CITY OF LA CROSSE

EMPLOYEE HANDBOOK

POLICIES

JANUARY 01, 2022

Part Two

Effective January 1, 2014

Amended 2/2014; 01/2015; 01/2016; 01/2017; 01/2018; 01/2019; 01/2020; 01/2022

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ATTENDANCE POLICY
NON-REPRESENTED EMPLOYEES

PURPOSE

This policy is to ensure that a consistent procedure is used by all city departments in the administration of attendance at work for non-represented employees.

ATTENDANCE

All employees will be required to be regular in their attendance and to meet normal attendance standards. For reporting purposes refer to below procedures. Three levels of attendance standards have been established ranging from exceeds to needs improvement. Each employee shall meet or exceed the standards. If an employee's yearly attendance, (i.e. June 1st through May 31st) falls below this expected level, they will not be eligible for a step increase and will be counseled and warned, and if the problem persists, the employee will be subject to disciplinary action.

For definition purposes, a day of absence means each individual day, or portion thereof, lost from work due to reasons **other than:**

- Accrued leave benefits: holidays; vacation; personal business; family care; bereavement
- Leave without pay (LWOP) pre-authorized by Human Resources
    - Leave while on ICI,
    - Leave accommodation due to ADAAA,
    - Pre-planned leave for a newly hired employee as part of the employment offer,
    - 30 day leave of absence provision as contained within the Employee Handbook
- Paid administrative leave
- Flex time
- Military leave
- Family Medical Leave
- Jury or witness duty
- Injury suffered on the job
- Disciplinary action
- Health Care Provider excused illness or medical appointment of the employee when using paid leave [1]

An occurrence is defined as each consecutive occasion that an employee misses work. Example: If an employee is off sick for two (2) consecutive days with the flu that would count as one (1) occurrence and two (2) days absence.

Any sickness or injury more than three (3) days duration must be verified by a physician's certificate. This certificate must state the kind or nature of the illness or injury and that the employee has been incapacitated for work for said period of absence.

Where the city has reasonable cause to suspect sick leave abuse exists, the city reserves the right to require reasonable medical substantiation, including a general diagnosis, for any and all prospective sick leave absences including those of three (3) or less workdays. Any and all medical substantiation, including physician certificate, required under this policy may bypass the

employee's immediate supervisor and be directed to the City's Human Resource Department, if the employee so desires.

REPORTING PROCEDURE FOR EMPLOYEES REQUESTING SICK LEAVE:

The Employee must:

- Personally notify his/her Supervisor or their designee prior to the scheduled start of the shift. Exception – If the employee is incapacitated by a medical condition that would prevent him/her from making the call personally.
- Inform management of the general nature of the illness and expected date of return.
- Inform management if leave is for Family Care. Family Care days are deducted from accrued sick leave bank, and are designated for injury/illness and medical/dental appointments of the employee's minor dependents.
- Keep management informed of changes effecting return to work date.
- Present acceptable medical substantiation upon return to work following more than three (3) consecutive scheduled work days (2 shift days for Airport Operations Coordinators) off due to illness or injury. The medical substantiation must be presented to a Supervisor or Human Resources upon returning to work.
- For absences less than 3 days to be considered approved, acceptable medical substantiation must be presented to a Supervisor or Human Resources by May 31st. Because attendance is a factor in an employee's performance evaluation, medical substantiation received beyond May 31st will not be considered with the exception of those employees with appointments/absences that occur in the last week of May for which they will have 1 week beyond May 31st to submit acceptable medical substantiation.

MEDICAL/DENTAL APPOINTMENTS:

If the work schedule allows, employees may use accrued sick leave for their medical/dental appointments as follows:

- The employee may use sick leave for the duration of the employee's medical/dental appointment, plus any travel time necessary to and from the appointment, (i.e. an employee has a doctor's appointment at 10:00 a.m. In order to make it there he/she requests to leave at 9:30 a.m. His/her appointment is completed at 11:00 a.m. He/she is expected to return to work immediately after the appointment, i.e. 11:30 a.m.).
- An employee will not be allowed to take the entire day off for an appointment, unless special circumstances warrant such as conditions which affect their ability to safely, effectively or thoroughly perform their job description's essential duties.
- Sick leave is not intended to provide additional income to an employee, but as a substituted form of pay for time attending the employee's appointment. Sick leave may be used for the time period for which the employee's appointment falls during normal work hours, (i.e. the employee is scheduled for an appointment at 4:00 p.m. and ends at 5:00 p.m. The employee's normal scheduled work day would have ended at 4:30 p.m., so the employee would only be able to use sick leave from 4:00 p.m. – 4:30 p.m.).
- Every effort should be made to schedule appointments during non-work time.
- For an approved absence while using sick leave, acceptable medical substantiation is required. Substantiation shall include the appointment date, employee name, start and end time of appointment, name/location of dental/health care facility, and signature of health care provider or official medical facility stamp.

ATTENDANCE STANDARDS	ATTENDANCE CRITERIA
"Exceeds"	3 days or less of absence 2 or 3 occurrences Platoon Shift Employees (Airport & Fire) 2 total shift days or less of absence 2 or less occurrences
"Meets"	4 to 7 total days of absence 4 occurrences Platoon Shift Employees (Airport & Fire) 3 total shift days of absence 3 occurrences
"Needs Improvement"	8 or more total days of absence 5 or more occurrences A noticeable pattern of absence is present Platoon Shift Employees (Airport & Fire) 4 or more total shift days of absence 4 or more occurrences A noticeable pattern of absence is present

Employees must meet both criteria for each standard to be considered for that category. For example, if an employee has 2 occurrences each lasting 3 days (for a total absence of 6 days) the appropriate standard would be "Meets". A partial day absence shall be considered one day.

FALSE SICK REPORTS

Employees who feign illness or injury in order to use sick leave, or to avoid working assigned work, are subject to disciplinary action, up to and including discharge.

REPORTING LATE FOR WORK:

Employees failing to report for work at their scheduled start time will be considered late. Employees shall make every effort to notify their Supervisor or their designee if they are going to be late with their expected time of arrival to work.

[1] City of La Crosse Family and Medical Leave Policy as defined by Wisconsin and Federal Family and Medical Leave Acts, Definition of Physician/Health Care Provider, 2001: **Health care provider**. Acupuncturist, audiologist, Christian Science practitioner, chiropractor, D. O., D. D. S., D. P.M., health care provider in foreign country, hospice, inpatient care facility, MD., marriage and family counselor or therapist, nurse-midwife, nurse, optometrist, 0. T., P. T. psychologist, respiratory care practitioner, social worker, speech pathologist, or Wisconsin-licensed CBRF.

Revised 6-09-11; 1-1-12; 11-27-13; 8-2014; 3-11-15; 10-2015; 11-2016

BONE MARROW AND ORGAN DONATION LEAVE POLICY

I. PURPOSE:

To describe the policies, procedures and obligations of the City of City of La Crosse and the rights and obligations of employees under the Wisconsin Bone Marrow and Organ Donation Leave law.

II. ORGANIZATIONS AND PERSONS AFFECTED:

This policy applies to all City of City of La Crosse departments, boards, commissions, and employees**.**

III. POLICY:

Eligible employees may take up to (6) weeks of protected leave in a 12-month period necessary to undergo a bone marrow or organ donation procedure and to recover from the procedure. Leave will be calculated on a 12 month calendar year (January – December) period.

Bone Marrow or Organ Donation Leave will run concurrently with Federal and State Family and Medical Leave (FMLA). If an employee does not apply for family and medical leave and his or her leave usage appears to qualify for FMLA, the City shall notify the employee in writing that the leave will be classified as FMLA leave, and run the benefits concurrently.

IV. REFERENCES:

Bone Marrow and Organ Donation Leave law (Section 103.11 Wis. Stats.)

V. PROCEDURES:

It is the policy of the City of City of La Crosse to grant up to six (6) weeks of Bone Marrow or Organ Donation Leave during any calendar year to eligible employees, in accordance with Section 103.11 of the Wisconsin Statutes. The leave may be paid, unpaid, or a combination of paid and unpaid, depending on the circumstances and as specified in this policy.

VI. ELIGIBILITY:

Employees are entitled to bone marrow and organ donation leave benefits if they have been employed by the City for at least 52 consecutive weeks and have worked for at least 1,000 hours during the 52 weeks prior to the start of the leave.

VII. AMOUNT OF LEAVE:

Eligible employees may take up to a total of (6) weeks of unpaid leave in a 12-month period only for the time necessary to undergo the bone marrow or organ transplant donation procedure and to recover from the procedure.

VIII. PAYMENTS ON BONE MARROW OR ORGAN DONATION LEAVE:

Employees may substitute, for portions of the bone marrow and organ donation leave, any accrued and unused paid leave provided to them by the City.

As with all leaves of absence, no employee may pursue or engage in employment when on bone marrow or organ donation leave.

IX. NOTICE AND CERTIFICATION:

If an employee intends to take leave for the purpose of serving as a bone marrow or organ donor, the employee shall do all of the following:

1. Give their supervisor advance notice of the bone marrow or organ donation and submit a **Family and Medical Leave Request Form** ("request form") to the Human Resources (HR) department within a reasonable period of time, i.e., at least (2) weeks in advance of the leave if foreseeable. When the need for leave is not foreseeable, the employee must notify their supervisor and the HR department and thereafter submit the request form as soon as practicable under the facts and circumstances of the particular case. Absent unusual circumstances, it is considered practicable for an employee to provide notice of unforeseeable leave within the time prescribed by the City's usual and customary notice requirements applicable to that employee for such leave. Failure to give timely notice and/or submit the request form may result in the delay or denial of the leave and may subject the employee to discipline under City policies.

2. Make a reasonable effort to schedule the bone marrow or organ donation procedure and accompanying recovery period so it does not unduly disrupt the City's operations, subject to the approval of the health care provider of the bone marrow or organ donee.

3. Submit a **Health Care Provider Bone Marrow and Organ Donation Leave Certification Form** ("certification form"), completed by the health care provider, to the HR department within 15 days of commencing the leave if possible, or, when the employee cannot submit the certification form within 15 days of commencing the leave, as soon as practicable, certifying:

    - The donee has a serious health condition that necessitates a bone marrow or organ transplant;
    - The employee is under the health care provider's care, is eligible, and has agreed to serve as a bone marrow or organ donor for the donee; and
    - The amount of time expected to be necessary for the employee to be off from work for the bone marrow or organ donation procedure and to recover from the procedure

4. If the employee receives written notification that the certification form is incomplete and/or insufficient, the employee shall have seven days to cure the identified deficiencies. If an employee does not provide the required certification by the designated deadlines, or if the City determines that an employee is not eligible for the leave, the leave may <u>not</u> be designated as bone marrow and organ donation leave, and the employee may be subject to discipline under City attendance policies unless he or she uses accrued paid leave (like vacation) and/or is granted an unpaid leave of absence as may be permitted by City Policy.

5. An employee returning from bone marrow and organ donation leave must provide a "Fitness for Duty" statement signed by the health care provider.

6. Forms available through the HR department.
    - Family and Medical Leave Request Form
    - Health Care Provider Certification Form
    - Fitness for Duty Certification Form

X. <u>HEALTH INSURANCE BENEFITS:</u>

Group health insurance coverage will be maintained for employees while they are on bone marrow and organ donation leave, on the same terms as if the employee continued to work. The employee

will be required to pay their regular portion of health insurance premium payments on a schedule established by the City.

The City may recover its share of health insurance premiums paid during a period of unpaid bone marrow and organ donation leave from an employee if the employee fails to return to work (for a minimum of 30 calendar days) after the expiration of the leave.

The City may discontinue health insurance benefits if the employee fails to make a premium payment within 30 days of the due date after providing written notice to the employee of the cancellation of coverage for non-payment.

XI. OTHER BENEFITS:

Qualified bone marrow and organ donation leave will not be counted as an absence under the City's attendance policy.

Other City benefits may be continued during periods of unpaid bone marrow and organ donation leave, and arrangements should be made for the employee's portion of the payments with the Employee Benefits Coordinator.

XII. FITNESS FOR DUTY AND RETURN TO WORK:

An employee returning from bone marrow and organ donation leave must provide a "Fitness for Duty" statement signed by the health care provider. An employee who fails to provide a Fitness for Duty statement may be prohibited from returning to work until it is provided. Failure to provide a Fitness for Duty statement may result in discipline up to and including termination. Upon return from bone marrow and organ donation leave, an employee shall be restored to their original position or, if the position is not vacant, to an equivalent position with equivalent pay, benefits and other terms and conditions of employment. An employee may not be restored to their original or equivalent position if they are unable to perform the essential functions of their job because of a mental or physical condition.

XIII. COMPLAINT PROCEDURE AND ADMINISTRATIVE PROCEEDING:

An employee who believes their right to take bone marrow or organ donation leave has been violated should contact the Director of Finance, Deputy Director of Human Resources or their designee immediately and attempt to resolve the matter internally. Alternatively, or in the event the matter is not resolved following contact with theDireector of Finance, Deputy Director of Human Resources or their designee, the employee may, within 30 days after the alleged violation occurs or the employee should reasonably have known that the violation occurred, whichever is later, file a complaint with the Department of Workforce Development alleging the violation.

XIV. DEFINITIONS:

- "Bone Marrow" has the meaning given in Section 146.34 (1) (a) Wis. Stats.
- "Health Care Provider" has the meaning given in Section 103.10 (1) (e) Wis. Stats.
- "Organ" has the meaning given for "human organ" in Section 230.35 (2d) (a) 2 Wis. Stats.

01/01/17; R 01/01/2018

Cell Phone Stipend Policy

I. PURPOSE

a. The City of La Crosse recognizes that the performance of certain job responsibilities may be enhanced by or may require the use of a cellular (cell) phone or a Smartphone. The IRS considers these devices to be "listed property." As such, IRS regulations (IRS Section 274(d)(4) require detailed record keeping including (a) the amount of the expense, (b) the time and place of the call, and (c) the business purpose for the call. The IRS can declare that all undocumented use of a cell phone is personal and should be taxed as wages, even if the majority of the calls are for business purposes.

b. In order to comply with IRS rules regarding the taxable nature of cell phone usage by employees, the City of La Crosse will issue a cell phone stipend for those employees who hold positions where the duties of that position require the use of a cell phone. The benefits of such an approach include:

    1. A call log is not required;
    2. Monthly reporting is not required;
    3. A single phone may be used for both personal and business purposes.
    4. The stipend is not to be considered taxable income to the employee.

c. This Stipend does not constitute an increase to base pay, and will not be included in the calculation of percentage increases to base pay due to annual raises, job upgrades, bonuses, benefits based on a percentage of salary, etc.

II. SCOPE

This policy applies to all City of La Crosse employees who will be receiving a stipend for their personal cell phone.

III. POLICY

Employees who hold positions that include the need for a cell phone to conduct city business as determined by the Department Head (see eligibility criteria below) may be eligible to receive a cell phone stipend to compensate for business-related costs incurred when using their individually-owned cell phones. The City will not own cell phones for the use of individual employees except in limited situations. Approval of a cell phone stipend requires recommendation by the Department Head, and approval by the Director of Information Technology and Director of Finance, Director of Human Resources or their designee.

IV. ELIGIBILITY

a. As determined by the Department Head, employees whose job duties include the <u>frequent need</u> for a cell phone may receive extra compensation, in the form of a monthly cell phone stipend, to cover business-related costs. An employee is eligible

for a personal phone stipend if at least one of the following criteria is met:

1. The job function of the employee requires considerable time outside of his/her assigned office or work area and it is important to the City/Department that s/he is accessible during those times;
2. The job function of the employee requires him/her to be accessible outside of scheduled or normal working hours where time sensitive decisions/notifications are required;
3. The job function of the employee requires him/her to have wireless data and internet access; and/or
4. The employee is designated as a "first responder" to emergencies.

b. An employee who only occasionally is contacted for business purposes is not eligible for a stipend.

c. An employee who receives “on call” pay is not eligible.

V. STIPEND PLAN:

a. If an employee meets the eligibility requirements for a cell phone, as outlined above, the Department Head submit their recommendation for the cell phone stipend by completing the Cell Phone Stipend Agreement and forwarding to Human Resources and Information Technology for approval. If approved by both the Director of Finance, Director of Human Resources or their designee and the Director of Information Technology the form will be provided to Finance for the stipend.

b. If approved, the stipend amount will be added to the employee's regular pay. In order to meet IRS guidelines, any amount added for cell phone equipment or for cell phone service will be identified as a non-taxable benefit.

c. The stipend will be paid as a flat rate per month, on the first pay period of each month, for the previous month’s service, based on the selected service and outlined below. The Department will pay only the agreed upon amount. “Previous month” shall be the month in which the employee was originally approved, via the Cell Phone Stipend Agreement.

d. The stipend allowance is neither permanent nor guaranteed. The City reserves the right to remove a participant from this plan and/or cancel the stipend for business reasons.

e. The amount of the stipend will be determined based on the type of plan required of the employee's position to perform his or her job responsibilities. Employee’s current cell phone must have the full capabilities of the recommended tier. The monthly stipend cannot exceed the employee’s monthly cell phone plan cost. If employee’s cell phone plan cost is less than the stipend amount for the required tier, the stipend will be paid at the next lower stipend amount. (For example, if an employee is required to have Tier 1 with a stipend of $35.00 per month, but has a

cell phone plan costing $20.00 per month, the stipend would be paid at $10.00 per month.) A tiered model includes the following options:

1. Tier 1 – Voice & Carrier provided Data – $35.00 per month
2. Tier 2 – Voice only, Or Voice and Text - $10.00 per month

f. If an employee's job duties do not include the need for a cell phone, the employee is not eligible for a cell phone stipend.

g. An employee may only receive one stipend (even if multiple phones are owned).

h. An employee may be required to provide documentation of their current cell phone plan to the Director of Information Technology to determine if they are eligible for the requested tier.

i. This plan was revised with an effective date of July 1, 2019.

VI. EQUIPMENT PURCHASE

a. The City/Department will not pay for the purchase of personal cell phones, activation fees or insurance.

VII. OVERSIGHT, APPROVAL & FUNDING

a. The Department Head/designee is responsible for identifying employees who hold positions that include the need for a cell phone.

b. The Department Head's recommendation of eligible employees for the cell phone stipend is subject to approval by the Director of Information Technology and Director of Finance, Deputy Director of Human Resources or their designee.

c. If approved, the Department Head/designee is responsible for overseeing employee cell phone needs and assessing each employee's continued need of a cell phone for business purposes. The need for a cell phone stipend should be reviewed annually by the Department Head, to determine if existing cell phone stipends should be continued as-is, changed, or discontinued.

d. Stipends are funded by the department submitting the request.

