# APPENDIX DATA

# APPENDIX A

- A-1 School Holidays
- A-2 Vacation Allowance and Sick Leave: Classified Employees—SEIU
- A-3 Vacation Allowance and Sick Leave: Classified Employees—Teamsters
- A-4 Vacation Allowance and Leave: Certificated Employees—SCTA



# **Human Resource Services**

School Holidays 2015-16 School Year\*

Labor Day HolidayMonday, September 7
Veterans' Day Holiday Wednesday, November 11
Thanksgiving HolidaysSaturday, November 21 through Sunday, November 29
Winter Holidays *Saturday, December 19 through Sunday, January 3
Martin Luther King Jr. Day Holiday
Lincoln's Day Holiday
Washington Day Holiday
Spring Holidays *Saturday, March 19 through Sunday, March 27
Memorial Day HolidayMonday, May 30
Last Day of Instruction for Schools on Regular Calendar Thursday, June 16

\* Holidays and vacation vary by work vacation group calendar.

(Revised: 07-20-15)



## Human Resource Services Vacation Allowance and Sick Leave: Classified Employees – SEIU \*

## Vacation Allowance

Probationary and permanent employees shall be entitled to vacation allowance based on 173.33 hours/month on the following basis:

Years of	Vacation Rate Per Hour Except	Approximate Number of Vacation Days Per Year for a Full-Time Employee						
Service	Overtime	12 Month	11 Month	10 Month	9 Month			
1 - 15	.0072	15	13.75	12.50	11.25			
16 or More	.00962	20	18.25	16.50	15.00			

Vacation allowance for part-time employees shall be computed at the appropriate vacation rate for all hours worked excluding overtime.

After the completion of not less than six (6) months of service, employees shall be entitled to use earned vacation.

## Sick Leave for Personal Illness (12.2)



Sick leave is earned by all probationary and permanent employees at the rate of one (1) day for each calendar month of service, with an annual maximum of twelve (12) days. However, no employee who works an entire school year shall receive less than ten (10) days sick leave per year. A school year is defined as that period of time in which students must be in school. A calendar month of service shall be defined as no less than seventy-five percent (75%) of the required working days of any calendar month for an employee. (12.2.1)

The number of days of sick leave a classified employee is eligible to earn during a fiscal year shall be available to him/her at any time during the fiscal year. However, a new employee shall not be eligible to take more than one-half (1/2) of the number of days of sick leave earnable in that year until he/she has completed six (6) months of active service with the District. (12.2.2)

\*Excerpt from SEIU/SCUSD Contract



# Human Resource Services Vacation Allowance and Sick Leave:

**Classified Employees – Teamsters \*** 

## **Vacation Allowance**

Vacation Rate					
Years of Service	Days Per Year				
1 - 14	20				
15 or More	22				

After the completion of not less than six (6) months of service, employees shall be entitled to use earned vacation.

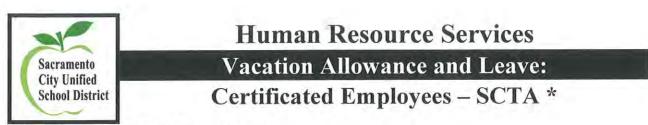
## Sick Leave for Personal Illness



Sick leave is earned by all probationary and permanent employees at the rate of one day for each calendar month of service with an annual maximum of thirteen (13) days. A calendar month of service shall be defined as no less than seventy-five percent (75%) of the required working days of any calendar month for an employee.

The number of days of sick leave a classified employee is eligible to earn during a fiscal year shall be available to him/her at any time during the fiscal year.

\*Excerpt from Teamster/SCUSD Contract



## Sick Leave for Employee Illness

Ten (10) days of sick leave at full pay shall be accrued to each member of the bargaining unit annually for personal illness or injury at any time during a school year except that persons employed under contract in extended-year programs shall earn sick leave at the rate of one (1) day for each full calendar month of service. A full month of service shall be defined as no less than 75 percent (75%) of the required working days of any calendar month for an employee.

Sick leave up to the maximum earnable within any given school year need not be earned by an employee before it is used.

In case any regular employee resigns or otherwise leaves the service of the school District, after having used more sick leave days than may have been earned for any current year at the rate of one (1) day per calendar month, as defined above, plus any prior year accumulations, a deduction shall be made in the salary or wages which may be due for each day of sick leave used and not earned. In case no salary or wages are still due at time of termination of service, the employee shall be properly billed for repayment to the District of pay received for unearned sick leave days that have been used.

Any unused portion of sick leave shall be accumulated without limit.

A member of the bargaining unit, while on unpaid leave of absence granted by the Board of Education, shall maintain any sick leave credits which were accumulated prior to such leave but shall not accumulate any additional sick leave credit during the period of such leave.

In case an employee severs official connection with the District and is reemployed at a later date, all unused sick leave credits on file at the close of the prior employment period shall be reinstated provided, however, that reemployment must occur within thirty-nine (39) months after the date ending the prior employment if such sick leave credits are to be reinstated.

For personal illness absence of any member of the bargaining unit exceeding ten (10) consecutive workdays, a physician's statement verifying the illness shall be provided by the employee in addition to the regular monthly absence report. For extended illness absence, a physician's written statement relative to necessity for continued absence is required. This requirement may be waived by the Associate Superintendent, Human

Resource Services, on his own volition or upon recommendation of the employee's immediate supervisor.

## Use of Sick Leave for Compelling Personal Importance

Sick leave, not to exceed nine (9) days per year may, at the employee's election, be used for any of the following reasons of compelling importance. Prior approval shall not be required except to give as much notice as possible to the employee's principal or other administrator in charge so that a substitute may be obtained.

Death, accident, or illness involving the employee's immediate family, other relatives, or close friends; accident involving the employee's personal property or the personal property of the immediate family, other relatives, or close friends. These days are in addition to those provided for bereavement, imminent death, or emergency.

Inability to get to the employee's assigned place of duty because of circumstances beyond control. Not less than one-half (1/2) day of leave may be used for this purpose except that not less than one (1) full day of leave may be used for this purpose in those instances where prior notification is not given.

Appearance in any court or before any administrative tribunal as a litigant, party or witness under subpoena or any order made with jurisdiction, except when acting as an agent for the District.

To attend religious observances or weddings, ceremonies, or traditional observances honoring the employee or members of the employee's immediate family.

To attend to legal or business matters which are of compelling personal importance.

To take examinations related to advanced training which cannot be scheduled during off-duty hours (in such cases the employee shall attach to the employee's absence report satisfactory written evidence of the requirement).

The following are not considered reasons of compelling personal importance: attendance at or participation in functions which are primarily for the employee's amusement, pleasure, personal convenience; the extension of holidays or vacation periods; accompanying a spouse on a trip when such travel is not otherwise authorized by these rules; seeking or engaging in other employment; engaging in a strike demonstration, picketing, lobbying, rally, march, campaign meeting, or any other activities relating to work stoppage or political campaigning.

The employee's election to use sick leave credits for any of the purposes allowable shall be indicated on the Employee Absence Report form which shall be attached to the payroll section's copy of the Monthly Absence Report. The employee shall check on the Employee Absence Report form the reason(s) for use of sick leave credits for reasons of compelling personal importance. Those employed on an hourly basis for at least one semester for not less than ten (10) hours per week, and personnel under contract with the District, excluding summer-session per session personnel, shall enjoy the following leave provisions:

## **Bereavement Leave**

Hourly employees shall be entitled to bereavement leave with pay from all assignments during a four (4) day period for each event of death in the immediate family as defined in 9.3,3.1. If out-of-state travel, or travel in excess of 250 miles is required, the bereavement leave period will span five (5) days beginning with one (1) day after death.

## **Emergency Leave**

An emergency absence shall be granted with full pay for sudden or unexpected illness or injury of a member of the immediate family, or in case of necessary surgery for a member of the immediate family.

The extent of emergency absence granted under this provision shall be no less than one (1) hour of assignment, or more than the hourly assignments for three (3) workdays during any one (1) school year and such leave is non-accumulative.

Necessary emergency absence, as per these regulations, shall be reported as soon as possible on the Employee Absence Report form. The employee shall explain the reason for the emergency on the reverse side of this form.

## **Imminent Death Leave**

Three (3) days at full pay shall be granted to per session employees as defined in Section 7 of this Article, in case of a serious illness or accident with death imminent, of each and every member of the immediate family. In the event that death does not occur, the necessity for this type of absence shall be verified by a written and signed statement of the attending physician specifically stating that death was imminent. The immediate family is defined in 9.3.3.1 above.

A maximum of two (2) consecutive workdays leave of absence without pay, in addition to each leave for imminent death as defined in the above paragraph, provided the days are necessary for travel or the settlement of legal and/or family problems in connection with such leaves. The employee has the option to avoid salary loss by using such leave in those instances where it is a matter of compelling personal importance.

## Jury Duty Leave

A member of the bargaining unit employed on an hourly basis shall be granted leave for serving on a jury on a case before a court of law. The District shall remunerate the difference between regular earnings and the jury duty pay.

For additional information on long-term leaves of absence counseling/advice, refer to the School/Department Assignments by Team for the appropriate HR Analyst.

\*Excerpt from SCTA/SCUSD Contract.

# **APPENDIX B**

For Benefits Questions and/or Inquiries, please contact the Benefits Office at 916-643-9432

## **APPENDIX C**

Payroll, Pay Dates, Salaries

- C-1 Flexible Reimbursement Accounts
- C-2 Payroll Deposit/Deduction Options
- C-3 Pay Date Schedules for New Hires and
  - Reassignments

## **PRE-TAX BENEFIT PLAN**

Your employer offers tax-free benefit plan(s) that provide you with ways to save up to thousands of dollars per year by offering the option to pay for certain types of expenses with pre-tax payroll deductions. If you choose to participate, you will reduce your taxable income which ultimately results in you having more money to spend!

This packet contains important information about your pre-tax benefit plan(s). For more details about the plan, please refer to your Summary Plan Description (SPD).

## Medical Flexible Spending Accounts (FSA):

#### What is the maximum I can elect?

Medical Expense Flexible Spending Account: \$2,550

#### How do I use the Medical FSA?

- The Medical Expense FSA allows you to set aside tax-free dollars that will reimburse you for "qualified" medical, dental and vision expenses "incurred" during the plan year. "Incurred" means the service must be performed during the plan year. "Qualified" expenses include most medically necessary (meaning not cosmetic) out-of-pocket medical, dental, and vision related expenses. Insurance premiums of any kind, including Medicare, individual health insurance, long-term care, warranties, or membership fees that are not directly related to care are not eligible for reimbursement through the Medical FSA.
- IRS Publication 502 <u>http://www.irs.gov/pub/irs-pdf/p502.pdf</u> offers helpful information as a guide to what qualifies as a medical expense. Please be advised Publication 502 addresses all expenses that can be deducted on your individual tax return, not just the expenses that are eligible for reimbursement through a Medical FSA.
- IRS Publication 969 <u>http://www.irs.gov/pub/irs-pdf/p969.pdf</u> is another good source of information for medical FSAs.

The following is a sample of permitted expenses:

- ✓ Acupuncture
- ✓ Allergy treatments
- ✓ Chiropractic
- ✓ Contact lenses & supplies
- ✓ Dental (NO teeth whitening)
- ✓ Doctor office visits & exams
- ✓ Glasses (prescription)
- ✓ Hearing aids
- ✓ Hospital services & surgery
- ✓ Insulin & insulin supplies
- ✓ Insurance co-pays & deductibles

- ✓ Laboratory fees
- ✓ Laser eye surgery
- ✓ Medical mileage
- ✓ Orthodontia (child & adult)
- Over-The-Counter medical items & supplies (restrictions may apply)
- Prescriptions (medically necessary)
- ✓ Psychiatric care
- ✓ Sterilization
- ✓ Therapy (no marriage/family counseling)
- ✓ Vaccines (including Flu Shots)
- ✓ Vision exams

## Can I be reimbursed through FSA for medical expenses incurred by my family members?

- Yes! You may save taxes on all qualified medical expenses incurred by you, your spouse, and your dependent children. You may NOT be reimbursed for expenses incurred by a domestic partner unless your domestic partner is your federal tax dependent.
- Your plan allows reimbursement for qualified expenses that you incur for an eligible adult child up to age 26.

## What is the last date I can submit FSA claims for the plan year?

If you are an active participant on the last day of the plan year, your designated final filing date is March 31, 2017. Please keep in mind that any unused amount left in your account is forfeited at the end of the plan year. This rule is called "use it or lose it."

## How do I enroll in the FSA plan?

You will make your Spending Account election using the CBA Enrollment Form. The appropriate enrollment instructions and/or forms are included or may be provided to you separately by your employer, if applicable.

## Can I participate in a FSA and HSA (Health Savings Account) at the same time?

If you participate in the Medical FSA, neither you nor your spouse (if applicable) is permitted to make contributions to a HSA at any time during the plan year.

## Can I be reimbursed more than I've had deducted from my paycheck?

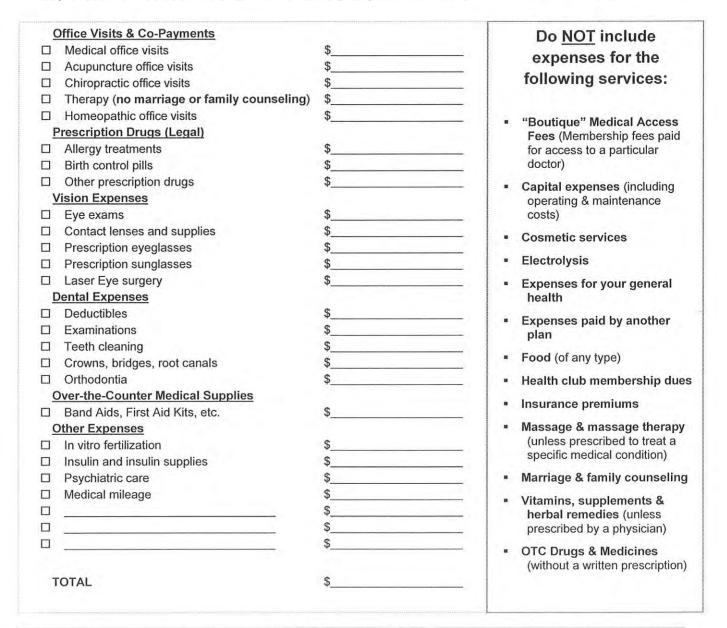
The Medical FSA account is pre-funded, meaning your entire annual election amount is available for reimbursement at any time during the plan year, regardless of the amount you have contributed from your paycheck.

## What happens if my employment terminates or I lose eligibility to participate in the plan(s)?

- Medical FSA: Benefits will not be payable for services rendered after the day on which you lost your eligibility to participate. (Refer to your SPD for information about COBRA for the Medical FSA, if it is available).
- CBA must receive your Medical FSA claims for reimbursement no later than 90 days after the date your eligibility ended for expenses that were incurred prior to the date you lost your eligibility to participate.

## How do I determine how much my family will spend on Medical Services?

- The following worksheet will help you calculate how much your entire family will spend on medical services during the course of the plan year.
- Only include services or expenses you will incur during the plan year based on the date of service (not the date you pay for a service).
- While determining the amount you would like to contribute on an annual basis, please keep in mind that any unused amount is forfeited at the end of the plan year. This rule is called "use it or lose it."





## SAVE! SAVE! SAVE! SAVE! SAVE!

## Over-The-Counter (OTC) Drugs, Medicines, and Supplies

Saving taxes on your OTC drugs, medicine, and medical supply purchases is a great way to maximize the benefits of your Medical FSA or HSA. However, getting reimbursed for your OTC purchases may have some restrictions. OTC drugs and medicines require a prescription from a physician to be reimbursed through your Medical FSA. However, there are still 27,000 OTC medical products and supplies that can be reimbursed through your Medical FSA without requiring a prescription. The following is a sample list of OTC products that may be reimbursed through your Medical FSA. For a more comprehensive list of OTC products available, we recommend visiting <u>http://www.CBAdministrators.com/FSAStore</u>.

## NO PRESCRIPTION REQUIRED

- Band Aids
- Birth Control
- Blood Pressure Monitor
- Braces & Supports
- Canes
- Catheters
- Colostomy Products
- Contact Lens Supplies & Solution
- Contraceptives
- Defibrillators
- Denture Adhesives
- First Aid Kits
- Glucose Meters
- Home Screening Tests (Cancer, Cholesterol, Fertility, Hepatitis C, HIV, Pregnancy, Prostate, Thyroid)
- Hot & Cold Packs
- Hydrogen Peroxide, Iodine
- Insulin & Diabetic Supplies
- Liquid Adhesive
- Medicated Bandages
- Reading Glasses
- Rubbing Alcohol
- Sleeping/Snoring Appliances
- Vapor rub
- Wheelchairs & Walkers

## ITEMS THAT REQUIRE A LETTER OF MEDICAL NECESSITY FROM YOUR DOCTOR:

- Herbs
- Herbal Remedies
- Minerals
- Other Natural Remedies
- Supplements
- Vitamins

## PRESCRIPTION IS REQUIRED

- Acne Medications
- Anti-Diarrhea Medications
- Anti-Inflammatory Treatments

## PRESCRIPTION IS REQUIRED (cont'd)

- Anti-Itch Treatments
- Antifungal Treatments
- Antiseptics & Topical Antibiotics
- Allergy, Cold, Flu, and Cough Medications
- Asthma Medications
- Bunion/Blister Treatments
- Cold Sore & Fever Blister Medications
- Corn & Callus Removal Medications
- Diaper Rash Ointment
- Digestion/Gas Aids
- Ear Drops
- Eye Drops
- Hemorrhoid Relief
- Laxatives
- Lice Control
- Motion Sickness Tablets
- Nasal Sprays, Drops & Strips
- Nicotine Gum or Patches
- Oral Pain Remedies
- Pain Relievers
- Sinus Medications
- Sleeping Medicines
- Throat Pain Remedies
- Wart Removal Medications

## **NEVER ELIGIBLE:**

- Aromatherapy products
- Baby bottles, cups, oil, wipes
- Cosmetics
- Cotton swabs or pads
- Deodorants and antiperspirants
- Diapers
- Facial care
- Feminine care
- Food (of any type)
- Fragrances
- Hair re-growth
- Low carb / low calorie / dietary foods
- Oral care (e.g. Sonicare)
- Shampoo and conditioner
- Skin care
- Spa salts
- Sun tanning products
- Toothbrushes

## **Dependent Care Spending Accounts (FSA)**

#### What is the maximum I can elect?

Dependent Care Flexible Spending Account: \$5,000

\*The maximum tax exclusion permitted during a 12-month calendar year is \$5,000 per individual taxpayer or married couple filing a joint tax return. The maximum amount permitted could be reduced under the following circumstances: (1) If you are married and file a separate tax return, the maximum you may elect is \$2,500; (2) If your spouse earns less than \$5,000, you may not elect more than your spouse earns during the Plan Year; (3) If your spouse is a full-time student or incapable of self-care, the maximum you may elect is \$3,000 for one child in day care or \$5,000 if you have two or more children in day care.

## Can I be reimbursed more than I've had deducted from my paycheck?

Dependent Care FSA: At no time can you be reimbursed more than you have actually contributed to your account through payroll deduction.

## How do I use the Dependent Care FSA?

- The Dependent Care FSA allows you to be reimbursed for custodial or day care expenses for children that are your federal tax dependents under age 13, or for a disabled adult federal tax dependent that lives with you, so that you and your spouse (if applicable) can work, attend school or actively look for work.
- Your daycare provider may not be your dependent or child under the age of 19.
- Only the Custodial Parent is eligible to participate in the Dependent Care FSA. In the case of divorce, the Custodial Parent is the parent with whom the child lives for MORE THAN 50% of the year. Only one parent can qualify as the Custodial Parent.

#### Qualified daycare expenses include:

- Actual reportable ("above the table") daycare expenses incurred during the plan year (separate fees for services such as transportation, meals, classes, lessons, trips or supplies are not reimbursable unless the charges are included as part of your base fee – not itemized.)
- Day camps, including day camps that focus on specific activities such as sports and arts (overnight camps are excluded even if the camp apportions the day camp and overnight charges.)
- Educational (tuition) charges for kindergarten and over are NOT eligible for reimbursement.
- The maximum amount you may elect is reduced for couples that file separate returns, when one spouse is a student or when a spouse earns little or no income.
- Determine your election amount for the entire plan year. Do NOT elect more than your actual expenses. Your annual election is then deducted pre-tax from your pay in equal installments throughout the plan year.

## What if the amount of my daycare expense changes during the year?

In most cases, if you experience a change of status, or the cost for care changes during the plan year, you may be permitted to adjust your election. However, there are significant restrictions. Therefore, you need to choose your election wisely because you will not be permitted to change your election simply because you elect too much, make a mistake, or even if you just decide to change to a less expensive provider. In any event, you must notify your employer within 30 days of the event that is causing the change. Please refer to your SPD for additional details.

## What is the last date I can submit Dependent Care FSA claims for the plan year?

If you are an active participant on the last day of the plan year, your designated final filing date is March 31, 2017. Please keep in mind that any unused amount left in your account is forfeited at the end of the plan year. This rule is called "use it or lose it."

## What happens if my employment terminates or I lose eligibility to participate in the plan(s)?

Dependent Care FSA: Benefits will not be payable for services rendered after the last day of the plan year during which you lost your eligibility to participate.

## **Custom Benefit Administrators**

#### Enrollment form & Salary Reduction Agreement

## FLEXIBLE BENEFIT PLAN

EMPLOYER: Sacramento City Unified School District PLAN YEAR: January 1, 2016

7	Employee Information									
	FIRST NAME	LAST NAME	T NAME SO					OCIAL SECURITY NUMBER		
	MAILING ADDRESS	CITY			STATE	STATE ZIP CODE				
	DATE OF BIRTH	NE NUMBER E-MAIL ADDRESS								
2	Making Your Elections - Enter your election for each account.									
	Medical Expense FSA		Dependent C	are FSA		Pre-	Tax Premi	um Plan	("POP")	
	<ul> <li>Yes, I elect to participate i Medical Expense FSA. The elect for the PLAN YEAR i below (maximum election)</li> <li>\$</li></ul>	<ul> <li>Yes, I elect to participate in the Dependent Care FSA. The amount I elect for the PLAN YEAR is entered below (maximum election \$5,000):</li> <li>\$*</li> <li>* Your election will be deducted from your pay in equal installments each pay period throughout the</li> </ul>			group auton premi to sig health	If you contribute toward the cost of your group health insurance, you are automatically enrolled in the pre-tax premium plan (POP). You do not need to sign any forms to save taxes on your health insurance contributions.				
3	Salary Reduction Agreement		Plan Year.							
<ul> <li>I authorize my employer to reduce my taxable compensation as directed above each pay period during the year. If ally understand that:</li> <li>&gt; I understand that I must be "common law employee" (as defined by my employer) to participate in the Plan. I further understand that if I am" Code § 4016, which includes a sole proprietor, partner in a partnership, over 2% owner of a SCorp (or the employee spouse or dependent or Corp), I may not participate in the Plan.</li> <li>&gt; Once made, my elections are "imexcable" during the plan year unless I experience a "qualifying and related drange in status" or other permis and by the Internal Revenue code(IRS). I further understand that my employer may motify or revoke my elections in any way II dears no infectible benefit plan in compliance with all applicable provisions of the IRS. I further understand that my elections are in addition to any or employer.</li> <li>&gt; I firm contributions for health insurance change by an insignificant amount during the plan year, my employer will automatically adjust my pre-tax</li> <li>&gt; I undiffect contributions that I have not daimed from my FSA accounds after the end of each plan year (the run-out period). The length of the Summary Plan Description.</li> <li>&gt; I may be offered ODERA form y Madical Expense FSA if I otherwise qualify.</li> <li>&gt; Tax-free reinhoursements from my FSA's may only be made for qualified expenses incurred (date services are rendered) during the plan year future plan years. I understand that reinhoursements are based on the amount I owe for qualified expenses and NOT on the amount I pay or har 5 services must be rendered (performed) before I may be reinhoursed.</li> <li>&gt; By participating in my flexible benefit (cafteria) plan, I could potentially reduce my social security benefits.</li> <li>&gt; This agreement is subject to all the terms and conditions of our flexible benefit plan, as amended and revokes any prior election and re accompleted.</li> <li>&gt; Prior to the stat of each plan year, I will have the</li></ul>							or dependent of a r other permissib ay it deems nece dition to any other just my pre-tax co The length of the the plan year an unt I pay or have p lection and redire lection and redire if I do not change ement accounts p uding wage taxes I have determined iowingly violating ay each pay peri- path of the pulses a	more than 2% le event as def ssary in order er agreements intributions acc run-out period d may not be o baid. ection agreeme a my POP elec rior to each fut during the firs during the firs that my election the terms of the cod to offset the remium (POP)	wwer of an S- ined in the Plan to maintain the I have with my cordingly. is stated in my carried over into ent I may have tion, my current ure plan year in at six months of on is in my best e Plan. e administrative account.	
	To be completed by Employer AUTHORIZED SCUSD SIGNATURE	DATE	FITS EFFECTIVE (May not precede mployee signed form)	BARGAININ	G UNIT	HIRE DATE	(CIRC	BER OF PAY CLE ONE): / 11 / 1		
			0 Dealilia CA 05	(000)	574 5449	E (00)	0) 574 456			

Post Office Box 2170, Rocklin, CA 95677 . (800) 574-5448 Fax (800) 574-4591



# Human Resource Services Payroll Deposit / Deduction Options

Contact the Payroll Department at 643-9400 for information on the following payroll deduction options:

- Payroll Check Electronic Deposits
- Payroll Deductions
- Schools Federal Credit Union
- Tax Shelter Annuity
- Provident Income Protection
- SCTA
- SEIU
- Teamster
- STRS Information
- PERS Information
- U.S. Savings Bonds
- California Casualty Insurance
- Section 125 IRS Plans
- Federal W-4 Form Changes and Additions
- State DE-4 Form Changes and Additions





# **Human Resource Services**

Pay Date Schedule:

## **New Hires and Reassignments**

## **Information Regarding Your First Paycheck**

Newly hired employees or employees reassigned to new positions after dates listed in the schedule below will receive their first paycheck or adjusted paycheck on the month following the first scheduled pay date. However, Human Resource Services <u>and</u> Payroll Services will make every effort to process all payroll sensitive documents to ensure the earliest possible payment.

Regular Pay Date	Reassign / Hire Date	Pay Date for First Chec				
End of the Month	After 15th	End of the Month Following First Scheduled Paydate				
15th of the Month	After 25th	15th of the Month Following First Scheduled Paydate				

## Examples

Regular Paydate	Reassign / Hire Date	First Scheduled Paydate	Paydate for First Check
15th of the Month	September 27th	October 15th	November 15th
End of the Month	October 18th	October 30th	November 30th



# APPENDIX D

# **Child Abuse Reporting Requirements**



# Human Resource Services Child Abuse Reporting Requirements

## Penal Code Section 11166, Report, Duty, Time Child Abuse Reporting Requirements

- (a) Except as provided in subdivision (b), any child care custodian, medical practitioner, nonmedical practitioner, or employee of a child protective agency who has knowledge or observes a child in his or her professional capacity or within the scope of his or her employment whom he or she knows or reasonably suspects has been the victim of child abuse shall report the known or suspected instance of child abuse to a child protective agency immediately or as soon as practically possible by telephone and shall prepare and send a written report thereof within 36 hours of receiving the information concerning the incident. For the purposes of this article, "reasonable suspicion" means that it is objectively reasonable for a person to entertain such a suspicion, based upon facts that could cause a reasonable person in a like position, drawing when appropriate, on his or her training and experience, to suspect child abuse.
- (b) Any child care custodian, medical practitioner, nonmedical practitioner, or employee of a child protective agency who has knowledge of or who reasonably suspects that mental suffering has been inflicted on a child or his or her emotional well-being is endangered in any other way, may report such known or suspected instance of child abuse to a child protective agency.
- (c) Any commercial film or photographic print processor who has knowledge of or observes, within the scope of his or her professional capacity or employment, any film, photograph, video tape, negative or slide depicting a child under the age of 14 years engaged in an act of sexual conduct, shall report such instance of suspected child abuse to the law enforcement agency having jurisdiction over the case, immediately or as soon as practically possible by telephone and shall prepare and send a written report of it with a copy of the film, photograph, video tape, negative or slide attached, within 36 hours of receiving the information concerning the incident. As used in this subdivision, "sexual conduct" means any of the following:
  - (1) Sexual intercourse, including genital-genital, oral-genital, anal-genital, or oral-anal, whether between persons of the same or opposite sex or between humans and animals.
  - (2) Penetration of the vagina or rectum by any object.
  - (3) Masturbation, for the purpose of sexual stimulation of the viewer.

- (4) Sadomasochistic abuse for the purpose of sexual stimulation of the viewer.
- (5) Exhibition of the genitals, pubic or rectal areas of any person for the purpose of sexual stimulation of the viewer.
- (d) Any other person who has knowledge of or observes a child whom he or she knows or reasonably suspects has been a victim of child abuse may report the known or suspected instance of child abuse to a child protective agency.
- (e) When two or more persons who are required to report are present and jointly have knowledge of a known or suspected instance of child abuse, and when there is agreement among them, the telephone report may be made by a member of the team selected by mutual agreement and a single report may be made and signed by such selected member of the reporting team. Any member who has knowledge that the member designated to report has failed to do so, shall thereafter make the report.
- (f) The reporting duties under this section are individual, and no supervisor or administrator may impede or inhibit the reporting duties and no person making such a report shall be subject to any sanction for making the report. However, internal procedures to facilitate reporting and apprise supervisors and administrators of reports may be established provided that they are not inconsistent with the provisions of this article.
- (g) A County Probation or Welfare Department shall immediately or as soon as practically possible report by telephone to the law enforcement agency having jurisdiction over the case to the agency given the responsibility for investigation of cases under Section 300 of the Welfare and Institutions Code, and to the District Attorney's Office, every known or suspected instance of child abuse as defined in Section 11165, except acts or omissions coming within the provisions of paragraph (2) of subdivision (c) of Section 11165, which shall only be reported to the county Welfare Department. A County Probation or Welfare Department shall also send a written report thereof within 36 hours or receiving the information concerning the incident to any agency to which it is required to make a telephone report under this subdivision.

A law enforcement agency shall immediately or as soon as practically possible report by telephone to the County Welfare Department the agency given the responsibility for investigation of cases under Section 300 of the Welfare and Institutions Code, and to the District Attorney's Office, every known or suspected instance of child abuse reported to it, except acts or omissions coming within the provisions of paragraph (2) of subdivision (c) of Section 11165, which shall only be reported to the County Welfare Department. A law enforcement agency shall also send a written report thereof within 36 hours of receiving the information concerning the incident to any agency to which it is required to make a telephone report under this subdivision.



#### BOARD OF EDUCATION

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## HUMAN RESOURCE SERVICES

P.O. Box 246870 • Sacramento, CA 95824-6870 (916) 643-9050 • FAX (916) 399-2016

José L. Banda, Superintendent Cancy McArn, Chief Human Resources Officer

DATE: August 27, 2015TO: All EmployeesFROM: Cancy McArn, Chief Human Resources Officer

Human Resource Services Department

## SUBJECT: Reporting Child Abuse: 2015-16

This memorandum is sent to all employees as mandated reporters. Please review below the law requirements of being a mandated reporter and how to file a report.

## Child Abuse Reporting Law Requirements:

The State of California Child Abuse and Neglect Reporting Act (Penal Code Section 11166, et seq.) requires all mandated child abuse reporters to report known or suspected child abuse or neglect to the proper authorities. The following is an excerpt from Penal Code Section 11166:

... a mandated reporter shall make a report...whenever the mandated reporter, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. The mandated reporter shall make a report... immediately or as soon as is practicably possible by telephone, and the mandated reporter shall prepare and send a written report thereof within 36 hours of receiving the information concerning the incident.

... "reasonable suspicion" means that it is objectively reasonable for a person to entertain a suspicion, based upon facts that could cause a reasonable person in a like position, drawing, when appropriate, on his or her training and experience, to suspect child abuse or neglect. For the purpose of this article, the pregnancy of a minor does not, in and of itself, constitute a basis for a reasonable suspicion of sexual abuse.

