension of time to file a grievance for discipline/termination. Please refer to the Grievance Procedure for the rules governing extensions. The failure of an Employee to timely file a grievance with the County Administrative Coordinator within five (5) working days or any period of extension granted by the County Administrative Coordinator shall constitute a waiver of the Employee’s right to use the grievance procedure and an abandonment of the grievance. Please refer to the Grievance Procedure for further details regarding the initiation of a grievance of discipline/termination.

3. FILLING OUT THE GRIEVANCE FORM

a. Event Being Grieved. This section requires you to describe the disciplinary act or termination that you are grieving. The description should include the reason(s) you understand you were disciplined/terminated and the date on which the discipline/termination occurred. A grievance form may only address one disciplinary event.

b. Basis for Grievance. This section of the form requires you to provide a detailed description of the reason or reasons why you believe that the County’s decision to discipline or terminate you was incorrect. Single word or limited responses to the effect that the discipline/termination was “wrong,” “unfair,” “unequal” or “mistaken” are insufficient. You must provide a *detailed* response explaining why you believe the disciplinary action or termination taken by the County was incorrect or unreasonable and a *detailed* description of any facts, events or other information which support your belief. Note that under the Grievance Procedure, you will have the burden of proving by clear, convincing and satisfactory evidence that the County did not have a rational basis for the disciplinary action/termination.

c. Witnesses. This section of the form requires you to identify all witnesses who you believe will support your claim that the disciplinary action or termination taken by the County was incorrect. The last known telephone number and address of each witness must be provided. You are also required to provide a detailed description of the facts or information known by each witness that supports your claim that the disciplinary action or termination taken by the County was incorrect and should be overturned. Single word or limited descriptions to the effect that the witness knows the discipline/termination was “wrong,” “unfair,” “unequal” or “mistaken” are insufficient. Employees must provide a *detailed* description of the facts or information known by each witness.

d. Documents. This section of the form requires you to produce all documents you believe support your claim that the disciplinary action or termination taken by the County was incorrect. If you do not have the documents, you are required to provide a description of each document which includes the date of the document, the source of the document and a description of the contents. The source can be, for example, an e-mail from a department head, supervisor, co-worker or other individual, a County policy or communication, a time card, portions of an employee or county file or a document that you wrote. The description of the contents should include the subject of the document and the information in the document which you believe supports your position on the grievance.

e. Remedy Requested. This section requires you to describe how you believe that the discipline or termination should be changed. The remedies that are available under the Grievance Procedure are limited to one or more of the following: (a) reinstatement; (b) a lesser adverse employment action consisting of a suspension, reduction in the length of a suspension, oral or written reprimand or documentation of employee acts and/or omissions in an employment file; (c) back pay; and (d) in the event of a reinstatement following termination, reimbursement of the County's applicable percentage of any payments made by the Employee for continuation of health insurance under the Consolidated Omnibus Budget Reconciliation Act (COBRA). Please note that you have a duty to mitigate damages and shall be required to submit proof of mitigation measures, if applicable.

4. ASSISTANCE: All information on the grievance form *must* be provided. If you have any questions regarding the information required by the form, please contact the Sawyer County Administrative Coordinator at (715) ____-_____. Employees in the County Administrative Coordinator's office may only offer assistance in identifying the information required by the grievance form. Employees in the County Administrative Coordinator's office cannot provide you with legal advice in connection with your grievance. Employees are encouraged to consult an attorney of their choice with any legal questions.

**APPENDIX B
SAWYER COUNTY
Unsafe Condition Or Hazard Report**

Instructions:

- Use this form to report an unsafe working condition that does not require immediate action.
- This form should NOT be used to *initially* report immediate and dangerous working conditions. See page 2 of this form for instructions on such conditions.
- This form should be completed, fully and legibly, with as much detail as possible. If additional space is needed, print information on a separate piece of paper and attach. If you need assistance in filling out the form, please contact the County Administrative Coordinator at (715) _____ - _____.
- Submit completed forms to the County Administrative Coordinator.

Employee's Name: _____ Job Title: _____ Date of Report: _____	DATE AND TIME RECEIVED <i>(for County use only)</i>
---	---

1. Location Of Condition Believed To Be Unsafe Or Hazardous (specify exact location where alleged unsafe or hazardous condition exists, the type of work performed and the approximate number of employees in the location. Use a separate form for each unsafe or hazardous condition).