VIII. EMPLOYEES RIGHTS & RESPONSIBILITIES

a. The employee acknowledges that their cell phone number may be shared internally via Intra-City telephone directories and on City emergency on-call lists as needed. The City will not share with the public employee cell phone numbers.

b. The employee is responsible for purchasing a cell phone and establishing a service contract with the cell phone service provider of his/her choice. The cell phone contract

is in the name of the employee, who is solely responsible for all payments to the service provider.

c. Because the cell phone is owned personally by the employee the stipend provided is not considered taxable income and the employee may use the phone for both business and personal purposes, as needed. The employee may, at his or her own expense, add extra services or equipment features, as desired. If there are problems with service, the employee is expected to work directly with the carrier for resolution.

d. The employee's cell phone is considered personal property. Should the cell phone malfunction, suffer damaged or is lost, the cost for repair or replacement is at the expense of the employee; or to the extent as covered under personal property replacement in the collective bargaining contract(s) if the damage/loss was work related.

e. Support from the City's Information Technology (IT) Department is limited to for connecting a personally-owned PDA/Smartphone to City-provided services, including email, calendar, and contacts.

f. An employee receiving a cell phone stipend must be able to show, if requested by his/her supervisor, a copy of the monthly access plan charges confirming they continue to have a contract for the cell phone. If the employee terminates the wireless contract at any point, s/he must notify his/her supervisor within 5 business days to terminate the stipend.

g. The City does not accept any liability for claims, charges or disputes between the service provider and the employee. Use of the phone in any manner contrary to local, state, or federal laws will constitute misuse, and will result in immediate termination.

h. Any cell phone that has data capabilities must be secured based on current security standards including password protection and encryption.

i. If a cell phone with data capabilities is stolen or missing, it must be reported to the employee's supervisor, the wireless device service provider, and to IT as soon as possible.

j. Employees must comply with the City's IS policy when using their cell phone for business purposes.

k. Employees are not required to perform work via their personal cell phone during non-work hours or off days and as such are not entitled to compensation or overtime for checking and responding to work related emails when off-duty.

l. Employees are expected to delete all City data from the cell phone when their employment with the City is severed, except when required to maintain that data in compliance with litigation hold notice. The City reserves the right to request to verify that all City data is deleted.

m. The City only has the right to view /City related work content which is limited to city email, city calendar, city appointments, and outlook contacts stored on the city network and servers. This can normally be accomplished via the City network without need for the actual device.

n. The City does not use any other 3rd party applications for business purposes such as messaging apps, photos apps, video apps and/or other applications and has no expectation or right to monitor or view personal use of these applications on the employee's cellphone, unless authorized by law or as part of an internal or criminal investigation.

IX. CITY -OWNED CELL PHONES

a. The City/Department may own and assign a limited number of cellular devices for emergency, disaster recovery, or for other business purposes as deemed necessary by the Department Head.

X. CANCELLATION

a. Any stipend agreement may be cancelled and/or suspended and stipend pro-rated for the month (based on weeks worked) if:

    1. An employee receiving a cell phone stipend terminates employment with the City.
    2. The employee changes positions within the City/Department which no longer requires the use of a cell phone for business reasons.
    3. There is misuse/misconduct with the phone when conducting City business.
    4. A decision by management (unrelated to employee misconduct) results in the need to end the program or there is a change in the employee's duties
    5. The employee is off work for long-term medical, personal or administrative purposes and is no longer subject to needing cellular access for work purposes.
    6. The employee terminates their personal cell phone contract for personal purposes.

b. Canceling a cellphone stipend requires the completion of the Cell Phone Stipend Agreement form and entering in the "end" date and distributing as required.

01/29/2015; R 02/06/2015; R 11/06/2017; R 01/01/2018; R 07/01/2019

CITY HALL SOLICITATION POLICY

WHEREAS, occasionally City Hall employees, while performing work for the City and during business hours of City Hall, are solicited by peddlers or solicitors as defined in ordinance 20.21 (B), and

WHEREAS, such solicitation by peddlers or solicitor as defined in Ordinance 20.21 (B) of sales of goods, wares or merchandise which are not being purchased by the City but by City employees for their personal use, is disruptive and reduces productivity of the employees.

IT IS THEREFORE established as a policy for City Hall that during regular City Hall hours and while such employees are engaged in their duties as a City employee, solicitation by peddlers or solicitors who are within City Hall doing such solicitation, unless prior permission is obtained from the Mayor or Director of Public Works after a determination has been made that such solicitation will not interfere with the work of the City employees.

The prohibition contained within this policy does not prohibit the solicitation for sales of goods, ware and merchandise that are purchased by the City for City purposes of those persons within City Hall that deal on a day-to-day basis with the purchase of goods, wares or merchandise for the City.

ADOPTED BY THE BOARD OF PUBLIC WORKS March 27, 1992

Classification and Compensation Plan

CLASSIFICATION PLAN

Section 1. Adoption of Classification Plan

The City will establish and maintain a Position Classification Plan. The Common Council has responsibility for adopting the position classification plan that assigns all City positions to position classifications. This position classification plan shall include all regular full-time and part-time positions in the City covered under the Employee Handbook, with the exception of LPPSA, LPPNSA, IAFF, ATU and Library positions. The classification plan shall be maintained, and reviewed at the time of a vacancy, to reflect the current responsibilities and requirements and other applicable factors for all covered City positions. For each position there shall be a written position or class description which will include the following:

a. Position or classification title;
b. FLSA status;
c. A position summary which explains the nature of the work responsibilities of the position;
d. The essential duties and responsibilities;
e. Position requirements such as the knowledge, skills, and abilities necessary for performance of the work;
f. A statement of the education, experience and training required, and desired (if different) for recruitment;
g. Specialized requirements such as licensures, certifications, or registrations; and
h. Physical requirements and working conditions in compliance with the Americans with Disabilities Act.

Section 2. Maintenance of Classification Plan

The Director of Human Resources or their designee shall be responsible for the preparation, administration and maintenance of the classification plan to ensure that position classifications accurately reflect the essential duties and responsibilities, required knowledge, skills, and abilities, and other position requirements. Department Heads shall be responsible for notifying the Director of Human Resources or their designee of substantive changes in the nature of the duties, responsibilities, working conditions, or other factors affecting the classification of any existing position in their department.

The Director of Human Resources or their designee shall review and analyze changes in position classifications and determine whether the change in the nature or level of duties and responsibilities warrants a revision or reassignment of the position classification, establishing a new position classification to which the position is assigned, or taking other appropriate action.

The Director of Human Resources or their designee shall determine whether changes in a position classification warrants a review of the job evaluation points assigned to a position classification and if so, whether that review results in a change in the position classifications assigned grade in the Compensation Plan.

The Human Resources Department shall maintain all official position descriptions for all City positions.

Section 3. Classification of New Positions

The Director of Human Resources or their designee shall be responsible for analyzing and assigning new positions to existing position classifications or developing a new position classification and evaluating the new position classification for placement in the City's Compensation Plan. New positions must be approved by the Common Council. The Director of Human Resources or their designee, shall be responsible for determining the qualifications and experience level of the new position, in consultation and review with the Department Head and Mayor.

Section 4. Amendments to the Classification Plan

The Common Council shall approve amendments to the Classification Plan by adding, changing, or deleting positions or classes of positions and salary grades based on internal analysis, market comparisons, authorized budget allocation and other relevant factors, based upon the Director of Human Resources or their designee recommendations. New positions introduced during the budget process are subject to Council rule 22. The Common Council reserves the right to modify or eliminate all or any portion of the Classification Plan at any time.

Section 5. Use of the Classification Plan

The classification plan is used for the following:

a. As a guide for recruiting and determining eligibility of applicants for employment in City positions;
b. In determining lines of promotion and promotion eligibility;
c. Development of employee training programs;
d. Determining compensation levels for position classifications, and;
e. Providing uniform job terminology

Section 6. Administration

The City of La Crosse Common Council authorizes the Director of Human Resources or their designee to implement the Classification Plan.

Section 7. Request for Reclassification

Requests for reclassification of a position to a higher classification grade should be submitted, in writing, by the Department Head to the Human Resources Department between May 1 and May 15 of each calendar year. The request should include the specific reasons for the request for reclassification, and must clearly demonstrate increased complexity and/or responsibility within their respective position. Upon receipt of the request the Director of Human Resources or their designee shall study the request and determine the merit of the request for reclassification. If the Director of Human Resources or their designee determines a reclassification is justified, a recommendation shall be presented to the Common Council. If approved by Common Council, the Director of Human Resources or their designee shall make the necessary changes to maintain a fair, equitable and accurate classification plan.

If the request for reclassification is denied based on the merit of the request, the employee, with Department Head approval, has the ability to appeal the determination within 20 calendar days of the date of the determination. Human Resources will coordinate a review of the appeal to the reclassification determination by an outside consultant. If the consultant determines a reclassification is justified, a recommendation shall be presented to the Common Council.

COMPENSATION PLAN

Section 1. Coverage of the Compensation

Employees shall be compensated in accordance with the Compensation Plan established by the City and adopted by the Common Council and administered by the Human Resources Department. Positions covered by LPPSA, LPPNSA, IAFF and ATU and Library positions are not included in the City's Compensation Plan. The City shall develop and maintain a compensation plan based on equitable compensation relationships for all position classifications covered by the Compensation Plan in accordance with state and federal laws. The compensation plan shall include all regular full time and regular part-time position classifications covered under the Employee Handbook of the City.

Section 2. Objectives

The City recognizes that employees play a significant role in the provision of services in the community. The City strives to recruit and retain high quality employees to provide public services. The City has identified the following objectives in its Compensation Plan:

- Provide fair and equitable rates of pay to employees
- Develop a system that establishes a market rate and salary range for each position.
- Establishes rates of pay that allows the City to successfully compete for, recruit and retain qualified employees
- Establishes a market position which is fiscally responsible with public resources
- Ensures consistent administration throughout the City

The City upholds the principal of equal employment opportunity (EEO), basing differentials in pay solely on qualifications, position responsibilities and individual performance without regard to non-position related attributes. No individual shall be discriminated against with respect to compensation because of race, color, creed, religion, political affiliation, sex, age, national origin, sexual orientation, marital status, veteran's status, disability or any other group or class against which discrimination is prohibited by state or federal law.

Section 3. Compensation Plan

The compensation plan is designed to establish and maintain a salary structure which attracts, motivates, recruits and retains qualified employees and is competitive with the local labor market. These objectives are accomplished through the use of:

a. Formal job evaluation system.
b. Competitive compensation structure with salary increases based on factors as determined by the Common Council.
c. The compensation plan will consist of salary grades with an established minimum, midpoint, and maximum rate. Position classifications will be placed in a salary grade based on the formal job evaluation ranking of the position classification and upon market considerations.
d. The overall compensation plan (pay and benefits) will be reviewed and evaluated on an annual basis. Recommended changes shall be communicated to the Common Council and employees.

e. The overall compensation (pay and benefits) may be limited by budgetary constraints (available revenues) and be structured accordingly.

The compensation plan is structured with twenty (20) grades with a seven (7%) percent spread between grades. Each grade is comprised of eleven (11) steps with a 2.75% spread between steps.

Section 4. Maintenance of Compensation

The Director of Human Resources or their designee shall review the status of the compensation plan annually and evaluate any amendment(s) necessary to maintain an up-to-date and competitive compensation structure.

The Director of Human Resources or their designee, in consultation with the Mayor, shall make recommendations for modifications to the plan to the Common Council based upon a study of local economic conditions, the financial state of City government, and market conditions of position classifications and other relevant factors deemed appropriate for consideration.

Section 5. Transition to a New Compensation Plan (2014)

The following three principles shall govern the transition to a new pay plan:

a. No employee shall receive a pay reduction as a result of the transition to a new pay plan.
b. Employees being paid at a rate lower than the minimum wage rate for their position classification in the new compensation plan shall receive an increase to the minimum of the new pay grade.
c. Employees being paid at a rate above the maximum rate established for their position classification shall have their wage frozen at that level until such time as the maximum rate for their position equals or exceeds the employee's wage. At such time when employee's pay realigns with the pay range for their position, the employee shall be placed at the step closest to their current wage which provides an increase.

Section 6. Payment at Listed Rate

All employees covered by the compensation plan shall be paid within the pay range established for their respective position classification (with the exception of 5(c) noted above).

Section 7. Rate of Pay upon Hire (New employee

New employees to the City of La Crosse shall be hired at the minimum rate of the salary grade assigned to their position classification. Appointments above the minimum rate of the salary grade are subject to the approval of the Director of Human Resources or their designee, when deemed necessary to serve the best interests of the City, based on such factors as qualifications or prior experience of the applicant, a shortage of qualified applicants available at the minimum rate, or the inability to hire qualified applicants willing to accept employment at the minimum rate. Human Resources shall consider internal equity of incumbent employees in the classification and department when making an employment offer for compensation above the minimum rate established for the classification. The salary may not exceed the maximum rate of the range of the salary grade to which the position is assigned.

A starting wage above step 6 (midpoint) in the compensation plan for "new employees" shall require the approval of the Common Council upon the recommendation of the Director of Human Resources or their designee and the Mayor. The compensation level of current employees in the same classification will not

be increased to provide a higher rate of pay for a new hire. Department Heads are not authorized to present compensation offers to potential candidates. It is the responsibility of the Human Resources Department to present all employment offers to potential employees, including wage and benefit levels.

Section 8. Salary Adjustments

The Director of Human Resources or their designee shall be responsible for implementing all salary adjustments. Employees shall be advised of all salary changes. Salary adjustments may occur as a result of the following:

a. **Across the Board Increase:** The Common Council may grant an across the board adjustment each fiscal year based on the recommendation of the Director of Human Resources or their designee and the Mayor, and budgetary considerations. The increase shall be applied to the midpoint (step 6) of each grade; the remaining steps are calculated from the midpoint, maintaining a 2.75% differential between steps. Subject to funding, changes to the compensation plan shall take effect on the first full pay period in January of each year.
b. **Step Increase:** Step increases for those employees who have not reached the maximum of the range assigned to their position may be authorized by the Common Council. Annual performance will be the determining factor for a step increase. Employees who leave City employment prior to July 1 shall not be eligible for a step increase or stipend. Provisions for step increase are defined in Section 9.
c. **Demotion – Performance Related:** An employee may receive a decrease in salary due to a demotion to a lower level position assigned to a lower salary grade. The new salary must fall within the range of the new position classification, and be an established step within the salary grade.
d. **Promotion:** The salary of an employee promoted, or assigned an interim appointment, to a exempt professional position classification with a higher salary grade, shall receive a minimum of four percent (4%) increase for one grade, or eight percent (8%) for two grades or more, provided the employee meets the minimum requirements of the position as determined by the Department Head, subject to review and approval by the Director of Human Resources or their designee. The employee shall be placed at the pay step which provides the minimum of four percent (4%) or eight percent (8%) increase. On an exception basis, the Director of Human Resources or their designee may offer one (1) additional step increase beyond the four percent (4%) for one grade, or eight percent (8%) for two grades or more. Consideration for an exception shall include current market of qualified candidates for the position and delayed eligibility for step increase of more than 16 months. The new salary must fall within the range of the new position classification, and be an established step within the salary grade. If the four percent (4%) or eight percent (8%) is less than step one of the salary grade, the employee will be placed at step one. Promotion or interim assignment may only occur when a position is vacated.
   At the completion of the interim assignment the employee would return to their former position, at the step they would have been placed at had they remained in the position.
e. **Reclassification:** When a position is reclassified resulting in the assignment of the position to a different salary grade, the Director of Human Resources or their designee has the discretion to adjust the salary upward, provided that the adjusted salary does not exceed the maximum of the new salary range; or to adjust the salary by placing it in the step which is closest to, or equal to, the employee's current rate however it shall not result in a pay decrease. In cases where the current salary is below the minimum of the new grade the salary shall be brought up to the

minimum of the new salary grade. Employees who experience a *negative* change in pay grade as a result of reclassification may not experience a reduction in pay. If the employee's present pay falls within the new range, the employee will be placed in the new range at the step closest to their current pay, without a decrease. If the employee's current pay exceeds the new range maximum, the employee will maintain their current rate of pay however would not be eligible for further base-accumulating pay increases until his/her pay is again within the pay rage for the new position.

f. Transfer: The Director of Human Resources or their designee may adjust the salary of an employee transferred to a non-exempt position based on qualifications and relevant prior experience, within the established pay grade. Human Resources shall consider internal equity of incumbent employees in the classification and department when making an employment offer for compensation above the minimum rate established for the classification. Employees who transfer to a position with the same job title shall receive no adjustment in base pay.

Section 9. Performance Evaluations and Step Increases

Performance evaluations are conducted on an annual basis to provide a planned and orderly means of evaluating individual performance. The performance evaluation provides an opportunity for performance feedback and to establish goals and objectives for the upcoming performance period. It is meant to improve employee performance at virtually any level of performance. The following principles shall be followed for the administration of the performance evaluation program:

a. Step increases are subject to funding by Common Council through the budgetary process.
b. Subject to funding and eligibility requirements for step increases, step increases shall be effective the first full pay period in July.
c. Performance evaluations shall be conducted annually, and shall serve the evaluation period of June 1 (previous year) through May 31 (present year). Human Resources will provide Performance Evaluation forms to be used in evaluating employee's performance. All evaluations must be received in Human Resources by the end of June. Failure to do so will result in the delay of the step increase for the employee until completion of the review and its review by the Human Resources Department. In these cases, a retroactive step increase will be granted with the effective date of the first full pay period in July, assuming the employee has "met" or "exceeded" expectations in each of the performance factors.
d. An employee must receive a "meets expectations" or "exceeds expectations" in each performance factor to be eligible for a step increase. Progression shall be limited to one step. Employees at or above the top step who meet the established performance factors shall receive a $750 performance stipend, subject to Common Council funding. The stipend shall be received in the paycheck representing the first full pay period in July.
e. The responsibility for conducting performance evaluations is delegated to the employee's immediate supervisor. The Department Head is responsible for reviewing the completed performance evaluations to ensure accuracy and consistency within the Department. The Human Resources Department will review all evaluations to ensure consistency city-wide.
f. Department Heads will be evaluated in a closed session by the Mayor and designated member(s) of the Executive Committee. Members of the Common Council may provide written input to the evaluators. While in closed session only the Mayor and member(s) of the Executive Committee may participate in the performance evaluation.

g. Guidelines for conducting effective performance reviews are available in the Human Resources Department.
h. The original performance evaluation, as well as employee self-evaluation or comments, shall be maintained in the employee's personnel file.
i. All personnel should understand clearly that step increases are based upon performance and not upon the mere passage of time.
j. If no increase has been recommended, the reason for this will be communicated to the employee by their immediate supervisor. A performance improvement plan will be initiated.
k. Initial pay step advancement for a new, transferred, or promoted employee: To be eligible for the initial step advancement, the new, transferred or promoted employee must have six months of competent service in the new position by the salary review date of July 1 (i.e. hired, transferred or promoted to a new position the previous calendar year between July 1 and December 31). An employee hired, transferred or promoted to a position within the first six (6) months of the year would not be eligible for a step advancement for that year, as they would not meet the six (6) months of service by the July 1 salary review date.

