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Introductory Statement

Welcome! As an employee of **Family Assistance Program**, you are an important member of a team effort. We hope that you will find your position with the agency rewarding, challenging, and productive.

We look to you and the other employees to contribute to the success of the Agency. This employee handbook is intended to explain the terms and conditions of employment of all employees and supervisors.

This handbook summarizes the policies and practices in effect at the time of publication. This handbook supersedes all previously issued handbooks and any policy or benefit statements or memoranda that are inconsistent with the policies described here. In addition to the policies covered in this handbook, Family Assistance Program also maintains and incorporates by reference, separate policies and procedures addressing COVID-19 in the workplace.

Please take the time to review the policies in this handbook, as well as Family Assistance Program's COVID-19 policies and procedures. Your Human Resource or program manager will be happy to answer any questions you may have.

Harassment, Discrimination and Retaliation Prevention

Family Assistance Program is an equal opportunity employer. Family Assistance Program is committed to providing a work environment free of harassment, discrimination, retaliation, and disrespectful or other

unprofessional conduct based on:

- Race
- Religion (including religious dress and grooming practices)
- Color
- Gender (including pregnancy, childbirth, breastfeeding or related medical conditions), gender stereotype, gender identity/gender expression/transgender (including whether or not you are transitioning or have transitioned) and sexual orientation
- National origin
- Ancestry
- Physical or mental disability
- Medical condition
- Genetic information/characteristics
- Marital status/registered domestic partner status
- Age (40 and over)
- Sexual orientation
- Military or veteran status
- Any other basis protected by federal, state or local law or ordinance or regulation

Family Assistance Program also prohibits discrimination, harassment, disrespectful or unprofessional conduct based on the perception that anyone has any of those characteristics, or is associated with a person who has or is perceived as having any of those characteristics.

In addition, the Agency prohibits retaliation against individuals who raise complaints of discrimination or harassment or who participate in workplace investigations.

All such conduct violates Agency policy.

Harassment Prevention

The Agency's policy prohibiting harassment applies to all persons involved in the operation of the Agency. The agency prohibits harassment, disrespectful or unprofessional conduct by any employee of the agency, including supervisors, managers and co-workers. The agency's anti-harassment policy also applies to applicants, vendors, customers, independent contractors, unpaid interns, volunteers, persons providing services pursuant to a contract and other persons with whom you come into contact while working.

Prohibited harassment, disrespectful or unprofessional conduct includes, but is not limited to, the following behavior:

- Verbal conduct such as epithets, derogatory jokes or comments, slurs or unwanted sexual advances, invitations, comments, posts or messages
- Visual displays such as derogatory and/or sexually-oriented posters, photography, cartoons, drawings or gestures
- Physical conduct including assault, unwanted touching, intentionally blocking normal movement or interfering with work because of gender, race or any other protected basis
- Threats and demands to submit to sexual requests or sexual advances as a condition of continued employment, or to avoid some other loss and offers of employment benefits in return for sexual favors
- Retaliation for reporting or threatening to report harassment
- Communication via electronic media of any type that includes any conduct that is prohibited by state and/or federal law or by agency policy

Sexual harassment does not need to be motivated by sexual desire to be unlawful or to violate this policy. For example, hostile acts toward an employee because of their gender can amount to sexual harassment, regardless of whether the treatment is motivated by sexual desire.

Prohibited harassment is not just sexual harassment but harassment based on any protected category.

Non-Discrimination

Family Assistance Program is committed to compliance with all applicable laws providing equal employment opportunities. This commitment applies to all persons involved in agency operations. The agency prohibits unlawful discrimination against any job applicant, employee or unpaid intern by any employee of the agency, including supervisors and coworkers.

Pay discrimination between employees of opposite genders or between employees of another race or ethnicity performing substantially similar work, as defined by the California Fair Pay Act

and federal law, is prohibited. Pay differentials may be valid in certain situations defined by law. Employees will not be retaliated against for inquiring about or discussing wages. However, Family Assistance Program is not obligated to disclose the wages of other employees.

Anti-Retaliation

Family Assistance Program will not retaliate against you for filing a complaint or participating in any workplace investigation or complaint process, and will not tolerate or permit retaliation by management, employees or co-workers.

Reasonable Accommodation

Discrimination can also include failing to reasonably accommodate religious practices or qualified individuals with disabilities where the accommodation does not pose an undue hardship.

To comply with applicable laws ensuring equal employment opportunities to qualified individuals with a disability, the agency will make reasonable accommodations for the known physical or mental limitations of an otherwise qualified individual with a disability who is an applicant or an employee unless undue hardship would result.

Any job applicant or employee who requires an accommodation in order to perform the essential functions of the job should contact the Human Resources Manager and discuss the need for an accommodation. The agency will engage in an interactive process with the employee to identify possible accommodations, if any, that will help the applicant or employee perform the job. An applicant, employee, or volunteer who requires an accommodation of a religious belief or practice (including religious dress and grooming practices, such as religious clothing or hairstyles) should also contact the Human Resources Manager and discuss the need for an accommodation. If the accommodation is reasonable and will not impose an undue hardship, the agency will make the accommodation.

The agency will not retaliate against you for requesting a reasonable accommodation and will not knowingly tolerate or permit retaliation by management, employees or co-workers.

Diversity, Equity and Inclusion

Family Assistance Program is committed to fostering a diverse workforce, and maintaining a workplace that is equitable, inclusive and safe for all employees. From recruiting practices, to pay and benefits, promotions, and all other aspects of employment with us, an environment of equity is of the utmost importance.

We not only recognize that you, our employees, comprise a wide range of backgrounds and characteristics, but we believe those differences should be celebrated and valued. Whether it's race, religion, gender, national origin, ancestry, color, language, age, marital status, sexual orientation, gender identity, gender expression, physical or mental disability, medical condition, genetic information/characteristics, veteran status, political affiliation or any other characteristic, these are parts of each of you that contribute to your experiences as humans, and ultimately to the knowledge and expertise that make you a valuable asset to the agency.

Family Assistance Program is committed and determined that there is access, opportunity and advancement for all individuals. We are always looking for ways in which we can cultivate an inclusive work environment, strengthen our cultural competency, and train our managers and employees to provide opportunities for growth and development.

It is our intention that all our employees, regardless of any particular background or characteristic, are always treated with respect and dignity. Likewise, we expect that as our employees, you treat your coworkers, supervisors and other team members with the same dignity and respect at all times.

Disrespect, inappropriate behavior or conduct toward others will not be tolerated and may subject an employee to disciplinary action, up to and including termination.

If you feel you have been mistreated, harassed, or discriminated or retaliated against in violation of the agency's Harassment, Discrimination and Retaliation Prevention policy, please contact your supervisor or Human Resources Manager.

Complaint Process

If you believe that you have been the subject of harassment, discrimination, retaliation or other prohibited conduct, bring your complaint to your Manager. If after you have brought your complaint to your manager and you still feel it is not resolved you can bring your complaint to the Human Resources Manager, or the Chief Operating Officer (COO) as soon as possible after the incident. You can bring your complaint to any of these individuals. If you need assistance with your complaint, or if you prefer to make a complaint in person, contact your manager or the Human Resources Manager. Please provide all known details of the incident or incidents, names of individuals involved and names of any witnesses. It would be best to communicate your complaint in writing, but is not mandatory.

The agency encourages all individuals to report any incidents of harassment, discrimination, retaliation or other prohibited conduct forbidden by this policy immediately so that complaints can be quickly and fairly resolved.

Managers must refer all complaints involving harassment, discrimination, retaliation or other prohibited conduct to the Human Resources Manager of the agency or the Chief Operating Officer (COO) so the agency can try to resolve the complaint.

When the agency receives allegations of misconduct, it will immediately undertake a fair, timely, thorough and objective investigation of the allegations in accordance with all legal requirements. The agency will reach reasonable conclusions based on the evidence collected.

The agency will maintain confidentiality to the extent possible. However, the agency cannot promise complete confidentiality. The employer's duty to investigate and take corrective action may require the disclosure of information to individuals with a need to know.

Complaints will be:

- Responded to in a timely manner
- Kept confidential to the extent possible
- Investigated impartially by qualified personnel in a timely manner
- Documented and tracked for reasonable progress

- Given appropriate options for remedial action and resolution
- Closed in a timely manner

If the Agency determines that harassment, discrimination, retaliation or other prohibited conduct has occurred; appropriate and effective corrective and remedial action will be taken in accordance with the circumstances involved. The agency will also take appropriate action to deter future misconduct.

Any employee determined by the agency to have engaged in harassment, discrimination, retaliation or other prohibited conduct will be subject to appropriate disciplinary action, up to, and including termination. Employees should also know that if they engage in unlawful harassment, they can be held personally liable for the misconduct.

You also should be aware that the Federal Equal Employment Opportunity Commission and the California Department of Fair Employment and Housing investigate and prosecute complaints of prohibited harassment, discrimination and retaliation in employment. If you think you have been harassed or discriminated against or that you have been retaliated against for resisting, complaining or participating in an investigation, you may file a complaint with the appropriate agency. The nearest office can be found by visiting the agency websites at www.dfeh.ca.gov and www.eeoc.gov.

At-Will Employment Status

Employees at Family Assistance Program are employed on an at-will basis. This means that the employment relationship may be terminated at any time with or without reason or advance notice by either the employee or the Agency. Nothing in this handbook limits the right to terminate at-will employment.

No employee or representative of the Agency has any authority to enter into an agreement for employment for any specified period of time or to make an agreement for employment on other than at-will terms. Only the Executive Director of Family Assistance Program has the authority to make any such agreement, which is binding only if it is in writing.

Nothing in this at-will statement is intended to interfere with an employee's rights to communicate or work with others toward altering the terms and conditions of their employment, such as communications regarding wages, scheduling or other terms or conditions of employment.

Right to Revise

This employee handbook contains the employment policies and practices of Family Assistance Program in effect at the time of publication. All previously issued handbooks and any inconsistent policy statements or memoranda are superseded reserves the right to revise, modify, delete, or add to any and all policies, procedures, work rules, or benefits stated in this handbook or in any other document, except for the policy of at-will employment. However, any such changes must be in writing and must be signed by The Board of Directors and the Executive Director of Family Assistance Program.

Any written changes to this handbook will be distributed to all employees so that employees will be aware of the new policies or procedures. No oral statements or representations can in

any way alter the provisions of this handbook.

This handbook sets forth the entire agreement between you and Family Assistance Program as to the duration of employment and the circumstances under which employment may be terminated. Nothing in this employee handbook or in any other personnel document, including benefit plan descriptions, creates or is intended to create a promise or representation of continued employment for any employee.

Nothing in this at-will statement is intended to interfere with an employee's rights to communicate or work with others toward altering the terms and conditions of their employment.

Hiring

New Hires

The first 90 days of continuous employment at Family Assistance Program is considered an introductory period. During this time, you will learn your responsibilities, get acquainted with co-workers and determine whether or not you are happy with your job. Your manager will closely monitor your performance.

Completion of the introductory period does not entitle you to remain employed by Family Assistance Program for any definite period of time. Your status as an at-will employee does not change. The employment relationship may be terminated with or without cause and with or without advance notice, at any time by you or the Agency.

Job Duties

During the introductory period, your manager will explain your job responsibilities and the performance standards expected of you. Please keep in mind that your job responsibilities may change at any time during your employment. From time to time, you may be asked to work on special projects, or to assist with other work necessary or important to the operation of your department or Family Assistance Program. Your cooperation and assistance in performing such additional work is expected.

Family Assistance Program reserves the right, at any time, with or without notice, to alter or change job responsibilities, reassign or transfer job positions, or assign additional job responsibilities.

Full-Time Employees

Regular full-time employees are those who are scheduled for and do work 40 hours per week. Regular full-time employees are eligible for most employee benefits described in this handbook. Benefit eligibility may depend on length of continuous service. Benefit eligibility requirements may also be imposed by the plans themselves or by law.

Part-Time Employees

Part-time employees are those who are scheduled for and do work fewer than 32 hours per week, but not fewer than 20 hours. Part-time employees are eligible for the following benefits paid sick leave.

Regular Employees

Regular employees are those who are hired to work on a regular schedule. Regular employees may be classified as full-time or part-time.

Temporary Employees

Temporary employees are those employed for short-term assignments. Short-term

assignments generally are periods of three months or fewer; however, such assignments may be extended. Temporary employees are not eligible for employee benefits except those mandated by applicable law.

Inactive Status

Employees who are on any type of leave of absence, work-related or non-work-related, that exceeds any protected state, federal or local leave of absence will be placed on inactive status.

Health Benefits Extension

Unless health benefits extension is covered by local, state or federal law, benefits will terminate according to our insurance carrier's policy. Employees on inactive status may be eligible under the Consolidated Omnibus Budget Reconciliation Act (COBRA) or the California Continuation Benefits Replacement Act (Cal-COBRA) to elect to continue their health care coverage at the employee's expense.

Contact the Human Resources Manager, for more information.

Promotion Opportunities

Employees are encouraged to review job openings within the agency. The agency prefers to promote from within and will provide opportunities for growth through training opportunities and priority consideration for open positions.

Time Off and Leaves of Absence

Bereavement Leave

Family Assistance Program grants leave of absence to employees in the event of the death of the employee's current spouse, registered domestic partner, child, parent, legal guardian, brother, sister, grandparent, or grandchild; or mother-, father-, sister-, brother-, son-, or daughter-in-law. An employee with such a death in the family may take up to 3 consecutive or non-consecutive scheduled workdays off with pay and 2 additional days without pay with a total of 5 days and needs not be consecutive with the approval of their Manager. The employee's manager may approve additional unpaid time off.

Crime or Abuse Victims' Leave and Accommodation

If you are the victim of crime or abuse, you are eligible for unpaid leave. While the leave is generally unpaid, employees can use their paid sick time under California's Healthy Workplaces, Healthy Families Act for the purposes described below.