2. Detailed Description Of Unsafe Or Hazardous Condition And Its Cause:

3. Date And Time Unsafe Or Hazardous Condition First Observed By Employee:

4. Are there any employees or other individuals who you believe have been injured or become ill from the unsafe or hazardous condition? If so, please identify the employee or individual, the nature of the illness or injury and the date on which the employee or individual was injured or became ill.

5. To your knowledge, has the unsafe or hazardous condition previously been reported to a person in management? If so, to whom was the condition reported and on what date or dates?

6. To your knowledge, has the unsafe or hazardous condition previously been inspected? If so, who inspected the condition, when was the inspection and what was the result of the inspection?

7. What changes would you recommend to correct the unsafe or hazardous condition?

8. Certification.

By my signature below, I certify that I have read the above report and declare that the information in the report is true and correct.

Signature of Employee: _____

Date Signed: _____

Immediate and Dangerous Working Conditions

1. This form should not be used to *initially* report immediate and dangerous working conditions. If a dangerous working condition exists that requires immediate corrective action, the employee must notify his/her supervisor at once. If the situation involves serious injury and/or the need for rescue, fire, or other emergency response, call 9-1-1 immediately.

2. Upon being advised of an immediate and dangerous working condition, the supervisor shall evaluate the condition take any immediate action necessary to correct or minimize the hazard to a reasonable standard of safety. The supervisor shall notify the Department Head and the County Administrative Coordinator of the employee's report of an immediate and dangerous working condition and the corrective action, if any, taken by the supervisor.

3. If corrective action is not taken immediately by the supervisor, or the employee believes that action taken by the supervisor does not minimize the hazard to a reasonable standard of safety, the employee shall immediately report the hazard to the Department Head and fill out and file this Unsafe Condition or Hazard Report with the County Administrative Coordinator.

4. The Department Head will designate the appropriate individual to go to the scene immediately, evaluate the situation, make a judgment, and document and communicate the decision on appropriate action to the employee, the supervisor and the County Administrative Coordinator.

5. The County Administrative Coordinator will review the information related to the reported dangerous working condition, refer the matter to the County Board's Safety/Wellness Committee and determine whether the situation has been satisfactorily resolved or if additional investigation and corrective actions are necessary. The County Administrative Coordinator will advise the employee in writing of the results of the investigation and any corrective action that the County intends to take within ten (10) working days of receipt of this Unsafe Condition or Hazard Report from the employee.

**APPENDIX C
SAWYER COUNTY WORKPLACE SAFETY GRIEVANCE FORM**

Please fill out this form completely. If you need more space, use a separate sheet of paper.

Name of Grievant: Job Title:	Work Phone: Home Phone:
Home Mailing Address:	DATE AND TIME RECEIVED <i>(for County use only)</i>
1. Identification of Condition Being Grieved. Provide a description of the Workplace Safety condition being grieved.	
2. Basis For Grievance. Provide a detailed description of the workplace condition you believe to be unsafe and a detailed description of any facts or information which support your belief.	
3. Witnesses. Identify by name, telephone number and address of all witnesses that you believe will support your claim. Provide a summary of the facts and/or information known by each witness.	
4. Documents. Attach any documents which support your claim. If you do not have a document, provide a description of the document which includes date of the document, the source of the document and the content of the document.	
5. Remedy Requested. Describe in detail the remedy you request.	
6. Certification and Signature. By my signature below, I certify that I have read the above complaint and, under penalty of law, I declare that this complaint is true and correct to my knowledge and belief. Signature of Grievant: _____ Date Signed: _____	

INSTRUCTIONS

1. USE: This Workplace Safety grievance form is for use in connection with the Sawyer County Grievance Procedure (Grievance Procedure). Any employee of Sawyer County may use the Grievance Procedure provided that the hazard or condition which is the subject of the grievance constitutes a “Workplace Safety” violation as defined in the Grievance Procedure *and* the Employee has complied with the conditions for filing a Workplace Safety grievance outlined in the Grievance Procedure. An Employee does not have to be personally impacted by a claimed hazard or condition in order to file a Workplace Safety grievance. Please refer to the Grievance Procedure in the Policies for additional rules and restrictions.

