POLICY: ATTENDANCE: SICK LEAVE STANDARDS AND PROCEDURES

PURPOSE:
Regular attendance of employees is necessary to carry out the work of UConn Health. Continuity of service, coverage and production all rely on the dependability of staff to report to work as scheduled. It is recognized that abuse and/or excessive use of sick time places a hardship on each department. Sick Time use as defined below will be monitored and utilized in the annual performance evaluation process for both full and part time employees. All evaluation of sick leave will be consistent with the applicable bargaining agreement and the procedures below.

DEFINITIONS:

Sick Leave: Includes use of sick time for legitimate employee illness or illness of an immediate family member, as defined within the parameters of the applicable collective bargaining agreement.

Occurrence: An occurrence of sick leave is defined as one continuous period of absence of any duration for the same reason, or a period of absenteeism related to a single cause if supported by acceptable medical documentation. An occurrence may also include unauthorized or unpaid time.

The following do NOT qualify as an “occurrence”:

- medical appointment time;
- funeral leave used as described in the applicable collective bargaining agreement; or
- approved leaves or intermittent absences documented in accordance with the State or Federal Family Medical Leave Acts.

Pattern of Sick Leave use: May be defined as the repeated use of sick or sick family leave on a particular day or before and/or after scheduled days off, weekends, or holidays.

PROCEDURES:

1. For the purpose of record keeping, the year will be defined to coincide with the
performance evaluation year for each employee. A record of sick absences is incorporated into the annual performance evaluation.

**Note:** For the purpose of preparing service ratings, the entire attendance record should be considered, including:

a) Number of days taken, and number of occurrences  
b) Pattern of usage including employee’s actual schedule, including pass days  
c) The employee’s past record  
d) Extenuating circumstances

2. Use of sick leave will be monitored by the employee's manager or designee on a regular basis and used in the evaluation process.

3. Upon review by the manager or designee, an employee may be counseled as the first step. This counseling generally should occur at the third (3rd) or fourth (4th) occurrence.

4. The number of occurrences of sick leave should not exceed six (6) per year. If more than six are used, progressive disciplinary action may be initiated and the employee may be considered “unsatisfactory” on their performance evaluation. Labor Relations should be contacted for guidance in these instances.

5. **Medical certificates** may be required by the employee's manager or designee as per the **collective bargaining agreement**. Managers are encouraged to consult with labor relations before placing an employee on a medical certificate requirement. An employee who has been placed on a medical certificate requirement must provide a medical certificate for each absence to the Human Resources benefits office no later than the day they return to work. The failure to provide a medical certificate should be treated consistent with paragraph 6 below. The requirement for a medical certificate may be withdrawn after improvement to a satisfactory level has been sustained. Medical certificate requirements will be reviewed periodically. The decision to remove the medical certificate requirement is at the discretion of the manager. *A copy of the notification of a medical certificate requirement should be sent by the manager to the appropriate union office as well as the Human Resources benefits office.*

6. **Unauthorized leave time** will be coded if a medical certificate requirement is in place and has not been submitted, or if the employee fails to follow the unit’s call out procedure. Instances of unauthorized time may result in disciplinary action.

7. **Unpaid leave time** will be coded in circumstances where an employee has exhausted their sick accruals, but has followed the unit’s call out procedure. Instances of unpaid leave time may result in disciplinary action.
Contractual References to Sick Leave:
UHP: Article 11, specifically Section 11.1c for medical certificate language.
AFSCME (NP-3): Article 31, specifically Section 5 for medical certificate language
CEUI (NP-2): Article 29, specifically Section 6 for medical certificate language
CPFU (NP-5): Article 26 and Article 28
1199 (NP-6/P-1): Article 22 specially Section 9 for medical certificate language and Article 22 Section Ten: “When continued absences from work constitute an abuse of sick leave, the Employee and the Union shall be notified in writing. After such notification, the Employer may deny sick pay. Such denial of sick pay is subject to the grievance and arbitration provision of this Agreement. Continued abuse of sick leave will subject the Employee to progressive discipline. No Employee shall be disciplined in any way for sick leave abuse on the basis solely of statistical evidence or mechanical application of the number of sick leave incidents. Discipline should be imposed only on the basis of an individual judgement, subject to the grievance procedure, than an individual has abused his or her sick leave privileges. Sick leave which is used to supplement Workers’ Compensation payment for injuries determined to be compensable shall not be considered in calculating the total amount of sick leave usage for purposes of this Section.”
A&R (P-5): Article 19, specifically Section 10 for medical certificate language.

Special Note: Administrative & Residual unit employees have certain important distinctions concerning sick leave use pursuant to an arbitration and related stipulated agreement. If they use less than 15 sick days, and there is no identifiable pattern of usage, no unauthorized leave, or no adverse effect on other aspects of their work, A&R employees cannot receive a Fair or Unsatisfactory Service Rating in the "Dependability" category.

Carolle Andrews (Signed) 11/16/16
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Carolle Andrews
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Andrew Agwunobi, M.D., M.B.A.
CEO, Executive Vice President for Health Affairs

Replaces:
- Administrative Procedure, Nursing Practice Manual, JDH, Department of Nursing, Procedure for: Attendance: Sick Leave/Professional, effective 10/85, revised 3/86, 0/88, 1/90, 2/91, 7/94, 9/96, 11/97, 10/00, 10/03;
- UConn Medical Group, UMG Practice Manual, UMG Administrative Policy and Procedure re: Attendance: Sick Leave, effective 8/98, revised 5/05, 10/06;
• HAM, Administrative Procedure, JDH, Procedure For: Attendance: Sick Leave, effective 4/05; and
• Any internal Departmental standards or procedures.

New Attendance Standards: 5/19/15
Revised: 10/13/15, 11/8/16