

Standard Operating Procedures Manual
City of Poquoson Fire and Rescue



**City of Poquoson
Fire and Rescue**

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GENERAL ADMINISTRATION

SOP#: GA 22.00

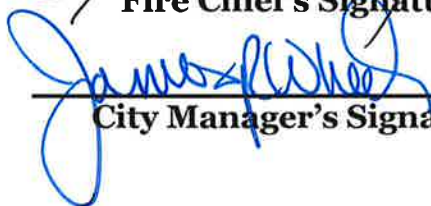
Title: Family Medical Leave Act

Effective Date: 04/27/2012

Revised Date: _____



Fire Chief's Signature



City Manager's Signature

Family Medical Leave Act (FMLA)

I. PURPOSE

The purpose of this policy is to provide guidance for career personnel with regard to Family Medical Leave Act (FMLA). It is important that our personnel know their rights and what is expected of both them and the City when this leave is requested or assigned.

This SOP is not all-inclusive and cannot encompass all situations that may be encountered.

II. APPLICABILITY

All career staff

III. POLICY

FMLA is covered in detail in the City of Poquoson Personnel Policy Manual and is compliant with all applicable federal laws.

All required notices are provided and posted at each fire station to include ADA postings as required by law.

As an emergency department it is our responsibility to provide and maintain minimum staffing levels for the protection of our staff and the citizens we serve.

In order to maintain minimum staffing factoring in certifications required on each shift (i.e. Pump Operators, Paramedics, EMT-I, Ladder Operators, or when multiple staff is out on FMLA) it may be necessary to move personnel from one shift to another. This should not be looked at as retaliation, but rather a necessity to maintain shift balance.

Just as important as it is to maintain minimum staffing, it is equally important that we provide our staff with all the benefits guaranteed them under FMLA.

To ensure that all parties are treated fairly and consistently the following shall be followed:

FMLA designation:

- FMLA can be requested by the employee or assigned by the City.
- FMLA will be assigned for any request for extended leaves covered over (2 weeks in duration) that requires leave up to 12 weeks (26 weeks for care of service personnel).
- Your built-in overtime will be factored into the 12 weeks. (You receive 6 hrs. for each cycle for a total of 12 hrs per month)

FMLA provides:

- Job protected leave for up to 12 weeks in a 12 month period (26 weeks for the care of service members).
- Continuation of health plan benefits on same terms of employee

Standard Operating Procedures Manual
Family Medical Leave Act

GA 22.00

participating in plan at time of leave.

- Protection from retaliation.

You must be aware that obligations and responsibilities are placed on both employer and employees.

When requesting FMLA you must:

- Have worked 1250 hrs for same employer in the last 12 months.
- Give sufficient notice to employer (30 days advance notice if leave is foreseeable or as soon as possible/practicable under the circumstances).
- Give reasons for the request with enough specificity to allow the employer to know if leave qualifies. Leave request can be denied if not enough information is given.
- Provide doctors note or certification from health care provider explaining necessity for leave.
- For leave following the birth or placement of a child, no medical necessity for leave is needed.
- Use all available sick leave, annual leave and other time.
- Once all leave is exhausted, you will go on leave without pay for the remainder of your approved leave and must make arrangements with the Finance Department to pay your portion of your health insurance.

While out on FMLA leave you will provide the following:

- Periodic updates to Fire

Standard Operating Procedures Manual
Family Medical Leave Act

GA 22.00

Administration.

- Intent to return to work at the end of leave.
- Fitness for full duty certificate before you may return to work.

While out on FMLA leave, unless you have written approval from the City Manager, you shall **not**:

- Work another job.
- Take vacations.
- Participate in sports or any activities that may prolong your leave or compromise your recovery.