2. FILING DEADLINE: In accordance with 1.04(B)(2) of the Grievance Procedure, an Employee may initiate a grievance relating to Workplace Safety by presenting a written grievance to the County Administrative Coordinator within five (5) working days of: (a) the Employee’s receipt of written notice from the County that the County will not be taking corrective action with respect to an alleged Workplace Safety violation; (b) the County’s failure to begin corrective action relative to a Workplace Safety violation within ten (10) working days as provided in section 1.04(A)(2) of the Grievance Procedure; or (c) the failure of the County to respond to a report of a Workplace Safety violation within fifteen (15) working days. A grievance will not be considered filed until the employee signs the grievance and the grievance is received by the County Administrative Coordinator. An employee may obtain an extension of time to file a grievance for a Workplace Safety violation. Please refer to the Grievance Procedure for the rules governing extensions. The failure of an Employee to timely file a grievance with the County Administrative Coordinator within five (5) working days or any period of extension granted by the County Administrative Coordinator shall constitute a waiver of the Employee’s right to use the grievance procedure and an abandonment of the grievance. Please refer to the Grievance Procedure for further details regarding the initiation of a Workplace Safety grievance.

3. FILLING OUT THE GRIEVANCE FORM.

a. Condition Being Grieved. This section requires you to describe the Workplace Safety hazard or condition that you are grieving. A grievance form may only address one Workplace Safety hazard or condition.

b. Basis for Grievance. This section of the form requires you to provide a detailed description of the workplace conditions that you believe are hazardous or unsafe.

c. Witnesses. This section of the form requires you to identify all witnesses who you believe will support your claim. The last known telephone number and address of each witness must be provided. You are also required to provide a detailed description of the facts or information known by each witness that supports your claim. You must provide a *detailed* description of the facts or information known by each witness.

d. Documents. This section of the form requires you to produce all documents you believe support your claim. If you do not have the documents, you are required to provide a description of each document which includes the date of the document, the source of the document and a description of the contents. The source can be, for example, an e-mail from a department head, supervisor, co-worker or other individual, a County policy or communication, a time card, portions of an employee or county file or a document that you wrote. The description of the contents should include the subject of the document and the information in the document which you believe supports your position on the grievance.

e. Remedy Requested. This section requires you to describe your opinion on the appropriate remedy.

4. ASSISTANCE: All information on the grievance form *must* be provided. If you have any questions regarding the information required by the form, please contact the office of the Sawyer County Administrative Coordinator at (715) _____ - _____. Employees in the County Administrative Coordinator's office may only offer assistance in identifying the information required by the grievance form. Employees in the County Administrative Coordinator's office cannot provide you with legal advice in connection with your grievance. Employees are encouraged to consult an attorney of their choice with any legal questions.

APPENDIX D

SAWYER COUNTY GRIEVANCE PROCEDURE APPEAL FORM

INSTRUCTIONS: This form is to be used by employees and/or the County to appeal the written decision of an Impartial Hearing Officer relating to discipline, termination or workplace safety under the Sawyer County grievance procedure. The form must be completed and filed with the County Administrative Coordinator within five (5) working days of the date of the Impartial Hearing Officer's decision from which the appeal is being taken. Failure to file a written appeal within five (5) working days of the impartial hearing officer's decision will result in the waiver of the right to an appeal and the outcome of the proceedings before the hearing officer shall be final. You may only use the space provided on this form.

Name of Grievant: Job Title:	Work Phone: Home Phone:
Address:	DATE AND TIME RECEIVED <i>(for County use only)</i>
1. Decision From Which An Appeal Is Being Taken. Attach a copy of the impartial hearing officer's decision to this form. If you do not have a copy, provide the date of the decision, the name of the Impartial Hearing Officer and briefly describe the decision and order of the impartial hearing officer in the space below.	
2. Basis For Appeal. Describe why you believe the decision of the impartial hearing officer was incorrect.	

3. Remedy. Describe what you believe the impartial hearing officer should have ordered and why.

Signature of Appealing Party: _____

Date Signed: _____

APPENDIX G - 1
Sawyer County
Family & Medical Leave Act (FMLA)
LEAVE REQUEST FORM
- to be completed by employee -

Employee Name: _____

Amount of Leave Requested

Date leave will begin: _____

Date employee will return: _____
if you are unable to return on the date noted, you must notify the County prior to that date

If your leave schedule is not yet known or other arrangements are necessary, please explain above or on the reverse side of this form.

If you are requesting intermittent leave, please describe above (or attach a schedule). Leave may be taken in ¼ hour increments.