## Persons Mandated to Report Child Abuse: Penal Code Section 11166:

For the purposes of the reporting law, <u>all educators, school employees, and college</u> <u>intern/trainees are mandated reporters</u>. An amendment to the law in 2000 redefined mandated reporters <u>to include all classified employees of any public school in</u> <u>addition to teachers, aides, administrators, and others</u>. Training for mandated reporters is provided by the District; however, the absence of training shall not excuse a mandated reporter from the duties imposed under reporting laws. Page 2 Memo—Reporting Child Abuse August 27, 2015

Volunteers whose duties require contact and supervision of children should also obtain training. (Penal Code Section 11165.7)

## **Definitions and Types of Child Abuse:**

The term "child abuse or neglect" includes:

- Physical Abuse
- Neglect
- Sexual Abuse
- Willful Cruelty or Unjustifiable Punishment
- Unlawful Corporal Punishment

**Physical Abuse** means a physical injury, which is inflicted by other than accidental means on a child by another person. (Partial excerpt from <u>Penal Code section 11165.6.</u>)

**Neglect** means negligent treatment or maltreatment of a child by a person responsible for the child's welfare under circumstances indicating harm or threatened harm to the child's health or welfare, and includes both acts and omissions on the part of the responsible person.

Severe neglect means the negligent failure of a person having the care or custody of a child to protect the child from severe malnutrition or medically diagnosed nonorganic failure to thrive, and includes those situations of neglect where any person having the care or custody of a child willfully causes or permits the person or health of the child to be placed in a situation such that the child's person or health is endangered, including the intentional failure to provide adequate food, clothing, shelter or medical care.

**General neglect** means the negligent failure of a person having the care or custody of a child to provide adequate food, clothing, shelter, medical care, or supervision where no physical injury to the child has occurred. (Penal Code Section 11165.2)

Sexual Abuse means sexual assault or sexual exploitation.

**Sexual Assault** includes: rape, statutory rape, gang rape (or rape in concert), incest, sodomy, lewd or lascivious acts upon a child or minor, oral copulation, sexual penetration, child molestation and intentional masturbation in the presence of a child.

**Sexual exploitation** includes preparing, selling or distributing matter depicting a minor engaged in obscene acts; knowingly promoting, aiding or assisting, employing, using, persuading, inducing or coercing a child or any person responsible for a child's welfare who knowingly permits or encourages a child to engage in, or assist others to engage in, prostitution or a live performance involving obscene sexual conduct, or to pose or model alone or with others for purposes of preparing a film, photograph, negative, slide, drawing,

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painting or other pictorial depiction involving obscene sexual conduct; and knowingly depicting a child in, or knowingly developing, duplicating, printing or exchanging any film, photograph, video tape, negative or slide in which a child is engaged in an act of obscene sexual conduct. (Penal Code Section 11165.1)

Willful Cruelty or Unjustifiable Punishment means a situation where any person willfully causes or permits any child to suffer, or inflicts thereon, unjustifiable physical pain or mental suffering, or having the care or custody of any child, willfully causes or permits the person or health of the child to be placed in a situation such that the child's person or health is endangered. (Penal Code Section 11165.3) Unlawful Corporal Punishment means a situation where any person willfully inflicts upon any child any cruel or inhumane corporal punishment or injury resulting in a traumatic condition. It does not include an amount of force that is reasonable and necessary for a person employed by a public school to quell a disturbance threatening physical injury to person or damage to property, for purposes of self-defense or to obtain possession of weapons or other dangerous objects within the control of the pupil (Education Code Section 49001), or that is necessary to maintain order, protect property, protect the health and safety of students, and maintain conditions conducive to learning (Education Code Section 44807). (Penal Code Section 11165.4)

In addition, any mandated reporter who has knowledge of, or reasonable suspicion of, mental suffering that has been inflicted upon a child, or that a child's emotional well-being is endangered in any way, **may** report the known or suspected instance of child abuse or neglect. (Penal Code Section 11166.05)

#### **REPORTING PROCEDURES:**

As mandated reporters, all school employees **must** report the known or suspected incidence of child abuse or neglect to the appropriate agency **immediately** or when practically possible **by telephone**. (Penal Code Section 11166)

The following information must be provided at the time of the telephone call:

- 1. Name, business address and telephone number of the mandated reporter, and the capacity that makes the person a mandated reporter;
- 2. The child's name and address, present location and, where applicable, school, grade and class;
- 3. The names, addresses and telephone numbers of the child's parents/guardians;
- 4. The information that gave rise to the reasonable suspicion of child abuse or neglect and the source or sources of that information; and
- 5. The name, address, telephone number, and other relevant personal information about the person or persons who might have abused or neglected the child. The mandated reporter must make this report even if some of this information is not known or is uncertain to him or her. (Penal code Section 11167.)

The telephone call **<u>must</u>** be followed within <u>36 hours</u> by a written report to the same agency to which the telephone report was made. (Penal Code Section 11166)

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For your reference, the following are some of the agencies to contact:

 Children's Protective Services (24 hr. number).....(916) 875-KIDS (5437) 3701 Branch Center Road P.O. Box 269057 Sacramento, CA 95826-9057

This is the agency to call for in-family suspected abuse (including live-in non-related persons) for which law enforcement is not immediately needed.

This is the agency to call for suspected abuse by non-family persons (neighbor, childcare provider, etc.), or if an immediate response is required for incidents occurring within city limits.

This is the agency to call for suspected abuse by non-family persons (neighbor, childcare provider, etc.), and which occurred **outside** city limits or if an immediate response is required.

## **REPORT FORM:**

The required form is the Department of Justice form SS8572 (Rev. a/93), Suspected Child Abuse Report (Penal Code Section 11168.) These reporting forms can be obtained online at <u>http://www.sacdhhs.com/article.asp?ContentID=1786.</u> The online form is accessed by obtaining a code when you phone your report. The reporting party should fill in the form completely, using the address and telephone number of their work site.

- Submit one copy to the child protective agency to which the telephone report was made.
- Submit one copy to the Health Services Department within one working day (Mail Box #764) to be maintained in a confidential file by the Coordinator of Health Services. NO OTHER COPIES ARE TO BE KEPT ON SITE OR FOR PERSONAL RECORDS.
- Notify the site principal and the director/supervisor of your department of the report.
- The person reporting the suspected child abuse or neglect has the option of deleting his/her name from the copy that is sent to the Health Services Department. However, the Health Services copy verifies that the reporter has complied with the law for mandated reporters.

The report should be typed, if possible. Make a photocopy and submit the photocopy to Health Services Department (Mail Box 764).

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**For reports sent to Children's Protective Services**, the reporting party should receive a written response from the investigating social worker. This written response should be forwarded to Health Services Department (Mail Box 764) to be attached to the Health Services copy of the original report.

## **CONFIDENTIALITY MANDATES:**

**Interview at School:** When a representative of Children's Protective Services deems it necessary, a suspected victim of child abuse or neglect may be interviewed at school. The child is given the option of being interviewed in private or selecting any adult school employee or volunteer aide to be present at the interview. The purpose of having a staff member at the interview is to lend support to the child and help him/her feel as comfortable as possible. The staff member cannot participate in the interview or discuss the facts or circumstances of the case with the child, and is subject to confidentiality requirements. (Penal Code Section 11174.3)

**Identity of mandated reporter:** The identity of all persons who are mandated reporters who report child abuse or neglect shall be confidential and disclosed only among: agencies receiving or investigating mandated reports, the district attorney in a criminal prosecution or an action initiated under Welfare & Institutes Code Section 602 arising from alleged child abuse, counsel appointed pursuant to Welfare & Institutions Code Section 317 (c), county counsel or district attorney in a proceeding under Family Code Section 7800 or Welfare & Institutions Code Section 300, a licensing agency when abuse or neglect in out-of-home care is reasonably suspected, or when the mandated reporter(s) waive confidentiality, or by court order. (Penal Code Section 11167)

**Reports of Suspected Child Abuse or Neglect:** Required reports of suspected child abuse or neglect and the information contained in those reports are confidential and may be disclosed only to: persons or agencies to whom disclosure of the identity of the mandated reporter(s) is permitted, persons or agencies to whom disclosure is permitted under Penal Code Section 11170(b), persons or agencies with whom investigations of child abuse or neglect are coordinated under Penal Code Section 11174, multidisciplinary personnel teams as defined in Welfare & Institutions Code Section 18951(d), persons or agencies responsible for the licensing of facilities which care for children, and other identified persons and agencies. (Penal Code Section 11167.5.)

A violation of any of these confidentiality provisions is a misdemeanor punishable by up to six months in jail or by a fine of \$500, or both. (Penal Code Section 11167.5)

## **FAILURE TO REPORT:**

The mandated reporter who fails to report an incident of known or reasonably suspected child abuse or neglect is guilty of a misdemeanor punishable by up to six months in jail or by a fine of \$1000.00, or both. (Penal Code Section 11166(c)) Educators who fail to report may also risk loss of their license or credential (Education Code Section 44421.) In addition, a failure to report may result in personal civil liability (Landeros v. Flood (1975) 17 Cal3d 399).

When two or more mandated reporters have knowledge of a known or suspected instance of child abuse or neglect, the telephone and written reports may be made by one person selected by mutual agreement.

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However, if the selected person fails to report, then the other person is responsible for reporting. (Penal Code Section 11166 11166 (h))

The reporting duties are individual. No supervisor or administrator may impede or inhibit the reporting duties and no person making a report shall be subject to any sanction for making the report. Internal procedures to apprise administrators and supervisors of reports may be established; however, they cannot require any employee to disclose his or her identity to the employer. Reporting possible child abuse or neglect to an employer, supervisor, principal, school counselor, coworker or other person does not substitute for making a mandated report. (Penal Code Section 11166(i))

## **IMMUNITY FROM CIVIL OR CRIMINAL LIABILITY FOR MANDATED REPORTERS:**

No mandated reporter shall be civilly or criminally liable for any required report. Any other person reporting known or suspected child abuse or neglect shall not incur civil or criminal liability unless it can be proven that a false report was made and the person knew that the report was false or was made with reckless disregard for the truth or falsity of the report and, in that event, the person is liable for any damages caused. (Penal Code Section 11172)

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# SUSPECTED CHILD ABUSE REPORT

**Reset Form** 

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	PLEASE PRINT OR TYPE				CASE NUMBER:						
A. REPORTING PARTY	NAME OF MANDATED REPORTER			TITLE				MANDATED REPORTER CATEGORY			
	REPORTER'S BUSINESS/	REPORTER'S BUSINESS/AGENCY NAME AND ADDRESS			Street City Zip			DID MANDATED REPORTER WITNESS THE INCIDENT?			
REP	REPORTER'S TELEPHON	E (DAYTIME)	SIGNATUR	E				TODAY'S DATE			
L Z	LAW ENFORCEMENT COUNTY PROBATION AGENCY										
B. REPORT NOTIFICATION	COUNTY WELFARE / CPS (Child Protective Services) ADDRESS Street City Zip								DATE/TI	IE OF PHONE CALL	
REP											
NOT NOT	OFFICIAL CONTACTED - 1	TITLE						()			
	NAME (LAST, FIRST, MIDI	DLE)					BIRTHDAT	E OR APPROX. AGE	SEX	ETHNICITY	
E	ADDRESS	Street		City			Zip TELEPHONE ()				
rvict	PRESENT LOCATION OF	VICTIM				SCHOOL		CLASS		GRADE	
C. VICTIM One report per victim	PHYSICALLY DISABLED?							PRIMARY LANGUAGE SPOKEN IN HOME			
C. One rel	IN FOSTER CARE?       IF VICTIM WAS IN OUT-OF-HOME CARE AT TIME OF INCIDENT, CHECK TYPE OF CARE:       TYPE OF ABUSE (CHECK ONLIDING)         YES       DAY CARE       CHILD CARE CENTER       FOSTER FAMILY HOME       FAMILY FRIEND       DHYSICAL       MENTAL       S         NO       DROUP HOME OR INSTITUTION       DRELATIVE'S HOME       DOTHER (SPECIFY)										
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D. INVOL	ADDRESS S	Street	City	Zip	ном (	E PHONE )	1	BUSINESS PHON	E		
D.	SUSPECT'S NAME (LAST, FIRST, MIDDLE) BIRTHDATE OR APPROX. AGE SEX ETHNICITY								ETHNICITY		
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Ū	OTHER RELEVANT INFOR	OTHER RELEVANT INFORMATION									
		IF NECESSARY, ATTACH EXTRA SHEET(S) OR OTHER FORM(S) AND CHECK THIS BOX IF MULTIPLE VICTIMS, INDICATE NUMBER:									
TION	DATE / TIME OF INCIDEN		PLACE OF		MECK		IF MOLTI		TE NOMBE		
E. INCIDENT INFORMATION	NARRATIVE DESCRIPTIO	NARRATIVE DESCRIPTION (What victim(s) said/what the mandated reporter observed/what person accompanying the victim(s) said/similar or past incidents involving the victim(s) or suspect)									

SS 8572 (Rev. 12/02)

DEFINITIONS AND INSTRUCTIONS ON REVERSE

DO NOT submit a copy of this form to the Department of Justice (DOJ). The investigating agency is required under Penal Code Section 11169 to submit to DOJ a Child Abuse Investigation Report Form SS 8583 if (1) an active investigation was conducted and (2) the incident was determined not to be unfounded.

#### **DEFINITIONS AND GENERAL INSTRUCTIONS FOR COMPLETION OF FORM SS 8572**

All Penal Code (PC) references are located in Article 2.5 of the PC. This article is known as the Child Abuse and Neglect Reporting Act (CANRA). The provisions of CANRA may be viewed at: <u>http://www.leginfo.ca.gov/calaw.html</u> (specify "Penal Code" and search for Sections 11164-11174.3). A mandated reporter must complete and submit the form SS 8572 even if some of the requested information is not known. (PC Section 11167(a).)

#### I. MANDATED CHILD ABUSE REPORTERS

• Mandated child abuse reporters include all those individuals and entities listed in PC Section 11165.7.

#### II. TO WHOM REPORTS ARE TO BE MADE ("DESIGNATED AGENCIES")

• Reports of suspected child abuse or neglect shall be made by mandated reporters to any police department or sheriff's department (not including a school district police or security department), the county probation department (if designated by the county to receive mandated reports), or the county welfare department. (PC Section 11165.9.)

#### **III. REPORTING RESPONSIBILITIES**

- Any mandated reporter who has knowledge of or observes a child, in his or her professional capacity or within the scope of his or her employment, whom he or she knows or reasonably suspects has been the victim of child abuse or neglect shall report such suspected incident of abuse or neglect to a designated agency immediately or as soon as practically possible by telephone and shall prepare and send a written report thereof *within 36 hours* of receiving the information concerning the incident. (PC Section 11166(a).)
- No mandated reporter who reports a suspected incident of child abuse or neglect shall be held civilly or criminally liable for any report required or authorized by CANRA. Any other person reporting a known or suspected incident of child abuse or neglect shall not incur civil or criminal liability as a result of any report authorized by CANRA unless it can be proven the report was false and the person knew it was false or made the report with reckless disregard of its truth or falsity. (PC Section 11172(a).)

#### **IV. INSTRUCTIONS**

• SECTION A - REPORTING PARTY: Enter the mandated reporter's name, title, category (from PC Section 11165.7), business/agency name and address, daytime telephone number, and today's date. Check yes-no whether the mandated reporter witnessed the incident. The signature area is for either the mandated reporter or, if the report is telephoned in by the mandated reporter, the person taking the telephoned report.

#### IV. INSTRUCTIONS (Continued)

- SECTION B REPORT NOTIFICATION: Complete the name and address of the designated agency notified, the date/ time of the phone call, and the name, title, and telephone number of the official contacted.
- . SECTION C - VICTIM (One Report per Victim): Enter the victim's name, address, telephone number, birth date or approximate age, sex, ethnicity, present location, and, where applicable, enter the school, class (indicate the teacher's name or room number), and grade. List the primary language spoken in the victim's home. Check the appropriate yes-no box to indicate whether the victim may have a developmental disability or physical disability and specify any other apparent disability. Check the appropriate yes-no box to indicate whether the victim is in foster care, and check the appropriate box to indicate the type of care if the victim was in out-of-home care. Check the appropriate box to indicate the type of abuse. List the victim's relationship to the suspect. Check the appropriate yes-no box to indicate whether photos of the injuries were taken. Check the appropriate box to indicate whether the incident resulted in the victim's death.
- SECTION D INVOLVED PARTIES: Enter the requested information for: Victim's Siblings, Victim's Parents/ Guardians, and Suspect. Attach extra sheet(s) if needed (provide the requested information for each individual on the attached sheet(s)).
- SECTION E INCIDENT INFORMATION: If multiple victims, indicate the number and submit a form for each victim. Enter date/time and place of the incident. Provide a narrative of the incident. Attach extra sheet(s) if needed.

#### V. DISTRIBUTION

- **Reporting Party:** After completing Form SS 8572, retain the yellow copy for your records and submit the top three copies to the designated agency.
- Designated Agency: Within 36 hours of receipt of Form SS 8572, send white copy to police or sheriff's department, blue copy to county welfare or probation department, and green copy to district attorney's office.

#### ETHNICITY CODES

- 1 Alaskan Native
- 2 American Indian
- 3 Asian Indian
- 4 Black
- 5 Cambodian
- 6 Caribbean
   7 Central American

10 Filipino

Ethiopian

9

- 8 Chinese
  - 13 Hispanic
    - 14 Hmong 15 Japanese

11 Guamanian

12 Hawaiian

- 16 Korean 17 Laotian
- 18 Mexican
- 19 Other Asian
- 21 Other Pacific Islander
- 22 Polynesian 23 Samoan
- 24 South American
- 25 Vietnamese
- 26 White
- 27 White-Armenian
- 28 White-Central American
- 29 White-European
- 30 White-Middle Eastern
- 31 White-Romanian

# **APPENDIX E**

23 B. 19

Instructions for Employment Eligibility Verification



## **Instructions for Employment Eligibility Verification**

**Department of Homeland Security** U.S. Citizenship and Immigration Services USCIS Form 1-9 OMB No. 1615-0047 Expires 03/31/2016

#### Read all instructions carefully before completing this form.

Anti-Discrimination Notice. It is illegal to discriminate against any work-authorized individual in hiring, discharge, recruitment or referral for a fee, or in the employment eligibility verification (Form I-9 and E-Verify) process based on that individual's citizenship status, immigration status or national origin. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documentation presented has a future expiration date may also constitute illegal discrimination. For more information, call the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC) at 1-800-255-7688 (employees), 1-800-255-8155 (employers), or 1-800-237-2515 (TDD), or visit <u>www.justice.gov/crt/about/osc</u>.

## What Is the Purpose of This Form?

Employers must complete Form I-9 to document verification of the identity and employment authorization of each new employee (both citizen and noncitizen) hired after November 6, 1986, to work in the United States. In the Commonwealth of the Northern Mariana Islands (CNMI), employers must complete Form I-9 to document verification of the identity and employment authorization of each new employee (both citizen and noncitizen) hired after November 27, 2011. Employers should have used Form I-9 CNMI between November 28, 2009 and November 27, 2011.

## **General Instructions**

Employers are responsible for completing and retaining Form I-9. For the purpose of completing this form, the term "employer" means all employers, including those recruiters and referrers for a fee who are agricultural associations, agricultural employers, or farm labor contractors.

Form I-9 is made up of three sections. Employers may be fined if the form is not complete. Employers are responsible for retaining completed forms. Do not mail completed forms to U.S. Citizenship and Immigration Services (USCIS) or Immigration and Customs Enforcement (ICE).

## Section 1. Employee Information and Attestation

Newly hired employees must complete and sign Section 1 of Form I-9 no later than the first day of employment. Section 1 should never be completed before the employee has accepted a job offer.

Provide the following information to complete Section 1:

**Name:** Provide your full legal last name, first name, and middle initial. Your last name is your family name or surname. If you have two last names or a hyphenated last name, include both names in the last name field. Your first name is your given name. Your middle initial is the first letter of your second given name, or the first letter of your middle name, if any.

Other names used: Provide all other names used, if any (including maiden name). If you have had no other legal names, write "N/A."

Address: Provide the address where you currently live, including Street Number and Name, Apartment Number (if applicable), City, State, and Zip Code. Do not provide a post office box address (P.O. Box). Only border commuters from Canada or Mexico may use an international address in this field.

**Date of Birth:** Provide your date of birth in the mm/dd/yyyy format. For example, January 23, 1950, should be written as 01/23/1950.

**U.S. Social Security Number:** Provide your 9-digit Social Security number. Providing your Social Security number is voluntary. However, if your employer participates in E-Verify, you must provide your Social Security number.

**E-mail Address and Telephone Number (Optional):** You may provide your e-mail address and telephone number. Department of Homeland Security (DHS) may contact you if DHS learns of a potential mismatch between the information provided and the information in DHS or Social Security Administration (SSA) records. You may write "N/A" if you choose not to provide this information.

All employees must attest in Section 1, under penalty of perjury, to their citizenship or immigration status by checking one of the following four boxes provided on the form:

## 1. A citizen of the United States

- 2. A noncitizen national of the United States: Noncitizen nationals of the United States are persons born in American Samoa, certain former citizens of the former Trust Territory of the Pacific Islands, and certain children of noncitizen nationals born abroad.
- 3. A lawful permanent resident: A lawful permanent resident is any person who is not a U.S. citizen and who resides in the United States under legally recognized and lawfully recorded permanent residence as an immigrant. The term "lawful permanent resident" includes conditional residents. If you check this box, write either your Alien Registration Number (A-Number) or USCIS Number in the field next to your selection. At this time, the USCIS Number is the same as the A-Number without the "A" prefix.
- 4. An alien authorized to work: If you are not a citizen or national of the United States or a lawful permanent resident, but are authorized to work in the United States, check this box. If you check this box:

a. Record the date that your employment authorization expires, if any. Aliens whose employment authorization does not expire, such as refugees, asylees, and certain citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, or Palau, may write "N/A" on this line.

- b. Next, enter your Alien Registration Number (A-Number)/USCIS Number. At this time, the USCIS Number is the same as your A-Number without the "A" prefix. If you have not received an A-Number/USCIS Number, record your Admission Number. You can find your Admission Number on Form I-94, "Arrival-Departure Record," or as directed by USCIS or U.S. Customs and Border Protection (CBP).
  - (1) If you obtained your admission number from CBP in connection with your arrival in the United States, then also record information about the foreign passport you used to enter the United States (number and country of issuance).
  - (2) If you obtained your admission number from USCIS *within the United States*, or you entered the United States without a foreign passport, you must write "N/A" in the Foreign Passport Number and Country of Issuance fields.

Sign your name in the "Signature of Employee" block and record the date you completed and signed Section 1. By signing and dating this form, you attest that the citizenship or immigration status you selected is correct and that you are aware that you may be imprisoned and/or fined for making false statements or using false documentation when completing this form. To fully complete this form, you must present to your employer documentation that establishes your identity and employment authorization. Choose which documents to present from the Lists of Acceptable Documents, found on the last page of this form. You must present this documentation no later than the third day after beginning employment, although you may present the required documentation before this date.

## Preparer and/or Translator Certification

The Preparer and/or Translator Certification must be completed if the employee requires assistance to complete Section 1 (e.g., the employee needs the instructions or responses translated, someone other than the employee fills out the information blocks, or someone with disabilities needs additional assistance). The employee must still sign Section 1.

## Minors and Certain Employees with Disabilities (Special Placement)

Parents or legal guardians assisting minors (individuals under 18) and certain employees with disabilities should review the guidelines in the *Handbook for Employers: Instructions for Completing Form I-9 (M-274)* on <u>www.uscis.gov/</u> <u>I-9Central</u> before completing Section 1. These individuals have special procedures for establishing identity if they cannot present an identity document for Form I-9. The special procedures include (1) the parent or legal guardian filling out Section 1 and writing "minor under age 18" or "special placement," whichever applies, in the employee signature block; and (2) the employer writing "minor under age 18" or "special placement" under List B in Section 2.

## Section 2. Employer or Authorized Representative Review and Verification

Before completing Section 2, employers must ensure that Section 1 is completed properly and on time. Employers may not ask an individual to complete Section 1 before he or she has accepted a job offer.

Employers or their authorized representative must complete Section 2 by examining evidence of identity and employment authorization within 3 business days of the employee's first day of employment. For example, if an employee begins employment on Monday, the employer must complete Section 2 by Thursday of that week. However, if an employer hires an individual for less than 3 business days, Section 2 must be completed no later than the first day of employment. An employer may complete Form I-9 before the first day of employment if the employer has offered the individual a job and the individual has accepted.

Employers cannot specify which document(s) employees may present from the Lists of Acceptable Documents, found on the last page of Form I-9, to establish identity and employment authorization. Employees must present one selection from List A **OR** a combination of one selection from List B and one selection from List C. List A contains documents that show both identity and employment authorization. Some List A documents are combination documents. The employee must present combination documents together to be considered a List A document. For example, a foreign passport and a Form I-94 containing an endorsement of the alien's nonimmigrant status must be presented together to be considered a List A document. List B contains documents that show identity only, and List C contains documents that show employment authorization only. If an employee presents a List A document, he or she should **not** present a List B and List C document, and vice versa. If an employee participates in E-Verify, the List B document must include a photograph.

In the field below the Section 2 introduction, employers must enter the last name, first name and middle initial, if any, that the employee entered in Section 1. This will help to identify the pages of the form should they get separated.

Employers or their authorized representative must:

- 1. Physically examine each original document the employee presents to determine if it reasonably appears to be genuine and to relate to the person presenting it. The person who examines the documents must be the same person who signs Section 2. The examiner of the documents and the employee must both be physically present during the examination of the employee's documents.
- 2. Record the document title shown on the Lists of Acceptable Documents, issuing authority, document number and expiration date (if any) from the original document(s) the employee presents. You may write "N/A" in any unused fields.

If the employee is a student or exchange visitor who presented a foreign passport with a Form I-94, the employer should also enter in Section 2:

- a. The student's Form I-20 or DS-2019 number (Student and Exchange Visitor Information System-SEVIS Number); and the program end date from Form I-20 or DS-2019.
- 3. Under Certification, enter the employee's first day of employment. Temporary staffing agencies may enter the first day the employee was placed in a job pool. Recruiters and recruiters for a fee do not enter the employee's first day of employment.
- 4. Provide the name and title of the person completing Section 2 in the Signature of Employer or Authorized Representative field.
- 5. Sign and date the attestation on the date Section 2 is completed.
- 6. Record the employer's business name and address.
- 7. Return the employee's documentation.

Employers may, but are not required to, photocopy the document(s) presented. If photocopies are made, they should be made for **ALL** new hires or reverifications. Photocopies must be retained and presented with Form I-9 in case of an inspection by DHS or other federal government agency. Employers must always complete Section 2 even if they photocopy an employee's document(s). Making photocopies of an employee's document(s) cannot take the place of completing Form I-9. Employers are still responsible for completing and retaining Form I-9.

## **Unexpired Documents**

Generally, only unexpired, original documentation is acceptable. The only exception is that an employee may present a certified copy of a birth certificate. Additionally, in some instances, a document that appears to be expired may be acceptable if the expiration date shown on the face of the document has been extended, such as for individuals with temporary protected status. Refer to the *Handbook for Employers: Instructions for Completing Form I-9 (M-274)* or I-9 Central (www.uscis.gov/I-9Central) for examples.

## Receipts

If an employee is unable to present a required document (or documents), the employee can present an acceptable receipt in lieu of a document from the Lists of Acceptable Documents on the last page of this form. Receipts showing that a person has applied for an initial grant of employment authorization, or for renewal of employment authorization, are not acceptable. Employers cannot accept receipts if employment will last less than 3 days. Receipts are acceptable when completing Form I-9 for a new hire or when reverification is required.

Employees must present receipts within 3 business days of their first day of employment, or in the case of reverification, by the date that reverification is required, and must present valid replacement documents within the time frames described below.

There are three types of acceptable receipts:

- 1. A receipt showing that the employee has applied to replace a document that was lost, stolen or damaged. The employee must present the actual document within 90 days from the date of hire.
- 2. The arrival portion of Form I-94/I-94A with a temporary I-551 stamp and a photograph of the individual. The employee must present the actual Permanent Resident Card (Form I-551) by the expiration date of the temporary I-551 stamp, or, if there is no expiration date, within 1 year from the date of issue.
- **3.** The departure portion of Form I-94/I-94A with a refugee admission stamp. The employee must present an unexpired Employment Authorization Document (Form I-766) or a combination of a List B document and an unrestricted Social Security card within 90 days.

When the employee provides an acceptable receipt, the employer should:

- 1. Record the document title in Section 2 under the sections titled List A, List B, or List C, as applicable.
- 2. Write the word "receipt" and its document number in the "Document Number" field. Record the last day that the receipt is valid in the "Expiration Date" field.

By the end of the receipt validity period, the employer should:

- 1. Cross out the word "receipt" and any accompanying document number and expiration date.
- 2. Record the number and other required document information from the actual document presented.
- 3. Initial and date the change.

See the Handbook for Employers: Instructions for Completing Form I-9 (M-274) at <u>www.uscis.gov/I-9Central</u> for more information on receipts.

## Section 3. Reverification and Rehires

Employers or their authorized representatives should complete Section 3 when reverifying that an employee is authorized to work. When rehiring an employee within 3 years of the date Form I-9 was originally completed, employers have the option to complete a new Form I-9 or complete Section 3. When completing Section 3 in either a reverification or rehire situation, if the employee's name has changed, record the name change in Block A.

For employees who provide an employment authorization expiration date in Section 1, employers must reverify employment authorization on or before the date provided.

Some employees may write "N/A" in the space provided for the expiration date in Section 1 if they are aliens whose employment authorization does not expire (e.g., asylees, refugees, certain citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, or Palau). Reverification does not apply for such employees unless they chose to present evidence of employment authorization in Section 2 that contains an expiration date and requires reverification, such as Form I-766, Employment Authorization Document.

Reverification applies if evidence of employment authorization (List A or List C document) presented in Section 2 expires. However, employers should not reverify:

- 1. U.S. citizens and noncitizen nationals; or
- 2. Lawful permanent residents who presented a Permanent Resident Card (Form I-551) for Section 2.

Reverification does not apply to List B documents.

If both Section 1 and Section 2 indicate expiration dates triggering the reverification requirement, the employer should reverify by the earlier date.

For reverification, an employee must present unexpired documentation from either List A or List C showing he or she is still authorized to work. Employers CANNOT require the employee to present a particular document from List A or List C. The employee may choose which document to present.

To complete Section 3, employers should follow these instructions:

- 1. Complete Block A if an employee's name has changed at the time you complete Section 3.
- 2. Complete Block B with the date of rehire if you rehire an employee within 3 years of the date this form was originally completed, and the employee is still authorized to be employed on the same basis as previously indicated on this form. Also complete the "Signature of Employer or Authorized Representative" block.
- 3. Complete Block C if:
  - **a.** The employment authorization or employment authorization document of a current employee is about to expire and requires reverification; or
  - **b.** You rehire an employee within 3 years of the date this form was originally completed and his or her employment authorization or employment authorization document has expired. (Complete Block B for this employee as well.)

To complete Block C:

- a. Examine either a List A or List C document the employee presents that shows that the employee is currently authorized to work in the United States; and
- b. Record the document title, document number, and expiration date (if any).
- 4. After completing block A, B or C, complete the "Signature of Employer or Authorized Representative" block, including the date.

For reverification purposes, employers may either complete Section 3 of a new Form I-9 or Section 3 of the previously completed Form I-9. Any new pages of Form I-9 completed during reverification must be attached to the employee's original Form I-9. If you choose to complete Section 3 of a new Form I-9, you may attach just the page containing Section 3, with the employee's name entered at the top of the page, to the employee's original Form I-9. If there is a more current version of Form I-9 at the time of reverification, you must complete Section 3 of that version of the form.