You are considered a victim of crime or abuse who is eligible for unpaid leave if you are:

- A victim of stalking, domestic violence, or sexual assault.
- A victim of a crime that caused physical injury or that caused mental injury and a threat of physical injury.
- A person whose immediate family member is deceased as a result of a crime.
 - "Immediate family member " includes:
 - Regardless of age, your biological, adoptive, or foster child, stepchild, or legal ward, a child of a registered domestic partner, a child to whom you stand in loco parentis, or a person to whom you stood in loco parentis when the person was a minor.
 - Your biological, adoptive, or foster parent, stepparent, or legal guardian or that of your spouse or registered domestic partner, or a person who stood in loco parentis when you or your spouse or registered domestic partner was a minor child.
 - Your legal spouse or registered domestic partner.
 - Your biological, foster, or adoptive sibling, a stepsibling, or half-sibling.
 - Any other individual whose close association with you is the equivalent of a family relationship described in any of the bullets above.
- Any person against whom any crime has been committed (only for purposes of taking time off to appear in court to comply with a subpoena or other court order as a witness in any judicial proceeding).

You may request leave if you are involved in a legal action, such as obtaining restraining orders, or appearing in court to obtain relief to ensure your or your child's health, safety, or welfare. Please provide reasonable advance notice of the need for leave, unless advance notice is not feasible. Contact Human Resources.

If you need a reasonable accommodation for your safety at work, contact Human Resources to discuss the need for an accommodation. If you are requesting a reasonable accommodation, you will need to submit a written statement signed by you, or by an individual acting on your behalf, certifying that the accommodation is for the purpose of your safety at work.

For reasonable accommodation requests, the Agency will also require certification demonstrating that you are the victim of crime and abuse. The Agency may request recertification every six months. Please notify the Agency if an approved accommodation is no longer needed.

The Agency will engage in an interactive process with you to identify possible accommodations, if any, that are effective and will make reasonable accommodations unless an undue hardship will result.

The Family Assistance Program will, to the extent allowed by law, maintain the confidentiality of an employee requesting leave or accommodation under these provisions.

Crime or Abuse Victims' Leave for Treatment

If you are the victim of domestic violence, sexual assault or stalking, you are eligible for unpaid leave. While the leave is generally unpaid, employees can use their paid sick time under California's Healthy Workplaces, Healthy Families Act for the purposes described below.

You are considered a victim of crime or abuse who is eligible for unpaid leave if you are:

- A victim of stalking, domestic violence, or sexual assault.
- A victim of a crime that caused physical injury or that caused mental injury and a threat of physical injury.
- A person whose immediate family member is deceased as a result of a crime.
 - "Immediate family member" includes:
 - Regardless of age, your biological, adoptive, or foster child, stepchild, or legal ward, a child of a registered domestic partner, a child to whom you stand in loco parentis, or a person to whom you stood in loco parentis when the person was a minor.
 - Your biological, adoptive, or foster parent, stepparent, or legal guardian or that of your spouse or registered domestic partner, or a person who stood in loco parentis when you or your spouse or registered domestic partner was a minor child.
 - Your legal spouse or registered domestic partner.
 - Your biological, foster, or adoptive sibling, a stepsibling, or half-sibling.
 - Any other individual whose close association with you is the equivalent of a family relationship described in any of the bullets above.

You may request leave for any of the following purposes:

- To seek medical attention for injuries caused by crime or abuse.
- To obtain services from a domestic violence shelter, program, rape crisis center, or victim services agency or agency as a result of the crime or abuse.

- To obtain psychological counseling or mental health services related to experiencing crime or abuse.
- To participate in safety planning and take other actions to increase safety from future crime or abuse, including temporary or permanent relocation.

Please provide reasonable advance notice of the need for leave unless advance notice is not feasible. Contact the Human Resources.

Family Assistance Program will, to the extent allowed by law, maintain the confidentiality of an employee requesting leave under this provision.

Criminal Judicial Proceedings and Victims' Rights Leave

If you are the victim, or the family member of a victim of certain serious crimes, you may take time off from work to attend judicial proceedings related to the crime or to attend proceedings involving rights of the victim.

If you are the family member of a crime victim, you may be eligible to take this leave if you are the crime victim's spouse, parent, child or sibling. Other family members may also be covered depending on the purpose of the leave.

The absence from work must be in order to attend judicial proceedings or proceedings involving rights of the victim. Only certain crimes are covered. You must provide reasonable advance notice of your need for leave, and documentation related to the proceeding may be required. If advance notice is not possible, you must provide appropriate documentation within a reasonable time after the absence.

Any absences from work to attend judicial proceedings or proceedings involving victim rights are unpaid, unless you choose to use vacation time.

For more information regarding this leave (including whether you are covered, when and what type of documentation is required, and which type of paid time off can be used), please contact the Human Resources Manager.

Jury Duty and Witness Leave

Family Assistance Program encourages employees to serve on jury duty and grants paid leave of absence to employees when called for such service. Non-exempt employees who have completed their introductory periods will receive full pay while serving up to 5 (five) days of jury duty. Exempt employees will receive full salary unless they are absent for a full week and perform no work. You should notify your manager of the need for time off for jury duty as soon as a notice or summons from the court is received. You may be requested to provide written verification from the court clerk of performance of jury service. If work time remains after any day of jury selection or jury duty, you will be expected to return to work for the remainder of your work schedule.

Fees Paid by the Court

You may retain any mileage allowance or other fee paid by the court for jury services.

Extended Medical Leave

On occasion, an employee may need a medical leave of absence that extends beyond limits under any state or federal mandatory leave law. In addition, there may be circumstances when an employee needs a medical leave allowed under disability laws and in accordance with this policy.

In these situations, an extended medical leave of absence may be granted for medical disabilities (other than pregnancy, childbirth, and related medical conditions) with a doctor's written certificate of disability. Extended disability leaves will also be considered on a case-by-case basis, consistent with the Agency's obligations under federal and state disability laws.

Employees should request any leave in writing as far in advance as possible.

A medical leave begins on the first day your doctor certifies that you are unable to work, and ends when your doctor certifies that you are able to return to work. Your Human Resources Manager will provide you with a form for your doctor to complete, showing the date you were disabled and the estimated date you will be able to return to work. When returning from a medical disability leave, you must present a doctor's certificate declaring fitness to return to work.

Upon return from medical leave, you will be offered the same position you held at the time your leave began, if available. If your former position is not available, a comparable position will be offered. If neither the same nor a comparable position is available, your return to work will depend on job openings existing at the time of your scheduled return. Family Assistance Program makes no guarantees of reinstatement, and your return will depend on your qualifications for existing openings will comply with any reinstatement obligations under state or federal law. California workers' compensation laws govern work-related injuries and illnesses. California pregnancy disability laws govern leaves taken because of pregnancy, childbirth, and related medical conditions. An employee that needs reasonable accommodations should contact the Human Resources Manager and discuss the need for an accommodation.

Pregnancy Disability Leave

If you are pregnant, have a related medical condition, or are recovering from childbirth, please review this policy. Any employee planning to take pregnancy disability leave ("PDL") should advise the Human Resources Manager as early as possible. Please make an appointment with the Human Resources Manager to discuss the following conditions:

- The length of pregnancy disability leave will be determined by the advice of your health care provider, but employees disabled by pregnancy may take up to four months of leave per pregnancy (the working days you normally would work in one-third of a year or 17 1/3 weeks). Part-time employees are entitled to leave on a pro rata basis. The four months of leave includes any period of time for actual disability caused by your pregnancy, childbirth, or related medical condition. This includes leave for severe morning sickness and for prenatal care, doctor-ordered bed rest, as well as other reasons. Your healthcare provider determines how much time you need for your disability.
- Family Assistance Program will also reasonably accommodate medical needs related to

pregnancy, childbirth, or related conditions or temporarily transfer you to a less strenuous or hazardous position (where one is available) or duties if medically needed because of your pregnancy.

- If you need to take PDL, you must inform Family Assistance Program when a leave is expected to begin and how long it will likely last. If the need for a leave, reasonable accommodation, or transfer is foreseeable (such as the expected birth of a child or a planned medical treatment for yourself), you must provide at least 30 days' advance notice before the PDL or transfer is to begin. Consult with the Human Resources Manager regarding the scheduling of any planned medical treatment or supervision in order to minimize disruption to the operations of the Agency. Any such scheduling is subject to the approval of your health care provider.
- For emergencies or events that are unforeseeable, we need you to notify the Agency, at least verbally, as soon as practical after you learn of the need for the leave.
- Failure to comply with these notice requirements may result in delay of PDL, reasonable accommodation, or transfer.
- Pregnancy Disability Leave usually begins when ordered by your health care provider. You must provide Family Assistance Program with a written certification from a health care provider for need of PDL, reasonable accommodation or transfer. The certification must be returned no later than 15 calendar days after it is requested by the Agency. Failure to do so may, in some circumstances, delay PDL, reasonable accommodation or transfer. Please see the Human Resources Manager for a medical certification form to give to your health care provider.
- Leave returns will be allowed only when your health care provider sends a release.
- You are required to use accrued sick time (if otherwise eligible to take the time) during PDL. You are allowed to use accrued vacation or personal time (if otherwise eligible to take the time) during PDL.
- Leave does not need to be taken in one continuous period of time and may be taken intermittently, as needed. Leave may be taken in increments of 30 min., one hour-increment; cannot be greater than one hour.

If intermittent leave or leave on a reduced work schedule is medically advisable you may, in some instances, be required to transfer temporarily to an available alternative position that meets your needs. The alternative position does not need to have equivalent job duties, but must have the equivalent rate of pay and benefits and you must be qualified for the position. The position must better accommodate your leave requirements than your regular job. Transfer to an alternative position can include altering an existing job to better accommodate your need for intermittent leave or a reduced work schedule.

When your health care provider releases you to return to work from PDL, you will be reinstated to your same position held at the time the leave began or, in certain instances, to a comparable position, if available. There are limited exceptions to this policy. An employee returning from a pregnancy disability leave has no greater right to reinstatement than if the employee had been continuously employed.

If you are on PDL, you will be allowed to continue to participate in group health insurance coverage for up to a maximum of four months of disability leave (if such insurance was

provided before the leave was taken) at the level and under the conditions that coverage would have been provided if you had continued in employment continuously for the duration of the leave. In some instances, the Agency can recover premiums paid to maintain your health coverage if you fail to return from PDL. PDL may impact other benefits or a seniority date. Please contact the Human Resources Manager for more information.

Family and Medical Leave (FMLA)

The federal Family and Medical Leave Act (FMLA) provides up to 12 workweeks of unpaid family/medical leave within a 12-month period, under the following conditions:

- You have been employed with the Agency for a total of at least 12 months prior to the commencement of leave. The 12 months of employment must have accumulated within the previous seven years (certain exceptions apply).
- You have worked at least 1,250 hours during the previous 12-month period before the need for leave.
- You are employed at a worksite where there are 50 or more employees within a 75-mile radius.

Leave may be taken for one or more of the following reasons:

- Your serious health condition that makes you unable to perform your job
- To care for your family member who has a serious health condition. For purposes of FMLA leave, a "family member" includes your:
 - Spouse
 - Parent
 - Child under the age of 18, or child over the age of 18 and incapable of self-care due to mental or physical disability at the time FMLA leave is to begin
- The birth of your child, or placement of a child with you for adoption or foster care
- Because of a qualifying exigency related to covered active duty or a call to covered active duty of your spouse, child or parent in the Armed Forces of the United States, or to care for a covered servicemember. (See Military Family Leave Entitlements below.)
- Incapacity due to pregnancy, prenatal medical care or child birth

Depending on your reason for leave, you may also be eligible for California Family Rights Act (CFRA) leave, in which case both your FMLA leave and CFRA leave will run concurrently. (See the *CFRA Leave* policy for additional information and CFRA leave eligibility.)

For additional information about eligibility for FMLA and how it may or may not interact with CFRA leave, contact Human Resources.

Military Family Leave Entitlements

- Eligible employees whose spouse, son, daughter or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement for 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.

- Eligible employees may also take a special leave entitlement of up to 26 weeks of leave during a single 12-month period to care for a covered servicemember. A covered servicemember is either:
 - A current member of the Armed forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness*
 - A veteran who was discharged or released under conditions other than dishonorable at any time during the five-year period prior to the first date the eligible employee takes FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness*
- *The FMLA definitions of "serious injury or illness" for current servicemembers and veterans are different from the FMLA definition of "serious health condition."

Pregnancy, Childbirth or Related Conditions and Baby Bonding

Time off because of pregnancy disability, childbirth or related medical condition counts as FMLA leave, but not for CFRA leave. Employees who take time off for pregnancy disability and who are eligible for FMLA will be placed on FMLA that runs at the same time as their pregnancy disability leave (PDL).

Once the pregnant employee is no longer disabled, or once the employee has given birth and exhausted PDL, the employee may apply for leave under the CFRA, for purposes of baby bonding.

Under the FMLA, leave taken for the birth, adoption, or foster care placement of a child must be taken as a continuous block of leave unless the Agency grants intermittent leave. If, however, your baby bonding leave is under both FMLA and CFRA (running concurrently), such leave does not have to be taken in one continuous period of time: CFRA leave taken for the birth or placement of a child will be granted in minimum amounts of two weeks. However, the Agency will grant a request for a CFRA leave (for birth/placement of a child) of less than two weeks' duration on any two occasions. The Agency may also grant additional requests for leave lasting less than two weeks at its discretion. Any leave taken (under either FMLA or CFRA) must be concluded within one year of the birth or placement of the child with the employee.

Leave Procedures

The following procedures shall apply to FMLA leave:

- Please contact the Human Resources Manager as soon as you realize the need for family/medical leave. If the leave is based on the expected birth, placement for adoption or foster care, or planned medical treatment for your serious health condition or that of a family member, you must notify the Agency at least 30 days before leave is to begin. You must consult with your Human Resources Manager regarding scheduling of any planned medical treatment or supervision in order to minimize disruption to the

operations of the Agency. Any such scheduling is subject to the approval of your health care provider or the health care provider of your child, parent, or spouse.