Section 10. Effective Date of Salary Changes
Salary changes shall become effective on the date of the transfer, promotion or demotion.

Section 11. Mandatory Deductions from Salary
Deductions which are required by law shall be deducted from employees' pay and may include:

a. Federal income tax.
b. State income tax.
c. Social Security/Medicare.
d. Wisconsin Retirement System.
e. Garnishments.
f. Other deductions as requested and authorized by the employee for benefits.

Section 11. Advance on Wages
There shall be no advance on wages and no paycheck will be released early.

Section 12. Amendments to the Compensation Plan
The Common Council reserves the right to modify or eliminate all or any portion of the Compensation Plan at any time.

Effective Nov. 2014; R 03/2015; R 02/2017; R 01/01/2018

CODE OF ETHICS POLICY

A. DEFINITIONS.

1. Anything of value - means any money or property, favor, service, payment, advance, forbearance, loan or promise of future employment, but does not include compensation and expenses paid by the City, fees, honorariums and expenses which are permitted and reported under Section 19.56, Wis. Stats., political contributions which are reported under Chapter 11 of the Wisconsin Statutes, or hospitality extended for a purpose unrelated to city business by a person other than an organization.

2. Public Employee - means any person excluded from the definition of a public officer who is employed by the City of La Crosse.

3. Public Officer - means all City officers as defined in Section 62.09 under Wisconsin Statutes and all members of Boards, Commissions and Agencies established or appointed by the Mayor or Common Council, whether paid or unpaid.

B. DECLARATION OF POLICY.

It is declared that high moral and ethical standards among City officers and employees are essential to the conduct of good representative government and that a Code of Ethics for the guidance of Public officers and employees will help them avoid conflicts with improved standards of public service and will promote and strengthen the confidence of the residents of this City in their public officers and employees.

C. STANDARDS OF CONDUCT.

There are certain provisions of the Wisconsin Statutes which should, while not set forth herein, be considered an integral part of any Code of Ethics.

Accordingly, the provisions of the following sections of the Wisconsin Statutes are made a part of this Code of Ethics and shall apply to public officers and public employees whenever applicable, to-wit:

Section 946.10 - Bribery of Public Officers and Employees
Section 946.11 - Special Privileges from Public Utilities
Section 946.12 - Misconduct in Public Office
Section 946.13 - Private Interest in Public Contract Prohibited

D. DISCLOSURES.

In addition to the foregoing statutory provisions, the following disclosure and related requirements are hereby established:

1. Disclosure of interest in legislation - To the extent that he knows thereof a member of the Common Council and any public officer or employee of the City of La Crosse,

whenever paid or unpaid, who participates in the discussion or gives official opinion to the Council on any legislation before the Council, shall publicly disclose the nature and extent of any direct or indirect financial or other private interest he has in such legislation.

2. Disclosure of interest in other matters - To the extent that he knows thereof a member of a Board, Commission or Agency and any other public officer or public employee of the City of La Crosse, whether paid or unpaid, who participates in discussion or gives official opinion to any such Board, Commission or Agency on any matter before it, shall publicly disclose the nature and extent of any direct or indirect financial or other private interest he has in such matters.

3. Confidential Information - No public officer or employee may intentionally use or disclose information gained in the course of or by reason of his or her official position or activities in any way that could result in receipt of anything of value for himself or herself, or his or her immediate family as defined by Section 19.42, Wisconsin Statutes, or for any other person or organization, if the information has not been communicated to the public or is not public information.

4. Special Privileges - No public officer or employee may use or attempt to use his public position to influence or gain unlawful benefits, advantages or privileges for himself or others.

5. Conduct after termination of Employment - No public officer or employee, after the termination of service or employment with the City, shall appear before any Board or Agency of the City of La Crosse in relation to any case, proceeding or application in which he personally participated during the period of his service or employment, or which was under his active consideration.

E. GIFTS AND GRATUITIES.

1. No public officer or employee shall receive or offer to receive, either directly or indirectly, any gift, gratuity, or anything of value which he is not authorized to receive from any person, if such person:
    a. Has or is seeking to obtain contractual or other business or financial relationships with such public employee's employer or the governmental body of the public official; or

    b. Conducts operations or activities which are regulated by such public employee's employer or the governmental body of a public official; or

    c. Has interests which may be substantially affected by such public employee's employer or the governmental body of the public official. The receipt of any gift, gratuity, or anything of value as denoted above is contrary to the public policy of the City of La Crosse.

2. The following is the policy to be followed in determining whether or not public officer or employees of the City of La Crosse may attend as a guest:

   a. It will be the choice of the official or employee to accept or not accept guest status when such individual is the primary speaker or on the program agenda as a participant in the program;

   b. It will be the choice of the official or employee to accept or not accept guest status when such individual is honored for distinguished service;

   c. It will be the choice of the official or employee to accept or not accept guest status when he attends functions in other capacities than that as an elected official or as an employee of the City.

   d. It will be the choice of the official or employee to accept or not accept a meal at meetings which are instructional and job-related and if the employee or official chooses to accept a meal, the cost of such should be submitted to the City of La Crosse for payment.

F. DISTRIBUTION OF CODE OF ETHICS.

1. The City Clerk shall cause to be distributed to each public officer and employee a copy of this Code of Ethics before entering upon the duties of his office or employment.

2. Each public officer, the President of the Common Council, the Chairman of each Board, Commission or Agency and the Head of each Department, shall between January 1st and January 31st, each year, review the provisions of this Code himself and with his fellow Council, Board, Commission, Agency members or Subordinates as the case may be, and certify to the City Clerk by February 15th that such annual review has been undertaken. A copy of this Code shall be continuously posted on each department bulletin board wherever situated.

G. ETHICS BOARD.

1. <u>Membership.</u>

   a. The Ethics Board shall be composed of five (5) voting members. The members shall be citizens chosen from the private sector who shall not have an affiliation with city government in any capacity. The members shall be appointed by the Mayor with the approval of the majority vote of the City Council.

   b. Terms of office of the citizen members shall be three years, except that when the initial appointments are made, one (1) member shall

be appointed for one year, two (2) for two years and two (2) for three years.

2. Creation and Composition of the Ethics Board.

a. The Ethics Board shall have its own Chair and Vice Chair.

b. The City Attorney shall furnish the Ethics Board whatever legal assistance, which may become necessary. The Ethics Board may determine the need for private counsel.

c. Duties and Powers.

i. Advisory Opinions. Any person governed by this code may apply in writing to the Ethics Board for an advisory opinion. Applicants shall present their interpretation of the facts at issue and of the applicability of the provision of this code before the advisory opinion is rendered. All opinions shall be in writing and adopted by the Ethics Board by resolution. The Ethics Board's deliberations and action upon such applications shall be in meetings not open to the public, but notice of such meetings shall be given pursuant to s. 19.84, Wis. Stats. Record of the Ethics Board opinions, opinion request and investigations of violations may be closed to public inspection, as permitted by Chapter 19, Wis. Stats. The Ethics Board, however, may make such records public with the consent of the applicant.

3. Complaints.

a. The City Clerk shall accept from any person, except a member of the Ethics Board, a signed original complaint that states the name of the official or employee alleged to have violated this code and that sets forth the material facts involved in the allegation. The City Clerk shall forward the original complaint to the Ethics Board Chair within three (3) working days.

b. Time Limitations. No action may be taken on any complaint that is filed more than one (1) year after a violation of the Ethics Code is alleged to have occurred.

4. Ethic Board Procedures. Following the receipt of a complaint:

a. The Ethics Board shall notify the accused within ten (10) calendar days.

b. The Ethics Board shall convene within 20 calendar days.

c. The Ethics Board may make preliminary investigations with respect to alleged violation of this code. A preliminary investigation shall not be initiated unless the accused official or employee is notified in writing within ten (10) calendar days from the initial meeting. The notice shall state the purpose of the investigation and the individual's specific action or activities to be investigated.

d. The Ethics Board shall make every effort to conclude within one hundred twenty (120) calendar days.

5. Hearings. If the Ethics Board finds that probable cause exists for believing the allegations of the complaint, the Ethics Board may issue an order setting a date for a hearing. If the Ethics Board elects to hold a hearing, the Ethics Board shall give the accused at least twenty (20) calendar days notice of the hearing date. Such hearing shall be conducted pursuant to the contested case hearing requirements of Chapter 227 Wis. Stats., at open session unless the accused petitions for a hearing closed to the public and good cause to close the hearing is shown.

6. Right of Representation. During all states of an investigation or proceeding conducted under this section, the accused or any person whose activities are under investigation is entitled to be represented by counsel of personal choice and at personal expense.

7. Due Process. The accused or his/her representative shall have an adequate opportunity to:

a. Examine all documents and records to be used at the hearing within a reasonable time before the date of the hearing as well as during the hearing.

b. Have witnesses heard.

c. Establish all pertinent facts and circumstances, and

d. Question or refute any testimony or evidence, including the opportunity to confront and cross-examine adverse witnesses.

8. Power to subpoena and administer oaths. The Ethics Board shall have the power to administer oaths and compel the attendance of witnesses by issuing subpoenas as granted other Boards and Commissions.

9. Vote of the Ethics Board. The majority vote of the Ethics Board shall be required for any action taken by the Ethics Board.

10. Evidentiary Standard. If the recommendation is that a violation of the ethics code has occurred, the Ethics Board must be convinced by clear and convincing evidence that such violation occurred.

11. Violations.

a. If the Ethics Board finds that a violation of the ethics code has occurred, the Ethics Board shall report their findings in writing to the City Council, complainant, and accused, through the City Clerk, within ten (10) working days after reaching a conclusion.

b. If the Ethics Board determines that an official or employee has violated any provision of this code, the Ethics Board may, as part of its report to the City Council, make any of the following recommendations:

i. In case of an official who is an elected City Council Member, that City Council considers sanctioning, censuring or removing the person.

ii. In the case of a citizen member or other elected or appointed City officer, that the City Council consider removing the person from the committee, board or office.

iii. In the case of an employee, that the employee's appointing authority consider discipline up to and including discharge of the employee.

iv. That the City Council consider imposing a civil forfeiture in an amount not exceeding $1,000 for each offense.

c. If the Ethics Board finds that no violation has occurred, the Ethics Board shall notify the complainant, the accused, and City Clerk in writing within five (5) working days.

12. Penalties.

a. If the Ethics Board files a report with the City Council finding that an official or employee has violated the Ethics Code, such report shall be referred to the Judiciary and Administration Committee for a report. The Judiciary and Administration Committee may recommend to the City Council a penalty for the violation and/or recommendation that a hearing be held on the issue of the penalty. If a hearing is recommended by the Judiciary and Administration Committee, then the Mayor shall schedule a

hearing before the City Council and cause notice to be mailed to the interested parties including the person or persons accused of the violation at least ten (10) days prior to the date set for the hearing. At the hearing, the evidence in support of the penalty recommendations by the Ethics Board an/or Judiciary and Administration Committee shall be presented by the City Attorney or by a member of the City Attorney's staff. The accused, who may appear in person or who may be represented by an attorney, shall be entitled to present the City Council such evidence as may be relevant, competent and material in regard to the penalty for the violation.

b. Upon completion of the hearing or other proceeding by the City Council, judgment shall be entered by the City Council determining the penalty for the Ethics Code violation found by the Ethics Board and may include a recommendation of discipline of the person to his/her appointing authority up to and including discharge from employment or removal from office, in accordance with Chapter 17 of the Wisconsin Statutes.

c. Any person violating the Code of Ethics may be subject to a forfeiture of not less than $100 nor more than $1,000 for each offense. (3rd Am. Ord. #4324 recreated 3/9/06)

POLICY ON COMPUTER SURVEILLANCE

It is the intent of this policy to establish a process for the investigation of computer related misconduct by city employees.

Currently over four hundred (400) city employees have access to the VOIP, internet and the city's network while at work and some have access while at home. In the interest of protecting confidential and proprietary information, the city has computer forensics capability on the city's internal/external computerized communication equipment, cellular phones, laptops, desktops, and all other network information systems, which allows the city to monitor technology use by city employees.

Three persons are charged with the responsibility to protect the integrity of the city's internal/external computerized communication and data information systems, (to include VOIP), from inappropriate, illegal, and/or prohibited use. City officials and employees that believe the city's information technology policy is or has been violated shall notify one or more of the following: the Director of Human Resources, the City Attorney, or the Director of Information Technology.

In situations where one or more of the above referenced individuals is made aware of an example or circumstance in which there is reasonable suspicion to believe that the city's internal/external computerized communication and data information systems are being used in violation of city policy, such information shall be evaluated by Director of Human Resources, in consultation with the City Attorney and the Director of Information Services and Technology. If the Director of Human Resources is suspected of violating the city's information technology policy, then the City Attorney shall evaluate the circumstances with consultation from the Director of Information Technology. If the City Attorney is suspected of violating the city's information technology policy, then the Director of Human Resources shall evaluate the circumstances with consultation from the Director of Information Technology. If the Director of Information Technology is suspected of violating the city's information technology policy then the Director of Human Resources shall evaluate the circumstances with consultation from the City Attorney. In any cases where such persons believe that reasonable suspicion of a policy violation exists, a targeted investigation may be authorized.

The City reserves the right to conduct random investigations into employee's use of the city's internal/external computerized communication and data information systems without reasonable suspicion as directed by the Director of Human Resources upon consultation with the City Attorney and Director of Information Technology described herein.

R 1/2018

DRESS FOR YOUR DAY GUIDELINES

Dress for Your Day provides employees with the flexibility to choose appropriate and professional work attire based upon their workday and anticipated meetings with customers. Employees will be expected to use good judgment when deciding what to wear to work using basic guidelines. These guidelines are intended for non-uniformed office workers at City Hall and other City office settings. These dress standards do not apply to those employees working in the field.

Dress for Your Day work attire is intended to be relaxed when employees have a workday that does not include meetings with external customers, clients, vendors, or the like. The expectation is that employees will wear professional clothing appropriate for the nature of our business and the type of work performed. We all share in the responsibility to portray a positive image for the City, and Department Heads are responsible for fairly and consistently administering these guidelines as described below.

Guidelines for types of attire to avoid:

Sweatshirts or sweatpants
Shorts
Tank tops (worn alone), crop/halter tops, graphic t-shirts
Ripped jeans, revealing clothing
Exercise wear
Clothes with holes, frays or stains
Leggings with short tops or wild patterns
Rubber soled flip-flops

Please keep in mind that we all share in the responsibility to portray a positive image for the City, and managers are responsible for fairly and consistently administering these guidelines. (Rule of thumb: if in doubt whether something is appropriate, err on the side of caution and keep it for the weekend!)

We appreciate your cooperation in maintaining the City's positive and professional image every day—not only by your attire, but by your positive attitude and service

R 03/2022

DRUG FREE WORKPLACE POLICY
(excluding Transit and Fire)

This policy is established to ensure a safe, healthy, and productive work environment and to deter drug usage, sale, or possession by city employees in the workplace. The goal of the City of La Crosse is to achieve a drug-free workplace.

PLEASE TAKE NOTICE that due to the Drug-Free Workplace Act of 1988, the unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited in the workplace of the City of La Crosse.

PLEASE TAKE FURTHER NOTICE that all employees of the City of La Crosse shall abide, as a condition of employment, by the terms of this notice. Employees who are convicted of any criminal drug statute violation occurring in the workplace of the City of La Crosse must notify, in writing, the City of La Crosse Director of Human Resources or their designee, City Hall, 400 La Crosse Street, La Crosse, Wisconsin 54601, no less than five (5) days after such conviction.

Failure to comply with the above requirement shall be grounds for appropriate disciplinary action against such employee up to and including termination. Additionally, such employee may be required to satisfactorily participate in a drug abuse assistance or rehabilitation program. Employee assistance programs are available to all city employees.

For purposes of this notice, "controlled substance" means a controlled substance in Schedules I through V of Section 202 of the Controlled Substances Act (21 U.S.C. 812); "conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or state criminal statute involving the manufacture, distribution, dispensation, use or possession of any controlled substance; "criminal drug statute" means a criminal statute involving the manufacture, distribution, dispensation, use or possession of any controlled substance; "city employee" includes all full time and part-time union or non-represented, non-supervisory, supervisory and managerial employees employed by the City of La Crosse. "The workplace of the City of La Crosse" means all areas and property in which the City maintains control including the operation of city vehicles, all equipment, buildings, parking lots, structures or other real property owned, leased or otherwise used or operated by the City. This would also include any location where an employee is conducting city business. This policy would be applicable for all employees while on duty.

PLEASE BE FURTHER ADVISED that a drug-free workplace awareness program will be conducted in the near future to inform all city employees about the dangers of drug abuse in the workplace, the City of La Crosse's policy of maintaining a drug-free workplace, available drug counseling, rehabilitation and employee assistance programs, and the penalties that may be imposed on employees for drug abuse violations occurring in the workplace while on duty.

The above requirements shall take effect May 1, 2001.

R 01/01/2018

Employee Identification Card Program

POLICY STATEMENT

The purpose of having an employee identification card program is to enhance customer service by providing a welcoming environment for the public to interact with City employees. Additionally an employee identification card program can assist in providing safety for the public and a safe working environment for the employees of the City of La Crosse. This policy is not intended to lessen City employee access to City facilities, but for the purpose of providing enhanced security and to aid in the public's recognition of those employees that serve the public in various functions.

EMPLOYEE RESPONSIBILITIES

All full-time, permanent part-time and other designated City employees will be issued an employee ID card to be used during their employment with the City. All office personnel are required to wear their ID cards during the work day either clipped on or hanging from a lanyard. Employees that conduct City business outside on private property, including businesses and schools are required to wear their ID cards during their visits. All laboring positions or positions where wearing the City issued I.D. causes a safety concern are required to have their city issued ID cards on their person during the work day in a wallet or other safe place that does not interfere with work. Police and fire personnel including airport employees shall wear identification badges pursuant to existing department policies. When employees are not at work they should take off their ID card.

MANAGEMENT RESPONSIBILITIES

It shall be the responsibility of all management personnel to ensure compliance with the employee identification card program. The Director of Human Resources or their designee shall implement procedures to ensure that compliance occurs.

EFFECTIVE DATE

The employee identification card program described herein shall become effective September 23rd, 2002, and revised effective August 4, 2006.