Reason for Leave

_____ My own serious illness

_____ Birth, adoption or as a pre-condition to adoption of the employee's child

_____ Serious illness of employee's:

_____ spouse;

_____ child;

_____ parent;

_____ parent-in-law (*state only*);

_____ eligible covered service member:

service member is employees:

_____ spouse;

_____ son or daughter;

_____ parent;

_____ next of kin

_____ Serious illness of employee's _____ domestic partner or _____ parent of a domestic partner

(*state only*).

_____ Qualifying exigency leave for employee's active duty _____ spouse; _____ parent; child;

who is a member of the Armed Forces, National Guard, or Reserves.

Employee signature

Date

APPENDIX G - 2
Sawyer County
Family & Medical Leave Act (FMLA)
Designation Notice

Employee Name: _____

Date of Notice: _____

Dates of Absence from Work: _____

This notice is to inform you that you are:

eligible not eligible for leave under the Federal FMLA

eligible not eligible for leave under the State FMLA

The requested leave: will will not be counted against your Federal FMLA entitlement.

The requested leave: will will not be counted against the following State FMLA entitlements: your medical condition (up to 2 weeks)
 to care for a qualifying family member (up to 2 weeks)
 birth, placement or adoption (up to 6 weeks)

You will will not be required to furnish medical certification of a qualifying health condition
If required, you must furnish certification by: (before leave commences) _____ or
we may delay the commencement of your leave until the certification is submitted.

You will will not be required to furnish periodic reports *(unless you are unable to return as scheduled)*
of your status and intent to return to work. If the circumstances of your leave change and you are
able to return to work earlier than the date indicated on your request, you will will not be
required to notify us at least two days prior to the date you intend to report to work.

You will will not be required to present a fitness-for-duty certificate prior to being restored
to employment. If such certification is required but not received, your return to work may be delayed
until certification is provided.

Certification of Health Care Provider
(Family and Medical Leave Act of 1993)

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division



(When completed, this form goes to the employee, **Not to the Department of Labor.**)

OMB No.: 1215-0181
Expires: 09-30-2010

1. Employee's Name

2. Patient's Name (If different from employee)

3. Page 4 describes what is meant by a “**serious health condition**” under the Family and Medical Leave Act. Does the patient's condition¹ qualify under any of the categories described? If so, please check the applicable category.

(1) _____ (2) _____ (3) _____ (4) _____ (5) _____ (6) _____ , or None of the above _____

4. Describe the **medical facts** which support your certification, including a brief statement as to how the medical facts meet the criteria of one of these categories:

5. a. State the approximate **date** the condition commenced, and the probable duration of the condition (and also the probable duration of the patient's present **incapacity**² if different):

b. Will it be necessary for the employee to take work only **intermittently or to work on a less than full schedule** as a result of the condition (including for treatment described in Item 6 below)?

If yes, give the probable duration:

c. If the condition is a **chronic condition** (condition #4) or **pregnancy**, state whether the patient is presently incapacitated² and the likely duration and frequency of **episodes of incapacity**²:

¹ Here and elsewhere on this form, the information sought relates **only** to the condition for which the employee is taking FMLA leave.

² “Incapacity,” for purposes of FMLA, is defined to mean inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment therefor, or recovery therefrom.

6. a. If additional **treatments** will be required for the condition, provide an estimate of the probable number of such treatments.

If the patient will be absent from work or other daily activities because of **treatment** on an **intermittent** or **part-time** basis, also provide an estimate of the probable number of and interval between such treatments, actual or estimated dates of treatment if known, and period required for recovery if any:

b. If any of these treatments will be provided by **another provider of health services** (e.g., physical therapist), please state the nature of the treatments:

c. **If a regimen of continuing treatment** by the patient is required under your supervision, provide a general description of such regimen (e.g., prescription drugs, physical therapy requiring special equipment):

7. a. If medical leave is required for the employee's **absence from work** because of the **employee's own condition** (including absences due to pregnancy or a chronic condition), is the employee **unable to perform work** of any kind?

b. If able to perform some work, is the employee **unable to perform any one or more of the essential functions of the employee's job** (the employee or the employer should supply you with information about the essential job functions)? If yes, please list the essential functions the employee is unable to perform:

c. If neither a. nor b. applies, is it necessary for the employee to be **absent from work for treatment**?