- If you cannot provide 30 days' notice, the Agency must be informed as soon as is practical.
- If the FMLA request is made because of your own serious health condition, the Agency may require, at its expense, a second opinion from a health care provider that the Agency chooses. The health care provider designated to give a second opinion will not be one who is employed on a regular basis by the Agency.
- If the second opinion differs from the first opinion, the Agency may require you, at the Agency's expense, to obtain the opinion of a third health care provider designated or approved jointly by you and the employer. The opinion of the third health care provider shall be considered final and binding on you and the Agency.

Certification

Family Assistance Program requires you to provide certification. You will have 15 calendar days from the Agency's request for certification to provide it to the Agency, unless it is not practical to do so. The Agency may require recertification from the health care provider if you request additional leave upon expiration of the time period in the original certification. (For example, if you need two weeks of family and medical leave, but following the two weeks you need intermittent leave, a new medical certification will be requested and required.) If you do not provide medical certification in a timely manner to substantiate the need for family and medical leave, the Agency may delay approval of the leave, or continuation thereof, until certification is received. If certification is never received, the leave may not be considered FMLA leave.

If the leave is needed to care for a sick family member, you must provide a certification from the health care provider stating:

- Date of commencement of the serious health condition
- Probable duration of the condition
- Estimated amount of time for care by the health care provider
- Confirmation that the serious health condition warrants your participation

Under the FMLA, when both parents are employed by the Agency, and request simultaneous leave for the birth or placement for adoption or foster care of a child, the Agency will not grant more than a total of 12 workweeks of FMLA leave for this reason. However, if baby bonding leave is under both FMLA and CFRA (running concurrently), each parent employed by the Agency is entitled to 12 workweeks of leave for this reason.

If your serious health condition is the reason for leave, you must provide a certification from the health care provider stating:

- Date of commencement of the serious health condition
- Probable duration of the condition

- Your inability to work at all or to perform any one or more of the essential functions of your position because of the serious health condition

If you are on leave because of your own serious health condition, the Agency will also require a medical release to return to work form or certification from your health care provider that you are able to resume work.

Failure to provide a release to return to work from your health care provider may result in denial of reinstatement until the certificate is obtained.

Leave Related to Military Service

A leave taken due to a "qualifying exigency" related to military service must be supported by a certification of its necessity. A leave taken due to the need to care for a servicemember must be supported by a certification by the servicemember's health care provider or other certification allowed by law. Special certification requirements apply to leaves related to military service.

Health and Benefit Plans

If you are taking FMLA leave, you will be allowed to continue participating in any health and welfare benefit plans in which you were enrolled in before the first day of the leave (for a maximum of 12 workweeks, or 26 workweeks if the leave is to care for a covered servicemember) at the level and under the conditions of coverage as if you had continued in employment for the duration of such leave. The Agency will continue to make the same premium contribution as if you had continued working. The continued participation in health benefits begins on the date leave first begins. In some instances, the Agency may recover premiums paid to maintain health coverage if you fail to return to work following FMLA leave.

Employees on pregnancy disability leave will be allowed to continue to participate in group health coverage for up to a maximum of four months of pregnancy disability leave (if such insurance was provided before the leave was taken) on the same terms as if you had continued to work. The right to continued group health coverage during pregnancy disability leave is a separate and distinct entitlement from the CFRA entitlement.

[Option 1]: Payment is due when it would be made by payroll deduction.

[Option 2]: Payment is due on the same schedule as payments that are made under COBRA

Substitution of Paid Leave

Generally, FMLA leave is unpaid. The Agency may require, or you may choose, to use accrued paid leave while taking FMLA leave. In order to use paid leave for FMLA leave, you must comply with the Agency's normal paid leave policies. For more information on those specific circumstances requiring or allowing the substitution of paid leave contact the Human Resources Manager.

Reinstatement

Under most circumstances, upon return from FMLA leave, you will be reinstated to your

original job or to an equivalent job with equivalent pay, benefits, and other employment terms and conditions. However, an employee has no greater right to reinstatement than if the employee had been continuously employed rather than on leave. For example, if an employee on FMLA leave would have been laid off had the employee not gone on leave, or if the employee's job is eliminated during the leave and no equivalent or comparable job is available, then the employee would not be entitled to reinstatement. In addition, an employee's use of FMLA leave will not result in the loss of any employment benefit that the employee earned before using FMLA leave.

Reinstatement after FMLA leave may be denied to certain salaried "key" employees under the following conditions (however, this exception will not apply if the FMLA leave runs concurrently with CFRA leave):

Time Accrual – While on Leave

Sick and vacation time will not accrue while you are out on leave of absence.

Carryover

Leave granted under any of the reasons provided by FMLA and/or CFRA will be counted as family/medical leave and will be considered as part of the 12-workweek entitlement (26-workweek entitlement if leave is to care for a servicemember) in any 12-month period. No carryover of unused leave from one 12-month period to the next 12-month period is permitted.

Intermittent Leave

You may take FMLA leave intermittently (in blocks of time, or by reducing your normal weekly or daily work schedule) if the leave is for your serious health condition or that of a qualifying family member and the reduced leave schedule is medically necessary as determined by the health care provider of the person with the serious health condition. The smallest increment of time that can be used for such leave is [one hour maximum].

See also the discussion of Pregnancy, Childbirth or Related Conditions and Baby Bonding above.

California Family Rights Act (CFRA)

California's California Family Rights Act (CFRA) provides up to 12 workweeks of unpaid family/medical leave within a 12-month period, under the following conditions:

- You have been employed with the Agency for a total of at least 12 months prior to the commencement of leave. The 12 months of employment must have accumulated within the previous seven years (certain exceptions apply).
- You have worked at least 1,250 hours during the previous 12-month period before the need for leave*.

*Special hours of service eligibility requirements apply to airline flight crew employees.

Leave may be taken for one or more of the following reasons:

- Your serious health condition that makes you unable to perform your job.
- To care for your family member who has a serious health condition. For purposes of CFRA leave, a "family member" includes your:
 - Spouse
 - Parent
 - Child of any age
 - Registered domestic partner
 - Grandparent
 - Grandchild
 - Sibling
 - Parent-in-law
- The birth of your child, or placement of a child with you for adoption or foster care.
- Because of a qualifying exigency related to covered active duty or a call to covered active duty of your spouse, registered domestic partner, child, or parent in the Armed Forces of the United States. (See Qualifying Exigencies Related to Active Duty below).

Qualifying Exigencies Related to Active Duty

Eligible employees whose spouse, domestic partner, child or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement for certain qualifying exigencies. Qualifying exigencies may include, but are not necessarily limited to, attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

Pregnancy, Childbirth or Related Conditions and Baby Bonding

Leave because of a disability for pregnancy, childbirth or related medical condition is not counted as time used under CFRA leave. Employees who take time off for pregnancy disability will be placed on pregnancy disability leave (PDL). (See *Pregnancy Disability Leave* policy for more information.)

Once the pregnant employee is no longer disabled, or once the employee has given birth and exhausted PDL, the employee may apply for leave under the CFRA, for purposes of baby bonding.

Any leave taken for the birth, adoption, or foster care placement of a child does not have to be taken in one continuous period of time. CFRA leave taken for the birth or placement of a child will be granted in minimum amounts of two weeks. However, the Agency will grant a request for a CFRA leave (for birth/placement of a child) of less than two weeks' duration on any two occasions. The Agency may also grant additional requests for leave lasting less than two weeks at its discretion. Any leave taken must be concluded within one year of the birth or placement of the child with the employee.

Leave Procedures

The following procedures shall apply to CFRA leave:

- Please contact the Human Resources Manager as soon as you realize the need for family/medical leave. If the leave is based on the expected birth, placement for adoption or foster care, or planned medical treatment for your serious health condition or that of a family member, you must notify the Agency at least 30 days before leave is to begin. You must consult with your supervisor regarding scheduling of any planned medical treatment or supervision in order to minimize disruption to the operations of the Agency. Any such scheduling is subject to the approval of your health care provider or the health care provider of your family member.
- If you cannot provide 30 days' notice, the Agency must be informed as soon as is practical.
- If the CFRA request is made because of your own serious health condition, the Agency may require, at its expense, a second opinion from a health care provider that the Agency chooses. The health care provider designated to give a second opinion will not be one who is employed on a regular basis by the Agency.
- If the second opinion differs from the first opinion, the Agency may require you, at the Agency's expense, to obtain the opinion of a third health care provider designated or approved jointly by you and the employer. The opinion of the third health care provider shall be considered final and binding on you and the Agency.

Certification

Family Assistance Program requires you to provide certification. You will have 15 calendar days from the Agency's request for certification to provide it to the Agency, unless it is not practical to do so. The Agency may require recertification from the health care provider if you request additional leave upon expiration of the time period in the original certification. (For example, if you need two weeks of family and medical leave, but following the two weeks you need intermittent leave, a new medical certification will be requested and required.) If you do not provide medical certification in a timely manner to substantiate the need for family and medical leave, the Agency may delay approval of the leave, or continuation thereof, until certification is received. If certification is never received, the leave may not be considered CFRA leave.

If the leave is needed to care for a sick family member, you must provide a certification from the health care provider stating:

- Date of commencement of the serious health condition
- Probable duration of the condition
- Estimated amount of time for care by the health care provider
- Confirmation that the serious health condition warrants your participation

If your serious health condition is the reason for leave, you must provide a certification from the health care provider stating:

- Date of commencement of the serious health condition

- Probable duration of the condition
- Your inability to work at all or to perform any one or more of the essential functions of your position because of the serious health condition

If you are on leave because of your own serious health condition, the Agency will also require a medical release to return to work form or certification from your health care provider that you are able to resume work.

Failure to provide a release to return to work from your health care provider may result in denial of reinstatement until the certificate is obtained.

Leave Related to Military Service

A leave taken due to a "qualifying exigency" related to military service must be supported by a certification of its necessity. Special certification requirements apply to leaves related to military service.

Health and Benefit Plans

If you are taking CFRA leave, you will be allowed to continue participating in any health and welfare benefit plans in which you were enrolled in before the first day of the leave (for a maximum of 12 workweeks) at the level and under the conditions of coverage as if you had continued in employment for the duration of such leave. The Agency will continue to make the same premium contribution as if you had continued working. The continued participation in health benefits begins on the date leave first begins. In some instances, the Agency may recover premiums paid to maintain health coverage if you fail to return to work following CFRA leave.

Employees on pregnancy disability leave will be allowed to continue to participate in group health coverage for up to a maximum of four months of pregnancy disability leave (if such insurance was provided before the leave was taken) on the same terms as if you had continued to work. The right to continued group health coverage during pregnancy disability leave is a separate and distinct entitlement from the CFRA entitlement.

Payment is by the 7th of the month.

Substitution of Paid Leave

Generally, CFRA leave is unpaid. The Agency may require, or you may choose, to use accrued paid leave while taking CFRA leave. In order to use paid leave for CFRA leave, you must comply with the Agency's normal paid leave policies. For more information on those specific circumstances requiring or allowing the substitution of paid leave contact Human Resources Manager.

Reinstatement

Under most circumstances, upon return from CFRA leave, you will be reinstated to your original job or to an equivalent job with equivalent pay, benefits, and other employment terms

and conditions. However, an employee has no greater right to reinstatement than if the employee had been continuously employed rather than on leave. For example, if an employee on CFRA leave would have been laid off had the employee not gone on leave, or if the employee's job is eliminated during the leave and no equivalent or comparable job is available, then the employee would not be entitled to reinstatement. In addition, an employee's use of CFRA leave will not result in the loss of any employment benefit that the employee earned before using CFRA leave.

Time Accrual

Please contact Human Resources with any questions regarding accrual of other Agency provided paid leave benefits (such as vacation, or sick leave) during unpaid CFRA leave.

Carryover

Leave granted under any of the reasons provided by CFRA and/or FMLA will be counted as family/medical leave and will be considered as part of the 12-workweek entitlement in any 12-month period. No carryover of unused leave from one 12-month period to the next 12-month period is permitted.

Intermittent Leave

You may take CFRA leave intermittently (in blocks of time, or by reducing your normal weekly or daily work schedule) if the leave is for your serious health condition or that of a qualifying family member and the reduced leave schedule is medically necessary as determined by the health care provider of the person with the serious health condition. The smallest increment of time that can be used for such leave is [one hour maximum].

See also the discussion of *Pregnancy, Childbirth or Related Conditions and Baby Bonding* above.

Please note that incapacity due to pregnancy, prenatal medical care or childbirth is not an eligible reason for CFRA leave. However, if you are eligible for leave under the Family Medical Leave Act (FMLA), then such leave will run concurrently with FMLA. (See *Pregnancy Disability Leave* and *FMLA Leave* policies for additional information).

If you are also eligible for leave under the FMLA, and depending on your reason for CFRA leave, FMLA may run concurrently with your CFRA leave. (See the *FMLA Leave* policy for additional information regarding FMLA leave eligibility).

For additional information about eligibility for CFRA leave and how it may or may not interact with FMLA leave, contact Human Resources.

Qualifying Exigencies Related to Active Duty

Eligible employees whose spouse, domestic partner, child or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement for certain

qualifying exigencies. Qualifying exigencies may include, but are not necessarily limited to, attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

Pregnancy, Childbirth or Related Conditions and Baby Bonding

Leave because of a disability for pregnancy, childbirth or related medical condition is not counted as time used under CFRA leave. Employees who take time off for pregnancy disability will be placed on pregnancy disability leave (PDL). (See *Pregnancy Disability Leave* policy for more information.)

If an employee is eligible for FMLA leave, then PDL will run concurrently with FMLA. (See *FMLA Leave* policy for additional information).

Once the pregnant employee is no longer disabled, or once the employee has given birth and exhausted PDL, the employee may apply for leave under the CFRA, for purposes of baby bonding.

