

RESOLUTION NO. 2021-06

RESOLUTION AUTHORIZING THE REVISED EMERGENCY COVID-19 SICK LEAVE POLICY

WHEREAS, in December 2019, a novel strain of the coronavirus was detected, now named COVID-19, that has spread throughout the world, including every state in the United States; and

WHEREAS, on January 3, 2020, the World Health Organization declared COVID-19 to be a Public Health Emergency of International Concern; and

WHEREAS, on March 12, 2020, Governor Tony Evers declared a public health emergency to direct all resources needed to respond to and contain COVID-19 in Wisconsin; and

WHEREAS, on March 13, 2020, President Donald Trump proclaimed a National Emergency concerning COVID- 19; and

WHEREAS, on March 18, 2020, the Village of Caledonia declared a local state of emergency; and

WHEREAS, the Village of Caledonia has revised the COVID Employment and Employee Conditions Policy to reflect the current state of the COVID virus; and

WHEREAS, the current COVID Employment and Employee Conditions Policy needs to be updated; and

WHEREAS, the Village has drafted an Emergency COVID-19 Sick Leave Policy to replace the current COVID Employment and Employee Conditions Policy in the Personnel Manual and is attached hereto as **Exhibit A**; and

WHEREAS, the Personnel Committee of the Caledonia Village Board has reviewed the new Emergency COVID-19 Sick Leave Policy, recommends adopting the new Policy;

NOW, THEREFORE, BE IT RESOLVED by the Caledonia Village Board the new Emergency COVID-19 Sick Leave Policy as of January 1, 2021, attached hereto as **Exhibit A**, replaces the current COVID Employment and Employee Conditions Policy.

Adopted by the Village Board of the Village of Caledonia, Racine County, Wisconsin, this 1st day of February, 2021.

VILLAGE OF CALEDONIA

By: _____

James R. Dobbs
Village President

Attest: _____

Joslyn Hoeffert
Deputy Village Clerk

EMERGENCY COVID -19 SICK LEAVE POLICY

The Village desires to provide and maintain a safe and healthy workplace and is equally committed to complying with all applicable laws. Accordingly, the Village will provide paid sick leave benefits (“COVID-19 Leave”) to eligible employees until March 31, 2021, or until other legally required paid leave becomes available and is required by law. This Policy is intended to provide employees with information regarding rights and responsibilities related to this leave. Should you have any questions about this Policy, please contact Human Resources.

EMPLOYEE ELIGIBILITY

Eligible employees may receive emergency paid sick leave benefits, regardless of their length of employment with the Village, provided that a qualifying reason for leave exists and is adequately communicated to the Village as soon as practical. Employees who fail, for reasons unrelated to any medical or sincerely held religious belief, to obtain a COVID-19 vaccination that is made available to them are not eligible for Paid Sick Leave under this policy. Paid Sick Leave under this Policy is available for immediate use for any of the qualifying reasons identified in this Policy.

QUALIFYING REASONS FOR PAID SICK LEAVE

Employees may use emergency paid sick leave under this Policy **if the employee is unable to work (or telework)** due to any of the following reasons:

1. The employee is subject to a Federal, State, or local health department quarantine or isolation order related to COVID-19;
2. The employee has been advised by a health care provider to self-quarantine due to concerns related to COVID-19;
3. The employee is experiencing symptoms of COVID-19 and seeking a medical diagnosis; or
4. The employee is caring for an individual who is subject to an order and has been advised by a health care provider or ordered by a Federal, State or local health department to self-quarantine.

Leave available under this Policy may only be used for reasons permitted by this Policy unless otherwise required by law.

APPLICATION PROCESS

Employees may make an initial request for paid leave under this Policy either orally or in writing, including email. Requests for leave should not be conveyed via voicemail unless circumstances prevent the other forms of communication. Requests for paid sick leave must be directed to Human Resources and must include a notice of a qualifying condition as identified above as well as the desire to receive sick leave under this policy. An employee seeking such leave should notify the Village of the need for leave as soon as practical after the employee becomes aware of the need for paid sick leave but no later than the first workday (or portion of such workday) that the employee has need for the Leave. Please note that leave will not be automatically granted because you make a request. Your request will be evaluated and you will be notified whether or not your leave is granted.

The notice to the Village of Caledonia and request for leave must identify the qualifying reason for leave as identified in above. An employee may be required to provide Human Resources with documentation supporting the reason for leave. The Village may follow up with an employee requesting such leave to obtain additional information and to advise the employee of other benefits available to including FMLA.

DURATION AND USE OF PAID SICK LEAVE

Eligible full-time employees are entitled to a combined total of 80 hours of emergency paid sick leave under this Policy and the 2020 federal FPSLA. Eligible part-time employees are entitled to a number of hours equal to the number of hours that they work, on average, over a 2-week period. If the employee’s hours of work are variable, the average bi-weekly hours the employee worked over the prior 6 months will be used. Unused paid sick leave under this policy is not paid to an employee upon the employee’s separation from employment.

Unless an employee is demonstrably teleworking, paid sick leave for qualifying reasons related to COVID-19 must be taken in full-day increments. It **cannot** be taken intermittently.

Unless you are teleworking, once you begin taking paid sick leave for one or more of these qualifying reasons, you must continue to take paid sick leave each day until you either: (1) use the full amount of paid sick leave or (2) no longer have a qualifying reason for taking paid sick leave. This limit is imposed because if you are sick or possibly sick with COVID-19, or caring for an individual who is sick or possibly sick with COVID-19, such paid sick leave as necessary to keep you from spreading the virus to coworkers.

If an employee who would otherwise qualify for leave under this policy has previously scheduled non-FMLA benefit hours (i.e. vacation, comp time and holidays), the employee will be required to use that previously scheduled benefit during their qualifying COVID-19 related absence.

COMPENSATION DURING LEAVE

When taking paid sick leave under this policy, employees are entitled to receive their regular rate of pay as compensation during a period of absence.

EFFECT ON EXISTING POLICIES

This Policy is not intended to replace any existing leave or paid time off policies maintained by the Village. Paid sick leave provided under this Policy is made available to eligible employees in addition to any leave or paid time off benefits provided under any of the Village’s existing policies.

NONDISCRIMINATION AND NO RETALIATION

The Village strictly prohibits any form of discrimination or retaliation in the administration of this Policy. The requesting or taking of leave under this Policy will not be used against any employee in any employment decision, including in the determination of raises, employment opportunities, or discipline. Similarly, paid sick leave under any section of this Policy will not serve as a negative factor or count against any employee for purposes of meeting the Village’s attendance requirements.

Created: January 28, 2021
Effective: January 1, 2021
Resolution: 2021-06

COVID-19 Emergency Paid Sick Leave Request Form

Employee Name (PRINT):	
Job Title:	
Department:	

I am requesting leave pursuant to the Emergency Paid Sick Leave Policy. My need for leave is based on my inability to work or telework due to one of the following reasons (select one of the following):

- 1. I am subject to a Federal, State, or local health department quarantine or isolation order related to COVID-19;
- 2. I have been advised by a health care provider to self-quarantine due to concerns related to COVID-19;
- 3. I am experiencing symptoms of COVID-19 and seeking a medical diagnosis; or
- 4. I am caring for an individual who is subject to an order or have been advised by a health care provider to self-quarantine.

I will need leave from _____, 2021 until _____, 2021.

Sincerely,

Signature: _____ *Date:* _____

Please submit all requests to Human Resources

HR Use Only:	
Date Received:	