R 12/2/13; R 01/01/2018

FAMILY AND MEDICAL LEAVE POLICY

A leave of absence for birth, adoption, or foster care placement; employee medical/illness; or family medical illness that is determined to be a serious health condition is available to employees as specified below. In addition to Family and Medical Leave a provision is provided for Military Family Leave for a qualifying exigency and to care for a seriously ill/injured military member (see attached policy). The intent of this policy is to comply with both the Wisconsin and Federal Family and Medical Leave Acts. Should this policy conflict in any way with the applicable Federal and State statutes or regulations, the statutes or regulations shall control. In addition, the employer-provided leaves of absence will run concurrently, and are not to be taken in addition to, the statutory leaves provided for under the Wisconsin and Federal Acts. All or part of this leave may be paid in certain instances. Use of authorized leave in conformance with this policy will not provide the basis for any adverse employment decision with respect to any employee, including decisions related to compensation or discipline. Employees must follow the same sick leave call-in procedures to be eligible for FMLA.

For purposes of ease and understanding, this Family and Medical Leave policy is divided into two sections as follows:

1. General Requirements for Family and Medical Leave (page 1 – 10)
2. General Requirements for Military Family Leave (page 11 - 17)

I. GENERAL REQUIREMENTS FOR FAMILY AND MEDICAL LEAVE:

A. Eligibility: Eligibility requirements vary between Wisconsin FMLA and Federal FMLA. Such eligibility is for request of birth, foster care placement, or adoption leave; family medical illness leave; or employee medical illness leave as provided under this policy.

1. To be eligible under **Wisconsin** FMLA (WFMLA) the employee must meet each of the following criteria:
   - Must have worked for the City for more than 52 consecutive weeks
   - Must have worked for at least 1000 hours during the 52 week period preceding the beginning of the leave. You may include vacation, sick leave, and other paid leave to count toward the minimum 1000 hours.

2. To be eligible under **Federal** FMLA (FMLA) the employee must meet each of the following criteria:
   - Must have worked for the City for at least 12 months (need not be consecutive, however within the last 7 years of actual work. 12 months is calculated via a look back of 12 months in reverse chronological order up to a period of 7 years)
   - Must have worked for the City for at least 1250 hours of service during the 12 month period preceding the beginning of the leave. Count only actual hours worked.

B. Length of Leave: Generally, no employee may take more than twelve (12) weeks in a calendar year for any one leave or combination of leaves for birth, foster care placement, or adoption leave; family medical/illness leave; or employee medical/illness leave. (Note: two weeks of leave are available under State law for the serious illness of a parent-in-law, domestic partner,

or domestic partners' parent). Leave will be calculated on a 12 month calendar year (January – December) period.

If the leave qualifies as both a City-provided leave, and FMLA and/or WFMLA leave, the leaves will run concurrently. (For example, City sick leave used for a serious illness of an employee qualifies as employee medical/illness leave under State and Federal law and, as such, shall be deducted from an employee's leave entitlement under State and Federal laws.)

If an employee does not apply for family and medical leave and his or her leave usage appears to qualify for FMLA or WFMLA, the City shall notify the employee in writing that the leave will be classified as FMLA leave, and run the benefits concurrently.

***If, after exhausting the family and medical leave entitlement, the employee has additional accrued leave available, employee will be allowed to continue on leave utilizing remaining accrued leave.*

C. Partial Absence or Intermittent Leave: For employees using partial absence or intermittent leave, the specific amount taken will be deducted in increments of not less than fifteen minutes for purposes of computing leave taken and leave remaining. If partial absence or intermittent leave is taken while on WFMLA, the employee may be temporarily transferred to an alternative position that better accommodates recurring periods of leave, however it shall be with the employee's approval. Once WFMLA is exhausted, the employer may require a temporary transfer to another position while leave is under the Federal FMLA.

D. Definitions:

1. **12 month period/calendar year.** 12 month calendar year (January – December).

2. **Health care provider**. Acupuncturist, audiologist, Christian Science practitioner, dentist, chiropractor, D. O., D. D. S., D. P.M., health care provider in foreign country, hospice, inpatient care facility, MD., marriage and family counselor or therapist, nurse-midwife, nurse, optometrist, 0. T., P. T. psychologist, respiratory care practitioner, social worker, speech pathologist or Wisconsin-licensed CBRF, podiatrist, clinical psychologist, and professional counselor.

3. **In loco parentis. "**In loco parentis" means an individual, other than a parent, who acts in the parent's place and has day-to-day responsibilities to provide care or financially supports the child, including providing for the child's needs and making decisions regarding the child's welfare.

4. **Spouse** – A husband or wife as defined or recognized under state law for purpose of marriage includes common law marriage and same sex marriage regardless of where they live.

5. **Child -** Biological, adopted, foster child, stepchild, ~~or~~ legal ward or child for which employee stands "in loco parentis" who is under eighteen (18) years of age; or eighteen (18) years of age or older and incapable of self-care at the time leave is to commence because of a "physical or mental disability." A "physical or mental disability" is a physical or mental impairment that substantially limits one or more of an individual's major life activities.

For purposes of the Wisconsin FMLA, however, a child over 18 must be incapable of self-care because of a serious health condition.

6. **Parent** - Biological, adoptive, step, foster parent or parent who stood "in loco parentis" to the employee when the employee was a child.

5. **Parent-in-law** - Spouse's parent - two (2) weeks (Wisconsin FMLA– not included within the 12 week Federal FMLA limit). Includes domestic partners' parents.

6. **Domestic Partner** – two (2) weeks (Wisconsin FMLA) Same sex couples and opposite sex couples

a. That meet the following criteria: at least 18 years of age and capable of consenting to the relationship, not married to, or in a domestic partnership with another individual, they must share a common residence, they must not be related by blood in a way that would prohibit marriage under Wis. Stat. 763.03, they must consider themselves to be members of each other's immediate family; and they must agree to be responsible for each other's basic living expenses.

4. **Serious Health Condition.** Under this policy a "serious health condition" is a disabling physical or mental illness, injury, impairment, or condition involving any of the following:

a. Inpatient care (i.e. an overnight stay) in a hospital, hospice, nursing home or residential medical care facility, including any period of incapacity defined to mean inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment therefor, or recovery therefrom, or any subsequent treatment in connection with such inpatient care; or

b. Outpatient care requiring continuing treatment or supervision by a health care provider: direct, continuous and firsthand contact by a health care provider subsequent to the initial outpatient contact. A serious health condition involving continuing treatment (defined as a period of incapacity of more than 3 consecutive days or treatment by the health care provider within 7 days from the onset of the incapacity, and at least two visits with a health care provider within 30 days of the first day of incapacity) by a health care provider includes any one or more of the following:

(i) A period of incapacity i.e., inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment therefor, or recovery therefrom, and any subsequent treatment or period of incapacity relating to the same condition that also involves:

a) Treatment two or more times, (see definition above) by a health care provider, by a nurse or physician's assistant under direct supervision of a health care provider, or by a provider of health care services (i.e., physical therapist) under orders of, or on referral by, a health care provider, or

b) Treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment (see definition of Treatment on page 4) under the supervision of the health care provider within the 30 day period.

(ii) Any period of incapacity due to pregnancy, or for prenatal care.

(iii) Any period of incapacity or treatment for such incapacity due to a chronic serious health condition. A chronic serious health condition is one which:

a) Requires periodic visits (defined as at least 2 times per year) for treatment by a health care provider, or by a nurse or physician's assistant under direct supervision of a health care provider;

b) Continues over an extended period of time (including recurring episodes of a single underlying condition); and

c) May cause episodic rather than a continuing period of incapacity (e.g., asthma, diabetes, epilepsy, etc.)

(iv) A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider. Examples include Alzheimer's, a severe stroke, or the terminal stages of a disease.

(v) Any period of absence to receive multiple treatments (including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity in the absence of medical intervention or treatment such as cancer (chemotherapy, radiation, etc), severe arthritis (physical therapy), kidney disease (dialysis).

Disabling means "incapacitation, or inability to pursue an occupation or perform services for wages because of physical or mental impairment", or, as to family member, "interference with normal daily function."

Treatment includes but is not limited to examinations to determine if a serious health condition exists and evaluations of the condition**. Treatment does not include routine physical examinations, eye examinations, or dental examinations.** A regimen of continuing treatment includes, for example, a course of prescription medication (e.g., an antibiotic) or therapy requiring special equipment to resolve or alleviate the health condition (e.g., oxygen). **A regimen of continuing treatment that includes the taking of over-the-counter medications such as aspirin, antihistamines, or salves; or bed-rest, drinking fluids, exercise, and other similar activities that can be initiated without a visit to a health care provider, is not, by itself, sufficient to constitute a regimen of continuing treatment for purposes of FMLA leave.**

Conditions for which cosmetic treatments are administered (such as most treatments for acne or plastic surgery) are not "serious health conditions" unless inpatient hospital care is required or unless complications develop. Ordinarily, unless complications arise, the common cold, the flu, ear aches, upset stomach, minor ulcers, headaches other than migraine, routine dental or orthodontic problems, periodontal disease, etc., are examples of conditions that do not meet the definition of a serious health condition and do not qualify for FMLA leave. Restorative dental or plastic surgeries after an injury or removal of cancerous growths are serious health conditions provided all the other conditions of this definition are met. Mental illness resulting from stress or allergies may be serious health conditions, but only if all the conditions of this section are met.

Substance abuse may be a serious health condition if the conditions of this section are met. However, FMLA leave may only be taken for treatment for substance abuse by a health care provider or by a provider of health care services on referral by a health care provider. On the other

hand, absence because of the employee's use of the substance, rather than for treatment, does not qualify for FMLA leave.

Absences attributable to incapacity under subsections (b)(ii) or (iii) above, qualify for FMLA leave even though the employee or the immediate family member does not receive treatment from a health care provider during the absence. For example, an employee with asthma may be unable to report for work due to the onset of an asthma attack or because the employee's health care provider has advised the employee to stay home when the pollen count exceeds a certain level. An employee who is pregnant may be unable to report to work because of severe morning sickness.

II. BIRTH, FOSTER CARE PLACEMENT OR ADOPTION LEAVE

A. Purpose: Unpaid birth, or adoption leave under state law may be used within sixteen (16) weeks before or after the following:

1. The birth of the employee's natural child; or

2. The placement of a child with the employee for adoption or as a precondition to adoption under Wisconsin Statutes; or

3. The placement of a child with the employee for 24 hour foster care that is made by or with agreement of a licensed child welfare agency or County Social Services/Human Services Department (Available under Federal FMLA only - allowable within a 12 month period beginning on the date of the placement).

Leave must be completed within twelve (12) months of commencement under Federal Law.

B. Length of Birth, Foster Care Placement or Adoption leave: In a calendar year period, generally no employee may take more than twelve (12) work weeks of birth, foster care placement, or adoption leave. If both spouses work for the City, they are each entitled to twelve (12) work weeks leave for birth or placement of a child for adoption or foster care.

B. Substitution: In lieu of unpaid leave, an employee may substitute a maximum of six (6) weeks of accrued paid sick or other accrued leave for the first six (6) weeks (state FMLA) of the otherwise unpaid twelve (12) week leave period for the birth, adoption or foster placement of a child (Federal FMLA only for foster placement). After the first six (6) weeks of state leave (for birth or adoption), the City requires any accrued vacation, or personal day(s) be substituted, for all of the remaining leave period until leave terminates or paid benefits are exhausted. The employee would also have the option, at their discretion, to use sick leave, floating holiday, banked holidays or compensatory time, in accordance with policy or collective bargaining agreements. The choice of the particular paid benefit to be used may be made by the employee; however, as one paid benefit is exhausted another will be substituted until all paid benefits are exhausted or leave terminates, whichever is first. The City will assign the form of paid leave in the absence of the employee’s selection.

**See page 1 of General Requirements.

D. Scheduling Birth, Foster Care Placement, or Adoption Leave: Except in cases of emergency, an employee must submit a written request for birth, foster care placement, or adoption leave not less than fourteen (14) days before the leave is to commence. This may be waived for medical reasons or unscheduled births. If the date of the birth, foster care placement, or adoption requires leave to begin sooner, the employee shall provide notice as soon as possible, but no later than two work days after the commencement of the leave. The employee shall identify if and what type of paid accrued leave he/she intends to substitute as provided above.

An employee may take birth, foster care placement, or adoption leave as partial absence or intermittent leave from employment in increments of not less than fifteen minutes. An employee who uses partial absence or intermittent leave shall make reasonable effort to schedule the leave so it does not unduly disrupt the operations of the City. To comply with this requirement, an employee must provide to the City, in writing, his or her proposed schedule of partial absence or intermittent leave not less than two (2) weeks before the leave is to begin. The schedule must be of sufficient definiteness that the City is able to schedule replacement employees, if necessary, to cover the absences. Any Partial absence or intermittent leave under WFMLA must begin within the sixteen (16) weeks prior to or following the birth, foster care placement, or adoption of a child. The last noncontinuous increment of leave must begin prior to the 16th week following the birth, care, placement or adoption of a child. Schedule for intermittent leave taken after 16 weeks following the birth, placement or adoption of a child is subject to department head approval.

III. FAMILY MEDICAL ILLNESS LEAVE

A. Purpose: Unpaid family medical/illness leave may be used to care for an individual who has a serious health condition and is the employee's spouse, child, parent and under Wisconsin law, parent-in-law, domestic partner or domestic partners' parent.

** See page 2 Definitions.

C. Length of Family Medical/Illness Leave: In a 12 month calendar year period, no employee may take more than twelve (12) weeks of family medical/illness leave for the employee's spouse, child, or parent with a serious health condition. If both the employee and his/her spouse are employed with the City, each spouse is eligible for the full twelve (12) weeks within the calendar year period to care for a son, daughter, parent or spouse with a serious health condition. A maximum of two (2) weeks of family medical/illness leave may be taken for a spouse's parent, domestic partner or domestic partners' parents. Care for child does not include the children of the employee's domestic partner.

D. Substitution: In lieu of unpaid leave, an employee may substitute a maximum of two (2) weeks of accrued sick or other paid leave for the first two (2) weeks (Wisconsin FMLA) of the otherwise unpaid twelve (12) week leave period. After the first two (2) weeks, the City requires that any vacation, personal day(s), or sick leave must be substituted, for all of the remaining leave period until the leave terminates or paid benefits are exhausted. The employee would also have the option, at their discretion, to use floating holiday, banked holidays or compensatory time, in accordance with policy or collective bargaining agreements. The choice of the particular paid benefit to be used may be made by the employee; however, as one paid benefit is exhausted another will be substituted until all paid benefits are exhausted or leave terminates, whichever is first. The City will assign the form of paid leave in the absence of the employee's selection.

**See page 1 under General requirements.

D. Scheduling Family Medical/Illness Leave:

1. If an employee intends to use family medical/illness leave for planned medical treatment or supervision of a family member, as defined above, the employee must do the following:

a. Give the City fourteen (14) days of advanced written notice of the intent to take such leave and the reason for the needed leave. The notice must identify the planned dates of the leave. In the case of an emergency, the written notice must be given as soon as practicable. At the same time, the employee shall identify if and what type of paid accrued leave he or she intends to substitute as provided above.

b. Schedule the medical treatment or supervision so that it does not unduly disrupt the operations of the City. Provide the City with a proposed schedule for the leave with reasonable promptness after the employee learns of the probable necessity of the leave. The schedule must be of sufficient definiteness that the City can schedule replacement employees, if necessary.

c. Provide medical certification, as required.

2. When medically necessary, an employee may take family medical/illness leave as partial absence or intermittent leave from employment in increments of not less than fifteen minutes and to make reasonable effort as to not unduly disrupt the operations of the City. To comply with this requirement, an employee must provide to the City, in writing, the employee's proposed schedule of partial absence or intermittent leave with reasonable promptness after the employee learns of the probable necessity of such leave. Only leave at the time of the family medical/illness incident will be allowed.

IV. EMPLOYEE MEDICAL/ILLNESS LEAVE

A. Purpose: Unpaid medical leave may be used by an employee who has a serious health condition which makes the employee unable to perform his or her job duties.

B. Length of Medical/Illness Leave: Unless otherwise required by law, no employee may take more than twelve (12) weeks of medical/illness leave in a 12 month calendar year period.

C. Substitution: In lieu of unpaid leave, an employee may substitute a maximum of two (2) weeks accrued sick or other leave for the first two (2) weeks (Wisconsin FMLA) of the otherwise unpaid twelve (12) week leave. After the first two (2) weeks, the City requires that any vacation, personal day(s), or sick leave be substituted for the remaining leave period. The employee would also have the option, at their discretion, to use floating holiday, banked holidays or compensatory time, in accordance with policy or collective bargaining agreements. The choice of the particular paid benefit to be used may be made by the employee; however, as one paid benefit is exhausted another will be substituted until all paid benefits are exhausted or leave terminates, whichever is first. The City will assign the form of paid leave in the absence of the employee’s selection.

D. FMLA Under Worker's Compensation: A serious health condition may arise from a work-related injury and employee medical/illness leave may run concurrently with such worker's compensation absence. If the worker's compensation injury extends beyond the twelve (12) weeks entitlement for employee medical/illness leave, the employee shall be eligible for workers compensation provided under State Statutes or as otherwise applicable under the labor agreement.

E. Use of Paid Leave: Use of paid sick leave, vacation, floating holidays, banked holidays, personal days, workers compensation benefits or compensatory time by an employee for a serious health condition will be deemed to be concurrent use of medical leave under both the State and Federal FMLA acts.

F. Scheduling Employee Medical/Illness Leave: An employee may schedule medical/illness leave as medically necessary.

1. If an employee intends to take medical/illness leave for a planned medical treatment or supervision, the employee must:

a. Give the City fourteen (14) days advance written notice of the intent to take such leave and the reason for the needed leave. The notice must identify the planned dates of the leave. (This requirement may be waived in emergency situations.) At the same time the employee shall identify if and what type of paid accrued leave the employee intends to substitute as provided under the law.

b. Schedule the medical treatment or supervision so that it does not unduly disrupt the operations of the City. Provide the City with a proposed schedule for the leave with reasonable promptness after the employee learns of the probable necessity of the leave. The schedule must be of sufficient definiteness that the City can schedule replacement employees, if necessary.

c. Provide medical certification as required.