Any leave taken for the birth, adoption, or foster care placement of a child does not have to be taken in one continuous period of time. CFRA leave taken for the birth or placement of a child will be granted in minimum amounts of two weeks. However, the Agency will grant a request for a CFRA leave (for birth/placement of a child) of less than two weeks' duration on any two occasions. The Agency may also grant additional requests for leave lasting less than two weeks at its discretion. Any leave taken must be concluded within one year of the birth or placement of the child with the employee.

Leave Procedures

The following procedures shall apply to CFRA leave:

- Please contact the Human Resources Manager as soon as you realize the need for family/medical leave. If the leave is based on the expected birth, placement for adoption or foster care, or planned medical treatment for your serious health condition or that of a family member, you must notify the Agency at least 30 days before leave is to begin. You must consult with your manager regarding scheduling of any planned medical treatment or supervision in order to minimize disruption to the operations of the Agency. Any such scheduling is subject to the approval of your health care provider or the health care provider of your family member.
- If you cannot provide 30 days' notice, the Agency must be informed as soon as is practical.
- If the CFRA request is made because of your own serious health condition, the Agency may require, at its expense, a second opinion from a health care provider that the Agency chooses. The health care provider designated to give a second opinion will not be one who is employed on a regular basis by the Agency.
- If the second opinion differs from the first opinion, the Agency may require you, at the Agency's expense, to obtain the opinion of a third health care provider designated or approved jointly by you and the employer. The opinion of the third health care provider shall be considered final and binding on you and the Agency.

Certification

Family Assistance Program requires you to provide certification. You will have 15 calendar days from the Agency's request for certification to provide it to the Agency, unless it is not practical to do so. The Agency may require recertification from the health care provider if you request additional leave upon expiration of the time period in the original certification. (For example, if you need two weeks of family and medical leave, but following the two weeks you need intermittent leave, a new medical certification will be requested and required.) If you do not provide medical certification in a timely manner to substantiate the need for family and medical leave, the Agency may delay approval of the leave, or continuation thereof, until certification is received. If certification is never received, the leave may not be considered CFRA leave.

If the leave is needed to care for a sick family member, you must provide a certification from the health care provider stating:

- Date of commencement of the serious health condition
- Probable duration of the condition
- Estimated amount of time for care by the health care provider
- Confirmation that the serious health condition warrants your participation.

If your serious health condition is the reason for leave, you must provide a certification from the health care provider stating:

- Date of commencement of the serious health condition
- Probable duration of the condition
- Your inability to work at all or to perform any one or more of the essential functions of your position because of the serious health condition

If you are on leave because of your own serious health condition, the Agency will also require a medical release to return to work form or certification from your health care provider that you are able to resume work.

Failure to provide a release to return to work from your health care provider may result in denial of reinstatement until the certificate is obtained.

Leave Related to Military Service

A leave taken due to a "qualifying exigency" related to military service must be supported by a certification of its necessity. Special certification requirements apply to leaves related to military service.

Health and Benefit Plans

If you are taking CFRA leave, you will be allowed to continue participating in any health and welfare benefit plans in which you were enrolled in before the first day of the leave (for a maximum of 12 workweeks) at the level and under the conditions of coverage as if you had continued in employment for the duration of such leave. The Agency will continue to make the same premium contribution as if you had continued working. The continued participation in

health benefits begins on the date leave first begins. In some instances, the Agency may recover premiums paid to maintain health coverage if you fail to return to work following CFRA leave.

Employees on pregnancy disability leave will be allowed to continue to participate in group health coverage for up to a maximum of four months of pregnancy disability leave (if such insurance was provided before the leave was taken) on the same terms as if you had continued to work. The right to continued group health coverage during pregnancy disability leave is a separate and distinct entitlement from the CFRA entitlement. Payment is due by the 7th of the month.

Substitution of Paid Leave

Generally, CFRA leave is unpaid. The Agency may require, or you may choose, to use accrued paid leave while taking CFRA leave. In order to use paid leave for CFRA leave, you must comply with the Agency's normal paid leave policies. For more information on those specific circumstances requiring or allowing the substitution of paid leave contact Human Resources.

Reinstatement

Under most circumstances, upon return from CFRA leave, you will be reinstated to your original job or to an equivalent job with equivalent pay, benefits, and other employment terms and conditions. However, an employee has no greater right to reinstatement than if the employee had been continuously employed rather than on leave. For example, if an employee on CFRA leave would have been laid off had the employee not gone on leave, or if the employee's job is eliminated during the leave and no equivalent or comparable job is available, then the employee would not be entitled to reinstatement. In addition, an employee's use of CFRA leave will not result in the loss of any employment benefit that the employee earned before using CFRA leave.

If you are on a FMLA-only leave, without CFRA running concurrently, there may be conditions in which you may be denied reinstatement if you are a "key" employee. (Please refer to the *Reinstatement* section of the *FMLA Leave* policy for additional information.)

Time Accrual

Please contact the Human Resources Department with any questions regarding accrual of other Agency provided paid leave benefits (such as vacation or sick leave) during unpaid CFRA leave.

Carryover

Leave granted under any of the reasons provided by CFRA and/or FMLA will be counted as family/medical leave and will be considered as part of the 12-workweek entitlement in any 12-month period. No carryover of unused leave from one 12-month period to the next 12-month period is permitted.

Intermittent Leave

You may take CFRA leave intermittently (in blocks of time, or by reducing your normal weekly or daily work schedule) if the leave is for your serious health condition or that of a qualifying family member and the reduced leave schedule is medically necessary as determined by the health care provider of the person with the serious health condition. The smallest increment of time that can be used for such leave is [one hour maximum].

See also the discussion of *Pregnancy, Childbirth or Related Conditions and Baby Bonding* above.

Civil Air Patrol Leave

No employee with more than 90 days of service shall be disciplined for taking time off to perform emergency duty as a volunteer in the California Civil Air Patrol. If you are a Civil Air Patrol volunteer, please alert your Human Resources Manager that you may have to take time off for emergency duty. When taking time off for emergency duty, please alert your Resources Manager before doing so, giving as much advance notice as possible.

Up to 10 days of leave for duty may be taken each year. However, leave for a single emergency mission cannot exceed three days, unless the emergency is extended by the entity in charge of the operation and the extension of leave is approved by the Agency.

Volunteer Civil Service Personnel

No employee shall be disciplined for taking time off to perform emergency duty as a volunteer firefighter, peace officer, or emergency rescue personnel. Employees who perform emergency duty as a volunteer firefighter, reserve peace officer, or emergency rescue personnel may also take up to a total of fourteen days unpaid leave time per calendar year to engage in required fire, law enforcement or emergency rescue training. Please alert your Human Resources Manager, that you may have to take time off for emergency duty or emergency duty training. When taking time off for emergency duty, please alert your Human Resources Manager before doing so when possible.

If you are an official volunteer firefighter, reserve peace officer or emergency rescue personnel, please alert your Human Resources Manager if you have training. Volunteer firefighters, reserve peace officers and emergency rescue personnel may take up to a total of fourteen days per calendar year to engage in fire, law enforcement or emergency rescue training.

Military Leave

Employees who wish to serve in the military and take military leave should contact the Human Resources Manager for information about their rights before and after such leave. You are entitled to reinstatement upon completion of military service, provided you return or apply for reinstatement within the time allowed by law.

Military Spouse Leave

Employees who work more than 20 hours per week and have a spouse or registered domestic partner in the Armed Forces, National Guard or Reserves who have been deployed during a period of military conflict are eligible for up to 10 unpaid days off when their spouse or registered domestic partner is on leave from (not returning from) military deployment.

Employees must request this leave in writing to the Human Resources Manager within two business days of receiving official notice that their spouse or registered domestic partner will be on leave. You must attach to the leave request written documentation certifying your spouse or registered domestic partner will be on leave from deployment.

Organ and Bone Marrow Donor Leave

Employees who are donors for organ or bone marrow may take paid time off as follows:

- You must be employed for at least a 90-day period immediately before the beginning of leave.
- You may take up to 30 business days of paid leave, and up to an additional 30 business days of unpaid leave in any one-year period for the purpose of donating an organ to another person. The one-year period is calculated from the date the employee begins their leave.
- You may take up to 5 business days of leave in any one-year period for the purpose of donating bone marrow to another person. The one-year period is calculated from the date the employee's leave begins.
- During the leave for organ/bone marrow donors, **Family Assistance Program** will continue to provide and pay for any group health plan benefits you were enrolled in prior to the leave of absence.
- Leave taken for the purpose of organ or bone marrow donation is not leave for the purpose of family medical leave under federal Family and Medical Leave Act or the state California Family Rights Act.

Employees who wish to take a leave of absence to donate bone marrow or an organ will be required to provide written verification of the need for leave, including confirmation that the employee is an organ or bone marrow donor and that there is a medical necessity for the donation of the organ or bone marrow.

Family Assistance Program] requires that employees taking leave for organ donation use two weeks of accrued but unused sick leave, or vacation.

Family Assistance Program requires that employees taking leave for bone marrow donation

use five days of accrued but unused sick leave, PTO and/or vacation.

Once you have exhausted the required paid sick, PTO and/or vacation leave, you will be paid for the remaining leave of absence, if additional leave is needed, up to the maximum allowed by law.

Vacation Time

Regular full-time employees are entitled to accrue:

1- 2 years - 10 days 3.08 hours per pay period

2 – 5 years – 15 days 4.62 hours per pay period

5+ years – 20 days 6.15 hours per pay period

Active service begins on your first day of work and continues thereafter unless broken by an absence without pay, a leave of absence, or termination of employment. Temporary and part-time employees do not accrue paid vacation.

Vacation can accrue up to a maximum of **120 hours**, no additional vacation will be earned until accrued vacation time is used.

You become eligible to take accrued vacation after **the 1st day** of active service as work schedules permit.

Vacation schedules must be coordinated with and approved by your manager in advance. Complete a request for vacation well in advance of the dates involved. Vacations are scheduled to provide adequate coverage of job responsibilities and staffing requirements. Every effort will be made to permit employees to take their vacations at the times they wish.

When your employment relationship with the Agency ends, you will be paid for accrued unused vacation days on a pro rata basis.

Temporary and part-time employees do not accrue paid vacation time. Regular full-time employees do not accrue vacation time during the probation period. No vacation time may be taken until after completion of the probation period of employment unless approved by your manager.

If you are taking an unpaid leave of absence, there are circumstances where you may be required to use your accrued and unused vacation before taking unpaid leave or having unpaid absences. In other circumstances, you can choose to use vacation before taking unpaid leave or having unpaid absences, but it is not required. It will depend on the type of leave you are taking and/or federal and state leave requirements.

The employee's supervisor is responsible for approving vacations. Vacation is tracked by the Human Resources Office. Employees are responsible for planning ahead of vacation and working out a complete schedule with their supervisor in advance. A written notice of 14 (fourteen) days for vacation is required to ensure that your shift is covered during your vacation period. Vacation requests that are not submitted with at least 14 (fourteen) days' notice in writing may not be granted.

Vacation time can accrue up to a maximum of 120 hours. Once an employee has accrued 120

hours, vacation time accrual will stop and until the balance falls below the maximum.

California Paid Sick Leave

California provides for mandatory paid sick leave under the Healthy Workplaces, Healthy Families Act (the "Act"). All employees who have worked in California for the same employer for 30 or more days within a year from the start of their employment are eligible for protected paid sick time under the Act. You cannot be discriminated or retaliated against for requesting or using vacation for qualifying reasons protected by the Act.

Our agency accrues sick time at 1.54 hours per pay period with a total of 40 hours per year. If you have any questions, please contact the Human Resources Department.

Sick Time Notification

If you have a foreseeable need to take paid time off for a qualifying reason under the Act, you must provide advance oral or written notification to your Manager. If the need is not foreseeable, you should provide notice your manager as soon as practical.

Qualifying Reasons

Paid time off under the Act can be used for any of the following reasons:

- Diagnosis, care or treatment of an existing health condition for an employee or "covered family member", as defined below.
- Preventive care for an employee or an employee's covered family member. Preventive care may include self-quarantine as a result of potential exposure to COVID-19 if quarantine is recommended by civil authorities, or other situations, such as where there has been exposure to COVID-19 or where an employee has traveled to a high-risk area.
- For certain specified purposes when the employee is a victim of crime or abuse.

For purposes of paid time off under the Act, a "covered family member" includes:

- A child: Defined as a biological, foster or adopted child; a stepchild; or a legal ward, regardless of the age or dependency status of the child. A "child" also may be someone for whom you have accepted the duties and responsibilities of raising, even if they are not your legal child
- A parent: Defined as a biological, foster or adoptive parent; a stepparent; or a legal guardian of an employee or the employee's spouse or registered domestic partner. A "parent" may also be someone who accepted the duties and responsibilities of raising you when you were a minor child, even if they are not your legal parent.
- A spouse
- A registered domestic partner
- A grandparent
- A grandchild
- A sibling

California provides for mandatory paid sick leave under the Healthy Workplaces, Healthy Families Act (the "Act"). All employees who have worked in California for the same employer for 30 or more days within a year from the start of their employment are eligible for protected paid sick time under the Act. You cannot be discriminated or retaliated against for requesting or using paid sick time.

If you have any questions about paid sick leave, please contact the Human Resources Department.

Family Assistance Program will provide eligible employees with 1.54 hours of sick time per pay period on their first day of employment. However, employees are not eligible to take their paid sick time until the 90th day of employment with the Agency.

Unused paid sick time will carry over from year to year up to 40 (Forty hours).

Paid sick time under the Act can be used for any of the following reasons:

- Diagnosis, care or treatment of an existing health condition for an employee or "covered family member", as defined below.
- Preventive care for an employee or an employee's covered family member. Preventive care may include self-quarantine as a result of potential exposure to COVID-19 if quarantine is recommended by civil authorities, or other situations, such as where there has been exposure to COVID-19 or where an employee has traveled to a high-risk area.
- For certain specified purposes when the employee is a victim of crime or abuse.