## What Is the Filing Fee?

There is no fee for completing Form I-9. This form is not filed with USCIS or any government agency. Form I-9 must be retained by the employer and made available for inspection by U.S. Government officials as specified in the "USCIS **Privacy Act Statement**" below.

## **USCIS Forms and Information**

For more detailed information about completing Form I-9, employers and employees should refer to the Handbook for Employers: Instructions for Completing Form I-9 (M-274).

You can also obtain information about Form I-9 from the USCIS Web site at <u>www.uscis.gov/I-9Central</u>, by e-mailing USCIS at <u>I-9Central@dhs.gov</u>, or by calling **1-888-464-4218**. For TDD (hearing impaired), call **1-877-875-6028**.

To obtain USCIS forms or the *Handbook for Employers*, you can download them from the USCIS Web site at <u>www.uscis.</u> <u>gov/forms</u>. You may order USCIS forms by calling our toll-free number at **1-800-870-3676**. You may also obtain forms and information by contacting the USCIS National Customer Service Center at **1-800-375-5283**. For TDD (hearing impaired), call **1-800-767-1833**.

Information about E-Verify, a free and voluntary program that allows participating employers to electronically verify the employment eligibility of their newly hired employees, can be obtained from the USCIS Web site at <u>www.dhs.gov/E-Verify</u>, by e-mailing USCIS at <u>I-9Central@dhs.gov</u> or by calling **1-888-464-4218**. For TDD (hearing impaired), call **1-877-875-6028**.

Employees with questions about Form I-9 and/or E-Verify can reach the USCIS employee hotline by calling **1-888-897-7781**. For TDD (hearing impaired), call **1-877-875-6028**.

#### Photocopying and Retaining Form I-9

A blank Form I-9 may be reproduced, provided all sides are copied. The instructions and Lists of Acceptable Documents must be available to all employees completing this form. Employers must retain each employee's completed Form I-9 for as long as the individual works for the employer. Employers are required to retain the pages of the form on which the employee and employer enter data. If copies of documentation presented by the employee are made, those copies must also be kept with the form. Once the individual's employment ends, the employer must retain this form for either 3 years after the date of hire or 1 year after the date employment ended, whichever is later.

Form I-9 may be signed and retained electronically, in compliance with Department of Homeland Security regulations at 8 CFR 274a.2.

#### **USCIS Privacy Act Statement**

**AUTHORITIES:** The authority for collecting this information is the Immigration Reform and Control Act of 1986, Public Law 99-603 (8 USC 1324a).

**PURPOSE:** This information is collected by employers to comply with the requirements of the Immigration Reform and Control Act of 1986. This law requires that employers verify the identity and employment authorization of individuals they hire for employment to preclude the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States.

**DISCLOSURE:** Submission of the information required in this form is voluntary. However, failure of the employer to ensure proper completion of this form for each employee may result in the imposition of civil or criminal penalties. In addition, employing individuals knowing that they are unauthorized to work in the United States may subject the employer to civil and/or criminal penalties.

**ROUTINE USES:** This information will be used by employers as a record of their basis for determining eligibility of an employee to work in the United States. The employer will keep this form and make it available for inspection by authorized officials of the Department of Homeland Security, Department of Labor, and Office of Special Counsel for Immigration-Related Unfair Employment Practices.

#### **Paperwork Reduction Act**

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 35 minutes per response, including the time for reviewing instructions and completing and retaining the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue NW, Washington, DC 20529-2140; OMB No. 1615-0047. Do not mail your completed Form I-9 to this address.

#### LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

## Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A Documents that Establish Both Identity and Employment Authorization O	R	LIST B Documents that Establish Identity AN	ID	LIST C Documents that Establish Employment Authorization	
2.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a	1.	Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	1.	<ul> <li>A Social Security Account Number card, unless the card includes one of the following restrictions:</li> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH</li> </ul>	
	temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa	2.	ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or		<ul><li>INS AUTHORIZATION</li><li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li></ul>	
4.	Employment Authorization Document that contains a photograph (Form I-766)		information such as name, date of birth, gender, height, eye color, and address	2.	Certification of Birth Abroad issued by the Department of State (Form FS-545)	
5.	For a nonimmigrant alien authorized	3.	School ID card with a photograph	3.	Certification of Report of Birth	
	to work for a specific employer because of his or her status:	4.	9		issued by the Department of State (Form DS-1350)	
	a. Foreign passport; and	5.	U.S. Military card or draft record	4.		
	b. Form I-94 or Form I-94A that has	6.	Military dependent's ID card		certificate issued by a State, county, municipal authority, or	
	the following: (1) The same name as the passport; and	7.	U.S. Coast Guard Merchant Mariner Card		territory of the United States bearing an official seal	
	(2) An endorsement of the alien's	8.	Native American tribal document	5.	Native American tribal document	
	nonimmigrant status as long as that period of endorsement has	9.	Driver's license issued by a Canadian government authority	6.	U.S. Citizen ID Card (Form I-197)	
	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.	F	or persons under age 18 who are unable to present a document listed above:	7.	Identification Card for Use of Resident Citizen in the United States (Form I-179)	
6.	. Passport from the Federated States of	10	8. Employment au		Employment authorization document issued by the	
	Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form	-	. Clinic, doctor, or hospital record		Department of Homeland Security	
	I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI	-	. Day-care or nursery school record			

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.

## **APPENDIX F**

## **Commission on Teacher Credentialing and Union Information**



**Human Resource Services** 

**Commission on Teacher Credentialing and** 

**Union Information** 

#### **Commission on Teacher Credentialing**

Issues concerning credentials (credential requirements, application processes, renewal processes, etc.) can be discussed and resolved with either the district Human Resource Services Analyst, or the California Commission on Teacher Credentialing at:

 1900 Capitol Avenue

 Sacramento, CA 95811-4213

 Phone: 1-(888) 921-2682

 Web Site: <a href="http://www.ctc.ca.gov">http://www.ctc.ca.gov</a>

 Fax: 1-(916) 327-3166

 Hours: 12:00 - 4:45 p.m.

Employees are responsible for renewing their credentials.

#### **Union Information**

**Classified Supervisor's Association** represents classified non-management supervisory Operations Support Services, Nutrition Services, Transportation, and Warehouse employees.

Sacramento City Teachers Association (SCTA) represents certificated non-management employees (teachers).

Service Employees International Union (SEIU): represents classified nonmanagement employees; excludes confidential and supervisory employees.

Teamster: represents classified non-management School Plant Operations Managers.

**United Professional Educators (UPE)** represents certificated management positions, such as Principal, Assistant Principal, Supervisors of Special Education, etc.

(Updated: 02-07-12)

## APPENDIX G

## Day-to-Day Substitutes and Eligibility Lists



## **Day-to-Day Substitutes**

## **Recruitment, Screening, and Hiring Process**

#### Minimum Requirements for a Certificated Day-to-Day Substitute

- Passage of the California Basic Educational Skills Test (CBEST) (verified by CBEST verification card, when hired).
- Valid 30-Day Substitute Permit <u>or</u> Teaching Credential (verified on California Commission on Teacher Credentialing [CCTC] at www.ctc.ca.gov
- Complete an on-line application on district web site: www.scusd.edu.
- Watch for job posting on our website at www.scusd.edu titled Guest Teacher Substitute.
- If selected either you wil be notified via email from the Substitue Office or will becontacted for an Interview.
- **Step 1 Application Screening**. Site Principals and Administrators are encouraged to recommend qualified, substitute teacher applicants to Substitute Services. Email request to <u>bobbie-jo-argo@scusd.edu</u> to request screening of an applicant's on-line application for substitute teaching qualifications. University and College Advisors are also encouraged to recommend qualified candidates, student teachers, and graduates to Substitute Services by emailing a list of recommended names or student teachers to <u>bobbie-jo-argo@scusd.edu</u>, Personnel Technician, Substitute Services will screen the application for substitute teaching qualifications.
- Step 2 Interview. Based on district needs, all on-line substitute applications are screened

Every month (or two) we will invite interested applicants for an interview. In addition to the NCLB requirements you will also need to do a brief writing assessment before you will be qualified to substitute. We will screen periodically during the school year and will call qualified applicants at that time. We are Pre K- 12th grade district.

Step 3 Hiring Process. Once the substitute candidate has attended the mandatory New Employee Orientation and all pre-employment paperwork and clearances have been received, <u>Substitute Services</u> will send an email to the substitute notifying him/her that he/she is now authorized to voice himself or herself in the Automated Sub Finder System for activation as a day-to-day substitute teacher.

#### Minimum Requirements for a Classified Day-to-Day Substitute

- Review the position description on district web site for minimum education, experience, and testing requirements. Be sure to include your education, experience, etc., on your application.
- Contact the Testing Center at (916) 643-7400, 643-7456, or 643-7455 to schedule any required clerical, or No Child Left Behind Act (NCLB) classified testing.
- Complete an on-line application on district web site: www.scusd.edu.
- Watch for job posting on our website at www.scusd.edu
- If selected either you wil be notified via email from the Substitute Office or will be contacted for an Interview.
- **Step 1 Application Screening**. Site Principals and Administrators are encouraged to recommend qualified, classified substitute applicants to Substitute Services. Email request to <u>bobbie-jo-argo@scusd.edu</u> to <u>request screening of an applicant's on-line application</u> for classified substitute qualifications.
- **Step 2 Interview**. Based on district needs, all on-line substitute applications are screened Every month (or two) we will invite interested applicants for an interview.We will screen periodically during the school year and will call qualified applicants at that time. We are Pre K- 12th grade district.
- Step 3 Clearances. Once the interview process is completed and approved, Substitute Services will contact the candidate via email. The substitute candidate will be invited to: (a) complete the necessary pre-employment processing packet; (b) complete required clearances as appropriate (TB Test, Fingerprinting, Lift Test, OSHA Training, clerical, or NCLB classified testing); (c) sign up to attend a mandatory New Employee Orientation upon submission of completed pre-employment packet. The substitute candidate is required to bring in his/her driver's license and social security card or passport. NOTE: A candidate is not authorized to start work until Substitute Services notifies candidate via email.
- Step 4 Hiring Process. Once the substitute candidate has attended the mandatory New Employee Orientation and all pre-employment paperwork and clearances have been received, <u>Substitute Services</u> will send an email to the substitute notifying him/her that he/she is now authorized to voice himself or herself in the Automated Sub Finder (ASF) system for activation as a day-to-day classified substitute.



## **Human Resource Services**

## **Day-to-Day Substitutes**

## **Recruitment, Screening, and Hiring Process:**

## **Student Teachers**

## Minimum Requirements for a Certificated Day-to-Day Substitute

- Passage of the California Basic Educational Skills Test (CBEST) at www.ctcexams.nesinc.com
- Valid 30-Day Substitute Permit <u>or</u> Teaching Credential (verified on California Commission on Teacher Credentialing [CCTC] at www.ctc.ca.gov
- Complete an on-line application on district web site: www.scusd.edu.

## Step 1 Application Screening.

• Site Principals and Administrators are encouraged to recommend qualified, Substitute Teacher applicants to Substitute Services. Email request to <u>bobbie-jo-argo@scusd.edu</u> to request screening of an applicant's on-line application for substitute teaching qualifications. University and College Advisors are also encouraged to recommend qualified candidates, student teachers, and graduates to Substitute Services by emailing a list of recommended names or student teachers to <u>bobbie-jo-argo@scusd.edu</u>, Personnel Technician, Substitute Services will screen the application for substitute teaching qualifications.

## Step 2 Email Invite.

- Substitute Teacher appliciant will then be notified to start the hiring proces via email notification from Substitute Services. The following documentation will be requested: \*Photo Identification, i.e Driver's License, Passort
  - \*Social Security Card
  - \*TB Test ( within the last 60 days )

\*Three (3) letters of recommendation, within the past two years, (combination of both personal and professional letters) are required and must include the following: Date, Name and. Contact Information.

\*Official transcripts with degree posted are required for Substitute Teachers

## Step 3 Hiring Process.

• Once the substitute candidate has attended the mandatory New Employee Orientation and all pre-employment paperwork and clearances have been received, Substitute Services will send an email to the substitute notifying him/her that he/she is now authorized to voice himself or herself in the Automated Sub Finder System for activation as a day-to-day substitute teacher.



## Human Resource Services & Payroll Department Frequently Asked Questions from Substitutes & Per Diem About Ab1522/304 Law

Questions from SCUSD Substitutes & Per Diem Employees	Answer
How qualifying employees accrue and take paid sick leave?	A qualifying employee begins to accrue paid sick leave beginning on July 1, 2015, or if hired after that date on the first day of employment. An employee is entitled to use (take) paid sick leave beginning on <b>the 90th day of employment</b> . SCUSD provide at least 24 hours or three days of paid sick leave per year and the full amount of this leave must be available for the employee's use from the beginning of each fiscal year.
How do I qualify for paid sick leave?	Work for the same employer, on or after January 1, 2015, for at least 30 days within a year in California, and Satisfy a 90-day employment period (similar to a probationary period) before taking any sick leave
What if I work less than 30 days in California within a year?	If you work less than 30 calendar days within a year for the same employer in California, then you are not entitled to paid sick leave under this new law.
What if I work more than 30 days in California within a year but less than 90 days?	The 90 calendar day period works like a probationary period. If you work less than 90 days for your employer, you are not entitled to take paid sick leave.
Does paid sick leave apply to all employees who work in California?	<ul> <li>All employees who work at least 30 days for the same employer within a year in California, including part-time, per diem, and temporary employees, are covered by this new law with some specific exceptions.</li> <li>Employees exempt from the paid sick leave law include:         <ul> <li>Employees covered by collective bargaining agreements with specified PROVISIONS.</li> <li>Retired annuitants working for governmental entities.</li> </ul> </li> </ul>
What happens if I return to work for the same employer after more than one year?	The paid sick leave law does not require that your accrued sick leave be restored to you.

Questions from SCUSD Substitutes & Per Diem Employees	Answer
How does an employer satisfy the provision for putting the full amount of leave into my leave bank under the alternative "up-front" (or advance) method for providing paid sick leave?	The law states that an employer is <u>not required</u> to have an accrual or carryover policy for paid sick leave if the "full amount of leave" is provided to employees at the beginning of each year of employment, calendar year or 12-month period. The "full amount of leave" that an employer is required to provide under this provision is at least 24 hours or three days of paid sick leave. For initial hires, however, the employee must still meet the 90-day employment requirement prior to taking any paid sick leave.
What can I use paid sick leave for?	<ul> <li>You can take paid sick leave for yourself or a family member, for preventive care or diagnosis, care or treatment of an existing health condition, or for specified purposes if you are a victim of domestic violence, sexual assault or stalking <ul> <li>Family members include the employee's parent, child, spouse, registered domestic partner, grandparent, grandchild, and sibling.</li> <li>Preventive care would include annual physicals or flu shots</li> </ul> </li> <li>The employee may decide how much paid sick leave he or she wants to use (for example, whether you want to take an entire day, or only part of a day). <u>Your employer can require you to take a minimum of at least two hours of paid sick leave at a time</u>.</li> </ul>
Do I have to notify my employer before taking sick leave?	The employee must notify Site/Sub Office in advance if the sick leave is planned, as may be the case with scheduled doctors' visits. If the need is unforeseeable, the employee need only give notice as soon as practical, as may occur in the case of unanticipated illness or a medical emergency. <u>Note to Substitute Employees</u> : Please ensure all explanations are completely filled out on this PSL-FORM12B, as this is required documentation and must be delivered to the Substitute Office no later than the 25th of each month. Failure to do so will result in the absence being considered as unauthorized, and a non-paid day.
When I take paid sick leave, will I get paid as I normally do for the applicable pay period?	The new law requires that an employer provide payment for sick leave taken by an employee no later than the payday for the next regular payroll period after the sick leave was taken. This does not prevent an employer from making the adjustment in the pay for the same payroll period in which the leave was taken, but it permits an employer to delay the adjustment until the next payroll. For example, if you did not clock in for a shift and therefore were not paid for it but utilized your paid sick leave. <i>your employer would have to pay you not later than the following pay period and account for it in the wage stub or separate itemized wage statement for that following regular pay period.</i>
How will I know how much sick leave I have accrued?	Employers must show how many days of sick leave you have available on your pay stub, or on a document issued the same day as your paycheck. If an employer provides unlimited paid sick leave or unlimited paid time off, the employer may indicate "unlimited" on your pay stub or other document provided to you the same day as your wages.

Questions from SCUSD Substitutes & Per Diem Employees	Answer
Do I have the right to cash out my unused sick days, like I can with vacation and paid time off?	No, not unless your employer's policy provides for a payout. If you leave your job and get rehired by the same employer within 12 months, you can reclaim (restore) what you had accrued in paid sick leave, provided it was not paid out pursuant to a paid time off policy at termination.
What step or hourly rate will I be paid out as?	If you are a Substitute Teacher and have earned you sick time this will be paid out as Step 1. If you are a Classified Substitute and have earned your sick time then you will be paid out at your lowest classified hourly of pay. Unless you provided the job # in which you have been working in a <u>long term</u> <u>position</u> ( 30 days or more ) in ( job # is required for this on Form-12b ) we will then consider this higher rate of pay.

Emplovee Name	Substitute/Per Diem Employee Absence Report [ame (Print Full Legal Name):	osence Report
Date Filled:	Dates of Absence:	Certificated Classified
Sub Position	(required):	
Site / Location	on ( if applicable ) :	
Job # of canceled	celed assignment ( if applicable ):	
You must b Resource G	You must be eligible first before you can use Type of Absence below: See your Substitute Resource Guide further information at www.scusd.edu	ıbstitute
Code	Turns of Alicenses	Number of
Letter	Type of Absence	Hours
SICK	Employee Illness (Include Appointments With Doctors Connected With Illness)	
FSICK	Family Illness (Include Appointments With Doctors Connected With Illness)	
The following	ng Type of Absence below will be a non-paid day if selected:	
Code	Type of Absence	Number of
Letter		Hours
B	Bereavement	
E	Emergency	
JURY	Jury Duty:  City/County  Federal	
PN	Use of Sick Leave for Compelling Personal Importance	
T	Transportation	
JRA	Job Related Absence ( outside SCUSD )	
NA	Unpleased with Assignment	
<u>Note to Substi</u> required docu	<u>Note to Substitute Employees</u> : Please ensure all explanations are completely filled out on this Form-12b, as this is required documentation and must be delivered to the Substitute Office no later than the 25th of each month. Failure to do so will result in the absence being considered as month original and a non-noil dow.	Form-12b, as this is ch month. Failure to
Signature:	ני ונו וויר מסברורה סבוווצ הסוושותרובת הם שנומשוניסו נצבחי חנות ה נוסוו-למוח חתלי	
Sub ID # or	# or Last 6 digits of SSN #	
Sub Office/1	Sub Office/Payroll Use only:	
Day to Day Assig	Assignment:  Certificated Long Term Assignment:	

PSL-F012B

Page 1 of 1

## **APPENDIX H**

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Worker's Compensation Reporting Requirements And Vehicle Safety Program Employee Pull Notice

Sacramento City Unified School Distri	ct	- BULLET	IN
SUBJECT:	WORKERS' COMPENSA REPORTING PROCEDU TRANSITIONAL WORK	RES, STRUCTURED	2015-2016 NO. BS-36
то:	All School Sites, Department	nts and Administrators	
DATE:	July 30, 2015		
PREPARED BY:	<u>Keyshun Marshall</u> <u>Coordinator II, Risk &amp;</u> <u>Disability Management</u>	DEPARTMENT:	Risk & Disability Management
REVIEWED BY:	Gerardo Castillo, CPA Chief Business Officer	APPROVED:	9

#### **Claims Reporting Procedure:**

- All work-related injuries must be reported directly to the supervisor, site administrator or designee as soon as possible. Contact the SIA Injury Reporting Line as soon as possible at (916) 643-9299 to report an injury and to obtain further information and instructions from an Early Intervention Nurse (EIN). All claims are to be reported to this number ONLY. Employees working after hours and/or weekends should report their injury to their supervisor, site administrator or designee, and the reporting line as soon as possible. If the after-hours injury requires immediate medical treatment call 911 immediately, see instructions under "emergencies" on the next page.
- 2. If medical treatment is necessary, an EIN will provide instructions and information on scheduling a doctor's appointment.
- 3. For questions related to existing claims, contact Schools Insurance Authority at their main number: (916) 364-1281 or Disability Management (916) 643-9421

**Emergencies**: If the injury is <u>life threatening</u>, **call 911** or report to the nearest medical facility. Please contact the reporting line at (916) 643-9299 immediately after you've obtained emergency care.

**Payroll Related Questions**: Contact Disability Management at (916) 643-9421. All work and nonwork related injury/illness, payroll is coordinated through the process of disability management.

<u>**Temporary Transitional Work Program</u>**: To assist injured employees in their recovery for both work and non-work related injuries, the District provides temporary transitional work in the form of</u>

modified or alternate work whenever possible. After reporting to the supervisor, if the injured worker has a work restriction or is temporarily disabled from work, **IMMEDIATELY** contact the Return-to-Work Coordinator with SIA (916) 364-1281 for work related injuries and Disability Management (916) 643-9421 for non-work related injuries for approval to return to work.

**Temporary Transitional Work Program Alternate Site**: The temporary duty work assignment timesheet are available for both work and non-work related injuries. The timesheet must be completed, signed by the site administrator/supervisor and the employee. Once complete, fax or email to the permanent site and Disability Management.

<u>**Permanent Restrictions**</u>: The District will comply with all federal, state and local laws and regulations requiring the accommodation of disabled employees. Contact Disability Management (916) 643-9421 if you have a permanent disability that will affect your performance at work.

**Doctor Appointment/Physical Therapy Appointments**: Appointments are to be scheduled before or after work whenever possible to prevent sick leave dock or wage loss. This applies to follow-up appointments and physical therapy as well. Workers' Compensation will not pick up benefits for lost time or wages due to medical appointments.

**Doctor's Statement/Medical Appointment**: The injured worker must provide the original medical slip to their supervisor immediately following his/her medical appointment. The supervisor will forward the original doctor's statement to Disability Management, in order to prevent payroll interruptions or holds.

**Reporting Absences:** Report Workers' Compensation absences, doctor's appointments and therapy as "SLIA" (sick leave industrial accident) on the monthly absence report. Non-work related injuries should be reported as "sick".

Please contact Disability Management at (916) 643-9421 if you have any questions or concerns.

#### **INJURY/ILLNESS PHONE DIRECTORY**

Schools Insurance Authority Workers' Compensation P.O. Box 276710 Sacramento, CA 95827-6710 916-364-1281 (Phone) 916-364-2421 (Fax)

NEW INJURY REPORTING:<br/>Reporting Line916-643-9299RETURN TO WORK QUESTIONS:<br/>Return to Work Unit916-364-1281EXISTING CLAIM QUESTIONS:916-364-1281PAYROLL and DISABILITY RELATED QUESTIONS:916-643-9421

Department of Risk & Disability Management SCUSD - BOX 840 916-643-9421 (Phone) 916-399-2056 (Fax)

NEW INJURY REPORTING Non-Work Related:	
Reporting Line	916-643-9421
RETURN TO WORK QUESTIONS:	
Return to Work	916-643-9421
PAYROLL and DISABILITY RELATED QUESTIONS: Work related/Non work related	916-643-9421

## Facts About Workers' Compensation

#### The Way It Was

In the early 20<sup>th</sup> century, a worker injured on the job had to sue his employer to recover medical expenses and lost wages.

Lawsuits took months and sometimes years. Juries had to decide who was at fault and how much, if anything, would be paid. In most instances, the worker got nothing. It was costly, time consuming, and often unfair.

#### The Way It Is

Today, the California workers' compensation law provides a faster, fairer way to take care of injured workers... where fault doesn't have to be proved to recover medical expenses and lost wages.

This job-injury insurance is paid for by your employer and supervised by the state. It pays your medicl bills and if you can't work due to a job-related injury or illness, provides money to help replace lost wages until you can return to work.

#### Who's Covered?

Almost every employee in California is protected by workers' compensation, but there are a few exceptions. People in business for themselves and unpaid volunteers may not be covered. Maritime workers and federal employees are covered by similar laws. If you have a question about coverage, ask your employer.

#### What's Covered?

Any injury or illness is covered if it's due to your job. It can be caused by one event like a fall, or repeated exposures, such as repetitive motion over time. Everything from first-aid type injuries to serious accidents is covered. Workers' compensation even covers injuries - including physical or psychiatric injuries = resulting from a workplace crime. (Some injuries from voluntary, off-duty recreational, social or athletic activity - for example, the company bowling team - may not be covered. Check with your supervisor or the claims administrator listed at the end of this document if you have questions.)

Coverage is automatic and immediate. There is no qualifying period, no need to earn a certain amount in wages before you're covered... protection begins the first minute you're on the job.

#### What You Have To Do

If you have a work injury or illness, immediately notify your supervisor or the employer representative listed on the back of this pamphlet so you can get medical help right away. If It's more than a simple first-aid injury, your employer will give you a claim form so you can describe the injury and how, when and where it happened. To file a claim, complete the "Employee" section of the claim form, keep one copy and return the rest to your employer. Your employer will then complete the "Employee" section, give you a signed and dated copy of the form, keep one copy and send one to the claims administrator, the company that is responsible for handling your claim and

Benefits can't start until the claims administrator knows of the injury, so report the injury and file the claim form with your employer as soon as possible. State Taw requires employers to authorize medical care within one working day of receiving a claim form, and employers may be liable for as much as \$10,000 in treatment until a claim is accepted or rejected. Delays in reporting may delay workers' compensation benefits, and you may not be able to get benefits if you don't file a claim within one year of the date of injury, the date you knew the injury was work related, or the date benefits were last provided. To ensure your right to benefits, report every injury, no matter how slight, and request a claim form if it's more than a minor injury requiring only first aid.

#### Benefits

The California workers' compensation law guarantees you three kinds of benefits:

 All reasonable and necessary medical care for your injury or illness... with no deductibles. Medical benefits may include treatment by a doctor, hospital services, lab tests, x-rays, physical therapy and medicines. State law makes non-emergency medical services subject to preauthorization and limits some medical services.

Tax-free payments to help replace lost wages while you are temporarily disabled. Additional payments are made if the injury causes a permanent disability or death.

 If your injury or illness causes permanent disability that prevents you from returning to work and your employer doesn't offer appropriate regular, modified or alternative work, you may be eligible for a supplemental job displacement benefit. This is a nontransferable voucher of up to \$6,000 for education-related retraining and/or skill enhancement at state-approved schools, and other items and services to help you get back to work.

#### **Benefit Payments**

• Medical Care: All medical bills for reasonable and necessary treatment will be paid directly by the claims administrator, so you should never receive a bill. The name and phone number of the claims administrator are at the end of this document and are posted at your workplace.

• Temporary Disability: If you are unable to work for more than three days, including weekends, you are entitled to temporary disability (TD) payments to help replace your lost wages. About two weeks after reporting the injury, you'll get a check. You will continue to receive TD checks every two weeks after that until the doctor says you can return to work, or that your medical condition is "permanent and stationary." (Payments won't be made for the first three days, however, unless you're hospitalized as an inpatient or unable to work more than 14 days.) The amount of these checks will be two-thirds of your average wage, subject to minimums and maximums set by the state Legislature. It probably won't be the full amount of your regular paycheck, but there are no deductions and the payments are tax free. Under state law, TD payments for a single injury may not extend for more than 104 compensable weeks within five years from the date of injury, or for more than 240 weeks within five years from the date of injury for a few long-term injuries such as severe burns or chronic lung disease. If you reach the maximum TD payment period before you can return to work or before your medical condition becomes permanent and stationary, you may be able to obtain State Disability benefits through the California Employment Development Department (EDD). You also may be able to get these benefits if your TD is delayed or denied. There are time restrictions, however, so contact EDD at 1-800-480-3287 or www.edd.ca.gov for information on when and how to apply.

• Permanent Disability: If your doctor says your injury or illness will always leave you somewhat limited in your ability to work, you may receive permanent disability payments. The amount depends on the doctor's report, how much of the permanent disability was directly caused by your work, and factors such as your age, occupation, type of injury, and date of injury. The minimum and maximum amounts are set by state law, and vary by injury date, but if you have a permanent disability, your claims administrator will send you a letter explaining how the benefit was calculated. In general, the total amount is set at a weekly rate spread over a fixed number of weeks. The first payment is due within 14 days after the final temporary disability payment, or if you were not receiving temporary disability, 14 days after your doctor says your condition is permanent and stationary. After that, the benefit will be paid every 14 days until you reach the maximum or until you settle your case and receive a lump sum.

• Death Benefits: If the injury or illness causes death, payments may be made to individuals who were financially dependent on you. These benefits are set by state law and the amount depends on the number of dependents and the date of injury. Generally, the payments are made at the same rate as temporary disability payments; however, no payments will be less than \$224 per week. Workers' compensation also provides a burial allowance.

• Supplemental Job Displacement Benefit: If the claims administrator receives a doctor's report that you have recovered as much as possible from your job injury, and that you have a permanent disability, within 60 days you may receive a form with an offer of regular, modified, or alternative work from your employer. If 60 days after receiving the doctor's report your employer has not offered you regular, modified, or alternative work, your claims administrator has 20 days to offer you the Supplemental Job Displacement Benefit. This is a voucher for up to \$6,000 that you can use for retraining or skill enhancement at a state accredited school, books, required tools, professional license and certification fees, or other resources that can help you find a new job. There are limits on how much you can spend for some items, but if you qualify, you'll get information on what types of expenses are covered, the limits, documentation requirements, and deadlines for using this benefit.

#### **Other Benefits**

Workers' compensation is sometimes confused with State Disability Insurance (SDI). They seem similar, but there are important differences. Workers' compensation insurance covers on-the-job injuries and illnesses and is paid for entirely by your employer. On the other hand, SDI covers off-the-job injuries or sickness, and is paid for by deductions from your paycheck. If you are not receiving workers' compensation benefits, you may be able to get State Disability benefits. For information, call the local office of the state Employment Development Department listed in the government pages of your phone book, or learn more at www.edd.ca.gov/disability/

If your work injury results in a permanent disability and the state determines that your workers' compensation permanent disability benefit is too low compared to your loss of future earnings, you may qualify for additional money from a Return-to-Work Fund, approved by state lawmakers in 2012. This fund is administered by the Department of Industrial Relations, and details on eligibility and how to apply will be included in state regulations, so if you have questions or think you may qualify, contact the local DWC Information and Assistance office listed in the back of this pamphlet, or visit the Division of Workers' Compensation web site at www.dwc.ca.gov

#### If You Have Questions

... ask your supervisor or employer representative. Or contact the workers' compensation claims administrator (the name and phone number are listed at the end of this document and are posted at your workplace). You also can contact an information and assistance officer at the State Division of Workers' Compensation (DWC). Information and assistance officers are available at no charge to answer questions, review problems and provide additional written information about workers' compensation. The local office is listed at the end of this document and is posted at your workplace, or you can call 800-736-7401, check the local listing in the white pages of the phone book under State Government Offices/Industrial Relations/Workers' Compensation, or go to the DWC web site at www.dwc.ca.gov.

#### More About Medical Care

Good medical care is important - to you, your family and your employer. Quality medical treatment is the quickest way to recovery.

• If emergency medical care is needed, call 911 for immediate help and get the best treatment available until emergency personnel

• If first-aid is available at your workplace, seek immediate treatment. Report to your employer where, when and how the accident happened. If it's more than a simple first-aid injury, ask your employer for a claim form.

• To make sure your medical bills get paid and you get all of your benefits, complete the "Employee" section of the claim form and return it to your employer as soon as possible. Employers must notify the claims administrator and authorize medical care within one working day of receiving a claim form, so get a signed and dated copy back from your employer and keep it with the other

· Your claims administrator will arrange medical care that meets the treatment guidelines for the injury. The doctor, who may be a specialist for your type of injury, will be familiar with workers' compensation requirements and will report promptly so your benefits

· Your employer may have a Medical Provider Network (MPN), which is a network of health care providers who treat workers injured on the job. If so, MPN information can be found on a notice posted at your worksite. You also can request information on how to use the MPN by asking your employer or by calling the MPN number on the poster.