8. a. If leave is required to **care for a family member** of the employee with a serious health condition, **does the patient require assistance** for basic medical or personal needs or safety, or for transportation?

b. If no, would the employee's presence to provide **psychological comfort** be beneficial to the patient or assist in the patient's recovery?

c. If the patient will need care only **intermittently** or on a part-time basis, please indicate the probable **duration** of this need:

Signature of Health Care Provider

Type of Practice

Address

Telephone Number

Date

To be completed by the employee needing family leave to care for a family member:

State the care you will provide and an estimate of the period during which care will be provided, including a schedule if leave is to be taken intermittently or if it will be necessary for you to work less than a full schedule:

Employee Signature

Date

A “**Serious Health Condition**” means an illness, injury impairment, or physical or mental condition that involves one of the following:

1. Hospital Care

Inpatient care (*i.e.*, an overnight stay) in a hospital, hospice, or residential medical care facility, including any period of incapacity² or subsequent treatment in connection with or consequent to such inpatient care.

2. Absence Plus Treatment

(a) A period of incapacity² of **more than three consecutive calendar days** (including any subsequent treatment or period of incapacity² relating to the same condition), that also involves:

- (1) **Treatment**³ **two or more times** by a health care provider, by a nurse or physician’s assistant under direct supervision of a health care provider, or by a provider of health care services (*e.g.*, physical therapist) under orders of, or on referral by, a health care provider; or
- (2) **Treatment** by a health care provider on **at least one occasion** which results in a **regimen of continuing treatment**⁴ under the supervision of the health care provider.

3. Pregnancy

Any period of incapacity due to **pregnancy**, or for **prenatal care**.

4. Chronic Conditions Requiring Treatments

A **chronic condition** which:

- (1) Requires **periodic visits** for treatment by a health care provider, or by a nurse or physician’s assistant under direct supervision of a health care provider;
- (2) Continues over an **extended period of time** (including recurring episodes of a single underlying condition); and
- (3) May cause **episodic** rather than a continuing period of incapacity² (*e.g.*, asthma, diabetes, epilepsy, etc.).

5. Permanent/Long-term Conditions Requiring Supervision

A period of **Incapacity**² which is **permanent or long-term** due to a condition for which treatment may not be effective. The employee or family member must be **under the continuing supervision of, but need not be receiving active treatment by, a health care provider**. Examples include Alzheimer’s, a severe stroke, or the terminal stages of a disease.

6. Multiple Treatments (Non-Chronic Conditions)

Any period of absence to receive **multiple treatments** (including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for **restorative surgery** after an accident or other injury, **or** for a condition that **would likely result in a period of Incapacity² of more than three consecutive calendar days in the absence of medical intervention or treatment**, such as cancer (chemotherapy, radiation, etc.), severe arthritis (physical therapy), and kidney disease (dialysis).

This optional form may be used by employees to satisfy a mandatory requirement to furnish a medical certification (when requested) from a health care provider, including second or third opinions and recertification (29 CFR 825.306).

Note: Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number.

³ Treatment includes examinations to determine if a serious health condition exists and evaluations of the condition. Treatment does not include routine physical examinations, eye examinations, or dental examinations.

⁴ A regimen of continuing treatment includes, for example, a course of prescription medication (*e.g.*, an antibiotic) or therapy requiring special equipment to resolve or alleviate the health condition. A regimen of treatment does not include the taking of over-the-counter medications such as aspirin, antihistamines, or salves; or bed-rest, drinking fluids, exercise, and other similar activities that can be initiated without a visit to a health care provider.

Public Burden Statement

We estimate that it will take an average of 20 minutes to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, Department of Labor, Room S-3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

DO NOT SEND THE COMPLETED FORM TO THIS OFFICE; IT GOES TO THE EMPLOYEE.

SOFTWARE REQUIREMENTS

To view, complete, and print this application, you will need Adobe Reader or Adobe Acrobat software. This product is available for free download by visiting <http://www.adobe.com/products/reader>. The Adobe Acrobat product is a paid product. The program and associated licenses can be purchased at <http://www.adobe.com/products/acrobat>.