2. When medically necessary, an employee may take employee medical/illness leave as partial absence or intermittent leave from employment in increments of not less than fifteen minutes and to make reasonable effort as to not unduly disrupt the operations of the City. To comply with this requirement, an employee must provide to the City, in writing, the employees proposed schedule of partial absence or intermittent leave with reasonable promptness after the employee learns of the probable necessity of such leave. If leave in increments of less than one-half (1/2) hour is medically necessary, the employee will provide appropriate medical certification of the necessity. If partial absences or intermittent leave is taken while on state FMLA, the employee may be temporarily transferred to an alternative position that better accommodates recurring periods of leave, however it shall be with the employee's approval. Once state FMLA is exhausted, the employer may require a temporary transfer to another position while leave is under the federal FMLA.

V. MEDICAL CERTIFICATE

A. Certification of Health Care Provider form: The employee may be required to complete a Certification of Health Care Provider form when an employee requests family medical/illness leave or employee medical/illness leave under this policy or the employer determines such medical information is necessary to determine whether a leave request

qualifies as an FMLA leave. This form must be completed by the employee and the health care provider treating the family member or employee. An employee must provide the certification **within fifteen (15) calendar days** following notification of this requirement, unless it is not practicable under the circumstances despite the employee's good faith efforts.

B. Incomplete Certification: If requirements for certification are not completed, Human Resources may delay or deny family medical/illness leave or employee medical/illness leave. The employee will be notified if a certification is incomplete or insufficient and be given 7 calendar days to cure the deficiency. If the deficiencies are not corrected, the City may deny the request for leave.

C. Additional Certification: Human Resources staff may contact the health care provider for information necessary to authenticate or clarify insufficient medical certification. The City may request a second health care provider opinion at the expense of the City. If the second opinion differs from the initial certification, a third opinion may be obtained at the expense of the City from a mutually (employer/employee) agreed upon health care provider.

1. Human Resources may request subsequent recertification on a reasonable basis. For chronic conditions lasting for an extended period of time (i.e. one year, "unknown," "indefinite," or "lifetime"), Human Resources may request to obtain recertification every 6 months.

D. If an employee does not apply for FMLA and his or her leave usage appears to qualify for FMLA, the City shall notify the employee in writing that the leave will be classified as FMLA leave, and run the benefits concurrently.

VI. INSURANCE AND BENEFITS: While an employee is on birth, foster care placement, or adoption leave; family medical/illness leave; employee medical/illness leave:

A. The City will maintain group health insurance coverage under the same conditions that are in effect for active employees.

The City's obligation to maintain health benefits will stop if and when an employee informs the City of an intent not to return to work at the end of the leave period, if the employee fails to return to work when leave entitlement is used up, or if the employee fails to make any required payments while on leave.

It is the employee responsibility to pay the employee portion of any benefits which they are currently enrolled in to maintain coverage. Failure to do so will cause termination of applicable benefit.

If the employee does not return to work after the leave entitlement has been exhausted, and does not qualify for continuing disability insurance, the City has the right to recover from him/her any applicable benefit premiums (i.e. life insurance, ICI, Section #125) the City paid during the period of unpaid leave.

B. The employee will continue to accrue employment benefits if paid leave is substituted.

VII. RETURN FROM LEAVE

A. An employee returning from employee medical/ illness leave may be required to return the Fitness For Duty Certification before being allowed to return to work. If the Fitness For Duty Certificate is not provided, the employee's return to work may be delayed or denied.

B. An employee returning from leave as provided under this policy can return to his or her position if vacant at the time the employee returns to work. If the position is no longer vacant, the employee shall be offered an equivalent position with equivalent benefits, pay, and other terms and conditions of employment.

C. An employee may return to work prior to the scheduled end of the leave. An employee may be required to notify the Human Resources Department two (2) days prior to the desired return date. If the leave was for the employee's own serious health condition, a medical release may be required by the City prior to the employee's return. An employee shall be returned to his or her prior position or an equivalent position within a reasonable time after the request to return to work early is made.

VIII. OTHER ADMINISTRATIVE PROCEDURES: With the concurrence of the Human Resources Department, City departments may adopt additional administrative rules and procedures related to administration of the Family and Medical Leave Acts, in order to address unique operational circumstances within the department. Department rules and procedures may not contravene the provisions of either the federal or state FMLA Acts.

IX. FAILURE TO MEET POLICY REQUIREMENTS: If employees fail to meet the requirements of this policy, requests for leave may be delayed or denied.

X. FORMS: All FMLA forms must be obtained from Human Resources. Outdated FMLA forms will not be accepted. FMLA forms are:

- Request for Leave
- Certification of Health Care Provider (Forms WH-380E for employees)
- Certification of Health Care Provider (Forms WH380F for covered family members)
- Notice to Employees of Rights Under FMLA
- Notice of Eligibility and Rights and Responsibilities
- Designation Notice to Employee of FMLA Leave
- Certification of Domestic Partnership
- Notice to Employer of Changes in Leave Plans
- Fitness for Duty Certification

FAMILY AND MEDICAL LEAVE POLICY - MILITARY

A leave of absence for a qualifying exigency or a family member medical illness of covered service member or veteran that is determined to be a serious illness or injury is available to employees as specified below. The intent of this policy is to comply with the Federal Family and Medical Leave Act. Should this policy conflict in any way with the applicable Federal regulations, the regulations shall control. In addition, the employer-provided leaves of absence will run concurrently, and are not to be taken in addition to, the statutory leaves provided for under the Wisconsin and Federal Acts. All or part of this leave may be paid in certain instances. Use of authorized leave in conformance with this policy will not provide the basis for any adverse employment decision with respect to any employee, including decisions related to compensation or discipline. Employees must follow the same sick leave call-in procedures to be eligible for FMLA-Military.

For purposes of ease and understanding, this Family and Medical Leave policy is divided into two sections as follows:

I. GENERAL REQUIREMENTS FOR FAMILY AND MEDICAL LEAVE – MILITARY

A. Eligibility: To be eligible under **Federal** FMLA Military (FMLA-Military), the employee must meet each of the criteria:

1. Must have worked for the City for more than 12 months (need not be consecutive, however within the last 7 years of actual work. 12 months is calculated via a look back of 12 months in reverse chronological order up to a period of 7 years).

2. Must have worked for the City for at least 1250 hours of service during the 12 month period preceding the beginning of the leave. Count only actual hours worked.

B. Family and Medical Leave - Military (FMLA-M): This leave is applicable only to Federal leave entitlements. There are two types of Military Family Leave available.

1. **Qualifying exigency leave:** Eligible employees may be entitled to use up to 12 weeks of their FMLA Leave entitlement to address certain qualifying exigencies. Leave may be used if the employee's spouse, son or daughter (of any age), or parent who is a member of the National Guard or Reserves and called to covered active duty. Covered active duty is defined as a call or order to active duty to a foreign country under a provision of law referred to in section 101(a)(13)(B) of title 10, United States Code. Qualifying exigencies may include:
   a. Short notice deployment:
      (i) Up to 7 calendar days of leave, beginning on the date a military member is notified of an impending call or order to active duty in support of a contingency operation.

   b. Attending certain military events:

(i) Any official ceremony, program or event sponsored by the military that is related to the active duty or call to active duty status of a military member; *and*

(ii) To attend family support or assistance programs and informational briefings sponsored or promoted by the military, military service organizations, or the American Red Cross that are related to the covered active duty or call to active duty status of a military member.

c. Childcare and school activities:

(i) To arrange for alternative childcare when covered active duty or call to active duty status necessitates a change in the existing childcare arrangement for a biological, adopted, or foster child, a stepchild, or a legal ward of a covered military member, or a child for whom a covered military members stands in loco parentis, who is either under age 18, or age 18 or older and incapable of self care because of a mental or physical disability at the time that FMLA leave is to commence.

(ii) To provide childcare on an urgent, immediate need basis (but not on a routine, regular, or everyday basis) when the need to provide such care arises from the active duty or call to active duty status of a military member for a covered child.

(iii) To enroll in or transfer to a new school or day care facility a covered child, when enrollment or transfer is necessitated by the active duty or call to active duty status of a military member; *and*

(iv) To attend meetings with staff at a school or a daycare facility, such as meetings with school officials regarding disciplinary measures, parent-teacher conferences, or meetings with school counselors, for a covered child, when such meetings are necessary due to circumstances arising from the active duty or call to active duty status of a military member.

d. Financial and Legal arrangements:

(i) To make or update financial or legal arrangements to address the military member's absence while on active duty or call to active duty status, such as preparing and executing financial and healthcare powers of attorney, transferring bank account signature authority, enrolling in the Defense Enrollment Eligibility Reporting System (DEERS), obtaining military identification cards, or preparing or updating a will or living trust; *and*

(ii) To act as the covered military member's representative before a federal, state or local agency for purposes of obtaining, arranging, or appealing military service benefits while the covered military member is on active duty or call of active duty status, and for a period of 90 days following the termination of the covered military member's active duty status.

e. Rest and recuperation:

(i) To spend time with a military member who is on short-term, temporary, rest and recuperation leave during the period of deployment. Eligible employees may take up to 15 days of leave for each instance of rest and recuperation.

f. Counseling:

(i) To attend counseling provided by someone other than a healthcare provider for oneself, for the military member, or for a covered child, provided that the need for counseling arise from the active duty or call to active duty status of a military member.

g. Post deployment activities:
   (i) For up to 90 days after termination of the military members active duty status.
      1. To attend arrival ceremonies, reintegration briefings and events, and any other official ceremony or program sponsored by the military for a period of 90 days following the termination of the military member's active duty status; *and*
      2. To address issues that arise from the death of a military member while on active duty status, such as meeting and recovering the body of the military member and making funeral arrangements.

h. Other activities:
   (i) To address other events which arise out of the military member's active duty or call to active duty status provided that the employer and the employee agree that such leave shall qualify as an exigency, and agree to both the timing and duration of such leave.

i. Certain activities arising from the military member's covered active duty related to care of the military member's parent who is incapable of self-care
   (i) To arrange for alternative care, provide care on a non-routine, urgent, immediate need basis, admit or transfer a parent to a new care facility, and attend certain meetings with staff at a care facility, such as meetings with hospice or social service providers.
   (ii) The employee taking leave for this purpose does not need to be related to the military member's parent.

2. **Leave to care for a military member:** There is also a special leave entitlement that permits employees who meet the eligibility requirements for FMLA-Military leave to take up to **26 weeks** of leave during a single 12 month period to care for a military member which is the employee's parent (biological, adoptive, step or foster father, mother or parent who stood "in loco parentis" to the employee when the employee was a child.), spouse, son or daughter, or next of kin. A service member is a certain veteran or current member of the Armed Forces, including a member of the National Guard or Reserves, who has been rendered medically unfit to perform his or her duties due to a serious injury or illness incurred in the line of duty (or existed before the beginning of the member's active duty and was aggravated by service in the line of duty) while on covered active duty for which the service member is undergoing medical treatment, recuperation, or therapy; or is in outpatient status; or is on the temporary disability retired list.

In case of a veteran, who was a member of the Armed Forces (including a member of National Guard or Reserves) who is discharged or released under conditions other than dishonorable and is undergoing medical treatment, recuperation, or therapy, for a qualified serious injury or illness at any time during the previous 5 years preceding the date of treatment.

When both husband and wife work for the same employer, the aggregate amount of leave that can be taken by the husband and wife to care for a military member is 26 weeks in a single 12 month period. The 26 weeks allotment will be limited by any FMLA leave taken for other qualifying reasons (it is not in addition to the existing 12 weeks of FMLA entitlement).

C. Length of Leave: Generally, no employee may take more than twelve (12) weeks in a calendar year for any one leave or combination of leaves and up to 26 weeks as noted above to care for an ill/injured military member. Leave for qualifying exigencies will be calculated on a 12 month calendar year (January – December) period. Leave to care for a military member will be calculated on a rolling year looking back from the first date leave is needed.

If the leave qualifies as both a City-provided leave and FMLA-Military, the leaves will run concurrently. (For example, City sick leave used to care for a serious illness/injury of a military member of an employee qualifies as employee medical/illness leave under Federal law and, as such, shall be deducted from an employee's leave entitlement under Federal laws.)

If an employee does not apply for Family and Medical Leave – Military (FMLA-M) and his or her leave usage appears to qualify for FMLA-M, the City shall notify the employee in writing that the leave will be classified as FMLA-M leave.

***If, after exhausting the family and medical leave entitlement, the employee has additional accrued leave available, the employee will be allowed to continue on leave utilizing remaining accrued leave.*

D. Partial Absence or Intermittent Leave: For employees using partial absence or intermittent leave, the specific amount taken will be deducted in increments of not less than fifteen minutes for purposes of computing leave taken and leave remaining. If partial absence or intermittent leave is taken the employee may be temporarily transferred to an alternative position that better accommodates recurring periods of leave.

D. Definitions:

1. **12 month period/calendar year.** 12 month calendar year (January – December).

2. **Health care provider for covered service member certification purposes**. D.O.D. health care provider, V.A. health care provider, D.O.D. TRICARE network authorized private health care provider, or a D.O.D. non-network TRICARE authorized private health care provider. A non-military affiliated health care provider. The following documents may be substituted for the required certification of need to care for a military member: Invitational Travel Order ITO, an Invitational Travel Authorization ITA or other documentation issued by the military that sets forth the dates of the military member's leave.

3. **Spouse.** A husband or wife as defined or recognized under state law for purpose of marriage.

4. **In loco parentis. "**In loco parentis" means an individual, other than a parent, who acts in the parent's place and has day-to-day responsibilities to provide care or

financially supports the child, including providing for the child's needs and making decisions regarding the child's welfare.

5. **Son or Daughter of a covered service member.** Biological, adopted, foster child, stepchild, legal ward or a child of a person standing in loco parentis (of any age).

6. **Parent -** Biological, adoptive, step, foster parent or parent who stood "in loco parentis" to the employee when the employee was a child.

7. **"Next of kin"** of a covered service member means the nearest blood relative other than the military member's spouse, parent, son or daughter, in the following order of priority:
   - ✓ Blood relatives who have been granted legal custody of the military member by court decree or statutory provisions;
   - ✓ Brothers and sisters;
   - ✓ Grandparents;
   - ✓ Aunts and uncles;
   - ✓ and first cousins,
   - ✓ unless the military member has specifically designated in writing another blood relative as his or her nearest blood relative for purposes of military caregiver leave under the FMLA.

7. **Serious Injury or Illness.** Defined as an injury or illness that was incurred in the line of duty (or existed before the beginning of the member's active duty and was aggravated by service in line of duty) on active duty that may render the service member or certain veteran medically unfit to perform the duties of his or her office, grade, rank or rating. A serious health condition for which the covered veteran has received a VA Service Related Disability Rating (VASRD) of 50% or greater, substantially impairs the veteran's ability to secure or follow a substantially gainful occupation by reason of a disability or disabilities related to military service or would do so absent treatment; or an injury including a psychological injury, on the basis of which the covered veteran has been enrolled in the Department of Veterans Affairs Program of Comprehensive Assistance For Family Caregivers.

II. EMPLOYEE FAMILY AND MEDICAL LEAVE - MILITARY

A. Purpose: Family and Medical Leave-Military may be used by an employee to care for a seriously ill/injured covered service member or for a qualifying exigency.

B. Length of Medical/Illness Leave: No employee may take more than twelve (12) weeks of family and medical leave in a 12 month calendar year period for a qualifying exigency and no more than twenty-six (26) weeks in a rolling-12 month calendar year period to care for a seriously ill/injured covered service member. The total amount of leave the employee takes for reasons other than care of an ill/injured service member cannot exceed twelve (12) weeks. During the same period, the employee may take up to twelve (12) weeks of FMLA leave for any other qualifying reason (see FMLA policy).

C. Substitution: For a qualifying exigency or leave to care for an ill/injured military member the City requires that any vacation, personal day(s), or sick leave be substituted for the leave period. The employee would also have the option, at their discretion, to use floating holiday,

banked holidays, or compensatory time, in accordance with policy or collective bargaining agreements. The choice of the particular paid benefit to be used may be made by the employee; however, as one paid benefit is exhausted another will be substituted until all paid benefits are exhausted or leave terminates, whichever is first. The City will assign the form of paid leave in the absence of the employee's selection.

D. Use of Paid Leave: Use of paid sick leave, vacation, floating holidays, banked holidays, personal days, or compensatory time, will be deemed to be concurrent use of family and medical leave to care for a military member or for qualifying exigency leave under Federal FMLA acts.

E. Scheduling Family and Medical Leave-Military – An employee may schedule family medical leave - military as necessary.

1. If an employee intends to take medical/illness leave for planned medical treatment of a serious ill/injured military member or exigency leave, the employee must:

a. Give the City fourteen (14) days advance written notice of the intent to take such leave and the reason for the needed leave. The notice must identify the planned dates of the leave. (This requirement may be waived in emergency situations.) At the same time the employee shall identify if and what type of paid accrued leave the employee intends to substitute as provided under the law.

b. Schedule the medical treatment or supervision leave when possible so that it does not unduly disrupt the operations of the City. Provide the City with a proposed schedule for the leave with reasonable promptness after the employee learns of the probable necessity of the leave. The schedule must be of sufficient definiteness that the City can schedule replacement employees, if necessary.

c. Provide medical or other certification as required.

2. When medically necessary, an employee may take family and medical/illness leave-military as partial absence or intermittent leave from employment in increments of not less than fifteen minutes and to make reasonable effort as to not unduly disrupt the operations of the City. To comply with this requirement, an employee must provide to the City, in writing, the employees proposed schedule of partial absence or intermittent leave with reasonable promptness after the employee learns of the probable necessity of such leave. If leave in increments of less than one-half (1/2) hour is necessary, the employee will provide appropriate certification of the necessity. If partial absences or intermittent leave is taken, the employee may be temporarily transferred to an alternative position that better accommodates recurring periods of leave.

III. MEDICAL OR OTHER CERTIFICATE

A. The employee may be required to complete a certification form when an employee requests family medical/illness leave to care for an ill/injured military member or for a qualifying exigency leave under this policy or the employer determines such information is necessary to determine whether a leave request qualifies as an FMLA leave.

1. For an ill/injured military member a Certification for Serious Injury or Illness of a military member – for Military Family Leave (WH385) form must be completed by the employee and/or the military member and the health care provider treating

the family member. An employee must provide the certification **within fifteen (15) calendar days** following notification of this requirement, unless it is not practicable under the circumstances despite the employee's good faith efforts.

2. For a qualifying exigency a Certification of Qualifying Exigency for Military Family Leave (WH-385) form must be completed by the employee. The employee may be required to submit a timely, complete and sufficient certification to support the request (i.e. a copy of the military member's active duty orders or other documentation from the military of impending call to active duty).

B. If requirements for certification are not completed, the City may delay or deny family medical/illness leave or employee medical/illness leave. Human Resources may contact the health care provider or designated agency for all information necessary to process this request. Human Resources may seek authentication or clarification of a certification form.