• The doctor with overall responsibility for your treatment is the "primary treating physician" (PTP). The PTP decides what kind of medical care you need and when you can return to work. The PTP may review your job description with you and your employer to define any limitations or restrictions that you may have when you go back to work. The PTP also will coordinate any care you receive from other medical providers, and for a serious injury, will write reports about any permanent disability or need for future medical care.

\* You can be treated by your personal doctor immediately if you have health care coverage for nonwork injuries, the doctor has treated you before, has your medical records, and has agreed in advance to treat you for work injuries or illnesses; and you gave your employer the doctor's name and address in writing before the injury. This is called "predesignating a personal physician." If you decide to predesignate, the doctor must be someone who has limited his or her practice of medicine to general practice or be a board-certified or board-eligible internist, pediatrician, obstetrician-gynecologist, or family practitioner; or you can predesignate a multispecialty group of licensed doctors of medicine or osteopathy (M.D.s or D.O.s) that provides comprehensive medical services primarily for nonoccupational injuries and illnesses. You can use the optional Predesignation of Personal Physician form included in this pamphlet to give your employer the necessary information. You can use the optional DVVC Form 9783.1 to name a personal chiropractor or acupuncturist, but different rules apply, and you may need to see an employer-selected doctor first.

\* If your employer has an MPN, but you have a predesignated personal physician, you may receive treatment immediately from that doctor. If your employer has an MPN and you do not predesignate a personal physician prior to injury, a network doctor will generally be your PTP for the duration of treatment. For treatment other than emergency care, your claims administrator should direct you to an MPN doctor for your first medical visit, though you may switch to another doctor in the network anytime after your first visit. If you want to switch to a chiropractor or acupuncturist, including a personal chiropractor or personal acupuncturist named prior to the injury, he or she must be in the network. Different rules apply if you are in a workers' compensation Health Care

Organization (HCO). If your employer has an MPN or if you are in an HCO, your employer will provide additional information about the network and your rights under your plan.

. Generally, if you don't predesignate a personal physician prior to the injury, and are not covered by an MPN, you can switch to your own doctor 30 days after the injury is reported. If you want to switch doctors before that, your claims administrator will give you a list of doctors to choose from. (Different rules apply if you are in an HCO, so check with your claims administrator if that's the case.) If you want to change doctors for any reason, choose carefully, and if you want advice on specialists, talk to the claims adjuster who works for your claims administrator. They're as interested as you are in your prompt recovery and return to work and will help you get a different doctor.

• In any event, report your choice to the claims adjustor as soon as you make it so the bills will be paid for you. Even minor injuries may need expert care. Prompt, quality medical care is the best investment you and your employer can make.

When a work injury or illness occurs...

1. If emergency medical care is needed, call 911 or go to the nearest emergency room.

2. Report injuries immediately to your supervisor or employer representative at \_\_\_\_\_\_ (telephone). Your employer may advise you on where to go for treatment. Your employer also is required to provide you with a claim form within one working day of learning of your injury, so ensure your rights to benefits by reporting every injury, no matter how slight, and request a claim form if it's more than a simple first-aid injury.

Your employer must notify the claims administrator and authorize medical treatment within one working day of receiving your claim form, and will direct you to a doctor, clinic, or to a hospital if necessary. Any delay in reporting an injury may delay workers' compensation benefits. If your claim or benefits are denied, you have a right to challenge the decision at the Workers' Compensation Appeals Board, but there are deadlines for filing the necessary papers, so don't delay.

3. Call your employer representative or claims administrator if you have questions or problems. It is illegal for an employer to fire or discriminate against you just because you file, intend to file, or settle a workers' compensation claim, or because you testify for a co-worker who was injured. If you prove this kind of discrimination, you will be entitled to job reinstatement, lost wages and increased benefits, plus costs and expenses up to a maximum set by the state legislature.

Emergency Telephone Number: Call 911 for an ambulance, the fire department, police, or for emergency medical care from a doctor or hospital. For nonemergency medical care, contact your employer, the workers' compensation claims administrator listed below, or go to:

Claims Administrator:	
Name:	Check if Company Is Self-Insured
Telephone:	
the local office listed below. You can hear recorded int	a Division of Workers' Compensation information and assistance officer at formation and get a list of local offices by calling (800-736-7401), or you can ensation by going to the Division of Workers' Compensation web site at

Proof Address			
street Address:	 		
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Employee I.D. #       Date:         Date:       Date:         Dilization review; reporting requirements; and the California Official Medical Fee Schedule. The following optional information may sist communication and facilitate the authorization, reporting, recordkeeping and payment processes:         fice Manager/Billing Contact:	<ul> <li>personal medical doctor (M.D.), doctor of osteopathic medicine (D.O.) or medical group if.</li> <li>you have health coverage for injuries or illnesses that are not work related;</li> </ul>	
To:	<ul> <li>your "personal physician" may be a médical group if it is a single corporation or partnership composed of li of medicine or osteopathy, which operates an integrated multispecially medical group providing comprehens ervices predominantly for nonoccupational illnesses and injuries;</li> <li>prior to the injury your doctor agrees to treat you for work injuries or illnesses;</li> <li>prior to the injury you provided your employer the following in writing: (1) notice that you want your personal you for a work-related injury or illness, and (2) your personal doctor's name and business address.</li> <li>You may use this form to notify your employer if you wish to have your personal medical doctor or a doctor of osteop treat you for a work-related injury or illness and the above requirements are met</li> </ul>	t, or family icensed docto sive medical
Tc:	Employee: Complete this section.	
(tellephone number)         (street address, city, state, ZIP)         (telephone number)         Employee Name (please print):         Employee's Address:         Name of nonoccupational coverage insurer/program:         Employee's Signature:         Physician: I agree to this Predesignation:         Signature:         (Physician or Designated Employee of the Physician or Medical Group)         The physician is not required to sign this form; however, if the physician or designated employee of the physician or medical group         Code of Regulations, section 9780.1(a)(3).		
testing of ubecidy (M.D., D.O. or medical group)         (street address, city, state, ZIP)         (telephone number)         Employee Name (please print):         Employee's Address:         Name of nonoccupational coverage insurer/program:         Employee's Signature:         Physician: I agree to this Predesignation:         Signature:       Date:         (Physician or Designated Employee of the Physician or Medical Group)         The physician is not required to sign this form; however, if the physician or designated employee of the physician or medical group does not sign, other documentation of the physician's agreement to be predesignated will be required pursuant to Title 8, California Code of Regulations, section 9780.1(a)(3).         tote to Employee: Unless an employee agrees, neither the employer nor the claims administrator shall contact your personal codesignated prior to the injury will be required. If you agree that after receiving this form your employer or claims administrator may on a predesignation (CCR 9780.1(f)). If your physician did not sign above, other documentation of the physician to confirm a predesignation, sign below:         mployee Signature:       Employee I.D. #       Date:         ization review; Reprints; and the California Official Medical Fee Schedule. The following optional information may issist communication and healther the uthorization, reporting, recordsceping and payment processes:         ization review; Reprint the uthorization, reporting, recordsceping and payment processes:       Phone:	If I have a work-related injury or illness, I choose to be treated by: (name of em	ployer).
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Name of nonoccupational coverage insurer/program:         Employee's Signature:       Date;         Physician: I agree to this Predesignation:         Signature:       Date:         (Physician or Designated Employee of the Physician or Medical Group)         The physician is not required to sign this form; however, if the physician or designated employee of the physician or medical group         The physician is not required to sign this form; however, if the physician or designated will be required pursuant to Title 8, California         Code of Regulations, section 9780.1(a)(3).         Hote to Employee: Unless an employee agrees, neither the employer nor the claims administrator shall contact your personal physician to confirm a predesignation [CCR 9780.1(f)). If your physician did not sign above, other documentation that they agreed to be redesignated prior to the injury will be required. If you agree that after receiving this form your employer or claims administrator may infact your physician to confirm the predesignation, sign below.         mployee Signature:       Employee I.D. #       Date:         Date:       Employee Signature:       Date:         text to Physician: California workers' compensation medical services are subject to preauthorization of non-emergency services;       Date:         ization review; reporting requirements; and the California Official Medical Medical Fee Schedule. The following optional information may ist communication and facilitate the authorization, reporting, recordkeeping and payment processes:         ice Manager/Billing Contact: <td< td=""><td></td><td></td></td<>		
Name of nonoccupational coverage insurer/program:         Employee's Signature:       Date;         Physician: I agree to this Predesignation:         Signature:       Date;         (Physician or Designated Employee of the Physician or Medical Group)         The physician is not required to sign this form; however, if the physician or designated employee of the physician or medical group         The physician is not required to sign this form; however, if the physician or designated will be required pursuant to Title 8, California         Code of Regulations, section 9780.1(a)(3).         Hote to Employee: Unless an employee agrees, neither the employer nor the claims administrator shall contact your personal         hysician to confirm the predesignation [CCR 9780.1(f)]. If your physician did not sign above, other documentation that they agreed to be         redesignated prior to the injury will be required. If you agree that after receiving this form your employer or claims administrator may         mater your physician: California workers' compensation medical services are subject to preauthorization of non-emergency services;         ization review; reporting requirements; and the California Official Medical Fee Schedule. The following optional information may         sist communication and facilitate the authorization, reporting, recordkeeping and payment processes:         ingrader Billing Contact:	Employee Name (please print):	
Name of nonoccupational coverage insurer/program: Date; Date; Date; Physician: I agree to this Predesignation: Date;	Employee's Address:	
Physician: I agree to this Predesignation:       Date:	Name of nonoccupational coverage insuror/organ	
Physician: I agree to this Predesignation:       Date:		
Signature:	Data:	
Signature:	Physician: I agree to this Predesignation:	
(Physician or Designated Employée of the Physician or Medical Group)         The physician is not required to sign this form; however, if the physician or designated employee of the physician or medical group does not sign, other documentation of the physician's agreement to be predesignated will be required pursuant to Title 8, California Code of Regulations, section 9780.1(a)(3).         Interpretent to complexe the employer of the claims administrator shall contact your personal hysician to confirm a predesignation [CCR 9780.1(f)]. If your physician did not sign above, other documentation that they agreed to be predesignated prior to the injury will be required. If you agree that after receiving this form your employer or claims administrator may be physician to confirm the predesignation, sign below:         mployee Signature:		
The physician is not required to sign this form; however, if the physician or designated employee of the physician or medical group does not sign, other documentation of the physician's agreement to be predesignated will be required pursuant to Title 8, California Code of Regulations, section 9780.1(a)(3).  Interpretent to the injury will be required. If your physician did not sign above, other documentation that they agreed to be predesignated prior to the injury will be required. If you agree that after receiving this form your employer or claims administrator may on the confirm the predesignation, sign below:  mployee Signature:  Employee I.D. # Date: Dat	(Physician or Designated Employee of the Division of the Divis	
Interpretention, section 9780.1(a)(3).       Interpretention of the strength of the strengt of the strength of the strength of the str	The obvicial distance Employee of the Physician or Medical Group)	
ontact your physician to confirm the predesignation, sign below:         mployee Signature:       Employee I.D. #       Date:         ote to Physician: California workers' compensation medical services are subject to preauthorization of non-emergency services; sist communication and facilitate the authorization, reporting, recordkeeping and payment processes:       Date:         sist communication and facilitate the authorization, reporting, recordkeeping and payment processes;       Phone:         niling Address (if different from street address):	Substant, section 9760. 1(a)(3).	California
mployee Signature:       Employee I.D. #       Date:         ote to Physician: California workers' compensation medical services are subject to preauthorization of non-emergency services;       Date:         ilization review; reporting requirements; and the California Official Medical Fee Schedule. The following optional information may sist communication and facilitate the authorization, reporting, recordkeeping and payment processes:       Dete:         fice Manager/Billing Contact:       Phone:	ontact your physician to confirm the predesignation, sign below:	onal agreed to be strator may
Date:	mployee Signature:	
fice Manager/Billing Contact: Phone: Phone: illing Address (if different from street address): c: Email:	ote to Physician: California workers' compensation medical services are subject to preauthorization of any	ervices;
iling Address (if different from street address):	fice Means (D) (Comparison of the second s	
cEmail:	Phone:	
	V.	

#### **Optional Form**

NOTICE OF PERSONAL CHIROPRACTOR OR PERSONAL ACUP	PUNCTURIST
--	------------

If your employer or your employer's insurer does not have a Medical Provider Network, you may be able to change your treating physician to your personal chiropractor or acupuncturist following a work-related injury or illness. In order to be eligible to make this change, you must give your employer the name and business address of a personal chiropractor or acupuncturist in writing prior to the injury or illness. Your claims administrator generally has the right to select your treating physician within the first 30 days after your employer knows of your injury or illness. After your claims administrator has initiated your treatment with another doctor during this period, you may then, upon request, have your treatment transferred to your personal chiropractor or acupuncturist. You may use this form to notify your employer of your personal chiropractor or acupuncturist.

Your Chiropractor or Acupuncturist's Information:

(street address, city, state, zip code)	
(telephone number)	 
Employee Name (please print):	 
Employee's Address:	 10
Employee's Signature:	
Date:	

Title 8, California Code of Regulations, Section 9783.1 (DWC Form 9783.1 - Effective Date March 2006)

Note to employee: State law does not allow a chiropractor to be a treating physician beyond a maximum of 24 visits. A personal chiropractor must be your regular, licensed chiropractor (D.C.) who previously directed your treatment and retains your chiropractic treatment records, including your chiropractic history. A personal acupuncturist must be your regular, licensed acupuncturist (L.Ac.) who previously directed your treatment and who retains your acupuncture treatment records, including your chiropractic history.

If your employer offers a workers' compensation Medical Provider Network (MPN), you may only switch to a personal chiropractor or acupuncturist within the MPN. If you are a member of a workers' compensation Health Care Organization (HCO) different rules apply, so check with your employer or claims administrator if that is the case.

## WORKERS' COMPENSATION FRAUD IS A FELONY

Anyone who makes or causes to be made any knowingly false or fraudulent material statement for the purpose of obtaining or denying workers' compensation benefits or payments is guilty of a felony and may be fined and imprisoned.

This pamphlet is available in Spanish. For a free copy, please write: CWCI, 1111 Broadway,Suite 2350, Oakland, CA 94607. Este Información esta traducido al español. Para conseguír una copia, favor de escribir a: CWCI, 1111 Broadway, Suite 2350, Oakland, CA 94607.

The information in this pamphlet has been approved by the Administrative Director of the Division of Workers' Compensation. The information applies to claims for injuries occurring on or after January 1, 2013.

Prepared and published as a community service by CWCI California Workers' Compensation Institute 1111 Broadway,Suite 2350,Oakland, CA 94607 www.cwci.org

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Rev. 10/12



Sacramento City Unified School District		BULLETIN		
SUBJECT:	VEHICLE SAFETY PRO EMPLOYEE PULL NOT		2015-2016 NO. BS-37	
то:	All School Sites and Depart	ments		
DATE:	July 1, 2015			
PREPARED BY:	<u>Keyshun Marshall</u> <u>Coordinator II, Risk &amp;</u> <u>Disability Management</u>	DEPARTMENT:	Risk & Disability Management Dept.	
REVIEWED BY:	Gerardo Castillo, CPA Chief Business Officer	APPROVED:	G	

#### **For Your Information:**

The Sacramento City Unified School District has established a driver's safety program known as "EPN" (Employee Pull Notice) for all employees that drive district vehicles, also, volunteers, and/or staff driving district students. This program allows the District to monitor driver license records of employees who are required to drive on behalf of the District. This program is designed to ensure safety of staff, students, and the community.

If you have questions or concerns regarding this request please feel free to contact the office of Risk & Disability Management at (916) 643-9421.



Title:

This form is required and must be completed and returned to Risk Management. The information below will be submitted to the Department of Motor Vehicle (DMV) in accordance with Title 8, California Code of Regulations.

#### **RELEASE OF DRIVER RECORD INFORMATION**

I \_\_\_\_\_\_\_ authorize Sacramento City Unified School District to review driving, motor vehicle related information periodically for the duration of my employment.

I understand that my driving privileges are contingent upon the Sacramento City Unified School District's review of such information.

I understand my signature is confirmation that I have read and understand the above information.

Organization: Sacramento City Unified School District

Signature \_\_\_\_\_ Date:\_\_\_\_

Printed Name (as it appears on driver license): \_\_\_\_\_

Driver License Number: \_\_\_\_\_ State \_\_\_\_ Circle Gender: M or F

Birth Date (Month/Day/Year): \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Department/Site: \_\_\_\_\_

Volunteer: 
Substitute/PerDeim:

Please be aware of timelines and plan for the necessary preparation time prior to submitting this form. This form must be submitted two (2) weeks in advance when approval is required.

This form is confidential and may be privileged. The information is intended solely for Sacramento City Unified School District Risk & Disability Management use or entity outlined for audit purposes and review or disclosure by anyone else is unauthorized. If you have received this form in error please forward immediately to the Office of Risk & Disability Management and destroy all copies without reading or disclosing the contents.

## APPENDIX I

## **Tuberculosis Testing Requirement**



## **Human Resource Services**

## **Tuberculosis Testing Requirements**

No person shall be employed by the school district unless they have placed on file with the district a certificate from a licensed physician indicating that a tuberculosis examination within the past 60 days shows that they are free from active tuberculosis. The tuberculosis examination shall consist of an approved intradermal tuberculin test or Adult Tuberculosis Risk Assessment Questionnaire. An X-ray of the lungs shall be required <u>only</u> if the intradermal test is positive. Employees with a history of previous positive skin test should follow the instructions below. **There can be no exemptions from this requirement.** (Education Code 49406, Assembly Bill 1667, and Board Policy)

**Continuing Employees and Volunteers:** Education Code Section 49406 and the Sacramento City Unified Board of Education require all district employees and volunteers to have an intradermal skin test for the detection of tuberculosis or have filled out a chest X-ray questionnaire <u>every four years</u>. (PSL-F011 Employee Tuberculin Testing Questionnaire)

**Transfer From Another School District:** According to Education Code Section 49406, persons transferring from another district may fulfill tuberculosis examination requirements in either of the following ways by:

- Producing a certificate showing that the employee was examined within the last four years and found free of active tuberculosis; or
- Having the last employing school district verify that it has on file a current certificate which contacts that showing. (Provide a copy of the district-administered TB skin test results slip.)

#### Special Instructions for Employees: Previous History of Positive Skin Test:

Employees and volunteers who have a previous history of a positive skin test, converted from a negative to a positive skin test, or who have other physician-diagnosed medical disorders that interfere with the skin-testing procedure are to go to their personal physician for an X-ray. You may obtain the necessary referral form from a school secretary at a district school.



Volunteers: Please send one copy of the result of your X-ray to your site administrator.

Employees: Please send one copy of the result of your X-ray to Human Resource Services.

#### Tuberculosis Testing Sites and Schedules: Refer to Appendix.

(Revised: 11-02-15)



#### BOARD OF EDUCATION

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Elizabeth Barry Student Board Member

# TO:All Employees, Substitutes, and Short-Term TempsHR-03DATE:September 21, 2015DEPARTMENT: Human Resource ServicesPREPARED BY:Christina VillegasAPPROVED:SUBJECT:TB EXPIRATION AND TB RESULTS REQUEST

This memo is sent as a reminder and to advise that as a District employee you are required to have current Tuberculosis (TB) assessment records on file at the Human Resource (HR) Services office.

TB risk assessment clearances must be repeated every four (4) years, in accordance with Education Code §49406 and Assembly Bill 1667. Verification of a negative TB risk assessment is a legal requirement for continued employment.

In order to fulfill this requirement of a TB clearance, employees may visit their own physician, doctor, and/or provider to obtain this clearance of their TB risk assessment results. Enclosed please find the two-page "Adult Tuberculosis (TB) Risk Assessment Questionnaire" form to provide to the health care provider.

To update personnel records with current TB results, employees may submit by either:

- Faxing the TB results into our office at 916-399-2016, ATTENTION: Human Resource (HR) Services; Emailing the TB results to <u>HRTB@scusd.edu</u>
- They may also drop off their TB risk assessment results in person to Human Resources. When they visit the HR office, please make sure they bring an Employee ID and/or provide the last four digits of their SS# to ensure verification with our records and that their TB clearance information has been updated properly.

Thank you, in advance, for your cooperation. Should you have any questions, please feel free to contact this office at (916) 643-9050.

cc: Customer Service Specialist(s) Human Resources

#### HUMAN RESOURCE SERVICES

P.O. Box 246870 • Sacramento, CA 95824-6870 (916) 643-9050 • FAX (916) 399-2016

José L. Banda, Superintendent Cancy McArn, Chief Human Resource Officer Christina Villegas, Director II



# Public Health

.....

#### Adult Tuberculosis (TB) Risk Assessment Questionnaire<sup>1</sup>

(To satisfy California Education Code Section 49406 and Health and Safety Code Sections 121525-121555) To be administered by a licensed health care provider (physician, physician assistant, nurse practitioner, registered nurse)

Name:	Date of Risk Assessment:
Date of Birth:	

History of positive TB test or TB disease Yes 🗌 No 🗌

If yes, a symptom review and chest x-ray (if none performed in previous 6 months) should be performed at initial hire.\* If no, continue with questions below.

If there is a "Yes" response to any of the questions 1-5 below, then a tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA) should be performed. A positive test should be followed by a chest x-ray, and if normal, treatment for TB infection considered.

RIS	k Factors		
1.	One or more signs and symptoms of TB (prolonged cough, coughing up blood, fever, night sweats, weight loss, excessive fatigue) Note: A chest x-ray and/or sputum examination may be necessary to rule out infectious TB. <sup>2</sup>	Yes 🗆	No 🗆
2.	Close contact with someone with infectious TB disease	Yes 🗆	No 🗆
3.	Birth in high TB-prevalence country** (**Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.)	Yes 🗌	No 🗆
4.	Travel to high TB-prevalence country** for more than 1 month (**Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.)	Yes 🗌	No 🗆
5.	Current or former residence or work in a correctional facility, long-term care facility, hospital, or homeless shelter	Yes 🗆	No 🗆

\*Once a person has a documented positive test for TB infection that has been followed by an x-ray that was deemed free of infectious TB, the TB risk assessment is no longer required.

<sup>1</sup>Adapted from a form developed by Minnesota Department of Health TB Prevention and Control Program and Centers for Disease Control and Prevention.

<sup>2</sup> Centers for Disease Control and Prevention (CDC). Latent Tuberculosis Infection: A Guide for Primary Health Care Providers. 2013.

(http://www.cdc.gov/tb/publications/LTBI/default.htm)

TCB-01 (12/14) Effective January 1, 2015





#### ADULT TUBERCULOSIS (TB) RISK ASSESSMENT QUESTIONNAIRE

(To satisfy California Education Code Section 49406 and Health and Safety Code Sections 121525-121555)

#### **CERTIFICATE OF COMPLETION**

To be signed by the licensed health care provider completing the risk assessment and/or examination

Name:		

Date: \_\_\_\_

Date of Birth: \_\_\_\_\_

The above named patient has submitted to a tuberculosis risk assessment. The patient does not have risk factors, or if tuberculosis risk factors were identified, the patient has been examined and determined to be free of infectious tuberculosis.

Health Care Provider Signature				
Please Print Health Care Provider Name			Title	
Office Address: Street	City	State	Zip Code	
Telephone		Fax		

TCB-01 (12/14) Effective January 1, 2015

Human Resource Services



## **Employee Tuberculin Testing Questionnaire**

This form should be filled out by employees who have had a previous positive tuberculin skin test and who have a negative chest X-ray report on file in Human Resource Services.

The employee needs to answer whether the following symptoms have been experienced since the last *negative* chest X-ray:

	Yes	No
• a chronic cough lasting at least three weeks		
<ul> <li>persistent night sweats</li> </ul>		
• coughed up or spit up blood		
involuntary weight loss		
• a persistent fever		

I, \_\_\_\_\_\_ (Print Name), understand that tuberculosis clearance is essential to my employment and failure to comply with mandatory tuberculosis testing may result in my removal from work, as well as be grounds for disciplinary action. Therefore, in accordance with Education Code §49406 and Governing Board Policies, I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Employee

Social Security Number

Work Site

Date

## APPENDIX J

Annual Employee Notification Sexual Harassment Uniform Complaint Procedures Williams Complaint Procedures





# Annual Employee Notifications

(All Employees, Substitutes, and Short-Term Temporary)

## 2015-16



#### **Board of Education**

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#### Human Resource Services

Cancy McArn, Chief Human Resources Officer Roxanne Findlay, Director III, Human Resource Services Tiffany Smith-Simmons, Director II, Human Resource Services Christina Villegas, Director II, Human Resource Services Cindy Nguyen, Director II, Employee Relations, Human Resource Services

(Revised: 08-04-15)

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### NON-DISCRIMINATION IN EMPLOYMENT (BP/AR 4030)

The Governing Board prohibits unlawful discrimination, intimidation, bullying against and/or harassment of district employees and job applicants on the basis of actual or perceived race, color, national origin, ethnicity, nationality, ancestry, religious creed, religion, age, marital status, pregnancy, physical or mental disability, disability, gender identity, gender expression, medical condition, veteran status, genetics, gender or sexual orientation, sex, or association with a person or a group with one or more of these actual or perceived characteristics at any district site and/or activity. The Board also prohibits retaliation against any district employee or iob applicant who complains, testifies, or in any way participates in the district's complaint procedures instituted pursuant to this policy. Any district employee who engages in or permits unlawful discrimination or harassment shall be subject to disciplinary action up to and including dismissal. A district employee shall be deemed to have permitted unlawful discrimination or harassment if he/she fails to report an observed incident of discrimination and/or harassment, whether or not the victim complains. Any employee or applicant for employment who feels that he/she or another individual in the district has been subjected to the above should immediately contact his/her supervisor, principal, other district administrator, or the Superintendent or designee (Chief Human Resources Officer; West Area HR Director, Central Area HR Director, or East Area HR Director at (916) 643-9050).

#### CHILD ABUSE REPORTING REQUIREMENTS (BP/AR 5141.4)

Section 11166 of the Penal Code requires any childcare custodian, health practitioner, fire fighter, animal control officer, or humane society officer, employee of a child protective agency or child visitation monitor, who has knowledge of or observes a child in his/her professional capacity or within the scope of his/her employment whom he/she knows or reasonably suspects has been the victim of child abuse to report the known or suspected instance of child abuse, to a child protective agency immediately or as soon as practically possible by telephone, and to prepare and send a written report thereof within 36 hours of receiving the information concerning the incident. "Child care custodian" includes teachers; an instructional aide, a teacher's aide, or a teacher's assistant employed by any public or private school, who has been trained in the duties imposed by this article, if the school district has so warranted to the State Department of Education; a classified employee of any public school who has been trained in the duties imposed by this article, if the school has so warranted to the State Department of Education; administrative officers, supervisors of child welfare and attendance, or certificated pupil personnel employees of any public or private school; administrators of a public or private day camp; administrators and employees of public or private youth centers, youth recreation programs, and youth organizations; administrators and employees of public or private organizations whose duties require direct contact and supervision of children and who have been trained in the duties imposed by this article; licensees, administrators, and employees of licensed community care or child day care facilities; head start teachers; licensing workers or licensing evaluators; public assistance workers; employees of a child care institution including, but not limited to, foster parents, group home personnel, and personnel of residential care facilities; social workers, probation officers, or parole officers; employees of a school district police or security department; any person who is an administrator or a presenter

of, or a counselor in, a child abuse prevention program in any public or private school; a district attorney investigator, inspector, or family support officer unless the investigator, inspector, or officer is working with an attorney appointed pursuant to Section 317 of the Welfare and Institutions Code to represent a minor; or a peace officer, as defined in Chapter 4.5 (commencing with Section 830) of Title 3 of Part 2 of this code, who is not otherwise described in this section. "Health practitioner" includes physicians and surgeons, psychiatrists, psychologists, dentists, residents, interns, podiatrists, chiropractors, licensed nurses, dental hygienists, optometrists, or any other person who is licensed under Division 2 (commencing with Section 500) of the Business and Professions Code; marriage, family, and child counselors; emergency medical technicians I or II, paramedics, or other persons certificated pursuant to Division 2.5 (commencing with Section 1797) of the Health and Safety Code: psychological assistants registered pursuant to Section 2913 of the Business and Professions Code; marriage, family, and child counselor trainees as defined in subdivision (c) of Section 4980.03 of the Business and Professions Code; unlicensed marriage, family, and child counselor interns registered under Section 4980.44 of the Business and Professions E 5141.4(b) Code; state or county public health employees who treat minors for venereal disease or any other condition; coroners; paramedics; and religious practitioners who diagnose, examine, or treat children. "Child visitation monitor" means any person as defined in Section 11165.15.

## EMPLOYEE USE OF TECHNOLOGY (BP/AR 4040)

Employees shall be responsible for the appropriate use of technology and shall use the district's electronic resources only for purposes related to their employment. Such use is a privilege that may be revoked at any time. Employees should be aware that computer files and communications over electronic networks, including e-mail and voice mail, are not private. This technology should not be used to transmit confidential information about students, employees, or district affairs. To ensure proper use, the Superintendent or designee may monitor the district's technological resources, including email and voice mail systems, at any time without advance notice or consent. If passwords are used, they must be known to the Superintendent or designee so that he/she may have system access when the employee is absent. The Superintendent or designee shall establish administrative regulations which outline employee obligations and responsibilities related to the use of technology. Employees who fail to abide by these regulations shall be subject to disciplinary action, revocation of the user account, and legal action as appropriate. The Superintendent or designee may establish guidelines and limits on the use of technological resources. He/she shall ensure that all employees using these resources receive copies of related policies, regulations, and guidelines. Employees shall be asked to acknowledge in writing that they have read and understood these policies, regulations, and guidelines. In the event that the use of an electronic resource affects the working conditions of one or more employees, the Superintendent or designee shall notify the employees' exclusive representative. Employees are authorized to use the district's on-line services in accordance with user obligations and responsibilities specified below:

 The employee in whose name an on-line services account is issued is responsible for its proper use at all times. Users shall keep personal account numbers, home addresses, and telephone numbers private. They shall use the system only under their own account number.

- 2. Employees shall use the system only for purposes related to their employment with the district. Commercial, political, and/or personal use of the system is strictly prohibited, including computer games, personal email/banking, and personal on-line activities. The use of signature lines should include name, title, phone number, etc. Confidentiality notice/disclaimers are allowed. No taglines, slogans, or quotes are to be included in the signature lines or in the body of the message. The district reserves the right to monitor any on-line communications for improper use.
- 3. Users shall not use the system to promote unethical practices or any activity prohibited by law or district policy.
- 4. Users shall not transmit material that is threatening, obscene, disruptive, or sexually explicit, or that could be construed as harassment or disparagement of others based on their race, national origin, sex, sexual orientation, age, disability, religion, or political beliefs.
- 5. Users shall not download pictures, images, music files or videos, or host for uploading copyrighted files.
- Copyrighted material may not be placed on the system without the author's permission. Users may download copyrighted material for their own use only and only in accordance with copyright laws.
- Vandalism will result in the cancellation of user privileges. Vandalism includes uploading, downloading, or creating computer viruses and/or any malicious attempt to harm or destroy district equipment, materials, or the data of any other user.
- Users shall not read other users' mail or files; they shall not attempt to interfere with other users' ability to send or receive electronic mail, nor shall they attempt to read, delete, copy, modify, or forge other users' mail.
- 9. Users are encouraged to keep messages brief.
- 10. Users shall report any security problem or misuse of the network to the Superintendent or designee.

## SEXUAL HARASSMENT (BP/AR 4119.11)

The Governing Board prohibits sexual harassment in the working environment of district employees or applicants by any person in any form. Employees who permit or engage in such harassment may be subject to disciplinary action up to and including dismissal. Any employee or applicant for employment who feels that he/she or another individual in the district is being sexually harassed should immediately contact his/her supervisor, principal, other district administrator, or the Superintendent or designee (Chief Human Resources Officer; West Area HR Director, Central Area HR Director, or East Area HR Director at (916) 643-9050) in order to obtain procedures for reporting a complaint. Complaints of harassment can be filed in accordance with AR 4031 - Complaints Concerning Discrimination in Employment. Any supervisor who receives a harassment complaint shall notify the Superintendent or designee, who shall ensure that the complaint is appropriately investigated. The district prohibits retaliatory behavior against any complainant or any participant in the complaint process. Each complaint of sexual harassment shall be promptly investigated in a way that respects the privacy of all parties concerned. Prohibited sexual harassment includes, but is not limited to, unwelcome sexual advances, requests for sexual favors, or other verbal, visual, or physical conduct of a sexual nature made by someone from or in the work or educational setting when:

 Submission to the conduct is made either expressly or by implication in term or condition of any individual's employment.