For purposes of paid sick leave, a "covered family member" includes:

- A child: Defined as a biological, foster or adopted child; a stepchild; or a legal ward, regardless of the age or dependency status of the child. A "child" also may be someone for whom you have accepted the duties and responsibilities of raising, even if they are not your legal child
- A parent: Defined as a biological, foster or adoptive parent; a stepparent; or a legal guardian of an employee or the employee's spouse or registered domestic partner. A "parent" may also be someone who accepted the duties and responsibilities of raising you when you were a minor child, even if they are not your legal parent
- A spouse
- A registered domestic partner
- A grandparent
- A grandchild
- A sibling

You can use paid sick time for any of the above qualifying reasons protected by the Act. If the need for paid sick time is foreseeable, you must provide advance oral or written notification to your manager. If the need for paid sick time is not foreseeable, you should provide notice to your manager as soon as practical.

You can also decide to use vacation time for any of the above reasons. However, if you want the time off to be protected paid sick time, you should designate the time off accordingly so we can treat it as such.

following options:

Personal Leave

A personal leave of absence without pay may be granted at the discretion of Family Assistance Program. Requests for personal leave should be limited to unusual circumstances requiring an absence of longer than 6 (six weeks). Approved personal absences of shorter duration are not normally treated as leaves, but rather as excused absences without pay.

School and Child Care Activities Leave

Employees are encouraged to participate in the school or child care activities of their child(ren).

The absence is subject to all of the following conditions:

- Time off under this policy can only be used by parents, guardians, grandparents, stepparents, foster parents or a person who stands *in loco parentis* to one or more children of the age to attend kindergarten through grade 12 or who are with a licensed child care provider.
- The amount of time off for school or child care activities described below cannot exceed a total of 40 hours each year.
- You can use the time off to find, enroll or reenroll a child in a school or with a licensed child care provider or to participate in activities of the child's school or licensed child care provider. The time off for these purposes cannot exceed eight hours in any calendar month. You must provide reasonable advance notice to the manager before taking the time off.
- You can also use time off to address a "child care provider or school emergency" if you give notice to the Agency. A "child care provider or school emergency" means that the child cannot remain in a school or with a child care provider due to one of the following:
 - The school or childcare provider has requested that your child be picked up, or has an attendance policy (excluding planned holidays) that prohibits your child from attending or requires your child to be picked up from the school or child care provider.
 - Behavioral or discipline problems.
 - Closure or unexpected unavailability of the school or child care provider, excluding planned holidays.
 - A natural disaster, including, but not limited to, fire, earthquake or flood.
- You must provide your manager with documentation from the school or licensed child care provider verifying that you were engaged in these child related activities on the day and time of the absence.
- If more than one parent is employed by Family Assistance Program, the first employee to request such leave will receive the time off. Another parent will receive the time off only if the leave is approved by their manager.

- You must use sick and vacation leave in order to receive compensation for this time off.
- If you do not have paid time off available, you will take the time off without pay.

School Appearances Involving Suspension

If you are the parent or guardian of a child facing suspension from school and are summoned to the school to discuss the matter, you should alert your manager as soon as possible before leaving work. In agreement with California Labor Code Section 230.7, no discriminatory action will be taken against an employee who takes time off for this purpose.

Sick Leave

California provides for mandatory paid sick leave under the Healthy Workplaces, Healthy Families Act (the "Act"). This paid sick leave policy is intended to comply with the requirements of the Act. Employees cannot be discriminated against or retaliated against for requesting or using accrued paid sick time. If you have any questions about paid sick leave, please contact the Human Resources Manager.

Eligible Employees

All employees who have worked in California for the same employer for 30 or more days within a year from the start of their employment will be entitled to paid sick time.

Use of Paid Sick Leave

If the need for paid sick leave is foreseeable, you must provide advance oral or written notification to the manager. If the need for paid sick leave is not foreseeable, provide notice to the manager as soon as practical. Use of paid sick time may run concurrently with other leaves under local, state, or federal law.

Paid Sick Leave and Workers' Compensation Benefits

Paid sick leave is a benefit that also covers absences for work-related illness or injury. Employees who have a work-related illness or injury are covered by workers' compensation insurance. However, workers' compensation benefits usually do not cover absences for medical treatment. When you report a work-related illness or injury, you will be sent for medical treatment, if treatment is necessary. You will be paid your regular wages for the time you spend seeking initial medical treatment.

Any further medical treatment will be under the direction of the health care provider. Any absences from work for follow-up treatment, physical therapy or other prescribed appointments will not be paid as time worked. If you have accrued and unused paid sick leave, you may use paid sick leave to receive pay for these absences.

If you do not have accrued, paid sick leave, or if you have used all of your sick leave, you may choose to substitute vacation time for further absences from work, related to your illness or injury.

Time Off for Voting

If you do not have sufficient time outside of working hours to vote in an official statewide election, you may take off enough working time to vote, including up to two hours off without loss of pay. This time should be taken at the beginning or the end of the regular working shift, whichever allows for more free time for voting and the least time off work. If you know or have reason to believe that time off will be necessary to be able to vote on election day, you must give your manager at least one working days' notice.

Paid Family Leave

Employees may be eligible for Paid Family Leave (PFL) wage replacement benefits, which are funded through payroll deductions and coordinated through the Employment Development Department (EDD). PFL provides partial pay for up to eight weeks when you need to take leave from work:

- To care for a parent, parent-in-law, child, spouse, registered domestic partner, grandparent, grandchild, or sibling who is seriously ill
- To bond with your newborn, foster child or newly adopted child
- For a qualifying exigency related to the covered active duty or call to covered active duty of your spouse, registered domestic partner, parent, or child in the Armed Forces of the United States

The PFL program does not provide employees with a right to a leave of absence; it is limited to a state-mandated wage replacement benefit.

Benefits and Holidays

Benefits Overview

Family Assistance Program committed to providing the following benefits for eligible employees. Benefit eligibility may be dependent upon your employee classification Full time after 60 days from the 1st of the 1st day you begin employment. You will receive Summary Plan Descriptions which describe the benefits in greater detail. information regarding employee benefits and to answer any questions you may have contact the Human Resources Department.

The Agency reserves the right to modify, amend or terminate benefits and to modify or amend benefit eligibility requirements at any time and for any reason, subject to any legal restrictions.

The Agency offers the following employee benefits:

- The Agency pays 80% of medical for employees and dependents.
- The Agency pays 80% of dental for employees and dependents.
- The Agency pays 80% of vision for employees and dependents.

Holidays

The agency offers all employees eleven (11) paid holidays each year for full-time

employees. Due to the nature of our agency many positions may require you to work on the listed holiday. If you are required to work the holiday, you will be offered to take a day off within the same pay period. If this is not possible, full-time employees will be compensated an additional 8 hours of regular pay. If your job duties allow you to take off on the holidays, this will be a paid day off for all full-time employees. If the holiday falls on a Saturday, you will have the Friday before the holiday off as the holiday, if the holiday falls on a Sunday, you will have the Monday after the holiday off as the holiday.

- New Year's Day
- Martin Luther King's Day
- President's Day
- Memorial Day
- Independence Day
- Labor Day
- Indigenous Peoples Day
- Veteran's Day
- Thanksgiving Day
- Day After Thanksgiving
- Christmas Day

Non-exempt employees are eligible for paid holidays after completion of the introductory period. Holidays that are paid but not worked do not count for overtime purposes.

To be paid for the holiday if you are scheduled to work the day immediately before and immediately after the holiday, you must work your scheduled shift in order to be paid unless an absence on either day is approved in advance by your manager or the absence is otherwise protected by law. If you are required to work on a paid scheduled holiday you will receive straight time plus any applicable overtime rates for hours worked plus up to 8 hours of holiday pay.

Lactation Accommodation

Family Assistance Program recognizes lactating employees' rights to request lactation accommodation, and accommodates lactating employees by providing a reasonable amount of break time and a suitable lactation location to any employee who desires to express breast milk for their infant child, subject to any exception allowed under applicable law.

If possible, the break time should run concurrently with your normally scheduled break time. Any break time to express breast milk that does not run concurrently with your normally scheduled break time is unpaid.

The lactation location will be private (shielded from view and free from intrusion from co-workers and the public) and located close to your work area. The location will be safe, clean and free of toxic or hazardous materials; have a surface to place a breast pump and other personal items; have a place to sit; and have access to electricity or alternative devices (including, but not limited to extension cords or charging stations) needed to operate an electric or battery-powered breast pump. Family Assistance Program will also provide access to a sink with running water and a refrigerator suitable for storing milk in close proximity to your workspace. If a refrigerator cannot be provided, Family Assistance Program will provide another cooling device suitable for storing milk, such as an employer-provided cooler. The

lactation location will not be a bathroom or restroom. The room or location may include an employee's private office if it otherwise meets the requirements of the lactation space. Multi-purpose rooms may be used as lactation space if they satisfy the requirements for space; however, use of the room for lactation takes priority over other uses for the time it is in use for lactation purposes.

Employees who desire lactation accommodations should contact the manager to request accommodations. An employee's request may be provided orally, by email, or in writing, and need not be submitted on a specific form. We will engage in an interactive process with you to determine when and where lactation breaks will occur. If we cannot provide break time or a location that complies with this policy, we will provide a written response to your request.

Family Assistance Program will not tolerate discrimination or retaliation against employees who exercise their rights to lactation accommodation, including those who request time to express milk at work and/or who lodge a complaint related to the right to lactation accommodation. If you believe you have been denied reasonable break time or adequate space to express milk, or have been otherwise denied your rights related to lactation accommodation, you have the right to file a complaint with the Labor Commissioner.

Workers' Compensation

Family Assistance Program in accordance with state law, provides insurance coverage for employees in case of work-related injury. The workers' compensation benefits provided to injured employees may include:

- Medical care
- Cash benefits, tax free, to replace lost wages
- Assistance to help qualified injured employees return to suitable employment

To ensure that you receive any workers' compensation benefits to which you may be entitled, you will need to:

- Immediately report any work-related injury to your manager.
- Seek medical treatment and follow-up care if required
- Complete a written *Employee's Claim for Workers' Compensation Benefits* (DWC Form 1) and return it to your manager.
- Provide the Agency with a certification from your health care provider regarding the need for workers' compensation disability leave, as well as your eventual ability to return to work from the leave

Upon submission of a medical certification that an employee is able to return to work after a workers' compensation leave, the employee under most circumstances will be reinstated to their same position held at the time the leave began, or to an equivalent position, if available. An employee returning from a workers' compensation leave has no greater right to reinstatement than if the employee had been continuously employed rather than on leave.

An employee's return depends on their qualifications for any existing openings. If, after returning from a workers' compensation disability leave, an employee is unable to perform the essential functions of their job because of a physical or mental disability, the Agency's

obligations to the employee may include reasonable accommodation, as governed by the Americans with Disabilities Act or the California Fair Employment and Housing Act.

The law requires Family Assistance Program to notify the workers' compensation insurance agency of any concerns of false or fraudulent claims.

COVID-19 may be a work-related injury. If you test positive for COVID-19, please notify the Agency immediately so we may notify our workers' compensation carrier as required by law.

Agency-Provided Physician

Family Assistance Program provides medical treatment for work-related injuries through a medical provider network, which the agency has chosen to provide medical care to injured employees because of their experience in treating work-related injuries.

Workers' Compensation and CFRA/FMLA

Employees who are ill or injured as a result of a work-related incident, and who are eligible for family and medical leave under state and/or federal law California Family Rights Act (CFRA) and/or Family Medical Leave Act (FMLA), will be placed on CFRA and/or FMLA during the time they are disabled and not released to return to work. The leave under these laws will generally run concurrently.

Paid Sick Leave and Workers' Compensation Benefits

Paid sick leave is a benefit that also covers absences for work-related illness or injury. Employees who have a work-related illness or injury are covered by workers' compensation insurance. However, workers' compensation benefits usually do not cover absences for medical treatment. When you report a work-related illness or injury, you will be sent for medical treatment, if treatment is necessary. You will be paid your regular wages for the time you spend seeking initial medical treatment.

Any further medical treatment will be under the direction of the health care provider. Any absences from work for follow-up treatment, physical therapy or other prescribed appointments will not be paid as time worked. If you have accrued and unused sick leave, you may choose to substitute paid sick leave for any time that would otherwise be unpaid. If you do not have accrued, paid sick leave, or if you have used all of your sick leave, you may choose to substitute vacation/paid time off for further absences from worked, related to your illness or injury.

Management

Names and Addresses Policy

Family Assistance Program is required by law to keep current all employees' name addresses and phone numbers. You are responsible for notifying the Agency in the event of a name or address and or phone number change.

Open-Door Policy

Suggestions for improving Family Assistance Program are always welcome. At some time, you may have a complaint, suggestion, or question about your job, your working conditions, or the treatment you are receiving. Your complaints, questions, and suggestions are important to us.

If you have a complaint, suggestion or question, speak with your immediate supervisors as soon as possible. If you are not comfortable speaking to your immediate supervisors, please bring the issue to the Human Resources Manager or any other member of management. Also, if you have raised the issue and if the problem persists, you may present it to the Human Resources Manager, who will investigate and provide a solution or explanation. If the problem is not resolved, you may also present the problem to the chief operating officer (COO) of Family Assistance Program who will attempt to reach a final resolution.

While a written complaint will assist us in investigating your concerns, it is not required that you put your complaint in writing. If you need assistance with your complaint, or you prefer to make a complaint in person, contact the Human Resources Manager.

This procedure, which we believe is important for both you and the Agency, Family Assistance Program cannot guarantee that every problem will be resolved to your satisfaction. However, values your observations and you should feel free to raise issues of concern without the fear of retaliation.

Performance Evaluations

Each employee will receive periodic performance reviews conducted by their manager. Your first performance evaluation will take place. Subsequent performance evaluations will be conducted annually. The frequency of performance evaluations may vary depending upon length of service, job position, past performance, changes in job duties, or recurring performance problems.