If an employee does not apply for FMLA and his or her leave usage appears to qualify for FMLA, the City shall notify the employee in writing that the leave will be classified as FMLA-Military Leave, and run the benefits concurrently.

IV. INSURANCE AND BENEFITS: While an employee is on family and medical leave - military:

A. The City will maintain group health insurance coverage under the same conditions that are in effect for active employees.

The City's obligation to maintain health benefits will stop if and when an employee informs the City of an intent not to return to work at the end of the leave period, if the employee fails to return to work when leave entitlement is used up, or if the employee fails to make any required payments while on leave.

It is the employee's responsibility to pay the employee portion of any benefits which they are currently enrolled in to maintain coverage. Failure to do so will cause termination of applicable benefit.

If the employee does not return to work after the leave entitlement has been exhausted, the City has the right to recover from him/her any applicable benefit premiums (i.e. life insurance, ICI, Section #125) the City paid during the period of unpaid leave.

B. The employee will continue to accrue employment benefits if paid leave is substituted.

V. RETURN FROM LEAVE

A. An employee returning from leave as provided under this policy can return to his or her position if vacant at the time the employee returns to work. If the position is no longer vacant, the employee shall be offered an equivalent position with equivalent benefits, pay, and other terms and conditions of employment.

B. An employee may return to work prior to the scheduled end of the leave. An employee may be required to notify the Human Resources Department two (2) days prior to the

desired return date. An employee shall be returned to his or her prior position or an equivalent position within a reasonable time after the request to return to work early is made.

VI. OTHER ADMINISTRATIVE PROCEDURES: With the concurrence of the Human Resources Department, City departments may adopt additional administrative rules and procedures related to administration of the Family and Medical Leave Acts, in order to address unique operational circumstances within the department. Department rules and procedures may not contravene the provisions of either the federal or state FMLA Acts.

VII. FAILURE TO MEET POLICY REQUIREMENTS: If employees fail to meet the requirements of this policy, requests for leave may be delayed or denied.

VIII. FORMS: All FMLA forms must be obtained from Human Resources. Outdated FMLA forms will not be accepted. FMLA forms are:

- Request for Leave
- Notice to Employees of Rights Under FMLA
- Notice of Eligibility and Rights and Responsibilities
- Designation Notice to Employee of FMLA Leave
- Certification of Qualifying Exigency for Military Family Leave (Form WH-384)
- Certification of Serious Injury/Illness of Covered Service Member for Military Family Leave (Form WH-385)
- Certification for Serious Injury/Illness of a Veteran – Military Caregiver Leave (Form WH-385V)

FMLA 2/01; R 11/09 ; R 6/15/15

FLEX TIME POLICY

POLICY INTENT: To establish flex time regulations for employees that are exempt from overtime.

APPLIES TO: Managers, supervisors and professional employees covered under the Employee Handbook. City executives are excluded from this policy.

Managers, supervisors and professional employees, who are exempt from overtime, are expected to minimally work the normal full time workweek and any additional hours as may be necessary to accomplish their assigned duties including attendance at special and regular meetings and events outside of the normal scheduled work hours. Flex time is not a right, but a privilege. **Employees should not expect that they will automatically be entitled to flex time for additional hours worked.**

Managers, supervisors and professional employees may, however, be permitted paid time off (flex time) when the workload of their department permits. Paid flex time is subject to the following:

- Paid flex time taken off for hours worked outside of the normal scheduled hours **must occur within thirty (30) days.** Exceptions to the 30 day timeframe *may* be considered due to extraordinary workload circumstances wherein the Department Head precluded the employee from using paid flex time within the initial 30 days.
- There shall be no carryover of flex time beyond the thirty (30) days (unless it is noted as an exception as defined in previous bullet).
- Paid flex time must be approved in advance by the respective City Executive for hours already worked..
- Flex time is not an employee entitlement.
- Approved flex time may be taken in increments of *up to* one (1) day at a time.
- Paid flex time may not be applied for approved FMLA time off.
- Paid flex time is **not** on an hour for hour basis.

Managers, supervisors and professional employees are exempt from overtime eligibility and as such, tracking of additional hours worked for the purpose of taking paid time off later in the year is prohibited. Any and all existing informal compensatory time banks are not recognized.

RE: Flex Time for City Executives

A Flex Time policy has been created for the exempt non-represented employees. This policy has established set timeframes for which the employee is eligible to use paid flex time.

Due to the additional hours City Executives put in, you will not be held to the same structured timeframe (same pay period) for which you are eligible to use paid flex time. If your workload and department operations allow the ability to use flex time, you would be eligible.

4/03; R 12/2/13; R6/8/15

FAIR LABOR STANDARDS ACT
Work Time Verification Policy

It is the City of La Crosse policy and practice to accurately compensate employees and to do so in compliance with all applicable state and federal laws.

Review Your Pay Stub

The City of La Crosse makes every effort to ensure our employees are paid correctly. Occasionally, however, inadvertent mistakes can happen. When mistakes do happen and are called to our attention, action will be taken to address any corrections necessary. If an overpayment has been made to the employee, repayment is due to the City, however to avoid significant disruption to the employee a payment plan may be arranged. Please review your pay stub when you receive it to make sure it is correct. If you believe a mistake has occurred, or if you have any questions, please use the reporting procedure outlined below.

Non-Exempt Employees

If you are classified as a non-exempt employee (eligible for overtime pay) you must maintain a record of the total hours you work each day. These hours must be accurately recorded on the timesheet/time card to verify that the reported hours worked are complete and accurate. Your timesheet/ time card must accurately reflect all regular and overtime/compensatory hours worked, authorized paid time off used, early or late arrivals, and early or late departures. At the end of every other week, you should submit your completed timesheet/ time card to your supervisor for verification and approval. (Exception: Reporting of hours for Transit employees is completed by Transit Management.)

Non-Exempt employees are prohibited from performing any "off the clock" work or "unauthorized" work. "Off the clock" work means work you may perform but fail to report on your timesheet.

Examples of prohibited off-the-clock work include but are not limited to:

- Performing work before you have clocked in or after you have clocked out;
- Performing work during your meal period and not reporting the missed or interrupted meal period;
- Performing work at home and not reporting the time worked; and
- Sending or responding to work-related e-mails or voicemails while at home.

"Unauthorized" work is work performed without authorization from your supervisor. Any employee who fails to report or inaccurately reports information on their timesheet/time card may be subject to disciplinary action, up to and including discharge. When you receive your paycheck, please verify immediately that you were paid correctly for all regular and overtime/compensatory hours worked. (Note, the policy provision for reporting of hours does not apply to Fire Department trade days.)

Exempt Employees

If you are classified as an exempt employee you will receive a salary which is intended to compensate you for hours you may work for the City of La Crosse. The salary is established at the time of hire or when you become classified as an exempt employee.

To Report Concerns, Violations or Obtain More Information

Please contact Finance/Payroll at 789-7579 if (1) you have any questions regarding deductions from your pay, (2) if you believe your wages have been subject to any improper deductions or (3) your pay does not accurately reflect all hours worked.

It is a violation for any employee to falsify a timesheet/time card, or to alter another employee's timesheet/time card. It is also a serious violation for any employee or manager to instruct another employee to incorrectly or falsely report information on their timesheet/time card or alter another employee's timesheet/ time card (example: to under – or over – report hours worked). If any manager instructs you to (1) incorrectly or falsely report information on your timesheet/time card; (2) alter another employee's timesheet/time card records to inaccurately or falsely report information on the timesheet/time card, or (3) conceal any falsification of time records or to violate this policy, do not do so. Instead, report it immediately to Human Resources, 789-7595.

Every report will be fully investigated and corrective action will be taken, up to and including discharge of any employee(s) who violates this policy.

The City will not allow any form of retaliation against individuals who report alleged violations of this policy or who cooperate in the City's investigation of such reports. Retaliation is unacceptable. Any form of retaliation in violation of this policy will result in disciplinary action, up to and including discharge.

EMPLOYEE CONDUCT, DISCIPLINE, AND DISCHARGE POLICY

The City of La Crosse expects all employees to perform their jobs at a quality level that exceeds the expectations of our citizens. Because of this, the City has established policies and procedures and its rules of conduct to ensure the effective operation of the City and to provide high quality service to all of its citizens, those persons interacting with the City, and visitors. The City expects all employees to demonstrate professional, competent and reasonable behavior, and to continually serve, both on-duty and off-duty, as positive examples of the high-quality personnel affiliated with this organization and consistent with the high expectations of the public;

1. Compliance with the policies, rules and general expectations of conduct is of paramount importance in order to fulfill these objectives and for the employee to have a successful career in the City. Failure to comply with these policies, rules and general expectations of conduct can undermine these objectives, and the trust and confidence that the public, businesses, employees and officers of the County must have in that employee.

2. The City treats all violations of policy, the rules and general expectations of conduct very seriously. Violations of these policies, the rules, and general expectations of conduct can subject an employee to discipline, up to and including discharge.

Examples of Behaviors or Actions. Listed below are examples of behaviors or actions, which may result in discipline or discharge. No list of rules or types of unacceptable conduct can substitute for the sound and reasonable judgment expected of each employee. It is impossible to list every conceivable type of unacceptable conduct contrary to the interests of the City. While it is impossible to list all types of unacceptable conduct, the City believes certain acts of misconduct, standing alone, warrant serious discipline up to and including discharge, such as the following:

- Incompetence or inefficiency in the performance of duties, substandard quality or quantity of work, including deliberate reduction of output, or failure to complete assignments promptly and accurately;
- Possession, use, or being under the influence of drugs or alcohol while on duty;
- Violation of smoke, alcohol, and drug-free workplace policies or regulations;
- Conviction of a felony or misdemeanor directly related to the employee's duties;
- Insubordination or failure to perform duties or directives as instructed; arguing, verbal abuse or assault of others;
- Unauthorized possession of weapons or firearms during work time or on City premises or property;
- Fighting, disturbing or violent behavior, threatening, humiliating, intimidation or harassment of others;
- Retaliation and/or reprisal against an employee who genuinely, and in good faith, reports threats of bullying or workplace violence;
- Use of offensive, profane or abusive language, disrespectful discourteous, insulting, abusive or inflammatory conduct toward others;

- Unauthorized or inappropriate use of identification cards or keys, or unauthorized access to data, e-mails, or restricted areas;
- Failing to completely and accurately document relevant information, including falsification of a time card or other records;
- Theft or misappropriation of City property or the property of others, including theft of work time, excessive time at break periods, misuse of sick leave or other designated leave, misrepresenting or failing to accurately record work time;
- Failure to work scheduled overtime, or overtime worked without prior authorization from the supervisor;
- Misuse, excessive personal use, carelessness, negligence, or unauthorized use in the handling or control of City property;
- Excessive absenteeism or tardiness, including excessive unscheduled or unexcused absences;
- Failing to promptly report absence or tardiness;
- Working another job while absent due to an unscheduled or unexcused absence;
- Engaging in illegal or immoral conduct;
- Unauthorized solicitations or distributions;
- Dishonest, misleading, or deceptive conduct;
- Horseplay, violating of safety rules, or engaging in conduct that creates an unsafe work environment;
- Engaging in conduct or activities which serve to lengthen the healing period for a work-related injury;
- Failure to promptly report defective equipment, safety hazards, or failure to report and injury or accident immediately;
- Loafing or sleeping during working hours;
- Engaging in illegal discrimination or harassing conduct;
- Unauthorized release or disclosure of confidential information;
- Making intimidating, threatening, hostile, false or malicious statements, including rumor-mongering, gossiping, and false reports for harassment or violence;
- Conducting personal business on City time or property;
- Failing to fully comply with, or violation of, expectations of conduct, City or departmental policies, regulations, or procedures.

This list is not inclusive and the City reserves the right to modify this list at any time or determine whether any other conduct is contrary to the interests of the City and warranting of disciplinary action up to and including discharge.

Disciplinary Procedure. Discipline may be applied to City employees for violation of City policies, or other reasonable work standards not specifically defined herein, but only after consultation with Human Resources. As part of the disciplinary process, the City may conduct an investigation to review the allegations and conduct any necessary interviews. The action chosen by the City may involve varying degrees of disciplinary action up to and including immediate termination, if warranted. Repeated infractions of even minor offenses can and will result in increasingly severe disciplinary actions. The City reserves the right to take any such disciplinary action it considers appropriate.

Grievance Procedure

Effective October 1, 2011
Revised April 11, 2014

The revisions contained herein are applicable to any termination or employee discipline rendered on or after April 11, 2014; or for workplace safety issues reported on or after April 11, 2014.

I. PURPOSE:

The City of La Crosse has established this Grievance Procedure for an employee to utilize for matters concerning discipline, termination, or workplace safety covered by this Grievance Procedure. This Procedure provides an employee with the individual opportunity to address concerns regarding discipline, termination or workplace safety matters, to have those matters reviewed by an Impartial Hearing Officer, and to appeal to the Common Council.

An employee shall use the Grievance Procedure for resolving disputes regarding employee termination, employee discipline or workplace safety issues covered by this Procedure. The City of La Crosse expects an employee and management to exercise reasonable efforts to resolve any questions, problems or misunderstandings prior to utilizing the Grievance Procedure. An employee subject to a contractual grievance procedure shall follow the contractual grievance procedure to the extent those procedures cover the matters covered by the Grievance Procedure. An employee subject to statutory dispute resolution procedures shall be subject to those procedures to the extent those procedures cover the matters covered by the Grievance Procedure.

The City of La Crosse reserves all rights and this procedure does not create a contract of employment. Unless required by statute, city ordinance, contract or Employee Handbook, employees of the City of La Crosse are employed at-will and may resign with or without reason. The Employer may terminate the at-will employment relationship at any time with or without reason and without violation of applicable law.

II. DEFINITIONS:

"Termination" means a separation from employment by the employer for disciplinary or quality of performance reasons. "Termination" does not include layoff, furlough or reduction in workforce, job transfer, non-disciplinary demotion, resignation, abandonment, retirement, nonrenewal of contract, death, separation as a result of disability, action taken pursuant to an ordinance created under s. 19.59 (1m), elimination of position due to loss of grant funding, or the end or completion of temporary employment, seasonal employment, contract employment, or assignment.

"Employee Discipline" means an employment action that results in disciplinary suspension, with or without pay, disciplinary termination, or disciplinary demotion. "Employee discipline" does not include counseling, oral reprimands or warnings, written reprimands or warnings, performance improvement plans, performance evaluations or reviews, documentation of employee acts or omissions, administrative leave, non-disciplinary wage, benefit or salary

adjustments, changes in assignment, action taken pursuant to an ordinance created under s. 19.59 (1m), or other non-material employment actions.

"Employee" shall not include limited term employees, seasonal employees, employees subject to a collective bargaining agreement addressing employee discipline, termination and workplace safety, statutorily appointed individuals serving as employees identified specifically in statute as serving at the pleasure of an appointing authority or who are subject to removal under Wis. Stats Chapter 17 or Chapter 62, elected officials, and independent contractors. Those individuals who do not have a process for grieving workplace safety matters shall follow this grievance procedure for workplace safety grievances.

"Administration" means the person or person designated by the City to represent the interests of management in a Grievance matter. The Administration may be represented by counsel at any point in the procedure.

"Workplace Safety" shall be narrowly construed and is not construed to include basic conditions of employment unrelated to physical health and safety. "Workplace Safety" means conditions of employment related to the physical health and safety of employees, as long as such conditions are not enforceable under state or federal law, and includes safety of the physical work environment, the safe operation of workplace equipment and tools, provision of protective equipment, training and warning requirements, workplace violence and accident risk. "Workplace Safety" does not include conditions of employment unrelated to physical health and safety matters, including, but not limited to, hours, overtime, sick, family, or medical leave, work schedules, breaks, termination, vacation, performance reviews, and compensation.

"Cause" means a lawful rational reason, including but not limited to inefficiency, neglect of duty, misfeasance, malfeasance, violation of city policies or work rules, or communicated expectation of conduct, or other conduct, or the failure to act that is detrimental to the interest of the City.

III. TIMELINES AND GRIEVANCE FORMAT:

1. Written Grievance Submission. The employee must file a written Grievance within twenty (20) calendar days of the termination, employee discipline or actual or reasonable knowledge of the workplace safety issue. The Grievance must be in writing and must be filed with the supervisor and with a copy to the Director of Finance, Deputy Director of Human Resources or their designee. The Grievance shall contain a clear and concise statement of the pertinent facts, the dates the incidents occurred, the identities of the persons involved, documentation related to the Grievance in possession of the Grievant, the steps taken to informally resolve the dispute and the results of those discussions, all reasons why the actions of the supervisor should be overturned, if applicable, and the remedy that should be issued.

2. Administrative Response. The Director of Finance, Deputy Director of Human Resources or their designee and the Department Head shall meet with the Grievant within fifteen (15) calendar days of receipt of the written Grievance to discuss voluntary resolution of the Grievance. If those discussions do not resolve the Grievance, then the

Director of Human Resources or their designee will provide a brief written response to the Grievance within ten (10) calendar days of the meeting. The written response shall contain a statement of the date the meeting between the Director of Human Resources or their designee, the Department Head and the Grievant occurred, the decision to sustain or deny the Grievance, and the deadline for the Grievant to appeal the Grievance to an Impartial Hearing Officer.

3. Impartial Hearing. The decision of the Director of Human Resources or their designee shall be final unless the Grievant files a written appeal requesting a hearing before an Impartial Hearing Officer (IHO). The written appeal shall be filed with the Director of Finance, Deputy Director of Human Resources or their designee and within ten (10) calendar days of the Administrative Response.

4. Appeal for Review. Either party may file a written request for review by the Common Council within ten (10) calendar days of receipt of the IHO's written decision.

5. Decision of Common Council. A decision by the Common Council will be made within ninety (90) calendar days of the filing of the appeal unless the Common Council extends this timeframe.

6. Importance of Timelines and Process. A Grievance will be processed pursuant to the established timelines. A Grievant may not file or advance a Grievance outside of the designated timeframes. The failure of the Grievant to follow the timelines and other requirements in this policy shall result in the IHO not having jurisdiction over this matter. If the Grievant fails to follow the established timeline in this procedure, then the Grievance is considered resolved, and no further action is available. The IHO shall have the authority to determine whether the IHO has jurisdiction, which may be subject to review by the Common Council.

   Any period of time described in the Grievance Procedure by reference to a number of days includes Saturdays, Sundays and any City observed holidays. Any period of time described in this procedure by reference to business day does not include Saturdays, Sundays or any City observed holiday. If the date or last date to perform any act or give notice is a Saturday, Sunday or City observed holiday, the act or notice may be timely performed or given on the next succeeding day which is not a Saturday, Sunday or City observed holiday.

7. Scheduling. Grievance meetings and hearings may be held during the Grievant's off-duty hours. Time spent in Grievance meetings and hearings on off-duty hours will not be considered as compensable work time.