- Submission to or rejection of such conduct by an individual is used as the basis for an employment decision affecting the individual.
- 3. The conduct has the purpose or effect of unreasonably interfering with an individual's work or academic performance or of creating an intimidating, hostile, or offensive working or educational environment or of adversely affecting the student or employee's performance, evaluation, advancement, assigned duties, or any other condition of education, employment, or career development.
- 4. Submission to, or rejection of, the conduct by the individual is used as the basis for any decision affecting the individual regarding benefits and services, honors, programs, or activities available at or through the educational institution.

Other examples of sexual harassment, whether committed by a supervisor or any other employee, are:

- 1. Unwelcome leering, sexual flirtations, or propositions.
- 2. Unwelcome sexual slurs, epithets, threats, verbal abuse, derogatory comments, or sexually degrading descriptions.
- Graphic verbal comments about an individual's body, or overly personal conversation.
- 4. Sexual jokes, stories, drawings, pictures, or gestures.
- Spreading sexual rumors.
- 6. Touching an individual's body or clothes in a sexual way.
- 7. Cornering or blocking of normal movements.
- 8. Displaying sexually suggestive objects in the educational or work environment.
- Any act of retaliation against an individual who reports a violation of the district's sexual harassment policy or who participates in the investigation of a sexual harassment complaint.

Each principal and supervisor has the responsibility of maintaining an educational and work environment free of sexual harassment. This responsibility includes discussing the district's sexual harassment policy with his/her students and/or employees and assuring them that they are not required to endure sexually insulting, degrading, or exploitative treatment or any other form of sexual harassment. The District prohibits discrimination, harassment, intimidation, and bullying based on actual or perceived ancestry, age, color, disability, gender, gender identity, gender expression, nationality, race or ethnicity, religion, sex, sexual orientation, or association with a person or a group with one or more of these actual or perceived characteristics.

#### DOMESTIC VIOLENCE

The Sacramento City Unified School District is committed to creating and maintaining a safe work environment free of all forms of harassment and violence, and charges every employee with the responsibility of contributing toward that environment. Domestic violence means intentionally or recklessly causing or attempting to cause injury or harm, or placing any family member, domestic partner, or cohabitant in reasonable fear of injury. Workers who must leave their jobs to protect themselves or their children from domestic violence - "good cause" under the law - are eligible for unemployment benefits. Victims of domestic violence are protected against discharge or discrimination for taking time off to seek protection orders or other judicial relief to help secure their own or their children's safety or welfare. The employee must give reasonable notice, if feasible, The Sacramento City Unified School District may require certification of domestic violence: a police report, protection order, and documentation from court or from a medical professional,

domestic violence advocate, or counselor. To the extent the law allows, the Sacramento City Unified School District must maintain the employee's confidentiality. (*California Labor Code* §230-230.1, as amended by 2000 Cal. Stat. 487) The Sacramento City Unified School District declares that violent conduct of any kind will not be condoned or tolerated. Discipline up to and including termination of employment will occur to any employee who threatens or abuses others on work time or using work resources. Employees convicted of a crime as a result of domestic violence may be subject to corrective or disciplinary procedures, up to and including termination, when work performance or normal operation of the workplace is affected.

### UNIFORM COMPLAINT (UC) PROCEDURES (BP/AR 1312.3)

The Governing Board recognizes that the district is responsible for complying with applicable state and federal laws and regulations governing educational programs. (T5 CCR 4620) The district shall follow uniform complaint procedures when addressing complaints alleging unlawful discrimination, harassment, intimidation, and/or bullying based on actual or perceived characteristics such as, age, sex, sexual orientation, or on the basis or a person's association with a person or group with one or more of these actual or perceived characteristics, gender, gender expression, gender identity, ethnic group identification, ethnicity, race, ancestry, nationality, national origin, religion, color, or mental or physical disability, or in any program or activity that receives or benefits from state financial assistance. Uniform complaint procedures shall also be used when addressing complaints alleging failure to comply with state and/or federal laws in adult education, consolidated categorical aid programs, migrant education, vocational education, child care and development programs, child nutrition programs, special education programs, federal school safety planning requirements and pertaining to prohibitive requirements to pay pupil fees for participation in an education activity. Additionally, the district shall use uniform complaint procedures to address complaints regarding insufficiency of instructional materials, emergency or urgent facilities conditions that pose a threat to the health and safety of pupils or staff, and/or teacher vacancy or misassignment issues as provided in Administrative Regulation 1312.4. The Board encourages the early, informal resolution of complaints at the site level whenever possible. Upon receipt of a written complaint from an individual, public agency or organization, uniform complaint procedures shall be initiated. The Superintendent or designee shall distribute full information about these procedures. The Board acknowledges and respects every individual's right to privacy. Discrimination complaints shall be investigated in a manner that protects the confidentiality of the parties and the facts. This includes keeping the identity of the complainant confidential except to the extent necessary to carry out the investigation or proceedings, as determined by the Superintendent or designee on a case-by-case basis. The Board prohibits retaliation in any form for participation in complaint procedures, including but not limited to the filing of a complaint or the reporting of instances of discrimination. Such participation shall not in any way affect the status, grades or work assignments of the complainant. The Board recognizes that a neutral mediator can often suggest a compromise that is agreeable to all parties in a dispute. In accordance with uniform complaint procedures, whenever all parties to a complaint agree to try resolving their problem through mediation, the Superintendent or designee shall initiate mediation. The Superintendent or designee shall ensure that mediation results are consistent with state and federal laws and regulations.

The Chief Human Resources Officer, Human Resource Services, will receive and investigate complaints and ensure district compliance with the law. The *Chief Human Resources Officer* will also assist complainants in understanding that they may pursue other remedies including actions before civil court or other public agencies. (T5 CCR 4621, 4622) <u>Procedures shall be</u> available free of charge. (T5 CCR 4622)

#### Procedures

The following procedures shall be used to address all complaints which allege that the district has violated federal or state laws or regulations governing educational programs. Compliance officers shall maintain a record of each complaint and subsequent related actions, including all information required for compliance with the T5 CCR 4632. All parties involved in allegations shall be notified when a complaint is filed, when a complaint meeting or hearing is scheduled, and when a decision or ruling is made.

Step 1 Filing of Complaint: Any individual, public agency, or organization may file a written complaint of alleged noncompliance by the district. Complaints alleging unlawful discrimination may be filed by a person who alleges that he/she personally suffered unlawful discrimination or by a person who believes that an individual or any specific class of individuals has been subjected to unlawful discrimination. The complaint must be initiated no later than six months from the date when the alleged discrimination occurred or when the complainant first obtained knowledge of the facts of the alleged discrimination. (T5 CCR 4632) The complaint shall be presented to the compliance officer who shall maintain a log of complaints received, providing each with a code number and a date stamp. If a complainant is unable to put a complaint in writing due to conditions such as illiteracy or other disabilities, district staff shall help him/her to file the complaint. (T5 CCR 4600)

Step 2 Mediation: Within three days of receiving the complaint, the compliance officer may informally discuss with the complainant the possibility of using mediation. If the complainant agrees to mediation, the compliance officer shall make all arrangements for this process. Before initiating the mediation of a discrimination complaint, the compliance officer shall ensure that all parties agree to make the mediator a party to related confidential information. If the mediation process does not resolve the problem within the parameters of law, the compliance officer shall proceed with his/her investigation of the complaint. The use of mediation shall not extend the district's timelines for investigating and resolving the complaint unless the complainant agrees in writing to such an extension of time. (T5 CCR 4631) Step 3 Investigation of Complaint: The compliance officer shall make all reasonable efforts to hold an investigative meeting within five days of receiving the complaint or an unsuccessful attempt to mediate the complaint. This meeting shall provide an opportunity for the complainant and/or his/her representative to repeat the complaint orally. The complainant and/or his/her representative and the district's representatives shall have an opportunity to present information relevant to the complaint. Parties to the dispute may discuss the complaint and question each other or each other's witnesses. (T5 CCR 4631)

<u>Step 4 Response</u>: Within 60 days of receiving the complaint, the compliance officer shall prepare and send to the complainant a written report of the district's investigation and decision, as described in Step 5 below, unless the complainant agrees in writing to extend the time line. (T5 CCR 4631)

<u>Step 5 Final Written Decision</u>: The report of the district's decision shall be in writing and sent to the complainant. (T5 CCR 4631) The report of the district's decision shall be written in English and in the language of the complainant whenever feasi-

Responsibility for UC Procedures

ble or required by law. If it is not feasible to write this report in the complainant's primary language, the district shall arrange a meeting at which a community member of the complainant's choosing will interpret it for the complainant. This report shall include:

- 1. The findings and disposition of the complaint, including corrective actions, if any. (T5 CCR 4631)
- 2. The rationale for the above disposition. (T5 CCR 4631)
- Notice of the complainant's right to appeal the decision to the California Department of Education, and procedures to be followed for initiating such an appeal. (T5 CCR 4631)
- For discrimination complaints, notice that the complainant must wait until 60 days have elapsed from the filing of an appeal with the California Department of Education before pursuing civil law remedies. (T5 CCR 4631; Education Code 262.3)
- A detailed statement of all specific issues that were brought up during the investigation and the extent to which these issues were resolved.

If an employee is disciplined as a result of the complaint, this report shall simply state that effective action was taken and that the employee was informed of district expectations. The report shall not give any further information as to the nature of the disciplinary action.

**Note:** In accordance with California Code of Regulations, Title 5, complaints alleging discrimination, harassment, intimidation and/or bullying must be filed within six (6) months from the date the alleged discrimination, harassment, intimidation and/or bullying complaint occurred.

### Appeals to the

#### **California Department of Education**

If dissatisfied with the district's decision, the complainant may appeal in writing to the California Department of Education within 15 days of receiving the district's decision. For good cause, the Superintendent of Public Instruction may grant an extension for filing appeals. (T5 CCR 4652) When appealing to the California Department of Education, the complainant must specify the reason(s) for appealing the district's decision and must <u>include</u> <u>a copy of the locally filed complaint and the district's decision</u>. (T5 CCR 4652) The California Department of Education may directly intervene in the complaint without waiting for action by the district when one of the conditions listed in T5 CCR 4650, exists. In addition, the California Department of Education may also intervene in those cases where the district has not taken action within 60 calendar days of the date the complaint was filed with the district.

#### **Civil Law Remedies**

A complainant may pursue available civil law remedies outside of the district's complaint procedures. Complainants may seek assistance from mediation centers or public/private interest attorneys. Civil law remedies under state or federal discrimination, harassment, intimidation or bullying laws, if applicable, that may be imposed by a court include, but are not limited to, injunctions and restraining orders. For discrimination complaints, however, a complainant must wait until 60 days have elapsed from the filing of an appeal with the California Department of Education before pursuing civil law remedies. The moratorium does not apply to injunctive relief and is applicable only if the district has appropriately, and in a timely manner, apprised the complainant of his/her right to file a complaint in accordance with T5 CCR 4622.

#### COMPLAINTS CONCERNING DISCRIMINATION IN EMPLOYMENT (AR 4031)

The Governing Board designates the Associate Superintendent, Human Resource Services, as Coordinator(s) for Nondiscrimination in Employment. The following procedures shall be followed when an employee has a complaint alleging that a specific action, policy, procedure, or practice discriminates against him/her on any basis specified in the district's nondiscrimination policies.

- The complaint must be initiated within 30 days after a complainant knew, or should have known, of the alleged discrimination.
- All parties involved in allegations of discrimination shall be notified when a complaint is filed, when a complaint meeting or hearing is scheduled, and when a decision or ruling is made. The complainant also shall be notified of his/her right to appeal the decision to the next level.
- When a complaint is brought against the individual responsible for the complaint process at any level, the complainant may address the complaint directly to the next appropriate level.
- Meetings related to a complaint shall be held at times subject to the collective bargaining agreement and least likely to interfere with school schedules and operations.
- For the protection of the complainant and the district, complaint proceedings shall be kept confidential insofar as appropriate.
- All documents, communications, and records dealing with the complaint shall be placed in a district complaint file, which is a separate file from the district's personnel file.
- No retaliation shall be taken in any form for the filing of a complaint, the reporting of instances of discrimination, or for participation in the complaint procedures. Such participation shall not in any way affect the status or work assignments of the complainant.
- 8. Time limits specified in these procedures may be revised only by written mutual agreement of all parties involved. A reasonable period of time to conduct an investigation will depend upon the quantity of witnesses and complexity of the investigation. If the district fails to respond within a specified or adjusted time limit, a complainant may proceed to the next level. If a complainant fails to take the complaint to the next step within the prescribed time, the complaint shall be considered settled at the preceding step.

Level I: The complainant shall first meet informally with the principal of the school or department where the allegedly discriminatory act occurred. A complaint regarding discrimination away from a school site should be discussed informally with an administrator selected by the Superintendent. If the complainant's concerns are not clear or cannot be resolved through informal discussion, the principal or other administrator shall prepare, within 10 working days, a written summary of his/her meeting(s) with the complainant. This report shall be available if requested by the nondiscrimination coordinator.

**Level II:** If a complaint cannot be satisfactorily resolved at Level I, the complainant may submit a formal written complaint to the district nondiscrimination coordinator within 10 days of his/her attempt to resolve the complaint informally. The written complaint shall include the following: (1) the complainant's signature or that of his/her representative; (2) the complainant's signature or that of his/her representative; (3) the name and address of the district staff member who committed the alleged violation; (4) a description of the allegedly discriminatory act(s) or omission(s); (5) the discriminatory basis alleged; (6) a specific description of the time, place, nature, participants in, and wit-

nesses to the alleged violation; (7) other pertinent information which may assist in investigating and resolving the complaint.

The nondiscrimination coordinator shall assign a staff member to assist the complainant with this writing if such help is needed. The coordinator shall respond to the complainant in writing within a reasonable period of time. The coordinator shall conduct any investigation necessary to respond to the complaint, including discussion with the complainant, person(s) involved, appropriate staff members and students, and review of the Level I report and all other relevant documents.

Level III: If the complaint cannot be resolved at Level II, the complainant may present the complaint to the Superintendent or designee within 10 days. The Superintendent or designee shall review the Level II investigation file, including the written complaint and all responses from district staff, and may conduct a further investigation if he/she finds it necessary to do so. The Superintendent or designee shall respond to the complainant in writing within a reasonable period of time.

Level IV: If the matter is not resolved at Level III, the complainant may file a written appeal to the Board within 10 working days after receiving the Level III response. The Superintendent or designee shall provide the Board with all information presented at previous levels. The Board shall grant the hearing request for the next regular Board meeting for which it can be placed on the agenda. Any complaint against a district employee shall be conducted in closed session as a personnel matter. The Board shall render its decision within a reasonable period of time. The Board may appoint a hearing panel to review the complaint and previous decisions and make recommendations to the Board. The panel shall hear the appeal and render its decision within 10 working days.

Other Remedies: Complainants may appeal the district's action to the California Department of Education. The Superintendent or designee shall ensure that complainants are informed that injunctions, restraining orders, and other civil law remedies may also be available to them. This information shall be published with the district's nondiscrimination complaint procedures and included in any related notices.

#### ANIMALS ON DISTRICT PROPERTY

It has come to our attention that there is a need to clarify regulations regarding animals. With the exception of the following three items, no animals are allowed at school sites or administrative facilities: (1) seeing-eye dogs and service dogs, (2) Board Policy 6163.2, "animals may be brought to school only for educational purposes, subject to rules and precautions specified in administrative regulations related to health, safety and sanitation," and (3) dogs used for law enforcement purposes.

#### TOBACCO-FREE SCHOOLS (BP/AR 3513.3)

The Governing Board recognizes the health hazards associated with tobacco products, including the breathing of second-hand smoke, and desires to provide a healthy environment for students and staff. Employees are encouraged to serve as models for good health practices that are consistent with the district's instructional programs. In accordance with state and federal law, smoking is prohibited in all district facilities and vehicles. The Board further prohibits the use of tobacco products at all times on district grounds. This prohibition applies to all employees, students, and visitors at any activity or athletic event on property owned, leased, or rented by or from the district. The Superintendent or designee shall inform students, parents/guardians, employees, and the public about this policy and related procedures. Signs prohibiting the use of tobacco shall be prominently displayed at all entrances to school property. The Superintendent or designee shall maintain a list of clinics and other resources which may assist individuals who wish to stop using tobacco products.

#### **Employee Notifications**

The Superintendent or designee shall notify employees of the district's tobacco-free schools policy. The notification shall also inform them of:

- Their need to abide by district policy as a condition of employment.
- The dangers of tobacco use in the workplace, including its threat to the health and safety of employees, students, and the public.
- Available resources which may help employees stop using tobacco.
- Possible disciplinary actions in accordance with Board policy, state law, and applicable collective bargaining agreements.

#### Enforcement Procedures for Visitors

A visitor who smokes on district property shall be informed of the district's tobacco-free schools policy and asked to refrain from smoking. If the person fails to comply with this request, the following actions may ensue:

- The matter may be referred to the Superintendent or designee responsible for the area or the event.
- 2. The Superintendent or designee may direct the person to leave school property.
- If necessary, the Superintendent or designee may request local law enforcement assistance in removing the person from school premises.
- If the person repeatedly violates the tobacco-free schools policy, the Superintendent or designee may prohibit him/her from entering district property for a specified period of time.

#### ENVIRONMENTAL SAFETY (BP/AR 3514)

The Governing Board believes that students and employees have the right to learn and work in a safe, clean, and healthy environment. The district has an obligation to locate and reduce or eliminate potential risks to health and the environment, to use environmental resources in a responsible way, and to educate students and staff about environmental issues. The Superintendent or designee shall establish regulations to guard against environmental hazards. Students and staff are encouraged to report any unsafe conditions they may observe.

#### Air Quality

The Board recognizes that clean air contributes to a favorable learning environment for students, productivity for staff, and the health of all school occupants. Adequate ventilation, appropriate housekeeping and maintenance procedures, and the removal of pollution sources are all necessary to achieve good indoor air quality. The Superintendent or designee shall ensure that staff implements measures that will maintain good air quality in classrooms and offices. Air quality shall be considered in the setting and architectural design of new or remodeled facilities and in the selection of building materials and furnishings.

The Superintendent or designee shall ensure that the following measures are taken in order to reduce indoor air contaminants:

 Heating, ventilating, and air conditioning systems shall be operated, inspected, and maintained in accordance with law. School buildings shall be inspected annually to ensure they have adequate ventilation systems, properly

maintained so as to preclude the buildup of mold, mildew, and air contaminants. Filters shall be changed frequently.

- Low-emission cleaning products shall be used whenever possible, and custodial duties that require polluting products shall be performed after classes are dismissed for weekends or vacations.
- Paints, adhesives, and solvents shall be used and stored in well-ventilated areas; these items shall be purchased in small guantities to avoid storage exposure.
- 4. Exterior wall and foundation cracks and openings shall be sealed to control exposure to radon.
- Water-damaged ceiling tiles, carpet, and other building materials shall be removed.

#### Pest Management

Sanitary measures shall be enforced and buildings regularly cleaned and repaired in order to prevent infestations, minimize the use of pesticides, and eliminate routine spraying. The Superintendent or designee shall ensure that the district follows integrated pest management procedures so as to use the most appropriate and least toxic method of control.

In determining when to control pests and whether to use mechanical, physical, chemical, cultural, or biological means, the district shall follow the principles of integrated pest management. Procedures shall include the following:

- The choice of using a pesticide will be based on a review of all other available options and a determination that these options are not acceptable or not feasible. The full range of alternatives, including no action, will be considered.
- Selected non-chemical pest management methods will be used whenever possible to provide the desired control. Cost or staffing considerations alone will not be adequate justification for use of chemical control agents.
- The pest and the site of infestation shall be carefully identified. Strategies for managing the pest will be influenced by the pest species, and whether that species poses a threat to people, property, or the environment.
- When it is determined that a pesticide must be used, the least hazardous material will be chosen and applied in accordance with law.
- Staff, students, and parents/guardians shall receive information about the district's integrated pest management policy and procedures and notification of any upcoming pesticide treatments. Notice of upcoming pesticide treatments shall also be posted in areas designated by the Superintendent or designee. (Reference: Education Code 48980.3, 17612)
- Records of pesticide use shall be maintained at a designated district office.
- 7. Pesticide purchases shall be limited to amounts authorized by the Superintendent or designee for use during the year. Pesticides shall be stored in a secure site not accessible to students or unauthorized staff; they shall be stored and disposed of in accordance with EPA-registered label directions and state regulations.
- Persons applying pesticides shall follow label precautions and shall be trained in the principles and practices of integrated pest management.

#### Lead Exposure Reduction

The Board recognizes that exposure to lead is especially damaging to young children, and that hazardous levels of lead may sometimes be present in paint, soil, or drinking water. In order to minimize any harmful exposure, the district shall follow guidelines recommended by the Department of Health Services and specified in administrative regulations. In accordance with law, the Superintendent or designee shall inform school staff and parents/guardians of the results of any lead survey conducted by the Department of Health Services.

The following steps shall be taken to minimize potential exposure to lead:

- Lead exposure hazards shall be evaluated before any renovation or remodeling is begun, and children shall not be allowed in or near buildings in which these activities may create lead dust. Contractors and workers shall comply with state and federal standards related to the handling and disposal of lead debris and the clean-up and containment dust within the construction area.
- School drinking water fountains shall be monitored for the amount of lead in the water, and corrective action shall be taken when necessary.
- 3. The district shall provide parents/guardians and students with information about the prevention of lead poisoning, and may refer parents/guardians to their children's health care providers or local health department for blood lead testing of children six months through six years of age.
- Remedial action to abate existing lead hazards shall be taken only by personnel qualified in accordance with law.

### **Asbestos Testing and Abatement**

Maintenance staff shall be trained in the location, identification, proper cleaning, and ongoing maintenance of asbestoscontaining materials and in the removal and decontamination of small amounts of such materials when needed to repair pipes or perform similar duties. Any more extensive asbestos abatement work shall be done by state-certified asbestos abatement contractors in compliance with state and federal standards. The district's complete, updated management plan for material containing asbestos in school buildings shall be available for inspection in district and school offices during normal business hours. Parent, teacher, and employee organizations shall annually be informed of the availability of this plan. (40 CFR 763.93)

#### Other Environmental Safety Precautions

Principals or their designees shall enforce school rules designed to:

- 1. Prevent the accumulation of flammable, noxious, or otherwise dangerous materials unless adequate safeguards are provided.
- 2. Keep all school facilities free of debris.
- Keep walkways at all times open to pedestrian traffic and clear of obstructions.

#### HAZARDOUS SUBSTANCES (BP/AR 3514.1)

The Governing Board recognizes that potentially hazardous substances are used in the daily operations of our schools. The Superintendent or designee shall ensure these substances are inventoried, used, stored, and regularly disposed of in a safe and legal manner. Insofar as possible, the Superintendent or designee shall minimize the quantities of hazardous substances stored on school property and shall substitute less dangerous materials for hazardous substances.

## HAZARDOUS SUBSTANCES DISPOSAL / HAZARD COMMUNICATION PROGRAM

The disposal of chemicals may be accomplished in accordance with removal and disposal systems established by the County Office of Education or by permission of the County Superintendent of Schools.

The Superintendent or designee shall develop, implement, and monitor a written hazard communication program in accordance with state law. As part of this program, he/she shall ensure that employees are fully informed about the properties and potential hazards of substances to which they may be exposed, and that Material Safety Data Sheets are readily accessible to them. Teachers shall instruct students about the importance of proper handling, storage, disposal, and protection when using any potentially hazardous substance.

#### Hazard Communication Program

The written hazard communication program shall be available upon request to all employees and their designated representatives. The following materials are exempted from the hazard communication program and this district regulation: hazardous wastes; tobacco products; wood and wood products; manufactured articles; food, drugs, and cosmetics intended for personal consumption by employees while in the workplace; and substances used in compliance with regulations issued by the Department of Pesticide Regulation pursuant to Food and Agriculture Code 12981.

- <u>Container Labeling</u>: Except for consumer products, pesticides, alcoholic beverages, and food, drug, and additive products which are already labeled in compliance with federal law, no container of hazardous substance shall be accepted by schools or the district unless labeled by the supplier with the following information:
  - a. Identity of the hazardous substance(s).
  - b. Hazard warning statements.
  - Name and address of the chemical manufacturer or importer.

Whenever hazardous substances are transferred from their original containers to other containers, the secondary containers shall likewise be labeled with the identity and hazard warning statement.

- Material Safety Data Sheets: Upon receiving a hazardous 2. substance or mixture, the Superintendent or designee shall ensure that the manufacturer has also furnished a Material Safety Data Sheet (MSDS) as required by law. If the MSDS is missing or obviously incomplete, the Superintendent or designee shall request a new MSDS from the manufacturer and shall notify the California Occupational Safety and Health Division (Cal/OSHA) if a complete MSDS is not received. The Superintendent or designee shall maintain copies of the MSDS for all hazardous substances, and ensure that they are kept up-to-date and available to all affected employees during working hours. He/she shall review each incoming MSDS for new and significant health or safety information and shall disseminate this information to affected employees.
- <u>Employee Information and Training</u>: Employees shall receive in-service training on hazardous substances in their work area at the time of their initial assignment and whenever a new hazard is introduced into their work area. This training shall include but is not limited to (8 CCR 5194):
  - An overview of the requirements of California's Hazard Communication Regulation (Code of Regula-

tions, Title 8, Section 5194), including employee rights described therein.

- The location, availability, and content of the district's written hazard communication program.
- Information as to any operations in the employees' work area where hazardous substances are present.
- d. The physical and health effects of the hazardous substances in the work area.
- e. Techniques and methods of observation that may determine the presence or release of hazardous substances in the work area.
- f. Methods by which employees can lessen or prevent exposure to these hazardous substances, such as appropriate work practices, use of personal protective equipment, and engineering controls.
- g. Steps the district has taken to lessen or prevent exposure to these substances.
- h. Instruction on how to read labels and review the MSDS for appropriate information.
- Emergency and first aid procedures to follow if exposed to the hazardous substance(s).
- List of Hazardous Substances: For specific information about the hazardous substances known to be present in the district and schools, employees may consult the MSDS.
- 5. <u>Hazardous Non-Routine Tasks</u>: When employees are required to perform hazardous non-routine tasks, they shall first receive information about the specific hazards to which they may be exposed during this activity and the protective/safety measures which must be used. They shall also receive information about emergency procedures and the measures the district has taken to lessen the hazards, including ventilation, respirators, and the presence of another employee.
- <u>Hazardous Substances in Unlabeled Pipes</u>: Before starting to work on unlabeled pipes, employees shall contact their supervisors for information as to the hazardous substance(s) contained in the pipes, the potential hazards, and safety precautions which must be taken.
- 7. Informing Contractors: To ensure that outside contractors and their employees work safely in district buildings and schools, the Superintendent or designee shall inform these contractors of hazardous substances which are present on the site and precautions that employees may take to lessen the possibility of exposure. It shall be the contractor's responsibility to disseminate this information to his/her employees and subcontractors.

### EXPOSURE CONTROL PLAN FOR BLOOD-BORNE PATHOGENS (BP/AR 4119.42)

The Superintendent or designee shall meet state and federal standards for dealing with blood-borne pathogens and other potentially infectious materials in the workplace. The Superintendent or designee shall establish a written Exposure Control Plan designed to protect employees from possible infection due to contact with blood-borne viruses, including human immuno-deficiency virus (HIV) and hepatitis B virus (HBV). The Governing Board shall determine which employees have occupational exposure to blood-borne pathogens and other potentially infectious materials. In accordance with the district's Exposure Control Plan, employees having occupational exposure shall be offered the hepatitis B vaccination. The Superintendent or designee may exempt designated first-aid providers from pre-

exposure hepatitis B vaccination under the conditions specified by state regulations. Any employee not identified as having occupational exposure in the district's exposure determination may petition to be included in the district's employee in-service and hepatitis B vaccination program. Any such petition should be submitted to the Superintendent or designee who shall evaluate the request and notify the petitioners of his/her decision. The Superintendent or designee may deny a request when there is no reasonable anticipation of contact with infectious material.

#### Definitions

Occupational Exposure means "reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties." Exposure Incident means "a specific eye, mouth, other mucous membrane, nonintact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties." Parenteral contact means "piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions."

#### **Exposure Control Plan**

The district's Exposure Control Plan shall contain at least the following components:

- A determination of which employees have occupational exposure to blood or other potentially infectious materials.
- A description of the schedule and method for implementing exposure control requirements, including but not be limited to:
  - a. Universal precautions.
  - b. Engineering and work practice controls.
  - c. Personal protective equipment.
  - d. Housekeeping schedules.
  - e. Hepatitis B vaccination.
  - f. Post-exposure evaluation and follow-up.
  - g. Informing employees about biohazards, including:
    - (1) Labels and signs.
    - (2) Training.
  - h. Maintenance of training and medical records.
- The district's procedure for evaluating circumstances surrounding exposure incidents.

The Exposure Control Plan shall be reviewed and updated at least annually and whenever necessary to:

- 1. Reflect new or modified tasks and procedures affecting occupational exposure.
- Reflect new or revised employee positions with occupational exposure.
- 3. Review the exposure incidents which occurred since the previous update.

The district's Exposure Control Plan shall be accessible to employees in accordance with law. It also shall be made available to the Chief or Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or his/her designee, upon request for examination and copying.

#### **Exposure Determination**

The district's Exposure Determination shall be made without regard to the use of personal protective equipment and shall include:

- All job classifications in which all employees have occupational exposure to blood-borne pathogens.
- Job classifications in which some employees have occupational exposure.
- All tasks and procedures or groups of closely related tasks and procedures in which occupational exposure occurs and which are performed by employees listed in item #2 above.

#### **Hepatitis B Vaccination**

Hepatitis B vaccinations shall be provided at no cost to those employees determined to have occupational exposure to blood and other potentially infectious materials. Employees who decline to accept the vaccination shall sign the hepatitis B declination statement as required by law. The district may exempt "designated first-aid providers" from the pre-exposure hepatitis B vaccine if:

- 1. Rendering first aid is not the primary job responsibility of the employee and is not performed on a regular basis.
- 2. The district's Exposure Control Plan provides that:
  - a. Employees report all first-aid incidents involving the presence of blood or other potentially infectious materials before the end of the work shift during which the incident occurred.
  - b. Designated first-aid providers participate in the blood-borne pathogens training program.
  - c. The full hepatitis B vaccination series shall be made available to unvaccinated first-aid providers no later than 24 hours after they render assistance in any situation involving the presence of blood or other potentially infectious material regardless of whether an exposure incident occurred.
- The district implements a procedure to ensure the above requirements are met.

#### **Protective Equipment**

The district shall provide appropriate personal protective equipment at no cost to the employee. The district shall maintain, repair, make accessible, and require employees to use and properly handle protective equipment.

#### Information and Training

The district shall provide a training program as specified by law to all employees in job classifications which have been determined to have some degree of occupational exposure. This program shall be offered at the time of initial assignment, annually thereafter, and whenever a change of tasks or procedures affects the employee's exposure. Employees who fall within the definition of designated first aid providers shall also receive training. Such training shall include the specifics of reporting first-aid incidents which involve blood or body fluids which are potentially infectious.

#### **First-Aid Incidents**

Unvaccinated designated first-aid providers must report any first-aid incident involving the presence of blood or other potentially infectious material, regardless of whether an exposure incident occurred, by the end of the work shift. The full hepatitis B vaccination series shall be made available to such employees no later than 24 hours after the first-aid incident.