Your performance evaluations may review factors such as the quality and quantity of the work you perform, your knowledge of the job, your initiative, your work attitude, and your attitude toward others. The performance evaluations are intended to make you aware of your progress, areas for improvement, and objectives or goals for future work performance. Favorable performance evaluations do not guarantee increases in salary or promotions. Salary increases and promotions are solely within the discretion of Family Assistance Program and depend upon many factors in addition to performance. After the review, you will be required to sign the evaluation report simply to acknowledge that it has been presented to you, that you have discussed it with your manager and that you are aware of its contents.

Personnel Records

You have a right to inspect or receive a copy of the personnel records that Family Assistance Program maintains relating to your performance or to any grievance concerning you. Certain documents may be excluded or redacted from your personnel file by law, and there are legal limitations on the number of requests that can be made.

Any request to inspect or copy personnel records must be made in writing to the Human Resources Manager. You can obtain a form for making such a written request from the Human Resources Manager.

You may designate a representative to conduct the inspection of the records or receive a copy of the records. However, any designated representative must be authorized by you in writing to inspect or receive a copy of the records. Family Assistance Program may take reasonable steps to verify the identity of any representative you have designated in writing to inspect or receive a copy of your personnel records.

The personnel records may be made available to you either at the place where you work or at a mutually agreeable location (with no loss of compensation for going to that location to inspect or copy the records). The records will be made available no later than 30 calendar days from the date the written request to inspect or copy your personnel records is received.

Disclosure of personnel information to outside sources, other than your designated representative, will be limited. However, Family Assistance Program will cooperate with requests from authorized law enforcement or local, state, or federal agencies conducting official investigations and as otherwise legally required.

Remote Working

Working remotely provides employees with an opportunity to work from an alternative work environment rather than in the physical location of the Agency. Working remotely must be pre-approved by your manager.

Family Assistance Program retains the right in its sole discretion to designate positions that are appropriate for remote work and approve employees for working remotely. Working remotely must be approved by your manager. Working remotely does not change the conditions of employment or required compliance with all Agency policies and procedures. The Agency reserves the right to change or terminate the remote working at any time, without cause or advance notice.

Your hours and days of work will not change. Employees must apply themselves during work hours and remain available for remote team meetings or conferences as needed.

Nonexempt employees must not work outside of scheduled hours without advance approval; this includes such activities as checking and responding to emails. Any work outside of a scheduled shift must be reported to your manager.

Working remotely is not intended as a substitute for childcare or to care for another adult. If you need to make special arrangements or changes to your work schedule due to the need to care for a child or another adult, please contact your manager.

Work Standards and Performance

As a remote working employee, you must:

- Remain accessible during your schedule
- Regularly communicate with your supervisor/manager to stay current on assigned/relevant tasks, projects and any other work-related issues
- Be available for and attend any video/teleconferences, scheduled on an as-needed basis
- Be available to physically attend scheduled work meetings as requested or required by the Agency
- If you are nonexempt (hourly), properly record all hours worked each day in compliance with the Agency policies and practices
- If you are nonexempt (hourly), obtain supervisor approval in advance of working any overtime hours
- Take rest and meal breaks in full compliance with all applicable policies of the Agency
- Request supervisor approval to use vacation, sick or other leave in the same manner as when working at a physical work location

It is critical that remote working employees comply with all Agency rules, policies, practices and instructions that would apply if they were working at the Agency's physical work location(s), including but not limited to, policies governing remote work, use of technology, confidentiality, harassment and discrimination, and workplace safety.

Equipment and Information Security

Your *Equipment Policy and Acknowledgement Form* will specify the equipment provided to you for purposes of working remotely.

As a remote employee, you will be subject to the following requirements:

- Your equipment must not be used by anyone other than yourself, and only for business-related work.
- You are responsible for immediately reporting any problems with Agency equipment.
- You must protect Agency-owned equipment, records and materials from unauthorized or accidental access, use, modification, destruction, disclosure or theft. You must follow all policies, practices and instructions regarding the safety and security of any confidential and/or proprietary information.
- You must report to your supervisor any incidents of loss, damage or unauthorized access at your earliest reasonable opportunity.
- All equipment, records and materials provided by the Agency will remain property of the Agency.
- At the termination of the employment, or upon the Agency's request, you agree to immediately return any and/or all Agency equipment.

Remote Safety

Remote employees are solely responsible for ensuring the safety of their alternative work environment. Remote employees should ensure their work space is safe and free from hazards and provides adequate protection and security of Agency property. Remote employees who need assistance in maintaining a safe work space should contact the Human Resources Manager.

Remote employees are protected by the Agency's workers' compensation insurance. As such, telecommuting employees are required to immediately report any injuries that occur while working.

A remote employee is liable for any injuries that occur to third parties at or around the remote employee's alternative work environment.

Remote employees must maintain a safe, secure and ergonomic work environment; comply with all applicable workplace safety rules, policies and instructions; and report work-related injuries to the Agency immediately. Please let your manager know if you require specific equipment. Remote employees should also complete the Agency's Remote Safety Checklist to certify the work area is safe in accordance with all workplace safety rules and policies.

Remote Agreement and Plan

All remote employees are required to sign a *Remote Agreement* with their manager that outlines the remote employee's work days and work hours (as applicable); equipment the remote employee will need; how the remote employee will communicate with the Agency; use of support or secretarial staff; and other appropriate information.

Your *Remote Agreement* will be evaluated on an ongoing basis to ensure that your work quality, efficiency and productivity are not compromised by the remote arrangements. The Agency may, at its sole discretion, change any of the conditions under which the employee is permitted to telecommute under the *Remote Agreement* at any time, and may require the employee to report to the employee's physical workplace at any time and for any reason.

Workplace Privacy - Audio/Video Recordings

Due to concerns regarding the potential for invasion of privacy, sexual or other harassment, and protection of proprietary or confidential information, employees may not use any audio or video recording devices while on working time. You also may not use any audio or video recordings in work areas that Family Assistance Program has identified as confidential, secure or private, unless you are engaged in protected activity related to improving the terms and conditions of your employment, such as documenting health and safety issues.

The agency uses or may use video surveillance in public areas (not in restrooms, locker rooms or changing areas). The video surveillance will not include sound recording.

Agency Property

Electronic and Social Media

This policy is intended to protect the Agency's computer systems and electronic information.

For purposes of these policies, the following definitions apply: "Computers" are defined as desktop computers, laptops, handheld devices (including but not limited to iPhones, smart phones, iPads, and other electronic tablets and cell phones), computer software/hardware and servers, and list additional Agency-owned computer-related items (other than desktop computers, laptops, handheld devices, computer software/hardware and servers, which are already covered in the policy).

Family Assistance Program also uses various forms of "electronic communication." "Electronic communications" includes e-mail, text messages, telephones, cell phones and other handheld devices (such as cell phones, smart phones or writing tablets or iPads), fax machines, and online services including the Internet.

"Electronic information" is any information created by an employee using computers or any means of electronic communication, including but not limited to, data, messages, multimedia data, and files.

The following general policies apply:

- Computers and all data transmitted through Family Assistance Program servers are Agency property owned by the Agency for the purpose of conducting Agency business. These items must be maintained according to Family Assistance Program rules and regulations. Computers must be kept clean and employees must exercise care to prevent loss and damage. Prior authorization must be obtained before any Agency property may be removed from the premises.
- All electronic communications also remain the sole property of Family Assistance Program and are to be used for Agency business. For example, email messages are considered Agency records.
- Electronic information created by an employee using any computer or any means of electronic communication is also the property of Family Assistance Program and remains the property of Family Assistance Program
- Information stored on Family Assistance Program computers and file servers, including without limitation **to client information and is** the property of the Agency and may not be distributed outside the Agency in any form whatsoever without the written permission of the Executive Director.
- Violation of any of the provisions of this policy, whether intentional or not, will subject Family Assistance Program employees to disciplinary action, up to and including termination.

Monitoring of Agency Property

Family Assistance Program reserves the right to inspect all Agency property to ensure compliance with its rules and regulations, without notice to the employee and at any time, not necessarily in the employee's presence. Family Assistance Program computers and all electronic communications and electronic information are subject to monitoring and no one should expect privacy regarding such use. The Agency reserves the right to access, review and monitor electronic files, information, messages, text messages, e-mail, Internet history, browser-based webmail systems and other digital archives and to access, review and monitor the use of computers, software, and electronic communications to ensure that no misuse or violation of Agency policy or any law occurs. E-mail may be monitored by the Agency and there is no expectation of privacy. Assume that e-mail may be accessed, forwarded, read or heard by someone other than the intended recipient, even if marked as "private."

Employee passwords may be used for purposes of security, but the use of a password does not affect the Agency's ownership of the electronic information or ability to monitor the information. The Agency may override an employee's password for any reason.

Employees are not permitted to access the electronic communications of other employees or third parties unless directed to do so by Family Assistance Program management.

Prohibited Use

All existing Agency policies apply to employee use of computers, electronic communications, electronic information, and the Internet. This includes policies that deal with misuse of Agency assets or resources. It is a violation of Family Assistance Program policy to use computers, electronic communications, electronic information, or the Internet, in a manner that: is discriminatory, harassing or obscene; constitutes copyright or trademark infringement; violates software licensing rules; is illegal; or is against Family Assistance Program policy. It is also a violation of policy to use computers, electronic communications, electronic information, or the Internet to communicate confidential or sensitive information or trade secrets.

The display of any kind of sexually explicit multimedia content, message, or document on any Agency computer is a violation of the Agency's policy against sexual harassment. This description of prohibited usage is not exhaustive, and it is within the discretion of Family Assistance Program to determine if there has been a violation of this policy. Employees that engage in prohibited use will be subject to discipline and/or immediate termination.

This policy is not intended to limit the ability of employees to discuss with other employees the terms and conditions of their employment, including such topics as wages, job performance, workload, supervisors, or staffing.

Computer and Internet Use

Family Assistance Program provides computers, electronic communications, electronic information and information technology resources, including the Internet, to its employees to help them do their job.

Generally, these Agency resources and property should be used only for business related purposes; however, there are a few exceptions:

- To send and receive necessary and occasional personal communications

- To use the telephone system, cell phones or smart phones for brief and necessary personal calls or messages
- To access the Internet for brief personal searches and inquiries during meal times or other breaks provided that employees adhere to all other usage policies

Any personal usage of Agency property must not interfere with the employee's work performance, take away from work time, consume supplies, slow other users, slow the servers or computer systems, or tie up printers or other shared resources, or violate any Agency policy, including policies against harassment, discrimination and disclosure of confidential or trade secret information.

All policies relating to monitoring usage of Agency property apply. Family Assistance Program reserves the right to adjust this policy on a case by case basis as it deems appropriate.

This policy is not intended to limit the ability of employees to use Agency email systems to communicate with other employees regarding the terms and conditions of their employment, including such topics as wages, job performance, workload, supervisors or staffing.

Social Media

Family Assistance Program uses social media in limited circumstances for defined business purposes. Social media is a set of Internet tools that aid in the facilitation of interaction between people online. If you have specific questions about which programs the Agency deems to be social media, consult with your manager.

Employees can use their own personal devices to engage in social media during non-working times, such as breaks and meal periods; however, all other Agency policies against inappropriate usage, including the Agency's no tolerance for discrimination, harassment or retaliation in the workplace, and protection of confidential or trade secret information apply.

Housekeeping

All employees are expected to keep their work areas clean and organized. People using common areas such as lunch rooms, locker rooms, and restrooms are expected to keep them sanitary. Please clean up after meals and dispose of trash properly.

Smoking

Smoking is prohibited at all our locations except for designated areas. The smoking prohibition applies to all smoking devices, including, but not limited to, the use of electronic smoking devices, such as electronic cigarettes, pipes, hookahs, and vaping devices.

Employee Conduct

Confidential Information

Each employee is responsible for safeguarding the confidential information obtained during employment.

In the course of your work, you may have access to client information or confidential information regarding Family Assistance Program's business (such as financial data, research and development, marketing, business plans or strategies, suppliers, business partners or clients). You have a responsibility to prevent revealing or divulging any such information unless it is necessary for you to do so in the performance of your duties or as required by law.

Access to, or disclosure of, confidential information should be on a "need-to-know" basis and must be authorized by the Human Resources Department. Any breach of this policy will not be tolerated, and legal action may be taken by the Agency.

This policy does not prohibit employees from confidentially disclosing trade secret, proprietary or confidential information to federal, state and local government officials, or to an attorney, when done to report or investigate a suspected violation of the law. Employees may also disclose the information in certain court proceedings if specific procedures to protect the information are followed. Nothing in this policy is intended to conflict with 18 U.S.C. sec. 1833(b) or create liability for disclosures of trade secrets that are expressly allowed by 18 U.S.C. sec. 1833(b).

Nothing in this policy prevents you from discussing or disclosing information about unlawful acts in the workplace, such as harassment or discrimination or any other conduct that you have reason to believe is unlawful.

Client Relations

Employees are expected to be polite, courteous, prompt, and attentive to every client. When an employee encounters an uncomfortable situation that they do not feel capable of handling, their manager should be called immediately.

Clients are to be treated courteously and given proper attention at all times. Never regard a client's question or concern as an interruption or an annoyance. You must respond to inquiries from clients, whether in person, by email or by telephone, promptly and professionally.

Never place a telephone caller on hold for an extended period. Direct incoming calls to the appropriate person and make sure the call is received.

Through your conduct, show your desire to assist the client in obtaining the help they need. If you are unable to help a client, find someone who can.

All correspondence and documents, whether to clients or others, must be neatly prepared and error-free. Attention to accuracy and detail in all paperwork demonstrates your commitment to those with whom we do business.

Never argue with a client. If a problem develops or if a client remains dissatisfied, ask your manager to intervene.

Dress Codes and Other Personal Standards

Employees are expected to wear clothing appropriate for the nature of our business and the type of work performed. Avoid clothing that can create a safety hazard.