8. Individual claim. Any Grievance filed regarding workplace safety must relate to issues personal to the Grievant filing the Grievance and may not relate to, without limitation by enumeration, safety of property or third parties. A Grievance filed regarding workplace safety must be filed by the Grievant claiming the grievant has been personally affected by the alleged workplace safety violation.

A Grievance filed for discipline or termination may only be filed by the employee who is the subject of the discipline or termination.

IV. HEARING PROCEDURE:

1. Selection of the Impartial Hearing Officer (IHO). Following receipt of the appeal requesting a hearing before an IHO, the Director of Human Resources or their designee shall conduct a search and provide the names of three (3) persons, not employees of the City of La Crosse, whom he or she determines are impartial, having no interest in the grievance. This list of the three (3) IHOs shall be provided to the grievant within thirty (30) calendar days of the filing of the employee's appeal.

   Within fifteen (15) calendar days of receipt of the IHO list from Human Resources the grievant must notify Human Resources, in writing, as to the selection of the IHO. The list of IHO's may not be appealed. If the grievant fails to select an IHO from the established list and notify Human Resources by the close of the regular business hours on the 15th day, then the grievance shall be considered resolved.

2. Pre-Hearing Conference and Timelines. The Administration, Grievant and IHO shall conduct a pre-hearing conference. The IHO shall determine the date for hearing. The IHO shall also assign dates for preliminary matters that may arise prior to the hearing.

3. Conciliation. Prior to the Hearing, the parties and IHO will engage in conciliation meetings to resolve the dispute. In cases involving allegations of workplace safety, the conciliation meeting shall occur not more than ten (10) calendar days after assignment to the IHO. The IHO's involvement in any conciliation process shall not disqualify the IHO from hearing the merits of the Grievance unless all parties agree to replacing the IHO. The replacement of any IHO shall be made from the remaining two IHO's from the original list, in accordance with Article IV, paragraph 1 of this Grievance Procedure.

4. Representation. The Grievant shall have the right to representation during the Grievance Procedure at the Grievant's expense. The representative shall not be a material witness to the dispute.

5. Record of Proceedings. The IHO shall conduct the proceedings and make a record of the proceedings. Following the issuance of the decision, the record shall be provided to the Director of Human Resources or their designee of the City of La Crosse for preservation. If a court reporter is utilized the costs shall be equally shared by the grievant and the employer.

6. Burdens of Proof and Procedure. The rules of evidence shall not be strictly followed. Evidence must be relevant, reliable and probative.

   a. In disciplinary and termination matters of employees who are not at-will employees, the Administration shall bear the burden of production and burden of

proof. The Administration must persuade the IHO that "cause" exists to discipline or terminate the grievant.

b. For at-will employees the Grievant shall bear the burden of production and burden of proof. The Grievant must persuade the IHO that the City had an unlawful reason for the termination or discipline.

c. In grievances due to workplace safety, the Grievant shall bear the burden of production and burden of proof.

In all cases, the IHO shall require the Grievant and Administration to provide a list of witnesses and exhibits that each intends to produce at the hearing no later than 10 calendar days prior to the hearing.

7. Cost: The grievant shall pay $400 as payment towards the IHO services. The payment shall be made payable to the City of La Crosse, and must be submitted with the notice to the City of the selected IHO as described in paragraph IV (1).

8. Powers and Decision of the Impartial Hearing Officer.
    a. Written Decision: After receiving the evidence and within 30 calendar days of the close of the hearing, the IHO shall issue a written decision. The IHO has the authority to extend the timeframe for the written decision as needed. The IHO may request oral or written arguments and replies. The IHO may set deadlines for pre-hearing motions. The decision shall contain findings of fact, analysis and a recommendation. The IHO must answer the following questions:
        i. Based on the preponderance of the evidence presented, has the Administration proven the evidence in support of cause for discipline or termination?
        ii. In the case of workplace safety, has the Grievant shown a workplace safety that may cause harm to the physical health of the employee which requires immediate and necessary action by the employer.
        iii. In the case of termination or discipline of an at-will employee, has the Grievant shown that the decision of the employer was unlawful.

    b. Powers of the Hearing Officer: The IHO shall have the power to sustain or deny the Grievance. The IHO shall have no power to issue any remedy, but the IHO may recommend a remedy. Remedial authority shall be subject to the determination and approval of the Common Council, and shall be addressed by the Common Council in the event the Grievance is sustained.

9. Appeal to Common Council.
    a. Written Appeal: Either party may file a written notice of appeal requesting a Common Council review of the IHO decision. The written notice of appeal shall be filed within 15 calendar days following the issuance of the IHO decision. The written notice shall contain a statement explaining the reasons for the appeal and a copy of the Grievance, the Administration's response to the Grievance, and the

IHO's response. The parties are prohibited from presenting new information in the written notice that was not presented at the Hearing. The request shall be filed with the City Clerk, and with a copy to the City Attorney, Director of Human Resources or their designee, Mayor and Council President.

b. Review by Common Council: Upon receipt of an appeal, a copy of the record, including all exhibits, will be forwarded to the Common Council President. As soon as practicable the Common Council President shall schedule a meeting of the Common Council to consider the record and the appeal. The meeting shall be in closed session unless the employee requests, in writing, that the meeting be conducted in open session with deliberation in closed session in accordance with the Wisconsin Open Meetings law. The Common Council may decide, in each situation whether it will make a decision based upon the record, or assign an IHO to create a recommendation based upon the record for the Common Council's consideration prior to rendering its decision. The manner and process of review is the sole choice of the Common Council. As an administrative procedure this review by the Common Council is not subject to public hearings or veto by the Mayor;

c. Decision: All decisions of the Common Council involving the Grievance shall be by simple majority vote and in writing and filed with the City Clerk or secretary of the Common Council within five (5) calendar days of the date of the final decision. A copy of the final decision shall be delivered to the Grievant, Director of Human Resources or their designee and the Administration. The Common Council's decision is final and is not subject to appeal or veto by the Mayor.

V. LIMITATIONS OF THE SCOPE OF THE GRIEVANCE PROCEDURE:

The scope of a grievance that is subject to the jurisdiction of a governmental body or specific procedure by other Wisconsin Statutes shall be governed by those statutes and not the Grievance Procedure.

The scope of a Grievance that is subject to a grievance procedure in a collective bargaining agreement may not be brought forth under this Policy.

The scope of a Grievance that is subject to other Policy or Ordinances for formal or informal investigation or dispute resolution procedures may not be brought forth under this Policy.

Any process available under Chapter 68, Wis. Stats., shall not apply and this grievance procedure shall be the exclusive process for all employees.

R 01/01/2018

HIPAA PRIVACY POLICY

Introduction

City of La Crosse (the "Employer") sponsors the following group health plans:

- City of La Crosse Self-Funded Medical Benefit Plan (Two networks administered by Gundersen Lutheran Health Plan & Custom Benefit Administrators)

- City of La Crosse Section 125 Cafeteria Plan

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) these plans are considered to be "covered entities." For purposes of this Privacy Policy, the plans listed above are referred to collectively and singularly as the "Plan." Members of the Employer's workforce may have access to the individually identifiable health information of Plan participants (1) on behalf of the Plan; or (2) on behalf of the Employer, for administrative functions of the Plan.

HIPAA as amended by the Health Information Technology for Economic and Clinical Health (HITECH) Act and its implementing regulations restrict the Employer' ability to use and disclose protected health information (PHI).

Protected Health Information. Protected health information means information that is created or received by the Plan and relates to the past, present, or future physical or mental health or condition of a participant; the provision of health care to a participant; or the past, present, or future payment for the provision of health care to a participant; and that identifies the participant or for which there is a reasonable basis to believe the information can be used to identify the participant. Protected health information includes information of persons living or deceased.

It is the Employer's policy to comply fully with HIPAA's requirements for the privacy of PHI. To that end, all members of the Employer's workforce who have access to PHI must comply with this Privacy Policy. For purposes of this Policy and the Employer's more detailed use and disclosure procedures, the Employer's workforce includes individuals who would be considered part of the workforce under HIPAA such as employees, volunteers, trainees, and other persons whose work performance is under the direct control of the Employer, whether or not they are paid by the Employer. The term "employee" includes all of these types of workers.

No third party rights (including but not limited to rights of Plan participants, beneficiaries, covered dependents, or business associates) are intended to be created by this Policy. The Employer reserves the right to amend or change this Policy at any time (and even retroactively) without notice. To the extent this Policy establishes requirements and obligations above and beyond those required by HIPAA, the Policy shall be aspirational and shall not be binding upon the Employer. This Policy does not address requirements under other federal laws or under state laws.

Hybrid Entity. In accordance with the HIPAA privacy regulations, the City of La Crosse has designated the City as a Hybrid Entity. Given this designation, employment records and other City records other than those related to the covered Health Plan will not be considered to be PHI, subject

to HIPAA requirements, unless specifically required by law. The Hybrid Election Form states the following records are not subject to the HIPAA privacy regulations: information obtained to determine an individual's suitability to perform his/her job duties (such as physical examination reports) fit for duty exams, drug and alcohol tests obtained in the course of employment, doctor's excuses provided in accordance with the City of La Crosse's attendance policy, work-related injury and occupational exposures reports and medical and laboratory reports related to such injuries or exposures, including information necessary to determine worker's compensation coverage. Notwithstanding the fact that the preceding records are not subject to the HIPAA privacy regulations, it is the policy of the City of La Crosse to limit the use and disclosure of non-covered medical records only to those individuals who have a need to access them.

Plan's Responsibilities as Covered Entity

I. Privacy Official and Contact Person

The Employer shall designate the individual responsible for the human resource function of the Employer as the Privacy Officer.

The Privacy Official will be responsible for the development and implementation of policies and procedures relating to privacy, including but not limited to this Privacy Policy and the Employer's more detailed use and disclosure procedures. The Privacy Official will also appoint those employees who will serve as the contact persons for participants who have questions, concerns, or complaints about the privacy of their PHI.

The Privacy Official is responsible for ensuring that the Plan complies with the provisions of the HIPAA privacy rules regarding business associates, including the requirement that the Plan have a HIPAA-compliant Business Associate Agreement in place with all business associates. The Privacy Official shall also be responsible for monitoring compliance by all business associates with the HIPAA privacy rules and this Privacy Policy.

Privacy Official is:
Director of Human Resources
c/o Human Resources
400 La Crosse Street
La Crosse, WI 54601
(608) 789-7595

Contact Person:
Employee Benefits Coordinator
c/o Human Resources
400 La Crosse Street
La Crosse, WI 54601
(608) 789-8310

II. Workforce Training

It is the Employer's policy to train all members of its workforce on its privacy policies and procedures. The Privacy Official is charged with developing training schedules and programs so that all workforce members receive the training necessary and appropriate to permit them to carry out their functions within the Plan in compliance with HIPAA.

III. Administrative, Technical and Physical Safeguards and Firewall

The Employer will establish on behalf of the Plan appropriate administrative, technical and physical safeguards to prevent PHI from intentionally or unintentionally being used or disclosed in violation of HIPAA's requirements. Administrative safeguards include implementing procedures for use and disclosure of PHI. Technical safeguards include limiting access to information by creating computer firewalls. Physical safeguards include locking doors or filing cabinets.

Firewalls will ensure that only authorized employees will have access to PHI, that they will have access to only the minimum amount of PHI necessary for plan administrative functions, and that they will not further use or disclose PHI in violation of HIPAA's privacy rules.

IV. Privacy Notice

The Privacy Official is responsible for developing and maintaining a notice of the Plan's privacy practices that describes:

- the uses and disclosures of PHI that may be made by the Plan;
- the individual's rights under the HIPAA privacy rules;
- the Plan's legal duties with respect to the PHI; and
- other information as required by the HIPAA privacy rules.

The privacy notice will inform participants that the Employer will have access to PHI in connection with its plan administrative functions. The privacy notice will also provide a description of the Employer's complaint procedures, the name and telephone number of the contact person for further information, and the date of the notice.

The notice of privacy practices will be individually delivered to all participants:

- no later than November 1st;
- on an ongoing basis, at the time of an individual's enrollment in the Plan or, in the case of providers, at the time of treatment and consent; and
- within 60 days after a material change to the notice.

The Plan will also provide notice of availability of the privacy notice (or a copy of the privacy notice) at least once every three years in compliance with the HIPAA privacy regulations.

V. Complaints

The Privacy Officer will be the Plan's contact person for receiving complaints.

The Privacy Official is responsible for creating a process for individuals to lodge complaints about the Plan's privacy procedures and for creating a system for handling such complaints. A copy of the complaint procedure shall be provided to any participant upon request.

VI. Sanctions for Violations of Privacy Policy

Sanctions for using or disclosing PHI in violation of HIPAA or this HIPAA Privacy Policy will be imposed in accordance with the Employer's discipline policy, up to and including termination.

VII. Mitigation of Inadvertent Disclosures of Protected Health Information

The Plan shall mitigate, to the extent possible, any harmful effects that become known to it of a use or disclosure of an individual's PHI in violation of HIPAA or the policies and procedures set forth in this Policy. As a result, if an employee becomes aware of a disclosure of protected health information, either by an employee or a business associate the employee or the business associate, that is not in compliance with this policy or HIPAA, the employee should immediately contact the Privacy Officer so that the appropriate steps to mitigate the harm to the participant can be taken.

VIII. No Intimidating or Retaliatory Acts; No Waiver of HIPAA Privacy

No employee may intimidate, threaten, coerce, discriminate against, or take other retaliatory action against individuals for exercising their rights, filing a complaint, participating in an investigation, or opposing any improper practice under HIPAA.

No individual shall be required to waive his or her privacy rights under HIPAA as a condition of treatment, payment, enrollment or eligibility under the Plan.

IX. Plan Documents

Plan documents shall include provisions to describe the permitted and required uses and disclosures of PHI by the Employer for plan administrative purposes or other permitted purposes. Specifically, Plan documents shall require the Employer to:

- not use or further disclose PHI other than as permitted by the Plan documents or as required by law;
- ensure that any agents or subcontractors to whom it provides PHI received from the Plan agree to the same restrictions and conditions that apply to the Employer;
- not use or disclose PHI for employment-related actions or in connection with any other employee benefit plan;
- report to the privacy Officer any use or disclosure of the information that is inconsistent with the permitted use or disclosure and, if necessary, report such use or disclosure to the Department of Health and Human Services (HHS),as required by HITECH;
- make PHI available to Plan participants, consider their amendments and, upon request, provide them with an accounting of PHI disclosures in accordance with HIPAA privacy rules;
- make the Employer's internal practices and records relating to the use and disclosure of PHI received from the Plan available to HHS upon request; and

- if feasible, return or destroy all PHI received from the Plan that the Employer still maintains in any form and retain no copies of such information when no longer needed for the purpose for which disclosure was made, except that, if such return or destruction is not feasible, limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible.

The Plan documents must also require the Employer to (1) certify to the Privacy Official that the Plan documents have been amended to include the above restrictions and that the Employer agree to those restrictions; and (2) provide adequate firewalls in compliance with the HIPAA privacy rules.

X. Documentation

The Plan's privacy policies and procedures shall be documented and maintained for at least six years from the date last in effect. Policies and procedures must be changed as necessary or appropriate to comply with changes in the law, standards, requirements and implementation specifications (including changes and modifications in regulations). Any changes to policies or procedures must promptly be documented.

The Plan shall document certain events and actions (including authorizations, requests for information, sanctions, and complaints) relating to an individual's privacy rights.

If a change in law impacts the privacy notice, the privacy policy must promptly be revised and made available. Such change is effective only with respect to PHI created or received after the effective date of the notice.

The documentation of any policies and procedures, actions, activities and designations may be maintained in either written or electronic form. The Plan must maintain such documentation for at least six years.

Policies on Use and Disclosure of PHI

I. Use and Disclosure Defined

The Employer and the Plan will use and disclose PHI only as permitted under HIPAA. The terms "use" and "disclosure" are defined as follows:

- *Use.* The sharing, employment, application, utilization, examination, or analysis of individually identifiable health information by any person working for or within the benefits department of the Employer, or by a Business Associate (defined below) of the Plan.

- *Disclosure.* For information that is PHI, disclosure means any release, transfer, provision of access to, or divulging in any other manner of individually identifiable health

information to persons not employed by or working within the Human Resources Department of the Employer, or not a Business Associate (defined below) of the Plan.

II. Workforce Must Comply With Plan's Policy and Procedures

All members of the Employer's workforce (described at the beginning of this Policy and referred to herein as "employees") who has access to Plan PHI must comply with this Policy and with the Plan's more detailed use and disclosure procedures, which are set forth in a separate document.

III. Access to PHI Is Limited to Certain Employees

The following employees ("employees with access") have access to PHI:

- Any employee who performs functions directly on behalf of the Plan; and

- Department of Human Resources who has access to PHI on behalf of the Business Associate for its use in "plan administrative functions" of the covered entities.

The same employees may be named or described in both of these two categories. These employees with access may use and disclose PHI for plan administrative functions, and they may disclose PHI to other employees with access for plan administrative functions (but the PHI disclosed must be limited to the minimum amount necessary to perform the plan administrative function). Employees with access may not disclose PHI to employees (other than employees with access) unless an authorization is in place or the disclosure otherwise is in compliance with this Policy and any associated procedures.

IV. Permitted Uses and Disclosures for Plan Administration Purposes

The Plan may disclose to the Employer for its use the following: (a) de-identified health information relating to plan participants; (b) Plan enrollment information; (c) summary health information for the purposes of obtaining premium bids for providing health insurance coverage under the Plan or for modifying, amending, or terminating the Plan; or (d) PHI pursuant to an authorization from the individual whose PHI is disclosed.

The Plan may disclose PHI to the following employees who have access to use and disclose PHI to perform functions on behalf of the Plan or to perform plan administrative functions ("employees with access"):

- Any employee who performs functions directly on behalf of the Plan; and
- Any other employee who has access to PHI on behalf of the Employer for its use in "plan administrative functions."

The same employees may be named or described in both of these two categories. These employees with access may use and disclose PHI for plan administrative functions, and they may disclose PHI to other employees with access for plan administrative functions (but the PHI disclosed must be limited to the minimum amount necessary to perform the plan administrative function).

Employees with access may not disclose PHI to employees (other than employees with access) unless an authorization is in place or the disclosure otherwise is in compliance with this Policy and the more detailed use and disclosure procedures.

V. Permitted Uses and Disclosures: Payment and Health Care Operations

The Plan may disclose to the Employer for the Plan's own payment purposes, and PHI may be disclosed to another covered entity for the payment purposes of that covered entity.