#### Exposure Incidents:

#### Post-evaluation and Follow-up

All exposure incidents must be reported as soon as possible to the Superintendent or designee. Following a report of an exposure incident, the district shall provide the exposed employee

with a confidential medical evaluation and follow-up, as required by law. The district shall maintain the confidentiality of the affected employee and the exposure source during all phases of the post-exposure evaluation.

#### Records

Medical and training records shall be kept in accordance with law. Medical records shall be maintained for the duration of employment plus 30 years. Training records shall be maintained for three years from the date of training. An employee's records shall be made available to that employee and to the National Institute for Occupational Safety and Health in accordance with law. Medical records for each employee with occupational exposure will be kept confidential as appropriate and transferred or made available in accordance with law.

#### Nondiscrimination in District Programs and Activities (BP 0410)

The Governing Board is committed to equal opportunity for all individuals in education. District programs and activities shall be free from discrimination based on race, color, ancestry, national origin, ethnic group identification, age, religion, marital or parental status, physical or mental disability, sex, sexual orientation, gender, gender identity or expression, or genetic information; the perception of one or more of such characteristics; or association with a person or group with one or more of these actual or perceived characteristics.

Annually, the Superintendent or designee shall review district programs and activities to ensure the removal of any barrier that may unlawfully prevent an individual or group in any of the protected categories stated above from accessing district programs and activities, including the use of facilities. He/she shall take prompt, reasonable actions to remove any identified barrier. The Superintendent or designee shall report his/her findings and recommendations to the Board after each review.

Pursuant to 34 CFR 104.8 and 34 CFR 106.9, the Superintendent or designee shall notify students, parents/guardians, employee organizations and sources of referral and applicants for admission and employment, about the district's policy on nondiscrimination and related complaint procedures. Such notification shall be included in each announcement, bulletin, catalog, handbook or application form, or other materials distributed to these groups. (34 CFR 104.8, 106.9)

An individual filing a complaint of discrimination shall not be subjected to acts of retaliation for the purpose of interfering with any right secured by federal or state law. This includes acts of intimidation, threats, coercion, or discrimination.

The district's nondiscrimination policy and related informational materials shall be published in a format that parents/guardians can understand. In addition, when 15 percent or more of a school's students speak a single primary language other than English, those materials shall be translated into that other language.

#### Access for Individuals with Disabilities

District programs and facilities, viewed in their entirety, shall be in compliance with the Americans with Disabilities Act and any implementing standards and/or regulations.

The Superintendent or designee shall ensure that the district provides appropriate auxiliary aids and services when necessary to afford individuals with disabilities equal opportunity to participate in or enjoy the benefits of a service, program, or activity. These aids and services may include, but are not limited to, qualified interpreters or readers, assistive listening devices, note-takers, written materials, taped text, and Braille or large print materials.

Individuals with disabilities shall notify the Superintendent or principal if they have a disability that requires special assistance or services. Reasonable notification should be given prior to the school-sponsored function, program, or meeting.

### EMPLOYEES WITH INFECTIOUS DISEASE (BP 4119.41)

The Governing Board encourages each employee to inform the district as soon as possible if he/she contracts an infectious disease which creates a physical or mental disability. The Board will reasonably accommodate the needs of such individuals. The Board may reassign or grant disability leave to an employee who is unable to perform his/her job responsibilities because of illness or because the employee's illness significantly endangers his/her health or safety or the health or safety of others. No employee will be discriminated against because of his/her disability. Legal protections established for disabled persons extend to individuals significantly impaired by infectious diseases. When informed that an employee has a disabling infectious disease, the Superintendent or designee may request that the employee sign a release form to provide confidential medical information and records. In determining a reasonable accommodation of the employee's condition, the Superintendent or designee may consult with public health officials or physicians with expertise in the diagnosis and treatment of infectious disease. The Superintendent or designee may also communicate with the employee's physician regarding the employee's ability to perform the essential requirements of the job with reasonable accommodation and without posing significant health or safety risks to the employee or others. The Superintendent or designee shall prepare a confidential report which includes his/her recommendation and the medical information upon which it is based. These recommendations shall take into consideration:

- The nature of the disease and the probability of its being transmitted, including the duration and severity of the risk.
- The physical condition of the employee, including diagnosis, treatment, and prognosis of the condition.
- The actual requirements of the employee's job and the expected type of interaction with others in the school setting.

This report shall be forwarded to the Board for confidential review and action. The job assignment of an employee with a disabling infectious disease shall be reevaluated whenever there is a change in medical knowledge or in the employee's medical regimen or health which might affect his/her assignment.

#### Confidentiality

The Board and the Superintendent or designee shall ensure that employee rights to confidentiality are observed. The district shall disclose medical record information only to the extent required or permitted by law. The medical records of any employee with a disabling infectious disease shall be held in strict confidence.

### DRUG AND ALCOHOL-FREE WORKPLACE (BP 4020)

The Governing Board believes that the maintenance of drug and alcohol-free workplaces is essential to school and district operations. No employee shall unlawfully manufacture, distribute, dispense, possess, use, or be under the influence of any alcoholic beverage, drug, or controlled substance as defined in the Controlled Substances Act and Code of Federal Regulations before, during, or after school hours at school or in any other district workplace. The Superintendent or designee shall:

- Publish and give to each employee a notification of the above prohibitions. The notification shall specify the actions that will be taken against employees who violate these prohibitions. The notification shall also state that as a condition of employment, the employee will abide by the terms of this policy and notify the employer, within five days, of any criminal drug or alcohol statute conviction which he/she receives for a violation occurring in the workplace. For the purpose of this policy, "conviction" shall mean a finding of guilt, including a plea of nolo contendere, or imposition of sentence, or both, by any judicial body charged to determine violations of federal or state criminal drug or alcohol statutes.
- Establish a drug and alcohol-free awareness program to inform employees about:
  - The dangers of drug and alcohol abuse in the workplace.
  - b. The district policy of maintaining drug and alcoholfree workplaces.
  - Any available drug and alcohol counseling, rehabilitation, and employee assistance programs.
  - d. The penalties that may be imposed on employees for drug and alcohol abuse violations.
- Notify the appropriate federal granting or contracting agencies within 10 days after receiving notification, from an employee or otherwise, of any conviction for a violation occurring in the workplace.
- 4. Initiate disciplinary action within 30 days after receiving notice of a conviction for a violation in the workplace from an employee or otherwise. Such action shall be consistent with state and federal law, the appropriate employment contract, the applicable collective bargaining agreement, and district policy and practices.
- 5. Make a good faith effort to continue maintaining a drug and alcohol-free workplace through implementation of Board policy. In taking disciplinary action, the Board shall require termination when termination is required by law. When termination is not required by law, the Board shall either take disciplinary action, up to and including termination, or shall require the employee to satisfactorily participate in and complete a drug assistance or rehabilitation program approved by a federal, state, or local health, law enforcement, or other appropriate agency. The Board's decision shall be made in accordance with relevant state and federal laws, employment contracts, collective bargaining agreements, and district policies and practices.

## DRUG AND ALCOHOL-FREE WORKPLACE NOTICE TO EMPLOYEES

YOU ARE HEREBY NOTIFIED that it is a violation of Board policy for any employee at a school district workplace to unlawfully manufacture, distribute, dispense, possess, use, or be under the influence of any alcoholic beverage, drug, or controlled substance as defined in the Controlled Substances Act and Code of Federal Regulations. "School district workplace" is defined as any place where school district work is performed, including a school building or other school premises; any schoolowned or school-approved vehicle used to transport students to and from school or school activities; any off-school sites when accommodating a school-sponsored or school-approved activity or function, such as a field trip or athletic event, where students are under district jurisdiction; or during any period of time when an employee is supervising students on behalf of the district or otherwise engaged in district business.

As a condition of your continued employment with the district, you will comply with the district's policy on Drug and Alcohol-Free Workplace and will, any time you are convicted of any criminal drug or alcohol statute violation occurring in the workplace, notify your supervisor of this conviction no later than five days after such conviction.

Pursuant to the federal Omnibus Transportation Employee Testing Act (OTETA) of 1991, school bus drivers and other employees defined in the OTETA as being in safety sensitive positions shall be subject to a drug and alcohol-testing program that fulfills the requirements of the Code of Federal Regulations, Title 49, Part 382.

Pursuant to California Education Code 44836 and 45123, the Board may not employ or retain in employment persons convicted of a controlled substance offense as defined in Education Code 44011. If any such conviction is reversed and the person acquitted in a new trial or the charges dismissed, his/her employment is no longer prohibited.

Pursuant to Education Code 45123, the district may employ for classified service a person who has been convicted of a controlled substance offense only if it determines, from evidence presented, that the person has been rehabilitated for at least five years. The Board shall determine the type and manner of presentation of the evidence, and the Board's determination as to whether or not the person has been rehabilitated is final.

Pursuant to Education Code 44425, whenever the holder of any credential issued by the State Board of Education or the Commission for Teacher Preparation and Licensing has been convicted of a controlled substance offense as defined in Education Code 44011, the commission shall forthwith suspend the credential. When the conviction becomes final or when imposition of sentence is suspended, the commission shall revoke the credential.

Pursuant to Education Code 44940, the district must immediately place on compulsory leave of absence any certificated employee charged with involvement in the sale, use, or exchange to minors of certain controlled substances.

Pursuant to Education Code 44940, the district may immediately place on compulsory leave of absence any certificated employee charged with certain controlled substance offenses.

Pursuant to Education Code 45304, the district must immediately place on compulsory leave of absence any classified employee charged with involvement in the sale, use, or exchange to minors of certain controlled substances.

Pursuant to Education Code 45304, the district may immediately place on compulsory leave of absence any classified employee charged with certain controlled substance offenses.

Drug and alcohol counseling, rehabilitation, and/or employee assistance programs are available locally. If you need a referral, please contact the *Chief Human Resources Officer*.

#### SOLICITING AND SELLING (BP 4135)

Employees shall not solicit district staff, students, or their families with the intent to sell general merchandise, books, equipment, or services. Staff shall not distribute promotional, political, controversial, or other non-instructional materials unless approved by the Superintendent or designee. Staff members shall not use their status as district employees to secure information such as names, addresses, and telephone numbers for use in profit-making ventures. Educational tours may be promoted on school premises only if the district sponsors them. Employees engaged in planning, organizing, or leading tours as a private business shall make it clear that they do not represent the school or district. All activities related to such tours must be carried on outside of school hours and off school premises. Any classroom activity requiring students to bring money to school for any purpose must have the principal's approval. Staff participation in "flower funds," "sickness and bereavement funds," "anniversary funds," and the like shall be a matter of individual discretion.

#### **TUTORING (BP 4137)**

The Governing Board expects teachers and other members of the instructional staff to make every effort to resolve students' learning problems at school before recommending that parents/guardians engage a tutor or other professional help. By maintaining a competent, dedicated staff and adequate instructional resources, the Board seeks to minimize the need for individual tutoring. To preclude conflicts of interest, teachers may not accept any kind of remuneration for tutoring a student enrolled in any of their classes. Teachers who tutor other students must perform this service outside of school facilities and make their own arrangements with parents/guardians for the fees to be charged. The Board encourages teachers to tutor only in subjects or grade levels for which they are certificated.

## OVERTIME OR COMPENSATORY TIME OFF FOR NON-EXEMPT EMPLOYEES UNDER THE FAIR LABOR STANDARDS ACT (FLSA)

Employees should refer to their union contracts for specific language that has been negotiated in regard to overtime and compensatory time off. For employees who are non-exempt under the FLSA, prior written approval from the evaluating supervisor is required prior to working overtime either for pay or compensatory time off. The FLSA designation for each position is shown on the position description and in the Terms of Employment signed by new or promoted employees. Overtime worked MUST be reported on time sheets along with the supervisor's approval so that comprehensive records of compensatory time off, or overtime for pay, can be appropriately maintained by the District.

### EXEMPT EMPLOYEES UNDER THE FAIR LABOR STANDARDS ACT (FLSA)

Exempt employees are NOT entitled to overtime or compensatory time off. They are considered to be bona fide executives, administrators, or professionals such as teachers, principals, managers, some confidential and supervisory positions, and others. The FLSA designation for each position is shown on the position description and in the Terms of Employment signed by new or promoted employees.

#### FAMILY AND MEDICAL LEAVE ACT

Basic Leave Entitlement: FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for the following reasons: for incapacity due to pregnancy, prenatal medical care or child birth; to care for the employee's child after birth, or placement for adoption or foster care; to care for the employee's spouse, son or daughter, or parent, who has a serious health condition; or for a serious health condition that makes the employee unable to perform the employee's job.

<u>Military Family Leave Entitlements</u>: The National Defense Authorization Act extends coverage for exigency leave to the family of all active-duty servicemembers who are deployed in a foreign country. Employees with a family member who is either in a regular component of the Armed Forces or a reserve component of the Armed Forces will be entitled to leave "because of any qualifying exigency arising out of the fact that the spouse, or a son, daughter, or parent of the employee is on covered active duty (or has been notified of an impending call or order to covered active duty)" in a foreign country; may use their 12week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

The act also extends coverage of "servicemember caregiver leave" to include caring for a veteran who is undergoing medical treatment, recuperation, or therapy, for a serious injury or illness and who was a member of the Armed Forces (including a member of the National Guard or Reserves) at any time during the period of five years preceding the date on which the veteran undergoes that medical treatment, recuperation, or therapy.

The caregiver would be able to take up to 26 weeks of leave to care for a veteran for up to five years after he or she leaves military service if the veteran suffered a qualifying injury or illness in the line of active duty (or had an existing injury or illness aggravated in the line of active duty). The injury or illness could manifest itself before or after the member became a veteran.

Benefits and Protections: During FMLA leave, the employer must maintain the employee's health coverage under any "group health plan" on the same terms as if the employee had continued to work. Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.

Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee's leave.

Eligibility Requirements: Employees are eligible if they have worked for a covered employer for at least one year, for 1,250 hours over the previous 12 months, and if at least 50 employees are employed by the employer within 75 miles.

Definition of Serious Health Condition: A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents the qualified family member from participating in school or other daily activities.

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than three consecutive calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

<u>Use of Leave:</u> An employee does not need to use this leave entitlement in one block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for

planned medical treatment so as not to unduly disrupt the employer's operations. Leave due to qualifying exigencies may also be taken on an intermittent basis.

<u>Substitution of Paid Leave for Unpaid Leave</u>: Employees may choose or employers may require use of accrued paid leave while taking FMLA leave. In order to use paid leave for FMLA leave, employees must comply with the employer's normal paid leave policies.

Employee Responsibilities: 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, the employee must provide notice as soon as practicable and generally must comply with an employer's normal call-in procedures.

Employees must provide sufficient information for the employer to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees also must inform the employer if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees also may be required to provide a certification and periodic recertification supporting the need for leave.

Employer Responsibilities: Covered employers must inform employees requesting leave whether they are eligible under FMLA. If they are, the notice must specify any additional information required as well as the employees' rights and responsibilities. If they are not eligible, the employer must provide a reason for the ineligibility.

Covered employers must inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If the employer determines that the leave is not FMLA-protected, the employer must notify the employee.

Unlawful Acts by Employers: FMLA makes it unlawful for any employer to:

- Interfere with, restrain, or deny the exercise of any right provided under FMLA;
- Discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

<u>Enforcement:</u> An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against an employer.

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

### AMERICANS WITH DISABILITIES ACT (ADA) OF 1990

The ADA prohibits discrimination against any qualified individual with a disability because of that disability. The purpose of the ADA is to provide a clear and comprehensive mandate for the elimination of discrimination against individuals with disabilities. The Sacramento City Unified School District provides equal access and opportunity to all persons, including qualified individuals with a disability. Applicants and employees are provided opportunities for employment in all positions, with or without reasonable accommodation. For further information on the ADA, contact the Office of Risk Management and Employees Benefits at 643-9432.

#### VIETNAM-ERA ADJUSTMENT ACT OF 1974

School districts with \$10,000 or more in federal funds must take affirmative action to hire disabled veterans of all wars and ALL veterans of the Vietnam War. A disabled veteran is one with 30% or more disability rating from the Veteran's Administration, or one who was discharged from active duty for serviceconnected disability. The Sacramento City Unified School District gives additional points in the screening, interview, and selection process for disabled veterans of the Vietnam War.

### OMNIBUS TRANSPORTATION EMPLOYEES ACT (OTEA) OF 1991

This act mandates alcohol and drug testing for all employees in safety sensitive positions. It applies to every employee who drives a commercial motor vehicle requiring a commercial driver's license such as bus drivers, grounds keepers, and maintenance drivers. Employees who drive vehicles that transport 16 or more passengers, weigh 26,001 pounds, or carry hazardous materials are subject to drug and alcohol testing. Drug and alcohol tests include post-offer/pre-employment, post-accident resulting in a moving violation, reasonable suspicion, return to duty and follow-up, and random testing of 25% of identified employees each year.

### EMPLOYEE ASSISTANCE PROGRAM

Most employees and eligible dependents are entitled to receive EAP services, administered by Mental Health Network (MHN). Eligible employees are entitled to receive seven sessions per benefit year. The spouse of an eligible employee is entitled to receive seven sessions, and the children of eligible employees are entitled in the aggregate to receive seven sessions per benefit year from July 1 through June 30. Services provided include clinical counseling and life management services, which include pre-retirement counseling, child care consultation, elder care consultation, Federal taxpayer consultation and representation service, organizing life's affairs, and other services. All services are confidential. Employees may call MHN 24 hours a day, seven days a week at 1-800-227-1060. The TDD number for the hearing impaired is 1-800-327-0801.

### CODE OF ETHICS (BP 4119.21, BP 4219.21, BP 4319.21)

The Governing Board expects district employees to maintain the highest ethical standards, to follow district policies and regulations, and to abide by state and national laws. Employee conduct should enhance the integrity of the district and the goals of the educational program. The Board encourages district employees to accept as guiding principles the codes of ethics published by professional associations to which they may belong.

#### Certificated Employees (E 4119.21)

#### **General Provisions**

80331 (a) These rules are binding upon every person holding a credential or any license to perform educational services under the jurisdiction of the Commission on Teacher Credentialing, and the consequences of any willful breach may be revocation or suspension of the credential, or license, or private admonition of the holder.

> (b) Nothing in these rules is intended to limit or supersede any provision of law relating to the duties

and obligations of certificated persons or to the consequences of the violation of such duties and obligations. The prohibition of certain conduct in these rules is not to be interpreted as approval of conduct not specifically cited.

(c) These rules may be cited and referred to as "Rules of Conduct for Professional Educators."

(d) The Commission shall complete a study of the effect of these rules and present its findings to the Governor, the Legislature, and the State Board of Education no later than September 1, 1989.

- (e) As used in these rules:
  - "Certificated person" means any person who holds a certificate, permit, credential, or other license authoring the performance of teaching or education-related service in grades K through 12 in California public schools.
  - (2) "Professional employment" means the performance for compensation of teaching or other education-related employment in a position for which certification requirements are set by law.
  - (3) "Confidential information" means information made confidential by Section 35301 of the Education Code, or information which was provided to the certificated person solely for the purpose of facilitating his/her performance of professional services for or on behalf of the person or employer providing such information.
- A certificated person shall not write or sign any 80332 (a)letter or memorandum which intentionally omits significant facts, or which states as facts matters which the writer does not know of his/her own knowledge to be true relating to the professional qualifications or personal fitness to perform certificated services of any person whom the writer knows will use the letter or memorandum to obtain professional employment; nor shall he/she agree to provide a positive letter of recommendation which misrepresents facts as a condition of resignation or for withdrawing action against the employing agency.

Professional Candor and Honesty in Letters or Memoranda of Employment Recommendation

> (b) This rule has no application to statements identified in the letter or memorandum as personal opinions of the writer, but does apply to unqualified statements as fact that which the writer does not know to be true, or to statements as fact that which the writer knows to be untrue.

Withdrawal from Professional Employment

- 80333 (a) A certificated person shall not abandon professional employment without good cause.
  - (b) "Good cause" includes, but is not necessarily limited to, circumstances not caused by or under the voluntary control of the certificated person.

Unauthorized Private Gain or Advantage

80334 A certificated person shall not:

- (a) Use for his/her own private gain or advantage or to prejudice the rights or benefits of another person any confidential information relating to students or fellow professionals.
- (b) Use for his/her own private gain or advantage the time, facilities, equipment, or supplies which are the property of his/her employer without the express or clearly implied permission of his/her employer.
- (c) Accept any compensation or benefit or thing of value other than his/her regular compensation for the performance of any service which he/she is required to render in the course and scope of his/her certificated employment. This rule shall not restrict performance of any overtime or supplemental services at the request of the school employer; nor shall it apply to or restrict the acceptance of gifts or tokens of minimal value offered and accepted openly from students, parents, or other persons in recognition or appreciation of service.
- 80335 A certificated person shall not, after July 1,1989:
  - (a) Knowingly, accept an assignment to perform professional services if he or she does not possess a credential authorizing the service to be performed; unless he or she has first exhausted any existing local remedies to correct the situation, has then notified the County Superintendent of Schools in writing of the incorrect assignment, and the County Superintendent of Schools has made a determination, within 45 days of receipt of the notification, that the assignment was caused by extraordinary circumstances which make correction impossible, pursuant to the procedures referred to in Education Code Section 44258.9 (g) (2) and (3).

## Performance of Unauthorized Professional Services

- (b) Knowingly and willfully assign or require a subordinate certificated person to perform any professional service which the subordinate is not authorized to perform by his or her credential or which is not approved by appropriate governing board authorization, unless he or she has made reasonable attempts to correct the situation but has been unsuccessful, and has notified the County Superintendent of Schools of those attempts, and the County Superintendent of Schools has determined, within 45 days of being notified of the assignment, that the assignment was caused by extraordinary circumstances which make correction impossible.
- (c) Neither (a) nor (b) shall be applicable in a situation where extraordinary circumstances make the correction of the misassignment impossible.
- (d) There shall be no adverse action taken against a certificated person under this rule for actions attributable to circumstances beyond his or her control.

Performance with Impaired Faculties

- 80336 (a) A certificated person shall not:
  - (1) Perform or attempt to perform any duties or services authorized by his or her cre-

dential during any period in which he or she knows or is in possession of facts showing that his or her mental or intellectual faculties are substantially impaired for any reason, including but not limited to use of alcohol or any controlled substance.

- (2) Assign or require or permit a subordinate certificated person to perform any duties authorized by his or her credential during any period in which the superior certificated person knows of his or her own knowledge, or is in possession of facts showing that the subordinate certificated person's mental or intellectual faculties are substantially impaired for any reason, including but not limited to use of alcohol or any controlled substance.
- (b) For the purpose of this rule, substantial impairment means a visible inability to perform the usual and customary duties of the position in a manner that does not represent a danger to pupils, employees, or school property. It does not include or mean inability attributable to lack of, or inadequate, professional preparation or education.

#### Harassment and Retaliation Prohibited

80337 No certificated person shall directly or indirectly use or threaten to use any official authority or influence in any manner whatsoever which tends to discourage, restrain, interfere with, coerce, or discriminate against any subordinate or any certificated person who in good faith reports, discloses, divulges, or otherwise brings to the attention of the Governing Board of a school district, the Commission on Teacher Credentialing, or any other public agency authorized to take remedial action, any facts or information relative to actual or suspected violation of any law regulating the duties of persons serving in the public school system, including but not limited to these rules of professional conduct.

#### **Discrimination Prohibited**

80338 A certificated person shall not, without good cause, in the course and score of his of her certificated employment and solely because of race, color, creed, gender, national origin, handicapping condition, or sexual orientation, refuse or fail to perform certificated services for any person.

#### Classified Employees (E 4219.21)

School employees who are in daily contact with many phases of educational work should be persons whose conduct is beyond reproach and who sincerely believe in the advancement of education and the betterment of working conditions.

As a school employee I will:

- Be proud of my vocation in order that I may use my best endeavors to elevate the standards of my position so that I may merit a reputation for high quality of service -- to the end that others may emulate my example.
- 2. Be a person of integrity, clean speech, desirable personal habits, and physical fitness.
- Be just in my criticism and be generous in my praise; to improve and not destroy.

- At all times be courteous in my relations with students, parents, teachers, and others.
- Be a resourceful person who readily adapts himself to different kinds of work and changed conditions, and finds better ways to do things.
- Conduct myself in a spirit of friendly helpfulness to my fellow employees to the end that I will consider no personal success legitimate or ethical which is secured by taking unfair advantage of another.
- Associate myself with employees of other districts for the purpose of discussing school problems and cooperating in the improvement of public school conditions.
- Always uphold my obligations as a citizen to my nation, my state, my school district, and my community, and give them unswerving loyalty.

## Management, Supervisory, and Confidential Employees (E 4319.21)

A management, supervisor, or confidential school employee's behavior must conform to an ethical code. The code must be idealistic and at the same time practical, so that it can apply reasonably to all. The professional acknowledges that the schools belong to the public they serve for the purpose of providing educational opportunities to all and provides professional leadership in the school and community. This responsibility requires standards of exemplary professional conduct. It must be recognized that the professional's actions will be viewed and appraised by the community, associates, and students. To these ends, the professional subscribes to the following statements of standards. The management, supervisory, confidential school employee:

- 1. Makes the well-being of students the fundamental element in all decision-making and actions.
- Fulfills professional responsibilities with honesty and integrity.
- 3. Supports the principle of due process and equal treatment under the law.
- Obeys local, state, and national laws and does not knowingly join or support organizations that advocate, directly or indirectly, the overthrow of the government.
- 5. Implements the Governing Board of Education's policies and administrative rules and regulations.
- Pursues appropriate measures to correct those laws, policies, and regulations that are not consistent with sound educational goals.
- 7. Avoids using positions for personal gain through political, social, religious, economic, or other influence.
- Accepts academic degrees or professional certification used in relationship with professional responsibilities only from duly accredited institutions.
- Maintains the standards and seeks to improve the effectiveness of the profession through research and continuing professional development.
- 10. Honors all contracts until fulfillment or release.
- 11. Seeks to involve the public and keep them honestly informed.
- Recommends the employment, development, promotion, and retention of the best possible personnel to assure a quality educational program.
- Affirms duty of loyalty to carry out the goals, objectives, programs, and policies of the Board and the district.

#### GIFTS TO PERSONNEL (BP 5133)

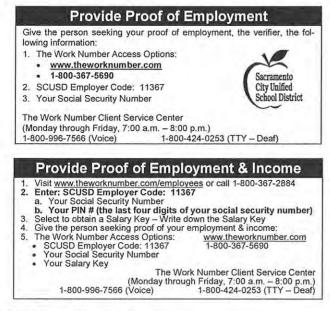
The intent of this Board Policy is directed at all employees of the district.

The Governing Board recognizes that a certificated employee shall not accept any compensation or benefit or thing of value for the performance of any service which he/she is required to render in the course of his/her certificated employment.

This shall not apply to or restrict the acceptance of gifts or tokens of minimal value offered and accepted openly from students, parents/guardians or other persons in recognition or appreciation of service.

## VERIFICATION OF EMPLOYMENT: THE WORK NUMBER

The Work Number<sup>®</sup> is an automated service that provides instant employment and income verification. This fast, <u>secure</u> <u>service</u> is used when applying for a mortgage or loan, for reference checking, leasing an apartment, or any other instance where proof of employment or income is needed. You benefit from having control of the process – authorizing others access to your information. The Work Number can be used anytime, anywhere, and is available 24 hours a day, 7 days a week.



## Risk-Based Authentication -Enhanced Security Enrollment

Security Enrollment is the process by which you provide the Work Number with information that will be used to verify your identity in the future. This is an innovative way to both protect your identity and to add a new layer of protection to your online account. After you complete this simple process, you'll know you're at an authentic site because you'll see your security image, which you chose during enrollment. The Work Number will know it's really you because they can validate your identity against the information you have provided to them during enrollment.

You will only have to enroll once, and continue to use the same PIN/Password you previously used. You will choose your personal security image during enrollment, and you can change it any time. The Work Number uses security questions to verify your identity on occasions when they can't verify your identity. You will choose your security questions during enrollment, and you can change them at any time. Revised: 08-04-15

Sacramento		P.O. Box 24	AN RESOURCE SERVICES 6870 • Sacramento, CA 95824-6870 916) 643-9050 • FAX (916) 399-2016
City Unified School District		Cancy M	<i>José L. Banda</i> , Superintendent <i>CArn</i> , Chief Human Resources Officer
SUBJECT:	TITLE IX / SEXUAL HA	ARASSMENT / DISCRIMI	NATION HR-01
то:	All Employees, Substitutes	s, and Short-Term Temps	
DATE:	August 2015		
PREPARED BY:	Monica Garland	DEPARTMENT:	Human Resource Services
<b>REVIEWED BY:</b>	Christina Villegas	APPROVED:	c ut

Sexual harassment violates federal and state law as well as the Sacramento City Unified School District's Board Policies and Administrative Regulations - 4119.11 (a) and 5145. 7(a). By definition, "sexual harassment includes, but is not limited to, unwelcome sexual advances, requests for sexual favors, or other verbal, visual or physical conduct of a sexual nature made by someone from or in the work or educational setting." Additionally, the District prohibits discrimination, harassment, intimidation, and bullying based on actual or perceived ancestry, age, color, disability, gender, gender identity, gender expression, nationality, race or ethnicity, religion, sex, sexual orientation, or association with a person or a group with one or more of these actual or perceived characteristics, as referenced in District Board Policy – 4030.

Examples of types of conduct which may constitute sexual harassment include, but are not limited to: (1) unwelcome leering, sexual flirtations, or propositions; (2) sexual slurs, epithets, threats, verbal abuse, derogatory comments, or sexually degrading descriptions; (3) graphic verbal comments about an individual 's body, or overly personal conversation; (4) sexual jokes, notes, stories, drawings, pictures, or gestures; (5) spreading sexual rumors; (6) touching an individual's body or clothes in a sexual way; (7) purposefully cornering or blocking normal movements; (8) displaying sexually suggestive objects in the educational or work environment.

If you believe that your rights under this policy have been violated, the following courses of action may be taken without retaliation:

- Report the alleged violation to your immediate supervisor or site administrator for initial attempts at resolution, or contact District Title IX Compliance Coordinators: Student Related Issues: Stephan Brown, Director, Student Services/Alternative Education, at (916) 643-9425, or Employee Related Issues: Cancy McArn, Chief Human Resources Officer, at (916) 643-9050.
- Make an appointment to report your grievance to the State Department of Fair Employment and Housing via the internet, <u>www.dfeh.ca.gov</u>, or by phone: 1-800-884-1684. Walk-ins are generally not seen without an appointment (2218 Kausen Drive, Suite 100, Elk Grove, CA 95758).
- File your charges or complaints directly with: Equal Employment Opportunity Commission; San Francisco District Office; 350 The Embarcadero, Suite 500; San Francisco, CA 94105-1260. Phone: 1-800-669-4000 (www.eeoc.gov). Please call first to obtain information or schedule an appointment.
- If you are a classified employee, you may also file a grievance with your union representative.
- If you are a certificated/non-management employee, you may also contact your SCTA representative for counseling and guidance in this matter.

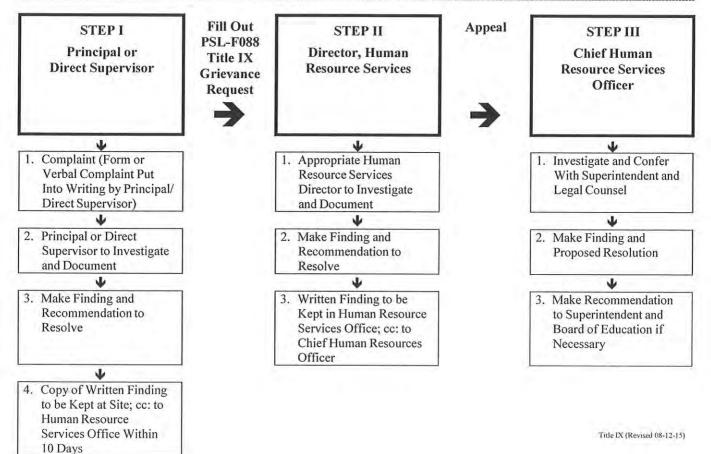
The site administrator will post a copy of the Title IX (Non-Discrimination on the Basis of Sex) Flyer in all classrooms and offices. The Department of Fair Employment and Housing: Harassment or Discrimination in Employment notice will be posted on staff bulletin boards.