Because each employee is a representative of Family Assistance Program in the eyes of the public, each employee must report to work properly groomed and wearing appropriate clothing. Employees are expected to dress neatly and, in a manner, consistent with the nature of the work performed. Each program and position and position will have a dress code based on their job position.

This dress code policy will not be enforced in a manner that discriminates against anyone based on a protected class, such as race, gender, gender identity or gender expression, religion, national origin or any other class protected by federal, state or local law. For more information, see the *Harassment, Discrimination and Retaliation Prevention* policy. Employees who need a reasonable accommodation because of religious beliefs, observances or practices should contact the Human Resources Manager and discuss the need for accommodation.

Drug and Alcohol Abuse

This policy applies to Family Assistance Program (“Agency”) employees (except where noted in this policy or where it is inconsistent with applicable law) and to all applicants for employment. This policy revises and supersedes the Agency’s previous drug and alcohol testing policies.

Policy Statement

Purpose of Guideline

It is the intent of the Agency to maintain a workplace that is free of drugs and alcohol and to discourage drug and alcohol abuse by its employees. Employees who are under the influence of a drug or alcohol on the job compromise the Agency’s interests and endanger their own health and safety and the health and safety of others. Substance abuse in the workplace can also cause a number of other work-related problems, including absenteeism and tardiness, substandard job performance, increased workloads for co-workers, behavior that disrupts other employees, and inferior quality in products or service.

To further its interest in avoiding accidents, to promote and maintain safe and efficient working conditions for its employees, and to protect its business, property, equipment, and operations, the Agency has established this policy concerning the use of alcohol and drugs. As a condition of continued employment with the Agency, each employee must abide by this policy.

Definitions

For purposes of this policy:

- “Legal drug” means any drug, including any prescription drug or over-the-counter drug, that has been legally obtained and that is not unlawfully sold or distributed.

- “Abuse of any legal drug” means the use of any legal drug (a) for any purpose other than the purpose for which it was prescribed or manufactured; or (b) in a quantity, frequency, or manner that is contrary to the instructions or recommendations of the prescribing physician or manufacturer.
- “Possession” means that an employee has the substance on their person or otherwise under their control.
- “Reasonable suspicion” includes a suspicion that is based on specific personal observations such as an employee’s manner, disposition, muscular movement, appearance, behavior, speech or breath odor; information provided to management by an employee, by law enforcement officials, by a security service, or by other persons believed to be reliable; or a suspicion that is based on other surrounding circumstances.

Prohibited Conduct

The prohibitions of this section apply whenever the interests of the Agency may be adversely affected, including any time an employee is (1) on Agency premises; (2) conducting or performing Agency business, regardless of location; (3) operating or responsible for the operation, custody, or care of Agency equipment or other property; or (4) responsible for the safety of others in connection with, or while performing, Agency-related business.

Alcohol and Marijuana Being under the influence of alcohol or marijuana during working hours is prohibited and may subject an employee to discipline, up to and including immediate discharge: (1) the unauthorized use, possession, purchase, sale, manufacture, distribution, transportation, or dispensation of alcohol or marijuana; or (2) being under the influence of alcohol or marijuana.

Illegal Drugs: The following acts are prohibited during working hours and may subject an employee to discipline, up to and including immediate discharge: (1) the use, possession, purchase, sale, manufacture, distribution, transportation, or dispensation of any illegal drug or other controlled substance listed under the Federal Controlled Substances Act; or (2) being under the influence of any Federally listed illegal drug or other controlled substance.

Prescription Drugs: This policy prohibits (1) the abuse of any legal drug; (2) the purchase, sale, manufacture, distribution, transportation, dispensation, or possession of any legal prescription drug in a manner inconsistent with law; or (3) working while impaired by the use of a legal drug whenever such impairment might endanger the safety of the employee or some other person, pose a risk of significant damage to Agency property or equipment; or substantially interfere with the employee’s job performance or the efficient operation of the Agency’s business or equipment. Nothing in this policy is intended to prohibit the customary and ordinary purchase, sale, use, possession, or dispensation of over-the-counter drugs, so long as that activity does not violate any law or result in an employee being impaired by the use of such drugs in violation of this policy.

Drug Testing

Reasonable Suspicion Testing

If the Agency has reasonable suspicion that the employee is working in an impaired condition or otherwise engaging in conduct that violates this policy, the employee will be asked about any observed behavior and offered an opportunity to give a reasonable explanation. If the employee is unable to credibly or adequately explain the behavior, they may be asked to take a drug test in accordance with the procedures outlined below. If the employee refuses to cooperate with the administration of the drug test, the refusal will be handled in the same manner as a positive test result.

Post-Accident Testing

Where there is a reasonable possibility that an employee's drug use contributed to a workplace accident involving any injury or property damage, or a "near miss," the employee will be tested when permissible under applicable law.

Post-accident testing will be administered if the accident causes a non-trivial injury (requiring treatment at a medical facility) or serious property damage and there is reasonable suspicion that the employee involved in the accident was under the influence of drugs and/or alcohol.

Procedures for Testing

Drug Testing

- The Agency will follow procedures which conform to applicable law and are modeled upon testing guidelines promulgated by the U.S. Department of Health and Human Services. Where state law requires the use of certain cutoffs or procedures, the Agency will adhere to them and understands that the laboratories adhere to such requirements.
- The Agency will refer employees to a test site.
- Appropriate laboratory personnel may inspect all incoming specimens for tampering and proper paperwork. Specimens suitable for testing will be screened.

Alcohol Testing

- Employees and applicants subject to alcohol tests shall be escorted to an Agency-designated medical facility where they will be required to present a photo identification and cooperate with the facility's normal procedures. Trained collectors shall use Evidential Breath Testing ("EBT") Devices to screen the test breath specimens for alcohol, where lawful.

All employees or applicants whose lab results are positive will be given a reasonable opportunity to explain or rebut the results confidentially.

If an employee fails the test, they will be considered to be in violation of this policy and will be subject to discipline accordingly.

Acknowledgment and Consent

Any employee subject to testing under this policy will be asked to sign a form acknowledging the procedures governing testing, and consenting to (1) the collection of a urine sample for the purpose of determining the presence of alcohol or drugs, and (2) the release to the Agency of medical information regarding the test results. Refusal to sign the agreement and consent form, or to submit to the drug test, will result in the revocation of an applicant's job offer, or will subject an employee to discipline up to and including termination.

Confidentiality

All drug testing-records will be treated as confidential.

Disciplinary Action

Violation of this policy may result in disciplinary action up to and including immediate termination. An employee who is convicted under a criminal drug statute for a violation occurring in the workplace or during any Agency-related activity or event will be deemed to have violated this policy. Mandatory participation in and satisfactory completion of an inpatient or outpatient drug or alcohol abuse assistance or rehabilitation program may become a condition of continued employment upon violation of this policy.

Prohibited Conduct

Employees are expected to conduct themselves in a manner to further the Agency's objectives. The following conduct is prohibited and will not be tolerated by Family Assistance Program. This list of prohibited conduct is illustrative only; other types of conduct that threaten security, personal safety, employee welfare and Agency operations also may be prohibited and will result in disciplinary action up to and including termination:

- Falsifying employment records, employment information, or other Agency records
- Inefficient or careless performance of job responsibilities or inability to perform job duties satisfactorily
- Recording the work time of another employee or allowing any other employee to record your work time, or falsifying any time card, either your own or another employee's
- Theft and deliberate or careless damage or destruction of any Agency property, or the property of any employee or customer
- Removing or borrowing Agency property without prior authorization
- Unauthorized use or misuse of Agency equipment, time, materials, or facilities
- Provoking a fight or fighting during working hours or on Agency property
- Participating in horseplay or practical jokes on Agency time or on Agency premises
- Carrying firearms or any other dangerous weapons on Agency premises at any time
- Causing, creating or participating in a disruption of any kind during working hours on Agency property

- Insubordination, including but not limited to failure or refusal to obey the orders or instructions of a supervisor or member of management, or the use of abusive or threatening language toward a supervisor or member of management
- Using abusive, threatening or intimidating language at any time on Agency premises
- Violation of Agency punctuality and attendance policies. Absences protected by state or federal law do not count as violations of this policy. Protected paid sick time under California, federal or local law does not count as a violation of this policy
- Failing to obtain permission to leave work for any reason during normal working hours, not including meal and rest periods
- Failing to observe working schedules, including rest and meal periods
- Sleeping or malingering on the job
- Working overtime without authorization or refusing to work assigned overtime
- Violating any safety, health, security or Agency policy, rule, or procedure
- Violation of the Agency's drug and alcohol policy
- Committing a fraudulent act or a breach of trust under any circumstances.
- Violating the Agency's anti-harassment or equal employment opportunity policies.
- Failing to promptly report work-related injury or illness.

This statement of prohibited conduct does not alter the Agency's policy of at-will employment. Either you or Family Assistance Program remain free to terminate the employment relationship at any time, with or without reason or advance notice.

Prohibited Cell Phone Use While Driving

In the interest of the safety of our employees and other drivers and pedestrians on the road, Family Assistance Program employees are prohibited from using cell phones that are not handsfree or any other wireless communication devices (including laptops and tablets) while driving on Agency business and/or Agency time.

Drive-time

A person who is driving for the company must refrain from getting tickets. If our insurance company is unable to cover the employee that employee is subject to termination.

Violating this policy is a violation of law and a violation of Agency rules.

Punctuality and Attendance

As an employee of Family Assistance Program, you are expected to be punctual and regular in attendance. Doing so is an essential function of your job. Tardiness or absences can cause problems for your co-workers and your manager. When you are absent, your assigned work must be performed by others.

You are expected to report to work as scheduled, on time, and prepared to start work. You

also are expected to remain at work for your entire work schedule, except for meal and rest periods or when required to leave on authorized Agency business. Late arrivals, early departures or other unanticipated and unapproved absences from scheduled hours are disruptive and must be avoided.

If you are unable to report for work on any particular day, it is requested that you provide reasonable advance notice to your manager before the time you are scheduled to begin working for that day. You must inform your manager of the expected duration of any absence. If you fail to provide reasonable advance notice before your scheduled time to begin work and do not arrive in time for your assigned shift, you will be considered tardy for that day. If the circumstances for your tardiness or absence were unforeseen, inform your manager as soon as practical of the reason for the tardiness or absence.

Excessive absenteeism or tardiness, providing false information or abuse of leave laws will not be tolerated. Generally, if you fail to report for work without any notification to your manager and your absence continues for a period of three (3) Family Assistance Program will consider that you have voluntarily abandoned or quit your employment.

Absences protected by local, state and federal law do not count as a violation of the punctuality and attendance policy. Paid sick time protected under California law does not count as a violation of this policy.

Wages

Reporting-Time Pay

Family Assistance Program will comply with all applicable regulations regarding reporting-time pay for nonexempt employees.

Family Assistance Program will pay a minimum of two hours of pay to employees who are required to report to work on a day other than their normally scheduled workday.

Family Assistance Program will pay employees for reporting to work under the following circumstances:

- Interruption of work because of the failure of any or all public utilities
- Operations can't begin due to threats to employees or the Agency's property, or when recommended by civil authorities
- Interruption of work because of natural causes or other circumstances beyond the Agency's power to control

Reporting time pay does not apply to employees on paid standby status, who are called to work at times other than their usual shift.

If you request time off that you will make up later in the week, you must submit your request at least twenty-four (24) hours in advance of the desired time off. If you request to work makeup time first in order to take time off later in the week, you must submit your request twenty-four (24) hours before working the makeup time. Your makeup time request must be approved in writing before you take the requested time off or work makeup time, whichever is first.

All makeup time must be worked in the same workweek as the time taken off. The Agency's

seven-day workweek is Sunday through Saturday. Employees may not work more than 8 hours in a day or 40 hours in a workweek as a result of making up time that was or would be lost due to a personal obligation.

If you take time off and are unable to work the scheduled makeup time for any reason, the hours missed will normally be unpaid. However, your manager may arrange with you another day to make up the time if possible, based on scheduling needs. If you work makeup time in advance of time you plan to take off, you must take that time off, even if you no longer need the time off for any reason.

An employee's use of makeup time is completely voluntary. Family Assistance Program does not encourage, discourage, or solicit the use of makeup time.

Meal and Rest Periods

Rest Breaks

Nonexempt employees are entitled to uninterrupted rest break periods during their workday. If you are a nonexempt employee, you will be paid for all such break periods, and you will not clock out.

Number of Rest Breaks

You will be authorized and permitted one (1) 10-minute net rest break for every four (4) hours you work (or major fraction thereof, which is defined as any amount of time over two (2) hours). A rest break need not be authorized for employees whose total daily work time is less than three and one half (3.5) hours.

You will be relieved of all duty during your rest break periods. You are free to come and go as you please and are free to leave the premises. You are expected to return to work promptly at the end of any rest break.

If you work a shift from three and one-half (3.5) to six (6) hours in length you will be entitled to one (1) ten-minute rest break. If you work more than six (6) hours and up to 10 hours, you will be entitled to two (2) ten-minute rest breaks. If you work more than 10 hours and up to 14 hours, you will be entitled to three (3) ten-minute rest breaks.

For shifts in excess of 14 hours, you will continue to be entitled to additional paid 10-minute rest breaks for every four (4) hours you work, or major fraction thereof.

Meals while Traveling

Employer will reimburse employees at the rate approved by the government and/or grantor, dependent on what is included and not included in the event an employee attends.

Shelter Staff

Shelter staff employees take their lunch and breaks with the clients; therefore, they are paid for meal breaks and the meal and rest period do not apply to shelter staff employees.

Timing of Rest Breaks

You are authorized and permitted to take a rest break in the middle of each four-hour work period.

There may be practical considerations that make this general timing infeasible and that require Family Assistance Program to deviate from this general rule. You will be informed if there are practical considerations that make this timing infeasible.

Your rest break will be scheduled by your manager.