PDF CONTENTS

- PDF Instructions (1 page)
- First Notification of Injury Form (2 pages)
- Physician's Return to Work Recommendations Record (1 page)
- Release of Medical Records Authorization (1 page)

COMPLETING THE FORMS ELECTRONICALLY

1. Open the PDF file
2. Click 'Save As' to save a new specific copy of the file. Not doing so will cause your master copy to overwrite any previous versions, or cause your file to be deposited into your Temporary folder.**
3. To enter text: Click your cursor over the designated field, your text cursor will display. Begin typing information into the field. Some fields will require information to be explained in detail- these fields are formatted to fit text on multiple lines. Text in these fields will get progressively smaller and automatically start a new line.
4. Check Boxes: Some questions will require a 'YES' or 'NO' answer or ask you to check a specific reply. Click the box containing your desired response, and a blue check mark will appear.
5. Once completed, save your file and print the form. Please sign.

***The ability to save individual copies of forms is only available with Adobe Acrobat. Adobe Reader users are required to print their records and scan them for digital storage.*

IMPORTANT

- **THE 'FIRST NOTIFICATION OF INJURY' DOCUMENT IS TO BE FILLED OUT BY BOTH THE INJURED EMPLOYEE'S SUPERVISOR (1ST PAGE) AND THE INJURED EMPLOYEE (2ND PAGE).**
- **THE 'PHYSICIAN'S RETURN TO WORK RECOMMENDATIONS RECORD' DOCUMENT IS TO BE FILLED OUT BY THE INJURED EMPLOYEE'S ATTENDING PHYSICIAN, AND NOT A NURSE OR PHYSICIAN'S ASSISTANT.**

FIRST NOTIFICATION OF INJURY FORM

SUPERVISOR'S REPORT

INJURED PERSON: DATE: CHECK ONE
 EMPLOYEE VISITOR VOLUNTEER

NAME AND POSITION OF PERSON PREPARING REPORT:

DEPARTMENT: SUPERVISOR'S PHONE NUMBER:

DATE OF INJURY: TIME OF INJURY: A.M. P.M. LEFT WORK? (CLICK) **YES** **NO**

ADDRESS OF ACCIDENT:

WHAT WAS THE EMPLOYEE DOING WHEN INJURED? BE SPECIFIC. PLEASE NAME ANY EQUIPMENT USED.

HOW DID THE ACCIDENT OCCUR?

HOW LONG HAS THE EMPLOYEE BEEN ON THE JOB? DAYS MONTHS YEARS

WHAT SAFETY EQUIPMENT IS REQUIRED ON THE JOB FOR THE WORK BEING PERFORMED?

WAS THE EMPLOYEE USING ALL REQUIRED SAFETY EQUIPMENT? (CLICK) **YES** **NO**

IF NO, WHICH SPECIFIC PERSON PROTECTIVE EQUIPMENT WAS NOT USED & WHY?

DOES AN UNSAFE CONDITION EXIST THAT CONTRIBUTED TO THE CAUSE? (CLICK) **YES** **NO**

IF YES, WHAT IS THE CONDITION?

HOW COULD THIS ACCIDENT BEEN PREVENTED?

CORRECTIVE ACTION TAKEN BY SUPERVISOR? (CLICK) **YES** **NO** DATE:

REINSTRUCTION OF PERSON(S) INVOLVED?	YES	NO
EQUIPMENT REPAIR/REPLACEMENT?	YES	NO
IMPROVED PERSONAL PROTECTION EQUIPMENT?	YES	NO
REDUCED CONGESTION?	YES	NO
IMPROVED DESIGN/CONSTRUCTION?	YES	NO
DISCIPLINE OF PERSON(S) INVOLVED?	YES	NO

OTHER:

IN DETAIL, PLEASE EXPLAIN ACTION TAKEN TO PREVENT RECURRENCE:

EMPLOYEE INFORMATION

NAME: SSN: GENDER: M F HOME PHONE:
 ADDRESS: CITY: STATE: ZIP:
 BIRTHDATE:

EMPLOYMENT HISTORY

OCCUPATION: DEPARTMENT: DATE HIRED:

ACCIDENT INFORMATION

DATE OF INJURY: TIME OF INJURY: DATE REPORTED:
 NAME OF INDIVIDUAL THE INJURY WAS REPORTED TO:

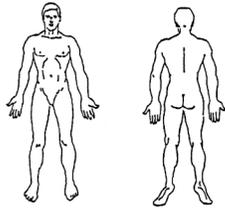
IN YOUR OWN WORDS, EXPLAIN IN DETAIL WHAT YOU WERE DOING IMMEDIATELY BEFORE THE ACCIDENT AND HOW THE ACCIDENT OCCURRED:

WITNESS?: DID/WILL YOU SEEK MEDICAL TREATMENT? (CLICK)

IF YES, PLEASE PROVIDE PHYSICIAN:

CLINIC:
 PHYSICIAN:
 ADDRESS:
 PHONE:

INDICATE ON THE DIAGRAM THE LOCATION OF INJURY



DESCRIBE SYMPTOMS:

I HEREBY CERTIFY THAT THE ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

DATE: SIGNATURE:

EMPLOYER SECTION:

PLEASE CHECK ONE:

EMPLOYEE HAS NOT MISSED TIME FROM WORK
 EMPLOYEE IS OFF WORK

IF EMPLOYEE IS OFF WORK, PLEASE INDICATE REASON

AUTHORIZED OFF WORK
 WORK RESTRICTIONS

PLEASE SUBMIT REPORT TO:

MUNICIPALITY
 NAME
 PHONE
 FAX

PLEASE BE SURE TO ATTACH A COPY OF THE PHYSICIAN'S RETURN TO WORK REPORT IF AVAILABLE

FAX REPORT TO AEGIS CORPORATION AT 262-252-6579 WITHIN 24 HOURS

SUPERVISOR OR HR REPRESENTATIVE: PHONE:

**WORKER'S COMPENSATION
ATTENDING PHYSICIAN'S RETURN TO WORK
RECOMMENDATIONS RECORD**

EMPLOYER NAME:
CLAIM NUMBER:

PATIENT NAME: DATE OF INJURY:

TO BE COMPLETED BY ATTENDING PHYSICIAN - PLEASE CHECK

DIAGNOSIS/CONDITION
(BRIEF EXPLANATION)

I SAW AND TREATED THIS PATIENT ON _____ AND BASED ON THE ABOVE DESCRIPTION OF THE PATIENT'S CURRENT MEDICAL PROBLEM:
(DATE)

1. RECOMMEND HIS/HER RETURN TO WORK WITH NO LIMITATIONS ON: _____
(DATE)

2. HE/SHE MAY RETURN TO WORK ON: _____ CAPABLE OF PERFORMING THE DEGREE OF WORK CHECKED BELOW
WITH THE FOLLOWING LIMITATIONS: (DATE)

SEDENTARY WORK. Lifting 10 pounds maximum and occasionally lifting and/or carrying such articles as docket, ledgers, and small tools. Although a sedentary job is defined as one which involved sitting, a certain amount of walking and standing is often necessary in carrying out job duties. Jobs are sedentary if walking and standing are required only occasionally and other sedentary criteria are met.

LIGHT WORK. Lifting 20 pounds maximum with frequent lifting and/or carrying of objects weighing up to 10 pounds. Even though the weight lifted may be only a negligible amount, a job is in this category when it requires walking or standing to a significant degree of when it involved sitting most of the time with a degree of pushing and pulling of arm and/or leg controls.

LIGHT MEDIUM WORK. Lifting 30 pounds maximum with frequent lifting and/or carrying of objects weighing up to 25 pounds.

MEDIUM WORK. Lifting 50 pounds maximum with frequent lifting and/or carrying of objects weighing up to 25 pounds.

MEDIUM HEAVY WORK. Lifting 75-80 pounds maximum with frequent lifting and/or carrying of objects weighing up to 40 pounds.

HEAVY WORK. Lifting 100 pounds maximum with frequent lifting and/or carrying of objects weighing up to 50 pounds.

1. In an 8-hour work day, the patient may:

- a. Stand/Walk
 NONE 1-4 Hours 4-6 Hours 6-8 Hours
- b. Sit
 1-3 Hours 3-5 Hours 5-8 Hours
- c. Drive
 1-3 Hours 3-5 Hours 5-8 Hours

2. Patient may use hand(s) for repetitive:

- Single Grasping
 Pushing or Pulling
 Fine Manipulation

3. Patient may use foot/feet for repetitive movement as in operating foot controls:

- YES NO

4. Patient is able to:

	FREQUENTLY	OCCASIONALLY	NOT AT ALL
Bend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Squat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Twist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OTHER INSTRUCTIONS AND/OR LIMITATIONS INCLUDING PRESCRIBED MEDICATIONS:

THESE RESTRICTIONS ARE IN EFFECT UNTIL: _____ OR UNTIL THE PATIENT IS RE-EVALUATED ON: _____
(DATE) (DATE)

