



08.220 Voluntary Shared Leave Program

Authority: Director of Human Resources
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Source of Authority: UNC Policy 300.3.1[R]
Related Links: Office of State Personnel Manual
Responsible Office: Human Resources

I. Policy

In case of a serious and prolonged medical condition, an employee may apply for or be nominated to become a recipient of leave transferred from another employee.

The intent of this policy is to allow one employee to assist another in a crisis involving a serious, prolonged medical condition. It is not the intent of this policy to apply to incidental, normal, short-term medical conditions.

For the purpose of this policy, medical condition means a medical condition of an employee (or a family member of an employee) that is likely to require an employee's absence from duty for a prolonged period of time and to result in a substantial loss of income to the employee due to limited leave in the employee's leave accounts.

With regard to application for participation in the program, each approved medical condition shall stand alone. An employee already approved for the shared leave program for one illness who subsequently develops another illness while under the program would have to reapply to remain eligible for the program.

II. Limits on Program Participation

- A. The use of vacation, sick, or bonus leave on a shared basis for any purpose other than specified by this policy is prohibited.
- B. The establishment of a "leave bank" for use by unnamed employees is expressly prohibited.
- C. The employee donating leave cannot receive compensation for the leave donated.
- D. Participation in this program is strictly voluntary. Any action by an employee to coerce another employee or interfere in any way with donating, receiving, or using leave under this program shall be grounds for disciplinary action up to and including dismissal on the basis of personal conduct.

III. Solicitation of Leave

- A. Only the University Human Resources Department may solicit the donation of vacation, bonus or sick leave on behalf of an employee approved for participation in this program. This solicitation of leave will be made only through periodic notices, as required, in a campus communication or on www.uncw.edu/hr.
- B. Employees may not personally solicit the donation of leave on their own behalf or on behalf of another employee, under the penalties noted above. However, an employee may solicit family members on his or her own behalf.

IV. Confidentiality

Individual leave records are confidential, and only individual employees may reveal their donation or receipt of leave. In addition, employees receiving donated leave shall not be informed of the names of employees who have donated leave. Finally, the nature of an employee's medical condition will not be made public.

V. Eligibility and Participation Requirements for Recipients

- A. The recipient must be a permanent EPA or SPA employee in a leave-earning status (including probationary employees and trainees to permanent appointments).
- B. An employee may apply for shared leave when medical evidence is available to support the need for leave beyond 20 days and also beyond the employee's accumulated leave balance. Leave donated under the program may be used to cover any associated absence from work.
- C. An employee must deplete all the vacation, bonus, sick leave, and accrued comp time in his or her account to become eligible to use donated leave. Accrued leave during the disability period will be deducted prior to shared leave donations.
- D. Participation in this program is limited to 1,040 hours (prorated for permanent part-time employees) either continuously or, if for the same condition, on a recurring basis. However, management may grant employee continuation in the program, month by month, for a maximum of 2,080 hours if management would otherwise have granted leave without pay.
- E. The university may initially or periodically require verification from the employee's attending physician (or the employee's family member's attending physician) as to the current or continuing nature of the medical condition in order to become or remain eligible for participation in the shared leave program.

- F. An employee on the Disability Income Plan of North Carolina or on workers' compensation leave should contact the Human Resources Department for further information regarding participation in this program.

VI. Participation Requirements for Donors

- A. Donation of Vacation or Bonus Leave. If the recipient employee has been approved for leave transfer under this program, vacation, or bonus leave may be donated by any SPA or EPA employee in a leave-earning status provided the employee donating vacation or bonus leave does not reduce his or her vacation leave balance below one-half the annual vacation leave accrual rate.

The following scenario is an example: A SPA employee with 5 but less than 10 years of state service earns 134 hours annually. This employee may contribute four or more hours but may not reduce his or her vacation leave balance below 67 hours.