Meal Period

With the exception of shelter staff nonexempt employees will be provided an uninterrupted unpaid meal period of at least 30 minutes if they work more than five (5) hours in a workday. You must clock out for your meal period. You will be permitted a reasonable opportunity to take this meal period, and you will be relieved of all duty. During your meal period, you are free to come and go as you please and are free to leave the premises. You are expected to return to work promptly at the end of any meal period.

If your total work period for the day is more than five hours per day but no more than six hours, you may waive the meal period. This cannot be done without the mutual consent of you and your manager. You must discuss any such waiver with your manager in advance. The waiver must be in writing.

Timing of Meal Period

Your meal period will be provided no later than the end of your fifth hour of work. For example, if you begin work at 8:00 a.m., you must start your meal period by 12:59 p.m. (which is before the end of your fifth hour of work).

Second Meal Period

If you work more than 10 hours in a day, you will be provided a second, unpaid meal period of at least 30 minutes. Again, you must clock out for your meal period. You will be permitted a reasonable opportunity to take this meal period, and you will be relieved of all duty. There will be no control over your activities during your meal period. During your meal period, you are free to leave the premises and are free to come and go as you please. You are expected to return to work promptly at the end of any meal period.

Depending on the circumstances, you may be able to waive your second meal period if you took the first meal period and if your total hours worked for the day is no more than twelve hours. This cannot be done without the mutual consent of you and your manager and must be in writing. You must discuss any such waiver with your manager in advance.

Timing of Second Meal Period

This second meal period will be provided no later than the end of your 10th hour of work.

Your second meal period will be scheduled by your manager.

Recording Meal Periods

You must clock out for any meal period and record the start and end of the meal period.

Employees are not allowed to work "off the clock." All work time must be accurately reported on your time record.

If for any reason you are not provided a meal period in accordance with our policy, or if you are in any way discouraged or impeded from taking your meal period or from taking the full amount of time allotted to you, please immediately notify the Human Resource Manager.

Anytime you miss a meal period that was provided to you (or you work any portion of a provided meal period), you will be required to report to the Human Resource Manager and document the reason for the missed meal period or time worked.

Please also refer to the Family Assistance Program Timekeeping Policy.

Overtime for Nonexempt Employees

Employees may be required to work overtime as necessary. Only actual hours worked in a given workday or workweek can apply in calculating overtime. Family Assistance Program will attempt to distribute overtime evenly and accommodate individual schedules. All overtime work must be previously authorized by your manager. Family Assistance Program provides compensation for all overtime hours worked by non-exempt employees in accordance with state and federal law as follows:

- All hours worked in excess of eight hours in one workday or 40 hours in one work week will be treated as overtime. (Unless working in a shelter with ten-hour shifts.) A workday begins at the beginning of the shift and ends 24 (twenty-four) hours later. Workweeks begin each Sunday at 12:01 a.m. and end the following Saturday at midnight.
- Compensation for hours in excess of 40 for the workweek, or in excess of eight and not more than 12 for the workday, and for the first eight hours on the seventh consecutive day of work in one workweek, shall be paid at a rate one and one-half times the employee's regular rate of pay.
- Compensation for hours in excess of 12 in one workday and in excess of eight on the fifth consecutive workday in a workweek shall be paid at double the regular rate of pay.
- Exempt employees may have to work hours beyond their normal schedules as work demands require. No overtime compensation will be paid to exempt employees.
- There maybe certain programs that require 4 (four), 10 (ten) hour days for their work shift.

Pay for Mandatory Meetings/Training

Family Assistance Program will pay non-exempt employees for their attendance at meetings, lectures, and training programs under the following conditions:

- Attendance is mandatory.
- The meeting, course, or lecture is directly related to the employee's job.
- The employee who is required to attend such meetings, lectures, or training programs

will be notified of the necessity for such attendance by their manager.

- Employees who do perform productive work during attendance at meetings, lectures or training programs will be compensated at their regular rate of pay.
- Any hours in excess of eight in a workday or 40 in a workweek will be paid at the appropriate overtime rate, at the hourly rate in effect at the time the overtime work is being performed.

Payment of Wages

Family Assistance Program offers automatic payroll deposit. You begin and stop automatic payroll deposit at time of onboarding. To begin automatic payroll deposit, you must complete a form available from the Human Resources Department and return it to the at least 2 days before the pay period for which you would like the service to begin.

Timekeeping Requirements

All nonexempt employees are required to use Family Assistance Program Timekeeping system to record time worked for payroll purposes. All time worked must be accurately reported on your time record.

You must record your own time at the start and at the end of each work period. You must clock out for your meal period and record the start and end of the meal period.

You are not allowed to work "off the clock." Working off the clock violates agency policy. Any work performed before or after a regularly scheduled shift must be approved in advance by your manager. If you perform any off-the-clock work, please report the work to your manager.

You also must record your time whenever you leave your work location for any reason other than Family Assistance business.

You will be required to certify that your time record is accurate.

Any handwritten marks or changes on the timecard must be initialed by your manager. Punching another employee's timecard, allowing another employee to punch your timecard, or altering a timecard is not permissible and is subject to disciplinary action.

Any errors on your timecard should be reported immediately to your manager.

Please also refer to Family Assistance Program meal and Rest Break Policy.

Safety and Health

Employees Who Are Required to Drive

Employees whose job duties require them to drive a Agency vehicle or their own vehicles for Agency business will be required to show proof of current valid driving licenses and proof of insurability under the Agency's policy or current effective insurance coverage before the first day of employment.

Family Assistance Program participates in a system that regularly checks state Department of Motor Vehicles (DMV) records of all employees who are required to drive as part of their job.

If an employee is required to drive as part of their job, Family Assistance Program retains the right to transfer to an alternative position, suspend, or terminate an employee whose license is suspended or revoked, or who fails to maintain personal automobile insurance coverage or who is uninsurable under the Agency's policy.

Employees who drive their own vehicles on Agency business will be reimbursed at the rate of the current IRS standard mileage rate per mile.

Ergonomics

Family Assistance Program is subject to Cal/OSHA ergonomics standards for minimizing workplace repetitive motion injuries. The Agency will make necessary adjustments to reduce exposure to ergonomic hazards through modifications to equipment and processes and employee training. The Agency encourages safe and proper work procedures and requires all employees to follow safety instructions and guidelines.

Family Assistance Program believes that reduction of ergonomic risk is instrumental in maintaining an environment of personal safety and well-being, and is essential to our business. We intend to provide appropriate resources to create a risk-free environment. If you have any questions about ergonomics, please contact the Human Resources Department.

Health and Safety

All employees are responsible for their own safety, as well as that of others in the workplace. To help us maintain a safe workplace, everyone must be safety-conscious at all times. Report all work-related injuries or illnesses immediately to your manager. In compliance with California law, and to promote the concept of a safe workplace, Family Assistance Program maintains an Injury and Illness Prevention Program. The Injury and Illness Prevention Program is available for review by employees and/or employee representatives in location of IIPP.

Family Assistance Program also maintains a written COVID-19 Prevention Program in compliance with California law, which is available for review by employees and/or authorized representatives.

In compliance with Proposition 65, Family Assistance Program will inform employees of any known exposure to a chemical known to cause cancer or reproductive toxicity.

Inclement Weather/Natural Disasters

In the event of severe weather or a natural disaster that prevents employees from safely traveling to and from work, the following leave policies will apply:

- Inclement weather: Conditions that excuse absence from work include: heavy rain, road closure, wildfire. If weather conditions prevent you from safely traveling to work, you must notify your manager by phone, if telephone service is functional, or by any other available means. Employees may be paid for up to three (3) day(s) per year when weather conditions prevent them from reaching the worksite. Absences in excess of three (3) day(s) will be unpaid or will be deducted from accumulated vacation time.
- In the event of a natural disaster, the office will be closed if the building is damaged or highways leading to the office are damaged. For instructions on reporting to another location, contact your manager immediately, if possible.

Recreational Activities and Programs

Family Assistance Program or its insurer will not be liable for payment of workers' compensation benefits for any injury that arises out of an employee's voluntary participation in any off-duty recreational, social, or athletic activity that is not part of the employee's work-related duties.

Security

Family Assistance Program has developed guidelines to help maintain a secure workplace. Be aware of persons loitering for no apparent reason in parking areas, walkways, entrances and exits, and service areas. Report any suspicious persons or activities to your manager. Secure your desk or office at the end of the day. When called away from your work area for an extended length of time, do not leave valuable and/or personal articles in or around your workstation that may be accessible. The security of facilities as well as the welfare of our employees depends upon the alertness and sensitivity of every individual to potential security risks. You should immediately notify your manager when unknown persons are acting in a suspicious manner in or around the facilities, or when keys, security passes, or identification badges are missing.

Workplace Violence

Family Assistance Program has adopted the following workplace violence policy to ensure a safe working environment for all employees.

The Agency has zero tolerance for acts of violence and threats of violence. Without exception, acts and threats of violence are not permitted. All such acts and threats, even those made in apparent jest, will be taken seriously, and will lead to discipline up to and including termination.

It is every employee's responsibility to assist in establishing and maintaining a violence-free work environment. Therefore, you are expected and encouraged to report any incident which may be threatening to you or your co-workers or any event which you reasonably believe is threatening or violent.

You may report an incident to any supervisor or manager.

Termination

Employee References

All requests for references must be directed to the Human Resources Manager. No other manager, supervisor, or employee is authorized to release references for current or former employees.

By policy, Family Assistance Program discloses only the dates of employment and the title of the last position held of former employees.

Involuntary Termination and Progressive Discipline

Violation of Family Assistance Program policies and rules may warrant disciplinary action. The Agency has a system of progressive discipline that may include verbal warnings, written warnings, and suspension. The system is not formal, and Family Assistance Program may, in its sole discretion, utilize whatever form of discipline is deemed appropriate under the circumstances, up to, and including, immediate termination of employment. The Agency's policy of progressive discipline in no way limits or alters the at-will employment relationship.

Reductions in Force

Under some circumstances, Family Assistance Program may need to restructure or reduce its workforce. If restructuring our operations or reducing the number of employees becomes necessary, the Agency will attempt to provide advance notice, if possible, to help prepare affected individuals. If possible, employees subject to layoff will be informed of the nature of the layoff and the foreseeable duration of the layoff, whether short-term or indefinite.

In determining which employees will be subject to layoff, Family Assistance Program will consider, among other things, operation and requirements, the skill, productivity, ability, and past performance of those involved, and also, when feasible, the employee's length of service.

Voluntary Resignation

Voluntary resignation results when an employee voluntarily quits their employment at Family Assistance Program or fails to report to work for three (3) per the attendance policy consecutively scheduled workdays without notice to, or approval by, their manager (unless the absence is protected by law). All Agency-owned property, including vehicles, keys, uniforms, identification badges, and credit cards, must be returned immediately upon termination of employment.

Confirmation of Receipt

Confirmation of Receipt – Employee Copy

I have received my copy of the Agency's employee handbook. I understand and agree that it is my responsibility to read and familiarize myself with the policies and procedures contained in the handbook.

I understand and agree that nothing in the employee handbook creates or is intended to create a promise or representation of continued employment and that employment at Family Assistance Program is employment at-will; employment may be terminated at the will of either the Agency or myself. My signature certifies that I understand that the foregoing agreement on at-will status is the sole and entire agreement between Family Assistance Program and myself concerning the duration of my employment and the circumstances under which my employment may be terminated. It supersedes all prior agreements, understandings, and representations concerning my employment with Family Assistance Program.

I understand that except for employment at-will status, any and all policies or practices can be changed at any time by the Agency. Family Assistance Program reserves the right to change my hours, wages, and working conditions at any time. I understand and agree that other than the Executive Director of Family Assistance program, no manager, supervisor, or representative of the Agency has authority to enter into any agreement, express or implied, for employment for any specific period of time, or to make any agreement for employment other than at-will; only the Executive Director has the authority to make any such agreement and then only in writing, signed by the Executive Director.

Employee's Signature _____

Employee's Printed Name _____

Date _____

Confirmation of Harassment Discrimination and Retaliation Prevention Policy – Employee Copy

I have received my copy of the Agency's Harassment, Discrimination and Retaliation Prevention policy. I understand and agree that it is my responsibility to read and familiarize myself with this policy.

I understand that the Agency is committed to providing a work environment that is free from harassment, discrimination and retaliation. My signature certifies that I understand that I must conform to and abide by the rules and requirements described in this policy.

Confirmation of Receipt – Employer Copy

I have received my copy of the Agency's employee handbook. I understand and agree that it is my responsibility to read and familiarize myself with the policies and procedures contained in the handbook.

I understand and agree that nothing in the employee handbook creates or is intended to create a promise or representation of continued employment and that employment at Family Assistance Program is employment at-will; employment may be terminated at the will of either the Agency or myself. My signature certifies that I understand that the foregoing agreement on at-will status is the sole and entire agreement between Family Assistance Program and myself concerning the duration of my employment and the circumstances under which my employment may be terminated. It supersedes all prior agreements, understandings, and representations concerning my employment with Family Assistance Program

I understand that except for employment at-will status, any and all policies or practices can be changed at any time by the Agency. Family Assistance Program reserves the right to change my hours, wages, and working conditions at any time. I understand and agree that other than the Executive Director of Family assistance Program no manager, supervisor or representative of the Agency has authority to enter into any agreement, express or implied, for employment for any specific period of time, or to make any agreement for employment other than at-will; only the Executive Director has the authority to make any such agreement and then only in writing, signed by the Executive Director.

Employee's Signature _____

Employee's Printed Name _____

Date _____

**Confirmation of Harassment Discrimination and Retaliation Prevention Policy –
Employer Copy**

I have received my copy of the Agency's Harassment, Discrimination and Retaliation Prevention policy. I understand and agree that it is my responsibility to read and familiarize myself with this policy.

I understand that the Agency is committed to providing a work environment that is free from harassment, discrimination and retaliation. My signature certifies that I understand that I must conform to and abide by the rules and requirements described in this policy.

Employee's Signature _____

Employee's Printed Name _____

Date _____