To: Academic Senate Executive Committee

From: Dale Spartz, Chief Human Resources Officer

Date: March 11, 2019

RE: Rule Change

Attached you will find a redlined and clean copy of proposed changes to Rule 5-200B: Paid Time Off (PTO), Holidays, Paid Parental Leave, and Other Paid Leave for University of Utah Health: Hospitals & Clinics Staff Members. Revision 4. Effective Date: July 1, 2019.

The purpose of the revisions to this policy is to update most sections, but specifically to add the section on Paid Parental Leave of Absence III. G.

This proposed rule change only impacts Hospitals & Clinics employees.

We are proposing to add a paid parental leave benefit that offers similar benefits implemented by the Main Campus on January 1, 2019. Some differences occur in the execution of this plan to align and coordinate with the Hospitals & Clinics benefits programs (specifically short-term disability) and to offer the benefit to benefit eligible staff, starting at a .5 FTE.

The Hospitals & Clinics delayed the implementation of its paid parental leave to July 1st to coincide with our fiscal year and to allow us to adequately budget the new benefit expenses involved.

Here is a summary of the proposed changes:

Section I. is drafted to add parental leave in the text and to split out purpose and scope in the rule.

Section II. adds sub-section E. to define Paid Parental Leave (PPL).

Section III. A. 1. This is a correction that was not caught in a previous revision in that we have PTO benefits available at a .50 FTE.

Section III. D. 3. The first part of the paragraph was removed as it was more appropriately placed in Section III. F. 1. 3. a.

Section III. F. 1, 2, 3, 4 was added to this Rule as previous FMLA language was inadequate in describing the process we follow.

Section III. G. is the new Paid Parental Leave section.

1. a. The Hospitals and Clinics rule will determine eligibility at a .50 FTE. This is needed because of the high reliance the Hospitals and Clinics has for part time positions and align with other benefits we provide .50 FTE employees.

The remainder of Section III G. 1. is explanatory language.

Section III. G.

1. a. Because the Hospitals and Clinics staff work a variety of different shifts (4, 6, 8, 10, and 12 hour shifts), we have chosen to use 120 hours as the Paid Parental Leave

benefit versus using “weeks” as the duration of time.

1. We have also chosen to determine whether the leave benefit is granted as 100% of pay for three weeks or 50% of pay for six weeks, dependent on whether short-term disability (STD) is to be used. If STD is being used, the employee will be directed to using 100% of salary to cover the short-term disability elimination period. If STD will not be used, the employee will have an option in using 100% of pay for three weeks or 50% of pay for six weeks for those 120 hours.

Section III. H. was added as clarifying language on the ADA as the Hospitals and Clinics Human Resources Department has assumed the administration of ADA from the Office of General Counsel (OGC) and the Office of General Counsel offers legal support when needed.

Section I. 1. b. language was changed to reflect the actual process used. We use to 24 hours to define the benefit so that an equal benefit is given to everyone, regardless of the hours they work per shift. Defining the leave as three days creates an unequal benefit because of variable shifts. This is how the procedure has worked under revision 3 (most recent revision in July, 2018). We also changed the leave name from Funeral Leave to Bereavement Leave.