- B. Donation of Sick Leave. Sick leave may be donated only by an immediate family member. For transfer of sick leave, immediate family member is restricted to spouse, parents, children (including step relationships), and other dependents living in the employee's household. An employee donating sick leave to a qualified family member under this program may not reduce his or her sick leave account below 40 hours.
- C. Amount of Sick or Vacation Leave to be Donated. The minimum amount of sick or vacation leave to be donated is four hours. Additional amounts may be donated in one-hour increments.

VII. Treatment of Unused Donated Leave

- A. Expiration of Medical Condition or Resignation of Recipient. At the expiration of the medical condition (as determined by the agency) or if the recipient employee resigns while participating in the program, the following guidelines apply:
 1. The sick leave balance of the recipient may not exceed 40 hours. Vacation leave balance will be zero.
 2. Any additional unused donated leave beyond 40 hours will be returned to the donor(s) on a prorated basis in increments of five minutes. Amounts fewer than one hour or increments fewer than five minutes shall not be returned to an individual donor, but will be forfeited.

3. Donated leave that would have been forfeited by the donor at the end of the calendar year (any amount above the 240 hours maximum allowable carryover) will not be returned to the donor.
- B. Death of Recipient Employee. In case of the death of an employee, unused donated leave will be returned to the donor(s) on a prorated basis in increments as indicated in Policy statement VII (A).

VIII. Participation in Shared Leave Program by Recipient

- A. Request for Participation. An employee desiring to be a recipient of shared leave must apply or be nominated by a fellow employee for participation in the program by letter of application to Human Resources. If nominated by a fellow employee, the nominee must sign a release to allow his or her status to be known prior to the soliciting, by University Human Resources, of shared leave on the employee's behalf. The nature of the employee's medical condition shall not be made public. Employees who are eligible for FMLA must complete an FMLA request through human Resources. Employees not eligible must submit a letter of application including the following information.
1. Name of employee
 2. Social security number
 3. Classification (e.g., Laborer, Clerk Typist III)
 4. Estimated length of time needed to participate in the program.
 5. A physician's statement of diagnosis certification of the illness and the anticipated length of disability must be attached to the request.
 6. A current time sheet must also be attached.
- B. Approval of the Request. Human Resources will review the merits of the request and will inform the employee of the final decision regarding acceptance or rejection as a recipient.
- C. Right to Appeal. Employees whose participation in the shared leave program is not approved may appeal the decision through the University Grievance and Appeal Procedure (Policy 08.520 or 08.521), with the provision that the resulting decision of the Chancellor is final and may not be appealed to the Office of State Personnel.
- D. Recipient Leave Accounting and Usage If Approved. Recipients will be notified in writing by Human Resources of leave amounts which have been donated to their account. Recipients should enter donated leave on the monthly time sheet

(Record of Hours Worked and Leave Taken, Form HR 210). (See Policy 08.210 - for additional information regarding Form HR 210). Attach a copy of the notification received from Human Resources to the time sheet before submitting to the employee's supervisor for approval at month-end.

Leave transferred under this program will be available for use on a current basis. Leave may be used to cover the initial 20 days of disability. All donated leave (whether sick or vacation or bonus leave) will be credited to the recipient's sick leave account.

IX. Participation in Shared Leave Program By Donor

- A. Request for Participation. An employee who wishes to donate vacation, bonus or sick leave should submit an Application for Leave (UNCW Form G.7-1) to his or her immediate supervisor for approval. Application for Leave forms may be ordered electronically from the U-Business Web site.
- B. Approval of the Request. Supervisory approval to donate vacation, bonus or sick leave is intended only to ensure participation requirements are met and leave donated is accurately reported. Supervisory approval of donated leave is not discretionary as is regular use of leave. The supervisor should ensure that requirements stated in Policy statement 6 are met and should contact Human Resources if unsure whether the designated recipient has been approved for participation in the program. Following supervisory approval, forward the original form to Human Resources for further review and final approval.
- C. Donor Leave Accounting If Approved. Upon approval by your immediate supervisor, the number of donated hours should be recorded on the monthly time sheet (Record of Hours Worked and Leave Taken, Form 08.210). (See Policy 08.210 for additional information regarding Form 210.)