3. HE/SHE IS TOTALLY INCAPACITATED AT THIS TIME. PATIENT WILL BE RE-EVALUATED ON: _____
(DATE)

NAME OF PROVIDER: DATE:
 PHYSICIAN:
 PHYSICIAN'S SIGNATURE:



WORKER'S COMPENSATION
RELEASE OF MEDICAL RECORDS AUTHORIZATION

By law, all health care providers must provide any employee, employer, worker's compensation insurer or their representative any information reasonably related to any alleged work injury. However, determining the relationship of prior medical records to a work injury can be difficult and time consuming. Therefore, to assist in the timely investigation of your claim, this document authorizes the health care provider to release medical information without attempting to determine the extent of its relationship to your alleged work injury:

NAME OF PROVIDER:	<input type="text"/>		
PROVIDER ADDRESS:	<input type="text"/>		
PHYSICIAN:	<input type="text"/>	EMPLOYER NAME:	<input type="text"/>
PATIENT NAME:	<input type="text"/>	PATIENT D.O.B.:	<input type="text"/>
PATIENT SSN:	<input type="text"/>	WC CLAIM NO.:	<input type="text"/>

The patient named above hereby authorized the health care provider named above to disclose all records checked below in its possession relating to the patient's health, treatment, and evaluation to:

NAME & ADDRESS OF PARTY AUTHORIZED TO RECEIVE PROTECTED INFORMATION:	Aegis Corporation 18550 West Capitol Drive Brookfield, WI 53045
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or its designated representatives, and to furnish to them a legible, certified duplicate of all records, writings, reports, test results and x-rays in its possession containing such information. This authorization includes all records, reports, correspondence, or other materials in the possession of the health care provider authorized, even if those materials were not generated by the health care provider, and the redisclosure of such materials is hereby authorized. This release is for use in the investigation, preparation, evaluation, and/or hearing of the worker's compensation claim described above.

PHYSICAL ONLY:

Release all records, correspondence, and any other information from whatever source regarding the patient's physical health, treatment and evaluation including, but not limited to, any made or provided by any physician, nurse, chiropractor, osteopath, dentist, physical therapist, hospital, or any other health care provider.

This consent constitutes a waiver of any privilege created by state or federal statute, regulation, rule or other authority, including but not limited to Wis. Stat. §§ 51.30, 146.025, 146.81, and 146.82, 42 C.F.R., Chap. 1, subpart C., § 2.31 and 45 C.F.R. § 164.508.

In signing this consent form, I acknowledge that I understand that:

- I am authorizing release of the records and information listed above.
- I am waiving any privilege that may otherwise prevent disclosure of the records and information listed above.
- I understand that the health care provider named above, whom I am authorizing to disclose my protected health information, may not condition my treatment, payment, enrollment or eligibility for benefits (if applicable) on whether I sign this authorization, except: (1) if my treatment is related to research, or (2) health care services are provided to me solely for the purpose of creating protected health information for disclosure to a third party.
- I may revoke this authorization at any time by a written request to the party authorized above to receive information, except that the party authorized above to receive such information may rely upon any personal health information received before the revocation of this authorization. Any by notifying the disclosing medical records/health information department in writing.
- I may obtain a copy of the disclosed medical records and information, upon written request to the party authorized above to receive information, at no charge to me.
- My personal health information disclosed pursuant to this authorization may be redisclosed and may no longer be protected by federal law. My personal health information may be released to any of the following: the employer, the worker's compensation insurer, the Department of Workforce Development, other parties to this matter or their attorneys; the Labor and Industry Review Commission; any court on any action of proceeding relating to this matter; experts retained or consulted by any party; and any of their agents, employees, or representatives. I specifically authorize and consent to any such disclosure and redisclosure.
- I am entitled to a copy of this consent form after I sign it.

This consent is subject to revocation at any time. If not revoked, this consent is effective for two (2) years from date signed. This authorization expressly waives any requirement that is must be used within a certain number of days after the date of signing, or that is must be dated within any time period before the date it is used. This authorization shall also extend to records of future treatment, after the date of signing of this authorization, as long as such treatment occurs while this authorization is still in effect. A photocopy shall be valid as the original.

PATIENT SIGNATURE (OR PERSON AUTHORIZED TO SIGN FOR PATIENT):	<input type="text"/>	DATE:	<input type="text"/>
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