If you have questions or need assistance regarding Title IX law and sexual harassment, please refer to the numbers listed above and call the appropriate District's Title IX Compliance Coordinator.

## PROCESS OF INVESTIGATION OF

# EMPLOYEE HARASSMENT OR DISCRIMINATION IN EMPLOYMENT

**Confidentiality Rule:** Do not delegate calling to anyone else. Do not leave messages that are detailed. Mark all information regarding this matter CONFIDENTIAL.





**Human Resource Services** 

**Process of Investigation of Student-to-Student** 

Harassment or Discrimination

*Confidentiality Rule:* Do not delegate calling to anyone else. Do not leave messages that are detailed. Mark all information regarding this matter CONFIDENTIAL.

## Important Note: At any time during the process, the parent/guardian or student may contact and work directly with the Title IX Officer (Director, Student Services/Alternative Education).

## STEP I: School Site

- a) Parent/guardian or student submits a complaint either verbal or in writing to the Principal, Assistant Principal, Counselor, Teacher, Activities Advisor, or any other staff member.
- b) The Principal or Direct Supervisor is responsible for investigating and documenting the process.
- c) The Principal or Direct Supervisor makes a finding and recommendation to resolve the complaint.
- d) A copy of the written findings must be kept at the site and a copy must be sent to the Title IX Officer (Director, Student Services/Alternative Education) within 10 days of resolution.

At any time during the process, please do not hesitate to contact the Title IX Officer at 643-9425.

## **STEP II: Title IX Officer**

- a) The Title IX Officer (Director, Student Services/Alternative Education) receives a Title IX Complaint. The Title IX Officer investigates documenting the process.
- b) The Title IX Officer makes a finding and recommendation to resolve the complaint.
- c) A written finding is filed in the Student Services Office and a copy is sent to the school site and parent.

## **STEP III: Appeal Process**

- a) Appeals can be made directly to the Assistant Superintendent of Equity.
- b) Make final recommendation to the Deputy Superintendent.

## TITLE IX (NON-DISCRIMINATION ON THE BASIS OF SEX)

Includes Nondiscrimination & Sexual Harassment (BP/AR 0410, 4119.11 & 4030)

The Governing Board prohibits unlawful discrimination, intimidation, bullying against and/or harassment of district employees, job applicants, and District programs & activities on the basis of actual or perceived race, color, national origin, nationality, ancestry, ethnicity, ethnic group identification, religious creed, religion, age, marital status, pregnancy, physical or mental disability, disability, medical condition, veteran status, gender, gender identity, gender expression, sex, sexual orientation, or association with a person or group with one or more of these actual or perceived characteristics at any district site and/or activity. The Board also prohibits retaliation against any district employee or job applicant who complains, testifies, or in any way participates in the district's complaint procedures instituted pursuant to this policy. Any district employee who engages in or permits unlawful discrimination or harassment shall be subject to disciplinary action up to and including dismissal. A district employee shall be deemed to have permitted unlawful discrimination or harassment if he/she fails to report an observed incident of discrimination and/or harassment, whether or not the victim complains. Unlawful harassment includes, but is not limited to:

- ✓ Slurs, epithets, threats, or verbal abuse.
- ✓ Derogatory or degrading comments, descriptions, drawings, pictures, or gestures.
- ✓ Unwelcome jokes, stories, or teasing.
- ✓ Any other verbal, visual, or physical conduct which adversely affects employment, interferes with work performance, or creates an intimidating, hostile, or offensive work environment.

(Harassment may arise not only as a result of the offender's intention, but also as a result of the offended person's perception of the conduct.)

## Title IX Policy on Sexual Harassment 4119.11(a) and 5145.7(a)

The Governing Board is committed to maintaining a learning environment that is free of harassment. The Board prohibits the unlawful sexual harassment of any student by an employee, student, or other person at school or at any school-related activity.

✓ Any student who engages in the sexual harassment of anyone at school or a school-related activity shall be subject to disciplinary action.

The Governing Board prohibits sexual harassment in the working environment of District employees or applicants by any person in any form.

✓ Employees who permit, engage, or participate in such harassment may be subject to disciplinary action up to and including dismissal.

## **Report Violations to:**

- 1. Your supervisor or site administrator for initial attempts at resolution, or
- 2. Contact District Title IX Compliance Coordinators:

Student Related Issues:

Stephan Brown, Director II, Student Services/Alternative Education, (916) 643-9425, OR Employee Related Issues:

Cancy McArn, Chief Human Resources Officer, (916) 643-9050.



## **Human Resource Services**

## **Title IX Grievance Review Request**

GONFIDENTIAL

Instructions: Individuals alleging Title IX discrimination and requesting review are required to complete this form and submit it to the appropriate Title IX Compliance Coordinator: <u>Student Related Issues</u>: Director of Student Services/Alternative Education <u>OR</u> <u>Employee Related Issues</u>: Assistant Superintendent, Human Resources & Employee Compensation 5735 47<sup>th</sup> Avenue, Sacramento, CA 95824 • P.O. Box 246870, Sacramento, CA 95824-6870

## 1. Name of Grievant:

Home Address School/Office: Zip Home Telephone

2. **Nature of Your Grievance:** Please describe the action you believe may be in violation of Title IX, and identify any person(s) you believe may be responsible. (Attach additional sheets if necessary.)

3. Have you discussed your grievance with any Sacramento City Unified School District personnel?

PLEASE ATTACH ANY STATEMENTS, NAMES OF WITNESSES, REPORTS, OR OTHER DOCUMENTS WHICH YOU FEEL ARE RELEVANT TO YOUR GRIEVANCE.

I certify that the foregoing is true and correct.

Print Name	Signature	Date
FOR HUMAN RESOURCE SERVICES USE ONLY:	Date Received:	Initial
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## Human Resource Services

## **Uniform Complaint Procedure**

## **Extracted From AR 1312.3 Community Relations**

## **Compliance Officers**

The Governing Board designates the following compliance officers to receive and investigate complaints and ensure district compliance with law:

Chief Human Resources Officer 5735 - 47th Avenue Sacramento, CA 95824 (916) 643-9050

The Chief Human Resource Officer, Human Resource Services, shall ensure that employees designated to investigate complaints are knowledgeable about the laws and programs for which they are responsible. Such employees may have access to legal counsel as determined by the Superintendent or designee.

Uniform complaint procedures shall also be used when addressing complaints alleging failure to comply with applicable state and/or federal laws and regulations and/or alleging discrimination in adult education, consolidated categorical aid programs, migrant education, career technical education and training programs, child care and development programs, child nutrition programs, special education programs, and federal school safety planning requirements. (Title 5 California Code of Regulations (T5CCR) 4610)

The District shall follow uniform complaint procedures when addressing complaints alleging unlawful discrimination based on, actual or perceived sex, sexual orientation, gender, ethnic group identification, race, ancestry, national origin, religion, color, or mental or physical disability, or age, or on the basis or a person's association with a person or group with one or more of these actual or perceived characteristics, or any program or activity that receives or benefits from state financial assistance. [Government Code 11135, Education Code 200, Education Code 220, T5CCR 4610]

The District shall have the primary responsibility to insure compliance with applicable state and federal laws and regulations. [T5CCR 4620]

The District shall investigate complaints alleging failure to comply with applicable state and federal laws and regulations and/or alleging discrimination, and seek to resolve those complaints in accordance with the District's Uniform Complaint Procedures. [T5CCR 4610, 4620, and 4621]

There will be annual dissemination of a written notice of the District's complaint procedures to students, employees, parents or guardians of its students, school and district advisory committees, appropriate private school officials or representatives, and other interested parties. [T5CCR 4622]

Additionally, the district shall use uniform complaint procedures to address complaints regarding insufficiency of instructional materials, emergency or urgent facilities conditions that pose a threat to the health and safety of pupils or staff, and/or teacher vacancy or misassignment issues as provided in Administrative Regulation 1312.4.

## Notifications

The Chief Human Resource Officer, Human Resource Services, shall meet the notification requirements of Title 5 California Code of Regulations 4622, including the annual dissemination of district complaint procedures and information about available appeals, civil law remedies and conditions under which a complaint may be taken directly to the California Department of Education. The Chief Human Resource Officer, Human Resource Services, shall ensure that complainants understand that they may pursue other remedies, including actions before civil courts or other public agencies.

Complainants will receive written acknowledgement identifying the person(s), employee(s), or agency positions(s), or unit(s) responsible for receiving complaints, investigating complaints and ensuring District compliance. The written acknowledgement will also include a statement that ensures that such person(s), employee(s), position(s), or unit(s) responsible for compliance and/or investigation shall be knowledgeable about the laws/programs that he/she is assigned to investigate. [T5CCR 4621, 4631]

## Procedures

The following procedures shall be used to address all complaints which allege that the district has violated federal or state laws or regulations governing educational programs. Compliance officers shall maintain a record of each complaint and subsequent related actions, including all information required for compliance with the Title 5 California Code of Regulations 4632.

All parties involved in allegations shall be notified when a complaint is filed, when a complaint meeting or hearing is scheduled and when a decision or ruling is made.

## **Step 1: Filing of Complaint**

Any individual, public agency or organization may file a written complaint of alleged noncompliance by the district.

Complaints alleging unlawful discrimination may be filed by a person who alleges that he/she personally suffered unlawful discrimination or by a person who believes that an individual or any specific class of individuals has been subjected to unlawful discrimination. The complaint must be initiated no later than six months from the date when the alleged discrimination occurred or when the complainant first obtained knowledge of the facts of the alleged discrimination. [T5 CCR 4630]

The complaint shall be presented to the compliance officer who shall maintain a log of complaints received, providing each with a code number and a date stamp.

If a complainant is unable to put a complaint in writing due to conditions such as illiteracy or other disabilities, district staff shall help him/her to file the complaint. [T5 CCR 4600]

## **Step 2: Mediation**

The Board recognizes that a neutral mediator can often suggest a compromise that is agreeable to all parties in a dispute. In accordance with uniform complaint procedures, whenever all parties to a complaint agree to try resolving their problem through mediation, the Superintendent or designee shall initiate mediation. The Superintendent or designee shall ensure that mediation results are consistent with state and federal laws and regulations.

Within three days of receiving the complaint, the compliance officer may informally discuss with the complainant the possibility of using mediation. If the complainant agrees to mediation, the compliance officer shall make all arrangements for this process.

Before initiating the mediation of a discrimination complaint, the compliance officer shall ensure that all parties agree to make the mediator a party to related confidential information.

If the mediation process does not resolve the problem within the parameters of law, the compliance

officer shall proceed with his/her investigation of the complaint.

The use of mediation shall not extend the district's timelines for investigating and resolving the complaint unless the complainant agrees in writing to such an extension of time. [T5 CCR 4631]

## Step 3: Investigation of Complaint

The compliance officer shall make all reasonable efforts to hold an investigative meeting within five days of receiving the complaint or an unsuccessful attempt to mediate the complaint. This meeting shall provide an opportunity for the complainant and/or his/her representative to repeat the complaint orally.

The complainant and/or his/her representative and the district's representatives shall have an opportunity to present information relevant to the complaint. Parties to the dispute may discuss the complaint and question each other or each other's witnesses. [T5 CCR 4631]

Refusal by the complainant to provide the investigator with documents or other evidence related to the allegations in the complaint, or to otherwise fail or refuse to cooperate in the investigation or engage in any other obstructions of the investigation, may result in the dismissal of the complaint because of lack of evidence to support the allegations. [T5CCR 4631]

Refusal by the District to provide the investigator with access to records and/or other information related to the allegation in the complaint, or to otherwise fail to refuse or cooperate in the investigation or engage in any other obstruction of the investigation, may result in a finding based on evidence collected that a violation has occurred and may result in the imposition of a remedy in favor of the complainant. [T5CCR 4631]

## Step 4: Response

Within 60 days of receiving the complaint, the compliance officer shall prepare and send to the complainant a written report of the district's investigation and decision, as described in Step #5 below unless the complainant agrees in writing to an extension of time. [T5 CCR 4631]

## **Step 5: Final Written Decision**

The report of the district's decision shall be in writing and sent to the complainant. [T5 CCR 4631]

The report of the district's decision shall be written in English and in the language of the complainant whenever feasible or required by law. If it is not feasible to write this report in the complainant's primary language, the district shall arrange a meeting at which a community member of the complainants choosing will interpret it for the complainant.

The report will contain the following elements [T5CCR 4631]:

- 1. The findings of fact based on the evidence gathered.
- 2. Conclusion of law.
- 3. Disposition of the complaint.
- 4. The rationale for such a disposition.
- 5. Corrective actions, if any are warranted.
- 6. Notice of the complainant's right to appeal the District's decision to the California Department of Education (CDE).
- 7. Procedures to be followed for initiating an appeal to CDE.

If an employee is disciplined as a result of the complaint, this report shall simply state that effective action was taken and that the employee was informed of district expectations. The report shall not give any further information as to the nature of the disciplinary action.

Discrimination complaints shall be investigated in a manner that protects the confidentiality of the parties and the facts. The District ensures that complainants are protected from retaliation and that the identity of a complainant alleging discrimination will remain confidential as appropriate, except to the

extent necessary to carry out the investigation or proceedings, as determined by the Superintendent or designee on a case-by-case basis. [T5CCR 4621]

The Board prohibits retaliation in any form for participation in complaint procedures, including but not limited to the filing of a complaint or the reporting of instances of discrimination. Such participation shall not in any way affect the status, grades or work assignments of the complainant.

## Appeals to the California Department of Education

If dissatisfied with the district's decision, the complainant may appeal in writing to the California Department of Education within 15 days of receiving the district's decision. For good cause, the Superintendent of Public Instruction may grant an extension for filing appeals. [T5 CCR 4652]

When appealing to the California Department of Education, the complainant must specify the reason(s) for appealing the district's decision and must include a copy of the locally filed complaint and the district's decision. [T5 CCR 4652]

The California Department of Education may directly intervene in the complaint without waiting for action by the district when one of the conditions listed in 5 CCR 4650 exists. In addition, the California Department of Education may also intervene in those cases where the district has not taken action within 60 calendar days of the date the complaint was filed with the district.

## **Civil Law Remedies**

A complainant may pursue available civil law remedies outside of the district's complaint procedures. Complainants may seek assistance from mediation centers or public/private interest attorneys. Civil law remedies that may be imposed by a court include, but are not limited to, injunctions and restraining orders. For discrimination complaints, however, a complainant must wait until 60 days have elapsed from the filing of an appeal with the California Department of Education before pursuing civil law remedies. The moratorium does not apply to injunctive relief and is applicable only if the district has appropriately, and in a timely manner, apprised the complainant of his/her right to file a complaint in accordance with Title 5 California Code of Regulations 4622.

#### Becky Bryant, Director Vacant, Director Iris Taylor, Special Education Interim Chief Academic Officer **Child Development** (916) 643-9163 (916) 643-7800 (916) 643-9086 Barry Evpak, Director, Chuck Ernst, Director Lisa Hayes, Director Facilities and Maintenance **Distribution Services** State and Federal Programs (916) 264-4075, Ext. 1008 643-9051 (916) 277-6715/6475

## **Program Administrators**

To obtain further information and forms regarding Uniform Compliant Procedures, please contact: <u>Compliance Officer</u>: Cancy McArn, Chief Human Resources Officer, Human Resources, Sacramento City Unified School District, 5735 47th Avenue, Sacramento, CA 95824, (916) 643-9050. The form (PSL-F089) may be downloaded from the district web page, <u>www.scusd.edu</u>, Human Resources, Uniform Complaint Procedures (left-hand side).

UNIFORM COMPLAINT (UC) PROCEDURES SHALL BE AVAILABLE FREE OF CHARGE: Contact Student Hearing and Placement Department (916) 643-9425 (Student Complaints) OR Human Resource Services, (916) 643-9050 (All Other Complaints). (T5 CCR 4622)

(Revised: 08-04-15)

Sacramento City Unified School District

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(916) 643-9050 • FAX (916) 399-2016

José L. Banda, Superintendent Cancy McArn, Chief Human Resources Officer

## ANNUAL NOTIFICATION OF THE UNIFORM COMPLAINT PROCEDURES (UCP) August 13, 2015

For students, employees, parents or guardians of its students, school and district advisory committees, appropriate private school officials or representatives, and other interested parties

The Sacramento City Unified School District (SCUSD) has the primary responsibility to insure compliance with applicable state and federal laws and regulations and has established procedures to address allegations of unlawful discrimination, harassment, intimidation and/or bullying complaints alleging violation of state or federal laws governing educational programs.

SCUSD shall investigate and seek to resolve complaints using policies and procedures known as the Uniform Complaint Procedures (UCP) adopted by our local board to address unlawful discrimination, harassment, intimidation, and/or bullying regarding or based on, actual or perceived characteristics such as, age, ancestry, color, ethnic group identification, gender expression, gender identity, gender, mental or physical disability, nationality, national origin, race or ethnicity, religion, sex, or sexual orientation, or on the basis or a person's association with a person or group with one or more of these actual or perceived characteristics, or in any program or activity that receives or benefits from state financial assistance. The UCP shall also be used when addressing complaints alleging failure to comply with state and/or federal laws in Adult Education, Consolidated Categorical Aid Programs, Migrant Education, Career Technical and Technical Education and Training Programs, Child Care and Developmental Programs, Child Nutrition Programs, Special Education Programs, Federal Safety Planning Requirements, and pertaining to prohibitive requirements to pay pupil fees for participation in an educational activity.

Complaints must be filed in writing with the following compliance officer(s):

	Student related:
Cancy McArn	Stephan Brown
Chief Human Resources Officer	Director, Student Hearing & Placement
5735 47th Avenue	Department
Sacramento, CA 95824	5735 47th Avenue
Phone: (916) 643-9050	Sacramento, CA 95824
Fax: (916) 399-2016	Phone: (916) 643-9425
	Fax: (916) 399-2029

Complaints alleging discrimination, harassment, intimidation and/or bullying must be filed within six (6) months from the date the alleged discrimination, harassment, intimidation and/or bullying complaint occurred or the date the complainant first obtained knowledge of the facts of the alleged discrimination, harassment, intimidation and/or bullying, unless the time for filing is extended by the superintendent or his or her designee.

Annual Notification of UCP Page 2 of 3

Complaints will be investigated and a written Decision or report will be sent to the complainant within sixty (60) days from the receipt of the complaint. This sixty (60) day time period may be extended by written agreement of the complainant. SCUSD's person responsible for investigating the complaint shall conduct and complete the investigation in accordance with Title 5 Code of Regulations (T5CCR) sections 4680-4687 and in accordance with local procedures adopted under section 4621 (T5CCR).

The complainant has a right to appeal SCUSD's Decision to the California Department of Education (CDE) by filing a written appeal within 15 days of receiving SCUSD's Decision. The appeal must include a copy of the complaint filed with SCUSD and a copy of SCUSD's Decision.

Civil law remedies may be available under state or federal discrimination, harassment, intimidation or bullying laws, if applicable. In appropriate cases, an appeal may be filed pursuant to Education Code Section 262.3. A complainant may pursue available civil law remedies outside of SCUSD's complaint procedures. Complainants may seek assistance from mediation centers or public/private interest attorneys. Civil law remedies that may be imposed by a court include, but are not limited to, injunctions and restraining orders.

## **Pupil Fees:**

A pupil enrolled in a District school shall not be required to pay a pupil fee for participation in an educational activity. Complaints alleging pupil fees shall be filed no later than one year from the date the alleged violation occurred. (5 CCR 4630(c) (2))

All of the following requirements apply to the prohibition identified above:

- All supplies, materials, and equipment needed to participate in educational activities shall be provided to pupils free of charge.
- A fee waiver policy shall not make a pupil fee permissible.
- The District shall not establish a two-tier educational system by requiring a minimal educational standard and also offering a second, higher educational standard that pupils may only obtain through payment of a fee or purchase of additional supplies that the school district or school does not provide.
- The District shall not offer course credit or privileges related to educational activities in exchange for money or donations of goods or services from a pupil or a pupil's parents or guardians, and a school district or school shall not remove course credit or privileges related to educational activities, or otherwise discriminate against a pupil, because the pupil or the pupil's parents or guardians did not or will not provide money or donations of goods or services to the school district or school.

The District shall not be prohibited solicitation of voluntary donations of funds or property, voluntary participation in fundraising activities, or school districts, schools, and other entities from providing pupils prizes or other recognition for voluntarily participating in fundraising activities.

This is declarative of existing law and shall not be interpreted to prohibit the imposition of a fee, deposit, or other charge otherwise allowed by law.

Annual Notification of UCP Page 3 of 3

A complaint of noncompliance with the requirements of this pupil fee law may be filed with the principal of a school under the Uniform Complaint Procedures set forth in Chapter 5.1 (commencing with Section 4600) of Division 1 of Title 5 of the California Code of Regulations.

A complaint may be filed anonymously if the complaint provides evidence or information leading to evidence to support an allegation of noncompliance with the requirements.

A complainant not satisfied with the decision of a District has a right to appeal the decision to the California Department of Education by filing a written appeal within 15 days of receiving SCUSD's Decision. The appeal must include a copy of the complaint filed with SCUSD and a copy of SCUSD's Decision.

Civil law remedies may be available under state or federal discrimination, harassment, intimidation or bullying laws, if applicable, and of the appeal pursuant to Education Code Section 262.3. (EC §§234.1, 262.3, 49013; 5 CCR §4622)

If the District finds merit in a complaint, or the California Department of Education finds merit in an appeal, the District shall provide a remedy to all affected pupils, parents, and guardians that, where applicable, includes reasonable efforts by the District to ensure full reimbursement to all affected pupils, parents, and guardians, subject to procedures established through regulations adopted by the state board.

Information regarding the requirements of this pupil fee law shall be included in the annual notification distributed to pupils, parents and guardians, employees, and other interested parties pursuant to Section 4622 of Title 5 of the California Code of Regulations.

The District shall establish local policies and procedures to implement the provisions of this law. (cf. Education Code 49011—49013)

A copy of SCUSD's UCP policy and complaint procedures shall be available free of charge and via the District website <u>www.scusd.edu</u>.

(Revision 08/2015)



## **Human Resource Services**

## **Williams Uniform Complaint Procedure**

## **Extracted From AR 1312.4 Community Relations**

## **Types of Williams Complaints**

The district shall use the following procedures to investigate and resolve complaints when the complainant alleges that any of the following has occurred: (Education Code 35186)

- 1. Instructional Materials
  - a. A pupil, including an English learner, does not have standards-aligned textbooks or instructional materials or state- or district-adopted textbooks or other required instructional materials to use in class.
  - b. A pupil does not have access to instructional materials to use at home or after school in order to complete required homework assignments.
  - c. Textbooks or instructional materials are in poor or unusable condition, have missing pages, or are unreadable due to damage.
- 2. Teacher Vacancy or Misassignment
  - a. A semester begins and a certificated teacher is not assigned to teach the class.

Vacancy means a position to which a single designated certificated employee has not been assigned at the beginning of the year for an entire year or, if the position is for a one-semester course, a position to which a single designated certificated employee has not been assigned at the beginning of a semester for an entire semester. (Education Code 33126)

- b. A teacher who lacks credentials or training to teach English learners is assigned to teach a class with more than 20 percent English learner pupils in the class.
- c. A teacher is assigned to teach a class for which the teacher lacks subject matter competency.

Misassignment means the placement of a certificated employee in a teaching or services position for which the employee does not hold a legally recognized certificate or credential or the placement of a certificated employee in a teaching or services position that the employee is not otherwise authorized by statute to hold. (Education Code 35186)

3. Facilities

A condition poses an emergency or urgent threat to the health or safety of pupils or staff.

Emergency or urgent threat means structures or systems that are in a condition that poses a threat to the health and safety of pupils or staff while at school, including but not limited to gas leaks; nonfunctioning heating, ventilation, fire sprinklers, or air-conditioning systems; electrical power failure; major sewer line stoppage; major pest or vermin infestation; broken windows or exterior doors or gates that will not lock and that pose a security risk; abatement of hazardous materials previously undiscovered that pose an immediate threat to pupils or staff; or structural damage creating a hazardous or uninhabitable condition. (Education Code 17592.72 paragraph (1) of subdivision (c))

## **Filing of Complaint**

A complaint alleging any condition(s) specified above shall be filed with the principal of the school or his or her designee, in which the complaint arises. The principal or designee shall forward a complaint about problems beyond his/her authority to the Superintendent or designee within 10 working days. (Education Code 35186)

The school shall have a complaint form available for such Williams Complaints. (Education Code 35186(a)(1), Title 5 California Code of Regulations (T5CCR) 4680):

The complainant need not use the Williams Complaint form to file a complaint.

The Williams Complaint form shall identify the place for filing the complaint.

The Williams Complaint form will include a space to indicate whether a response is requested.

The principal or designee shall make all reasonable efforts to investigate any problem within his/her authority. He/she shall remedy a valid complaint within a reasonable time period not to exceed 30 working days from the date the complaint was received. (Education Code 35186)

The Williams complaints may be filed anonymously. If the complainant has indicated on the complaint form that he/she would like a response to his/her complaint, the principal or designee shall report the resolution of the complaint to him/her within 45 working days of the initial filing of the complaint. At the same time, the principal or designee shall report the same information to the Superintendent or designee. (Education Code 35186)

Upon receipt of a written complaint from an individual, public agency or organization, Williams's complaint procedures shall be initiated. The Superintendent or designee shall distribute full information about these procedures.

Refusal by the complainant to provide the investigator with documents or other evidence related to the allegations in the complaint, or to otherwise fail or refuse to cooperate in the investigation or engage in any other obstructions of the investigation, may result in the dismissal of the complaint because of lack of evidence to support the allegations. (T5CCR 4631)

Refusal by the District to provide the investigator with access to records and/or other information related to the allegation in the complaint, or to otherwise fail to refuse or cooperate in the investigation or engage in any other obstruction of the investigation, may result in a finding based on evidence collected that a violation has occurred and may result in the imposition of a remedy in favor of the complainant. (T5CCR 4631)

The Board recognizes that a neutral mediator can often suggest a compromise that is agreeable to all parties in a dispute. In accordance with Williams's complaint procedures, whenever all parties to a complaint agree to try resolving their problem through mediation, the Superintendent or designee shall initiate mediation. The Superintendent or designee shall ensure that mediation results are consistent with state and federal laws and regulations.

If a complainant is not satisfied with the resolution of the complaint, he/she may describe the complaint to the Governing Board at a regularly scheduled hearing. (Education Code 35186)

For complaints concerning a facility condition that poses an emergency or urgent threat to the health or safety of pupils or staff as described in item #3 above, a complainant who is not satisfied with the resolution proffered by the principal or Superintendent or designee may file an appeal to the State Superintendent of Public Instruction within 15 days of receiving the report. (T5CCR 4687)

## Reports

The Superintendent or designee shall report summarized data on the nature and resolution of all complaints to the Board and the County Superintendent of Schools on a quarterly basis. The report shall include the number of complaints by general subject area with the number of resolved and unresolved complaints. These summaries shall be publicly reported on a quarterly basis at a regularly scheduled Board meeting. (Education Code 35186, T5CCR 4686)

If a response is requested, the response shall be made to the mailing address of the complainant indicated on the complaint. (Education Code 35186(a)(1), T5CCR 4680)

If Section 48985 if the Education Code is applicable, the response, if requested, and report shall be written in English and the primary language in which the complaint was filed. (Education Code 5186(a)(1))

Complaints and written responses shall be public records. (Education Code 35186)

The complainant shall comply with the appeal requirements of Title 5 California Code of Regulations 4632 and 4687.

## **Forms and Notices**

The Superintendent or designee shall ensure that the district's complaint form contains a space to indicate whether the complainant desires a response to his/her complaint and specifies the location for filing a complaint. A complainant may add as much text to explain the complaint as he/she wishes. (Education Code 35186)

The Superintendent or designee shall ensure that a notice is posted in each classroom in each school containing the components specified in Education Code 35186.

## **Program Administrators**

Iris Taylor,	Vacant, Director	Becky Bryant, Director
Interim Chief Academic Officer	Child Development	Special Education
(916) 643-9086	(916) 643-7800	(916) 643-9163
Lisa Hayes, Director	Chuck Ernst, Director	Barry Evpak, Director,
State and Federal Programs	Distribution Services	Facilities and Maintenance
643-9051	(916) 277-6715/6475	(916) 264-4075, Ext. 1008

To obtain further information and forms regarding Williams Uniform Compliant Procedures, please contact: <u>Compliance Officer</u>: Cancy McArn, Chief Human Resource Officer, Human Resources, Sacramento City Unified School District, 5735 47th Avenue, Sacramento, CA 95824, (916) 643-9050. The form (PSL-F089) may be downloaded from the district web page, <u>www.scusd.edu</u>, Human Resources, Uniform Complaint Procedures (left-hand side).

UNIFORM COMPLAINT (UC) PROCEDURES SHALL BE AVAILABLE FREE OF CHARGE: Contact Student Hearing and Placement Department (916) 643-9425 (Student Complaints) OR Human Resource Services, (916) 643-9050 (All Other Complaints). (T5 CCR 4622)

(Revised: 08-13-15)

**All Schools** 



HUMAN RESOURCE SERVICES

P.O. Box 246870 • Sacramento, CA 95824-6870 (916) 643-9050 • FAX (916) 399-2016

José L. Banda, Superintendent Cancy McArn, Chief Human Resources Officer

## Williams Complaints Classroom Notice Community Relations E 1312.4 Notice to Parents/Guardians, Pupils, Teachers: Complaint Rights

Parents/Guardians, Pupils, and Teachers:

Education Code 35186 requires that the following notice be posted in each classroom:

- 1. There should be sufficient textbooks and instructional materials. For there to be sufficient textbooks and instructional materials, each pupil, including English learners, must have a textbook, or instructional materials, or both, to use in class and to take home to complete required homework assignments.
- 2. School facilities must be clean, safe, and maintained in good repair. Good repair means that the facility is maintained in a manner that assures that it is clean, safe, and functional as determined by the Office of Public School Construction.
- 3. There should be no teacher vacancies or misassignments. There should be a teacher assigned to each class and not a series of substitutes or other temporary teachers. The teacher should have the proper credential to teach the class, including the certification required to teach English learners if present.

*Teacher vacancy* means a position to which a single designated certificated employee has not been assigned at the beginning of the year for an entire year or, if the position is for a one-semester course, a position to which a single designated certificated employee has not been assigned at the beginning of a semester for an entire semester.

*Misassignment* means the placement of a certificated employee in a teaching or services position for which the employee does not hold a legally recognized certificate or credential or the placement of a certificated employee in a teaching or services position that the employee is not otherwise authorized by statute to hold.

4. If you do not think these requirements are being met, a Uniform Complaint form (PSL-F089 Complaint Form) may be obtained at the school office, district office, or download from the Sacramento City Unified School District website. You may also download a copy of the California Department of Education complaint form from the following web site: <u>http://www.cde.ca.gov/re/cp/uc</u>

If you have other questions, please contact the following Administrators: Matt Turkie, Interim Assistant Superintendent, Curriculum and Instruction at (916) 643-9120, or Area Assistant Superintendents: Tu Moua-Carroz at (916) 643-9411, Doug Huscher at (916) 643-9162, Mary Hardin Young at (916) 643-9009, Chad Sweitzer at (916) 643-9244, & Olga Simms at (916) 643-9244 or Lisa Allen, Interim Deputy Superintendent at 643-9191.

English/Williams Uniform Complaint Procedure-All Schools (Rev.08-13-15)

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(	Sacramento	ĺ
	City Unified School District	ĺ
	School District	

## **Human Resource Services**

# **Complaint Form**

School District				For Offic	ce Use Only	
Check One				Case #:		
□ Employee □	☐ Applicant	Parent/Guard	dian 🛛 Public	□ Student*	Anonymous	
Date (mm/dd/yy):	1	1	Response Requeste	ed: 🗆 Yes 🛛	] No	
Site/Location:			Administ	rator:		
Course or Grade Lev	el:		Room Nu	mber or Location	n:	
Site/Location Addres	s:		Email add	lress:		
Name of Complainan	t (Print):					
Complainant Address	S:					
Complainant Home/V	Work Phone:		Location:			
Please indicate the t	ype of complain	t below: (BP refe	ers to Board Policy; E	E refers to Exhibi	it.)	
Employee/Appli	cant: Employm	ent Discrimination	on/Harassment (BP 1.	312.3, 4144)		
□ Age □ Sex		Sexual Orientatio	n 🗆 Ethni	c Group Identific	cation	
□ Race □ And	cestry Dr	National Origin	□ Menta	al or Physical Di	sability	
□ Religion □ Col	or 🗆 🕻	Other:	🗆 Empl	oyee Complaint	(BP 4144)	
Student *						
Student Complain	nt (BP 5144, 5145	.7)				
Parent/Public			and the second			
Complaint Concer			omplaint Concerning			
Discrimination in			mplaint Concerning			
Parent/Public: V (BP 1312.4, E[1] 1312		e Complaint	Concerning Defi	ciencies Rela	ated to	
	textboo	ks or instruction	nglish Learner, does r al materials or state-a o use in class. <i>(EC 35</i> .	dopted textbook	s or other required	
Instructional Materials	home o	A pupil does not have access to textbooks or instructional materials to use at home or after school. This does not require two sets of textbooks or instructional materials. <i>(EC 35186[e][1][B], T5CCR 4681)</i>				
	Textbo	missing pages, or are unreadable due to damage. (EC 35186[e][1][C], T5CCR				
	instruct					

(Continued on the following page)

Parent/Public: Will (BP 1312.4, E[1] 1312.4): (	iams Case Complaint Concerning Deficiencies Related to: continued)
Teacher Vacancy or	A semester begins and a teacher vacancy exists. (A position to which a single designated certificated employee has not been assigned at the beginning of the year for an entire year or, if the position is for a one-semester course, a position of which a single designated certificated employee has not been assigned at the beginning of a semester for an entire semester.) (EC 35186[e][2][A], T5CCR 4682)
Misassignments	☐ A teacher who lacks credentials or training to teach English learners is assigned to teach a class with more than 20% English learner pupils in the class. <i>(EC 35186[e][2][B], T5CCR 4682)</i>
	☐ A teacher assigned to teach a class for which the teacher lacks a subject matter competency. (EC 35186[e][2][C], T5CCR 4682)
Conditions of Facilities	A condition poses an urgent or emergency threat to the health or safety of pupils or staff, including: gas leaks, nonfunctioning heating, ventilation, fire sprinklers or air-conditioning systems, electrical power failure, major sewer line stoppage, major pest or vermin infestation, broken windows or exterior doors or gates that will not lock and that pose a security risk, abatement of hazardous materials previously undiscovered that pose an immediate threat to pupils or staff, structural damage creating a hazardous or uninhabitable condition, and any other emergency conditions the school district determines appropriate. <i>(EC 17592.72, T5CCR 4683)</i>
	A school restroom has not been maintained or cleaned regularly, is not fully operational, or has not been stocked at all times with toilet paper, soap, and paper towels or functional hand dryers. ( <i>EC 35292.5[a][1]</i> )
	☐ The school has not kept restrooms open during school hours when pupils are not in classes, and has not kept a sufficient number of restrooms open during school hours when pupils are in classes. This does not apply when temporary closing of the restroom is necessary for pupil safety or to make repairs. (EC 35292.5)
Intensive Instruction and Services Provided to Students Who Have Not Passed One or Both Parts of CAHSEE After the Completion of 12 <sup>th</sup> Grade	☐ Intensive instruction and services were not provided pursuant to Education Code Section 37254 to pupils who have not passed one or both parts of the high school exit examination after the completion of grade 12. <i>(EC 35186[a][4], EC 35186[e][4]), EC 35186[f][4])</i>

Person(s) Involved in Complaint: Date of Occurrence (mm/dd/yy): Ethnicity (if applicable):						
		2.				
		1	/ Time:		Witness:	
		Age (i	Age (if applicable):		Sex: 🗆 Male	
Describe the Specific Nature of thadditional pages, if necessary.)						

\*<u>Return student complaints to</u>: Student Hearing and Placement Department, 5735 47<sup>th</sup> Avenue, Sacramento, CA 95824, through District Mail to Box Number 760, fax to (916) 399-2029, phone (916) 643-9425. <u>Return all other complaints to</u>: Human Resource Services, 5735 47<sup>th</sup> Avenue, Sacramento, CA 95824, through District Mail to Box Number 770, fax to (916) 399-2016, phone (916) 643-9050.

<u>Note:</u> If dissatisfied with the District's decision, the complainant may appeal in writing to the California Department of Education within 15 days of receiving the district's decision. For good cause, the Superintendent of Public Instruction may grant an extension for filing appeals. (CCR 4652)

## UNIFORM COMPLAINT PROCEDURES SHALL BE AVAILABLE FREE OF CHARGE. PHONE NUMBERS ARE LISTED ABOVE TO REQUEST COPIES OF THE PROCEDURE.

# APPENDIX K

# **Bloodborne Pathogens**



## HEALTH SERVICES DEPARTMENT

573547th Avenue • Sacramento, CA 95824 (916) 643-9412 • FAX (916) 643-9471

José L. Banda, Superintendent Victoria Flores, Director III, Student Support and Health Services

DATE: September 1, 2015

TO: All Employees

FROM: Victoria Flores, Director III Student Support and Health Services Department

# SUBJECT: PROCEDURES TO BE USED IN SCHOOLS FOR THE PREVENTION OF INFECTIOUS DISEASES TRANSMITTED BY BODY FLUIDS: 2015-2016

Resources from the California Department of Education and the Centers For Disease Control are incorporated in the following preventive guidelines. The basic principle promoted by these guidelines is to use Universal Precautions.

## BACKGROUND:

The epidemic of the acquired immunodeficiency syndrome/human immunodeficiency virus (AIDS/HIV) infection has created much interest in what precautions can be taken to prevent the spread of all infectious diseases.

Because of the concern generated by AIDS/HIV infection, the California Legislature had mandated that schools inform their employees annually about appropriate methods for preventing the spread of all infectious diseases, with specific information about AIDS/HIV and also Hepatitis B infections (Health and Safety Codes, Sections 120875 and 120880).

In addition, Cal-OSHA, the California Occupational Safety and Health Administration adopted the Bloodborne Pathogens Standard (8-CCR-5193). "Bloodborne Pathogens" are defined as pathogenic microorganisms, which are present in human blood and can cause disease in humans. These pathogens include but are not limited to, hepatitis B virus, hepatitis C virus and human immunodeficiency virus. The Standard requires employers to develop plans and adopt practices, which eliminate or minimize employee occupational exposure to blood and other contaminated body fluids. In compliance with the Standard, Sacramento City Unified School District has developed an Exposure Control Plan, which covers the following areas:

- 1. Exposure determination for employee infection control
- 2. Hepatitis-B vaccination
- 3. Control methods including:
- 4. Universal Precautions
- 5. Engineering controls
- 6. Work practice controls
- 7. Personal protective equipment
- 8. Post exposure evaluation and follow-up
- 9. Regulated waste disposal
- 10. Labels and bags
- 11. Housekeeping practices
- 12. Training and education of employees
- 13. Record-keeping

A copy of the Exposure Control Plan is available for review at every school site and program office within the school district.

### Bloodborne Pathogens 2015

### UNIVERSAL PRECAUTIONS

The term <u>UNIVERSAL PRECAUTIONS</u> refers to a system of infection control in which the body fluids of all persons are treated as if known to be infectious. In the school setting, those precautions should include: hand washing, using disposable gloves, careful trash disposal, using disinfectants, and modifications of cardiopulmonary resuscitation (CPR)

It is critical that universal precautions be used in every instance when handling blood and body fluids because (1) there may be situations where it is not known that a person is infected; (2) persons should not wait until an identified infected student or adult is encountered before practicing infectious disease prevention techniques; and (3) for legal reasons related to confidentiality, there is no requirement that health officials notify school authorities of the results of blood tests for antibody to the HIV virus.

The term "body fluids" includes: blood, semen, vaginal secretions, drainage from scrapes and cuts, feces, urine, vomitus, respiratory secretions (such as nasal drainage) and saliva.

### HAND WASHING:

- 1. Thorough hand washing is the single most important factor in preventing the spread of infectious diseases and should be practiced routinely by all school personnel and taught to students as routine hygienic practice.
- 2. All staff should wash their hands in the following circumstances:
  - Before handling food, drinking or eating
  - After toileting
  - After contact with body fluids or items soiled with body fluids
  - After touching or caring for students, especially those with nose, mouth, or other discharges
- 3. Scheduling time for students to wash hands before eating is suggested to encourage the practice.
- 4. How to wash hands: Wet hands with running water and apply soap from a dispenser. Lather well and wash vigorously for 15 to 20 seconds. Soap suspends easily removable soil and microorganisms, allowing them to be washed off. Running water is necessary to carry away dirt and debris. Rinse well under running water with water draining from wrist to fingertips. Leave water running. Dry hands well with a paper towel and then turn off the faucet with paper towel. Discard the towel.
- 5. Classroom instruction about proper hand washing can be integrated into health instruction at all grade levels.

### FIRST AID INVOLVING BODY FLUIDS AND CPR:

- 1. Avoid direct skin contact with body fluids. Allow the student or staff person to clean their own body fluid spill when this can be done safely. If direct skin contact occurs, hands and other affected skin areas should be washed with soap and water immediately after contact has ended.
- 2. An "occupational exposure incident" is defined as: specific eye, mouth or other mucous membrane, non-intact skin or parenteral contact with <u>BLOOD</u> or <u>blood-tinged</u> body fluids resulting from the performance of an employee's duties. If an 'incident' occurs, the following steps should be taken by the affected employee:
  - Immediately wash the skin area exposed to body fluids with soap and running water. If it is the eye or mouth, flush with water.
  - Report the incident directly to your supervisor and include the names of everyone directly involved, as soon as possible.

### Bloodborne Pathogens 2015

The site administrator, supervisor or designee will report work-related injuries to the District Workers' Compensation Office at 643-9299. The SIA Nurse will direct the employee to the appropriate medical facility to determine the need for Hepatitis B vaccination and treatment. The SIA nurse will notify the Health Services Office of all occupational exposure incidents.

Employees working after hours and/or weekends may be directed by their site administrator, supervisor or designee to call 643-9299 and leave message. Someone will return your call the next business day. If it is an emergency, call 9-1-1 or go to the nearest hospital.

- 3. <u>Disposable single-use</u> latex gloves should be used when contact with body fluids is anticipated (such as bloody nose, diapering, etc.). Gloves are standard components for first aid supplies in the schools so that they are readily accessible for emergencies and regular care given in school health offices. Latex gloves as well as non-latex gloves are available from the district warehouse.
- 4. Devices that prevent backflow of fluids from the mouth of a victim being given CPR should be used by rescuers in the school setting. These devices are available through local medical supply companies.
- 5. Any soiled clothing should be placed in a plastic bag, sealed and placed in a second plastic bag. If soiled with <u>blood</u>, the second bag should be a red biohazard bag, available from the custodian. Label with the student's name. Send home with the student.

### TRASH DISPOSAL:

- 1. All wastebaskets should be lined with disposable plastic bags. In areas where blood is present, physical care is provided or personal care occurs (e.g., health office, restrooms, locker rooms, science classrooms, etc.), disposable plastic bags should be replaced daily.
- 2. Waste in which contains recognizable <u>fluid blood</u> is considered biohazardous waste and must be double bagged with the outside bag color-coded <u>red</u> and with a biohazard label. Biohazard waste cannot be disposed of in the dumpster. Health Services will pick up biohazard waste when notified by district sites. Please note: Band-Aids, feminine hygiene products or dressings with a small amount of dried blood are NOT considered biohazardous waste and may be disposed of in plastic bags as regular trash.
- 3. If needles, syringes, or lancets are used in the school setting or found on the school premises, a special punctureproof container is available from Health Services. Place intact needles and syringes in the designated puncture-proof container. Do not bend or break needles and do not recap needles. Health Services will pick up and dispose of the containers with a medical waste hauler.

### USING DISINFECTANTS

- 1. Environmental surfaces contaminated with body fluids should be cleaned promptly with disposable towels and approved disinfectant. Disposable gloves should be worn. Disposable items should be discarded in a plastic-lined wastebasket.
- 2. Mop solution used to clean up body fluid spills should consist of the district-approved disinfectant. Used mops should be soaked in this solution 30 minutes and rinsed thoroughly before reusing.
- 3. After cleanup, remove gloves and wash hands.
- 4. If carpet is soiled, clean up immediately with absorbent material and disinfect with district approved disinfectant.

### Bloodborne Pathogens 2015 INFECTIOUS DISEASES

### WHAT IS AIDS/HIV INFECTION?

AIDS (Acquired Immune Deficiency Syndrome) is the advanced stage of HIV (Human Immunodeficiency Virus) infection. The virus attacks the body's immune system, leaving the immune system vulnerable to life threatening opportunistic infectious and malignancies. The virus also may directly attack the central nervous system. Persons infected with HIV may have no apparent symptoms for up to ten years and may appear to be in good health. More than half of the persons in the United States who have been diagnosed to have AIDS (the advanced stage of HIV infection) have died. There is no known cure for AIDS at this time.

### HOW IS HIV INFECTION SPREAD?

Everyone infected with HIV, even a person without apparent symptoms, is capable of transmitting the infection. HIV infection can be transmitted by:

- 1. Sexual activity involving direct contact with blood, semen, or vaginal secretions of someone who is infected
- 2. Sharing intravenous (IV) needles and/or syringes with someone who is infected
- 3. Accidental needle sticks with needles containing infected blood
- 4. Direct contact with infected blood on broken skin or mucous membranes (eyes, nose, mouth)
- 5. Receiving a blood transfusion or blood products from someone who is infected (screening test advancements have reduced this risk)
- 6. Sharing unsterilized instruments for tattooing, ear piercing, shaving or acupuncture with someone who is infected
- 7. Being born to or breast fed by an infected mother

### THE HIV/AIDS VIRUS CANNOT BE TRANSMITED OR SPREAD:

through air or water	by using drinking fountains, toilets, sinks, etc.
by coughing or sneezing	through closed-mouth kissing
on surfaces such as phones or door knobs	through hugging

(There is no documentation of transmission through these sources.)

### SYMPTOMS OF HIV INFECTION:

A person could be infected with HIV and not know it because it can take years to damage the immune system enough for symptoms to appear. When symptoms do appear, they often seem like many common illnesses and may include:

Fever	Swollen glands	Loss of appetite
Night sweats	Diarrhea	Weight loss

A blood test, which shows the presence of HIV antibodies, confirms HIV infection. As the HIV infected person becomes unable to fight off infections and certain illnesses, the person is diagnosed with AIDS. There is no cure for HIV or AIDS at this time.

#### HIV/AIDS RESOURCES:

Education:

Sacramento County AIDS Program (875-6022)

#### Bloodborne Pathogens 2015

Testing:	Anonymous Testing: Sacramento County Department of Health and Human Services (874-7720)
Medical Treatment:	CARES (443-3299)
Information:	Northern California AIDS Hotline (1-800-367-2437) Monday through Friday – 9:00 a.m. to 4:00 p.m. Saturday and Sunday – Closed <u>www.HIVServicesCa.com</u> Operators speak: English, Spanish AIDS/HIV Night Line: 1-800-273-2437, 5:00 p.m. to 5:00 a.m. every night

#### WHAT IS HEPATITIS B?

Hepatitis B is an infection of the liver caused by a virus present in blood and other body fluids of infected persons. Less than 50 percent of persons who become infected show symptoms of illness. The onset of symptoms may appear 6 weeks to 6months after becoming infected with the virus. Five to ten percent of infected adults can become chronic virus carriers. Hepatitis B carriers may or may not have chronic liver disease. Persons with chronic liver disease are at increased risk for developing liver cancer.

#### HOW IS HEPATIITS B SPREAD?

An infected person can transmit Hepatitis B as long as the virus remains in the blood. Transmission may occur as early as 4 weeks before any symptoms occur. A small percentage of people will carry the virus in their blood for years and are known as chronic carriers. Hepatitis B can be transmitted by:

- 1. Sexual activity involving direct contact with blood, semen, or vaginal secretions of someone who is infected
- 2. Sharing unsterile instruments used for tattooing, ear piercing, shaving or acupuncture with someone who is infected
- 3. Sharing intravenous (IV) needles and/or syringes with someone who is infected
- 4. Direct Contact of infected blood with broken skin or mucous membrane (eyes, mouth, nose)
- 5. Accidental needle sticks with needles containing blood from a virus carrier
- 6. Being born to an infected mother
- 7. Sharing toothbrushes of an infected person

#### SYMPTOMS:

Mild fever Fatigue Loss of appetite Skin becomes yellowish (jaundice) Vomiting Muscle aches Joint aches Stool turns light (clay colored) Abdominal pain Nausea Urine turns dark

#### HEPATITIS B VACCINATION:

The Cal-OSHA Bloodborne Pathogens Standard requires employers to offer the 3-injection Hepatitis B vaccination series free to those employees who are determined to be occupationally at risk for exposure to blood and other potentially infectious materials as a result of their job duties. Sacramento City Unified School district employees who are determined to be at risk are provided with specific Bloodborne Pathogen Standard training and written information about the opportunity to receive the Vaccination series.

### Bloodborne Pathogens 2015

Initial and annual re-trainings are mandatory in order to meet Cal/OSHA requirements for the following job classifications:

- > athletic coach
- > bus attendant
- > bus driver
- > campus monitor
- > child care worker
- ➢ custodian
- elementary school principal, secretary or clerk who perform first aid routinely ×
- AA physical education teacher
- plant manager
- P plumber
- police officer P
- > preschool staff
- school community liaison
- > school nurse
- special education teacher or aide working with disabled student (of special day classes except LD and RSP) 4
- > walking attendant

Other employees not listed above may wish to discuss the need for Hepatitis B vaccine with their primary care physician. The Hepatitis B vaccination series may be covered by district health plans.

Questions regarding this memorandum may be directed to the Health Services Office at (916) 643-9412.

## APPENDIX L

## No Child Left Behind (NCLB)



## **Human Resource Services**

## No Child Left Behind (NCLB)

The No Child Left Behind Act of 2001 (NCLB) reauthorized the Elementary and Secondary Education Act (ESEA) -- the main federal law affecting education from kindergarten through high school. Proposed by President Bush shortly after his inauguration, NCLB was signed into law on January 8th, 2002.

NCLB is a landmark in education reform designed to improve student achievement and change the culture of America's schools. President George W. Bush describes this law as the "cornerstone of my administration." Clearly, our children are our future, and, as President Bush has expressed, "Too many of our neediest children are being left behind."

In amending *ESEA*, the new law represents a sweeping overhaul of federal efforts to support elementary and secondary education in the United States. It is built on four common-sense pillars: accountability for results; expanded parental options; expanded local control and flexibility; and an emphasis on doing what works based on scientific research.

### Four Pillars of NCLB

**Stronger Accountability for Results:** Under NCLB, states are working to close the achievement gap and make sure all students, including those who are disadvantaged, achieve academic proficiency. Annual state and school district report cards inform parents and communities about state and school progress. Schools that do not make progress must provide supplemental services, such as free tutoring or after-school assistance; take corrective actions; and, if still not making adequate yearly progress after five years, make dramatic changes to the way the school is run.

More Choices for Parents: Parents of children in low-performing schools have new options under NCLB. In schools that do not meet state standards for at least two consecutive years, parents may transfer their children to a better-performing public school, including a public charter school, within their district. The district must provide transportation, using Title I funds if necessary. Students from low-income families in schools that fail to meet state standards for at least three years are eligible to receive supplemental educational services, including tutoring, after-school services, and summer school. Also, students who attend a persistently dangerous school or are the victim of a violent crime while in their school have the option to attend a safe school within their district.

More Freedom for States and Communities: Under NCLB, states and school districts have unprecedented flexibility in how they use federal education funds. For example, it is possible for most school districts to transfer up to 50 percent of the federal formula grant funds they receive under the Improving Teacher Quality State Grants, Educational Technology, Innovative Programs, and Safe and Drug-Free Schools programs to any one of these programs, or to their Title I program, without separate approval. This allows districts to use funds for their particular needs, such as hiring new teachers, increasing teacher pay, and improving teacher training and professional development.

**Proven Education Methods:** NCLB puts emphasis on determining which educational programs and practices have been proven effective through rigorous scientific research. Federal funding is targeted to support these programs and teaching methods that work to improve student learning and achievement. In reading, for example, NCLB supports scientifically based instruction programs in the early grades under the Reading First program and in preschool under the Early Reading First program.

(Updated: 07-10-08)



No Child Left Behind Act: Highly Qualified Timelines: Teachers/Paraprofessionals

The "highly qualified" requirements in the No Child Left Behind (NCLB) Act apply to teachers <u>and</u> paraprofessionals. The timeline for meeting highly qualified requirements for paraprofessionals was at the end of the 2005-06 school year. The timeline was extended for teachers to June 20, 2007.

	Teachers	Paraprofessionals	
Who must meet the requirements?	<ul> <li>All teachers of core academic subject areas at all schools (including charter schools).</li> <li>Charter schools must be NCLB compliant; they are not exempt.</li> </ul>	• Paraprofessionals who provide instructional support to Title I, Part A, students. (Note: For school-wide programs, all paraprofessional providing instructional support must meet the requirement.)	
What are the requirements?	<ul> <li>Bachelor's degree.</li> <li>CTC issued credential.</li> <li>Demonstrated core academic subject matter competence. <i>Teachers credentialed after</i> <i>July 1, 2002:</i></li> <li>Pass approved subject matter exam.</li> <li>Major in subject area, graduate degree, or National Board Certificate, or HOUSSE (middle/high school only).</li> <li><i>Teachers credentialed before</i> <i>July 1, 2002:</i></li> <li>CA High Objective Uniform State Standard of Evaluation (HOUSSE) (all grades).</li> <li>Major in subject area, graduate degree, or National Board Certificate, or HOUSSE (middle/high school only).</li> <li>Pass approved subject matter exam.</li> </ul>	<ul> <li>Secondary school diploma.</li> <li>For those hired <u>after</u> January 8, 2002: two years of study at a college or university (48 units), associate's degree (or higher), pass the academic assessment, or be NCLB compliant.</li> </ul>	
When must the requirements be met?	June 20, 2007	End of the 2005-06 School Year	
Is there funding to support meeting this requirement?	All districts receiving Title I, Part A, must set aside 5% toward Highly Qualified support; Program Improvement schools and districts must set aside an additional 10%.		
Who will be targeted for an audit?	All schools <u>must be</u> 95% compliant status or will be targeted for audit.		

Training Manual: NCLB Highly Qual Timelines (09-07-12)



## **Human Resource Services**

## No Child Left Behind Act: Certificated Highly Qualified Teacher Designation

K-12 Classroom Teachers who teach core academic subjects:

- Arts (Visual and Performing) (Fine Art credit)
- Civics
- Economics
- English (to include Yearbook)
- Foreign Language
- Geography

- Government
- History
- Mathematics
- Reading or Language Arts
- Science

Exempt: Those who do not teach core academic subjects, such as:

- AVID
- Computer Business
- Health Education
- Librarians

Some Special Education teachers who:

- Assist disabled students with mobility
- Pull out students for RSP (Elementary RSP Teacher)

- Physical Education
- ROP
- ROTC
- Vocational Education
- Teach Life Skills
- Work in a consultative role

Consistent with the No Child Left Behind Act of 2001 (core subjects only) and other related legislation.

Human Resource Services contact person for Certificated NCLB paperwork:

Amber Pena, Human Resource Services Analyst (West Area), 643-7490 Jake Hansen, Human Resource Services Analyst (Central Area), 643-7495 Brandon Lillard, Human Resource Services Analyst (East Area), 643-7489 Marjorie Petralli, Credential Specialist, 643-2152



## **Human Resource Services**

## No Child Left Behind Act: Classified Highly Qualified Paraprofessional Designation

Assessor-Translator

Educational Assistant (Career Lattice)

Employment Coach, Special Education

Family Advocate (Integrated Support Services Only)

Health Aide I, II, III (Career Lattice)

Health Aide I, II, III, Special Education (Career Lattice)

Home Visitor, First 5 Home-Based Program (Career Lattice)

Home Visitor, Head Start/Early Head Start Home-Based Program (Career Lattice)

IEP Designated Instructional Paraprofessional-Special Education (AUT, CD, DD, DIS, ED, LD, OI, RSP, SD, VI) (Career Lattice)

Instructional Aide (Career Lattice)

Instructional Aide, (D/HOH) (Career Lattice)

Instructional Aide, Child Development (Career Lattice)

Instructional Aide, Computer Lab Assistant (Career Lattice)

Instructional Aide, Special Education (Career Lattice)

Interpreter for the Deaf I, II, III (Career Lattice)

School Intervention Staff Assistant

Teacher Assistant Bilingual (Career Lattice)

Teacher Assistant Bilingual, Computer Lab Assistant (Career Lattice)

Transition Assistant, Special Education

Consistent with the No Child Left Behind Act of 2001 (core subjects only), other related legislation, or as determined by the Chief Human Resources Officer.

Training Manual: NCLB Classified (09-07-12)

## APPENDIX M

Commonly Asked Questions



**Human Resource Services** 

### **Commonly Asked Questions**

### **Questions Regarding District Benefits**

Call the District's Benefits Office at (916) 643-9432

### Medical

Health Net: 1-(800) 522-0088 Kaiser: Member Services at 1-(800) 464-4000

Vision (VSP) at 1-(800) 877-7195 or www.vsp.org

Delta Dental at 1-(866) 499-3001 or www.deltadentalca.org

Employee Assistance (EAP) at 1-(800) 277-1060, Plan #5845-014

### **Flexible Reimbursement Account**

Section 125 of the Internal Revenue Code permits employers to offer their employees an option to set aside pre-tax dollars from their payroll check in accounts that would reimburse employees for dependent care expenses and/or non-reimbursed health care expenses. For information, please contact the District's Benefits Office at (916) 643-9432.

For non-carrier specific questions, call the District's Benefits Office at (916) 643-9432.

### **Human Resource Services Questions**

• Whom do I contact about renewing my credential?

The Credential Specialist, Marjorie Petralli, at (916) 643-2152 Commission on Teacher Credentialing Phone: (916) 445-7254

# • If I am applying for a loan, mortgage or rental agreement and an agency needs to verify employment with the District, whom should they contact?

Employment verifications are done through The Work Number, 1-800-367-5690, <u>www.theworknumber.com</u>. Please refer to the brochure that is provided.

• Who is my Personnel or Fiscal Services Technician (Payroll)?

• See the School or Department Assignments by Team, or call (916) 643-9050 for information.

• If I would like to know what salary class and step I am currently placed on or how many units the District has on file for me, who would I call?

Contact the appropriate Personnel Technician II. Refer to the School or Department Assignments by Team.

• How long is a probationary period?

Classified non-management employees......1 year Certificated non-management employees......2 years Classified management employees......1 year Certificated management employees.......2 years

• If I would like to know what vacancies are currently available, how would I find out? Where may I obtain an application for employment?

Access our website at <u>www.scusd.edu</u> to view vacancies, fill out an on-line application, and apply for vacancies.

• If I applied for a posted/advertised management, confidential, or nonrepresented supervisor vacancy and I would like to know the status of my application, who would I contact?

Monica Garland, Administrative Assistant Phone: 643-7474

• How many days of sick leave and vacation do I have?

Contact the appropriate Fiscal Technician I or Lead Payroll Technician. Refer to the School or Department Assignments by Team.

(Updated 11-03-15)

## APPENDIX N

New Health Insurance Marketplace Coverage Information



The Affordable Care Act (ACA) requires employers to provide all employees with a written notice about the public Marketplaces (insurance exchanges) that will be available for coverage starting January 1, 2014. Attached is this notice "New Health Insurance Marketplace Coverage Options and Your Health Coverage" –commonly referred to as the employer "Notice of Exchange."

Please carefully review the information contained in this notice. This Notice is for informational purposes only and does not affect or change your coverage (if you have it) through the District.

If you have any questions, please contact the Benefits Department at (916) 643-9432, <u>benefits@scusd.edu</u> 5735 47<sup>th</sup> Avenue Sacramento, CA 95824 Employer Identification Number (EIN): 94-6002491



New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved OMB No. 1210-0149 (expires 1-31-2017)

### **PART A: General Information**

When key parts of the health care law take effect in 2014, there will be a new way to buy health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment-based health coverage offered by your employer.

### What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October 2013 for coverage starting as early as January 1, 2014.

#### Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

### Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer's health plan. However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.<sup>1</sup>

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution -as well as your employee contribution to employer-offered coverage- is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

#### How Can I Get More Information?

For more information about your coverage offered by your employer, please check your summary plan description or contact

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit HealthCare.gov for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

<sup>&</sup>lt;sup>1</sup> An employer-sponsored health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs.

### PART B: Information About Health Coverage Offered by Your Employer

This section contains information about any health coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

3. Employer name 5. Employer address		<ol> <li>Employer Identification Number (EIN)</li> <li>Employer phone number</li> </ol>		
10. Who can we contact about employee health co	overage at this job?	1		
11. Phone number (if different from above)	12. Email address			

Here is some basic information about health coverage offered by this employer:

- •As your employer, we offer a health plan to:
  - All employees. Eligible employees are:
  - □ Some employees. Eligible employees are:

•With respect to dependents:

- U We do offer coverage. Eligible dependents are:
- We do not offer coverage.
- □ If checked, this coverage meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages.
  - \*\* Even if your employer intends your coverage to be affordable, you may still be eligible for a premium discount through the Marketplace. The Marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If, for example, your wages vary from week to week (perhaps you are an hourly employee or you work on a commission basis), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount.

If you decide to shop for coverage in the Marketplace, HealthCare.gov will guide you through the process. Here's the employer information you'll enter when you visit HealthCare.gov to find out if you can get a tax credit to lower your monthly premiums.

The information below corresponds to the Marketplace Employer Coverage Tool. Completing this section is optional for employers, but will help ensure employees understand their coverage choices.

13.	Is the employee currently eligible for coverage offered by this employer, or will the employee be eligible in the next 3 months?
	<ul> <li>Yes (Continue)         <ol> <li>If the employee is not eligible today, including as a result of a waiting or probationary period, when is the employee eligible for coverage? (mm/dd/yyyy) (Continue)</li> <li>No (STOP and return this form to employee)</li> </ol> </li> </ul>
14.	Does the employer offer a health plan that meets the minimum value standard*?
	For the lowest-cost plan that meets the minimum value standard* offered only to the employee (don't include family plans): If the employer has wellness programs, provide the premium that the employee would pay if he/she received the maximum discount for any tobacco cessation programs, and didn't receive any other discounts based on wellness programs. a. How much would the employee have to pay in premiums for this plan? \$
	plan year will end soon and you know that the health plans offered will change, go to question 16. If you don't v, STOP and return form to employee.
16.	What change will the employer make for the new plan year?

- Employer won't offer health coverage
  - Employer will start offering health coverage to employees or change the premium for the lowest-cost plan available only to the employee that meets the minimum value standard.\* (Premium should reflect the discount for wellness programs. See question 15.)

Quarterly Yearly

a. How much would the en	nployee have to pay in	premiums for this plan?	\$
b. How often?  Weekly	Every 2 weeks	Twice a month	Monthly

 An employer-sponsored health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs (Section 36B(c)(2)(C)(ii) of the Internal Revenue Code of 1986) . . .



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Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution -as well as your employee contribution to employer-offered coverage- is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

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This section contains information about any health coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

3. Employer name		4. Employer Identification Number (EIN)		
5. Employer address		6. Employer phone number		
7. City	8. St		9. ZI <sup>2</sup> code	
10. Who can we contact at this job?				
11. Phone number (if different from above) 12. Email address				

You are not eligible for health insurance coverage through this employer. You and your family may be able to obtain health coverage through the Marketplace, with a new kind of tax credit that lowers your monthly premiums and with assistance for out-of-pocket costs.