Payment. Payment includes activities undertaken to obtain Plan contributions or to determine or fulfill the Plan's responsibility for provision of benefits under the Plan, or to obtain or provide reimbursement for health care. Payment also includes:

- eligibility and coverage determinations including coordination of benefits and adjudication or subrogation of health benefit claims;

- risk adjusting based on enrollee status and demographic characteristics;

- billing, claims management, collection activities, obtaining payment under a contract for reinsurance (including stop-loss insurance and excess loss insurance) and related health care data processing; and

- any other payment activity permitted by the HIPAA privacy regulations.

PHI may be disclosed for purposes of the Plan's own health care operations. PHI may be disclosed to another covered entity for purposes of the other covered entity's quality assessment and improvement, case management, or health care fraud and abuse detection programs, if the other covered entity has (or had) a relationship with the participant and the PHI requested pertains to that relationship.

Health Care Operations. Health care operations means any of the following activities to the extent that they are related to Plan administration:

- conducting quality assessment and improvement activities;
- reviewing health plan performance;
- underwriting and premium rating;
- conducting or arranging for medical review, legal services and auditing functions;
- business planning and development; and
- business management and general administrative activities; and
- any other payment activity permitted by the HIPAA privacy regulations.

VI. No Disclosure of PHI for Non-Health Plan Purposes

PHI may not be used or disclosed for the payment or operations of the Employer's "non-health" benefits (e.g., disability, workers' compensation, life insurance, etc.), unless the participant has provided an authorization for such use or disclosure (as discussed in "Disclosures Pursuant to an

Authorization") or such use or disclosure is required by applicable state law and particular requirements under HIPAA are met.

VII. Mandatory Disclosures of PHI: to Individual and HHS

A participant's PHI must be disclosed as required by HIPAA in three situations:

- The disclosure is to the individual who is the subject of the information (see the policy for "Access to Protected Information and Request for Amendment" that follows);
- The disclosure is required by law, or
- The disclosure is made to HHS for purposes of enforcing of HIPAA.

VIII. Other Permitted Disclosures of PHI

PHI may be disclosed in the following situations without a participant's authorization, when specific requirements are satisfied. The requirements include prior approval of the Employer's Privacy Official. Permitted are disclosures—

- about victims of abuse, neglect or domestic violence;
- for treatment purposes;
- for judicial and administrative proceedings;
- for law enforcement purposes;
- for public health activities;
- for health oversight activities;
- about decedents;
- for cadaveric organ, eye or tissue donation purposes;
- for certain limited research purposes;
- to avert a serious threat to health or safety;
- for specialized government functions; and
- that relate to workers' compensation programs.

IX. Disclosures of PHI Pursuant to an Authorization

PHI may be disclosed for any purpose if an authorization that satisfies all of HIPAA's requirements for a valid authorization is provided by the participant. All uses and disclosures made pursuant to a signed authorization must be consistent with the terms and conditions of the authorization.

X. Complying With the "Minimum-Necessary" Standard

HIPAA requires that when PHI is used or disclosed, the amount disclosed generally must be limited to the "minimum necessary" to accomplish the purpose of the use or disclosure.

The "minimum-necessary" standard does not apply to any of the following:

- uses or disclosures made to the individual;
- uses or disclosures made pursuant to a valid authorization;
- disclosures made to HHS;
- uses or disclosures required by law; and
- uses or disclosures required to comply with HIPAA.

Minimum Necessary When Disclosing PHI. The Plan, when disclosing PHI subject to the minimum necessary standard, shall take reasonable and appropriate steps to ensure that only the minimum amount of PHI that is necessary for the requestor is disclosed. More details on the requirements are found in the Plan's Privacy Use and Disclosure Procedures. All disclosures not discussed in the Plan's Privacy Use and Disclosure Procedures must be reviewed on an individual basis with the Privacy Official to ensure that the amount of information disclosed is the minimum necessary to accomplish the purpose of the disclosure.

Minimum Necessary When Requesting PHI. The Plan, when requesting PHI subject to the minimum-necessary standard, shall take reasonable and appropriate steps to ensure that only the minimum amount of PHI necessary for the Plan is requested. More details on the requirements are found in the Plan's Privacy Use and Disclosure Procedures. All requests not discussed in the Plan's Privacy Use and Disclosure Procedures must be reviewed on an individual basis with the Privacy Official to ensure that the amount of information requested is the minimum necessary to accomplish the purpose of the disclosure.

XI. Disclosures of PHI to Business Associates

Employees may disclose PHI to the Plan's business associates and allow the Plan's business associates to create or receive PHI on its behalf. However, prior to doing so, the Plan must first obtain assurances from the business associate that it will appropriately safeguard the information. Before sharing PHI with outside consultants or contractors who meet the definition of a "business associate," employees must contact the Privacy Official and verify that a business associate contract is in place.

Business Associate is an entity that:

- performs or assists in performing a Plan function or activity involving the use and disclosure of protected health information (including claims processing or administration, data analysis, underwriting, etc.); or

- provides legal, accounting, actuarial, consulting, data aggregation, management, accreditation, or financial services, where the performance of such services involves giving the service provider access to PHI.

XII. Disclosures of De-Identified Information

The Plan may freely use and disclose de-identified information in accordance with HIPAA privacy regulations. De-identified information is health information that does not identify an individual and with respect to which there is no reasonable basis to believe that the information can be used to identify an individual. There are two ways a business associate can determine that information is de-identified: either by professional statistical analysis, or by removing specific identifiers.

XIII. Physical Access Controls/Guidelines to Guard PHI

The Employer will maintain strict physical access controls to its information systems at all times and under all conditions. This includes the physical security of electronic and paper data.

The Employer will terminate access to information systems and other sources of PHI, including access to rooms or buildings where PHI is located, when an employee, agent or contractor ends his/her employment or engagement. The Employer will terminate access to specific types of PHI when the status of any member of the workforce no longer requires access to those types of information.

Cleaning personnel:

Cleaning personnel do not need PHI to accomplish their work. Whenever reasonably possible, PHI will be placed in locked containers, cabinets or rooms before cleaning personnel enter an area. When it is not reasonably possible to lock up PHI, it must be removed from sight before cleaning personnel enter an area and a supervisor must be present.

Computer Screens:

Computer screens at each workstation must be positioned so that only authorized users at that workstation can read the display. When screens cannot be relocated, filters, hoods, or other devices may be employed. Computer displays will be configured to go blank, or to display a screen saver, when left unattended for more than a brief period of time. The period of time will be determined by the Compliance Official. Wherever practicable, reverting from the screen saver to the display of data will require a password. Computer screens left unattended for longer periods of time will log off the user. The period of time will be determined by the Privacy Official.

Compliance Official:

Director of Information Systems & Technology
City of La Crosse
400 La Crosse Street
La Crosse, WI 54601
(608) 789-8225

Conversations:

Conversations concerning individual care or other PHI must be conducted in a way that reduces the likelihood of being overheard by others. Wherever reasonably possible, barriers will be used to reduce the opportunity for conversations to be overheard.

Copying medical records and other PHI:

When PHI is copied, only the information that is necessary to accomplish the purpose for which the copy is being made, may be copied. This may require that part of a page be masked.

Desks and countertops:

Provider reports and other documents which may display identifiers and other "keys" to information should be placed face down on counters, desks, and other places where individuals or visitors can see them. Wherever it is reasonably possible to do so, medical reports and other documents containing PHI will not be left on desks and countertops after business hours. Supervisors will take reasonable steps to provide all work areas where PHI is used in paper form with lockable storage bins, lockable desk drawers or other means to secure PHI during periods when the area is left unattended. In areas where locked storage after hours cannot reasonably be accomplished, PHI must be kept out of sight. A supervisor must be present whenever someone who is not authorized to have access to that data is in the area.

Disposal of paper with PHI:

Paper documents containing PHI must be shredded when no longer needed. If retained for a commercial shredder, they must be kept in a locked bin.

Home office:

Any member of the workforce who is authorized to work from a home office must assure that the home office complies with all applicable policies and procedures regarding the security and privacy of PHI, including these guidelines.

Key policy:

The Privacy Official will develop a list of which personnel, by job title, may have access to which keys. This includes keys to storage cabinets, storage rooms and buildings. All keys must be signed out. Keys must be surrendered upon termination of employment. The Privacy Official will ensure that locks are changed whenever there is evidence that a key is no longer under the control of an authorized member of the workforce, and its loss presents a security threat that justifies the expense.

Personal digital assistants (PDAs):

The privacy and security policies apply to any PHI that is stored on a PDA or laptop. Users of PDAs and laptops are responsible for assuring that the PHI on their devices is kept secure and private. Any loss or theft of a PDA or laptop thought to contain PHI must be reported to the Compliance Official immediately. Users of PDAs who store PHI on their devices will receive special training in the risks of this practice, and measures that they can take to reduce the risks (such as use of passwords).

Printers and Fax Machines:

Printers and fax machines must be located in secure areas, where only authorized members of the workforce can have access to documents being printed.

Records carried from one building to another:

When PHI is carried from one building to another, it must be signed out and signed in. When a member of the workforce is transporting PHI from one building to another, it may not be left unattended unless it is in a locked vehicle, in an opaque, locked container. Locking the vehicle alone is not sufficient.

Record Storage:

Areas where records and other documents that contain PHI are stored must be secure. Wherever reasonably possible, the PHI will be stored in locking cabinets. Where locking cabinets are not available, the storage area must be locked when no member of the workforce is present to observe who enters and leaves and no unauthorized personnel may be left alone in such areas without supervision.

Workforce Vigilance:

All members of the workforce are responsible for watching for unauthorized use or disclosure of PHI, to act to prevent the action, and to report suspected breaches of privacy and security policies to their supervisor, or to the Privacy Official (example of a breach: individual or visitor looking through PHI left on a counter).

Visitors:

Visitors to areas where PHI is being used must be accompanied by a member of the Employer's workforce.

XIV. Breach Notification Requirements

The Plan will comply with the requirements of the HITECH Act and its implementing regulations to provide notification to affected individuals, HHS, and the media (when required) if the Plan or one of its business associates discovers a breach of unsecured PHI.

Policies on Individual Rights

I. Access to PHI and Requests for Amendment

HIPAA gives participants the right to access and obtain copies of their PHI that the Plan (or its business associates) maintains in designated record sets. HIPAA also provides that participants

may request to have their PHI amended. The Plan will provide access to PHI and it will consider requests for amendment that are submitted in writing by participants.

Designated Record Set is a group of records maintained by or for the Plan that includes:

- the enrollment, payment, and claims adjudication record of an individual maintained by or for the Plan; or

- other PHI used, in whole or in part, by or for the Plan to make coverage decisions about an individual.

II. Accounting

An individual has the right to obtain an accounting of certain disclosures of his or her own PHI. This right to an accounting extends to disclosures made in the last six years, other than disclosures:

- to carry out treatment, payment or health care operations;
- to individuals about their own PHI;
- incident to an otherwise permitted use or disclosure;
- pursuant to an authorization;
- to persons involved in the patient's care or other notification purposes;
- to correctional institutions or law enforcement when the disclosure was permitted without authorization;
- as part of a limited data set;
- for specific national security or law enforcement purposes; or
- disclosures that occurred prior to the compliance date.

The Plan shall respond to an accounting request within 60 days. If the Plan is unable to provide the accounting within 60 days, it may extend the period by 30 days, provided that it gives the participant notice (including the reason for the delay and the date the information will be provided) within the original 60-day period.

The accounting must include the date of the disclosure, the name of the receiving party, a brief description of the information disclosed, and a brief statement of the purpose of the disclosure (or a copy of the written request for disclosure, if any). If a brief purpose statement is included in the accounting, it must be sufficient to reasonably inform the individual of the basis of the disclosure.

The first accounting in any 12-month period shall be provided free of charge. The Privacy Official may impose reasonable production and mailing costs for subsequent accountings.

III. Requests for Alternative Communication Means or Locations

Participants may request to receive communications regarding their PHI by alternative means or at alternative locations. For example, participants may ask to be called only at work rather than at home. Such requests may be honored if, in the sole discretion of the Employer, the requests are reasonable.

However, the Employer shall accommodate such a request if the participant clearly provides information that the disclosure of all or part of that information could endanger the participant. The Privacy Official has responsibility for administering requests for confidential communications.

IV. Requests for Restrictions on Uses and Disclosures of Protected Health Information

A participant may request restrictions on the use and disclosure of the participant's PHI. It is the Plan's' policy to attempt to honor such requests if, in the sole discretion of the Employer, the requests are reasonable. The Plan is charged with responsibility for administering requests for restrictions and shall communicate any restrictions to the
Privacy Official.

HIPAA PRIVACY USE AND DISCLOSURE PROCEDURES

Introduction

City of La Crosse (the "Employer") sponsors the following health plans:

- City of La Crosse Self-Funded Medical Benefit Plan (Two networks administered by Gundersen Lutheran Health Plan & Custom Benefit Administrators)

- City of La Crosse Section 125 Cafeteria Plan

For purposes of these procedures the plans listed above are referred to collectively and singularly as the "Plan." Members of the Employer's workforce may have access to the individually identifiable health information of Plan participants (1) on behalf of the Plan itself; or (2) on behalf of the Employer, for administrative functions of the Plan.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) and its implementing regulations restrict the Employer's ability to use and disclose protected health information (PHI).

Protected Health Information. Protected health information means information that is created or received by the Plan and relates to the past, present, or future physical or mental health or condition of a participant; the provision of health care to a participant; or the past, present, or future payment for the provision of health care to a participant; and that identifies the participant or for which there is a reasonable basis to believe the information can be used to identify the participant. Protected health information includes information of persons living or deceased.

It is the Employer's policy to comply fully with HIPAA's requirements. To that end, all members of the Employer's workforce who have access to PHI must comply with these Use and Disclosure

Procedures. For purposes of these Use and Disclosure Procedures and the Employer's separate privacy policy, the Employer's workforce includes individuals who would be considered part of the workforce under HIPAA such as employees, volunteers, trainees, and other persons whose work performance is under the direct control of the Employer, whether or not they are paid by the Employer. The term "employee" includes all of these types of workers.

No third party rights (including but not limited to rights of Plan participants, beneficiaries, covered dependents, or business associates) are intended to be created by these Use and Disclosure Procedures. The Employer reserves the right to amend or change these Use and Disclosure Procedures at any time (and even retroactively) without notice. To the extent these Use and Disclosure Procedures establish requirements and obligations above and beyond those required by HIPAA, these Use and Disclosure Procedures shall be aspirational and shall not be binding upon the Employer. These Use and Disclosure Procedures do not address requirements under other federal laws or under state laws.

Procedures for Use and Disclosure of PHI

I. Use and Disclosure Defined

The Employer and the Plan will use and disclose PHI only as permitted under HIPAA. The terms "use" and "disclosure" are defined as follows:

- Use. The sharing, employment, application, utilization, examination, or analysis of individually identifiable health information by any person working for or within the human resources department of the Employer, or by a Business Associate (defined below) of the Plan.

- Disclosure. For information that is PHI, disclosure means any release, transfer, provision of access to, or divulging in any other manner of individually identifiable health information to persons not employed by or working within the human resources department of the location(s) of the Employer.

II. Workforce Must Comply With Employer's Policy and Procedures

All members of the Employer's workforce (described at the beginning of these Use and Disclosure Procedures and referred to herein as "employees") must comply with these Use and Disclosure Procedures and the Employer's separate privacy policy.

III. Access to PHI Is Limited to Certain Employees

The following employees ("employees with access") have access to PHI:

- Those employees who perform functions directly on behalf of the Plan, and

- Any other employee who has access to PHI on behalf of the Employer for its use in "plan administrative functions".

These employees with access may use and disclose PHI for plan administrative functions, and they may disclose PHI to other employees with access for plan administrative functions (but the PHI disclosed must be limited to the minimum amount necessary to perform the plan administrative function). Employees with access may not disclose PHI to employees (other than employees with access) except in accordance with these Use and Disclosure Procedures.

IV. Permitted Uses and Disclosures of PHI: Payment and Health Care Operations

Definitions

Payment. Payment includes activities undertaken to obtain Plan contributions or to determine or fulfill the Plan's responsibility for provision of benefits under the Plan, or to obtain or provide reimbursement for health care. Payment also includes:

- eligibility and coverage determinations including coordination of benefits and adjudication or subrogation of health benefit claims;
- risk adjusting based on enrollee status and demographic characteristics; and
- billing, claims management, collection activities, obtaining payment under a contract for reinsurance (including stop-loss insurance and excess loss insurance) and related health care data processing.

Health Care Operations. Health care operations means any of the following activities to the extent that they are related to Plan administration:

- conducting quality assessment and improvement activities;
- reviewing health plan performance;
- underwriting and premium rating;
- conducting or arranging for medical review, legal services and auditing functions;
- business planning and development; and
- business management and general administrative activities.

Procedure

- Uses and Disclosures for Plan's Own Payment Activities or Health Care Operations. An employee may use and disclose a Plan participant's PHI to perform the Plan's own payment activities or health care operations.
- Disclosures must comply with the "Minimum-Necessary" Standard. (Under that procedure, if the disclosure is not recurring, the disclosure must be approved by the Privacy Official.)
- Disclosures must be documented in accordance with the procedure for "Documentation Requirements."
- Disclosures for Another Entity's Payment Activities. An employee may disclose a Plan participant's PHI to another covered entity or health care provider to perform the other entity's payment activities. These disclosures will be made according to procedures developed by the Privacy Official.

- Disclosures for Certain Health Care Operations of the Receiving Entity. An employee may disclose PHI for purposes of the other covered entity's quality assessment and improvement, case management, or health care fraud and abuse detection programs, if the other covered entity has (or had) a relationship with the individual and the PHI requested pertains to that relationship. Such disclosures are made according to procedures developed by the Privacy Official.

- The disclosure must be approved by the Privacy Official.

- Use or Disclosure for Purposes of Non-Health Benefits. Unless an authorization from the individual (as discussed in "Disclosures Pursuant to an Authorization") has been received, an employee may not use a participant's PHI for the payment or operations of the Employer's "non-health" benefits (e.g., disability, worker's compensation, and life insurance). If an employee requires a participant's PHI for the payment or health care operations of non-Plan benefits, follow the steps provided by the Privacy Official.

- Obtain an Authorization. First, contact the Privacy Official to determine whether an authorization for this type of use or disclosure is on file. If no form is on file, request an appropriate form from the Privacy Official. **Employees shall not attempt to draft authorization forms.** All authorizations for use or disclosure for non-Plan purposes must be on a form provided by (or approved by) the Privacy Official.

- Questions? Any employee who is unsure as to whether a task he or she is asked to perform qualifies as a payment activity or a health care operation of the Plan should contact the Privacy Official or his or her designated representative.

V. Mandatory Disclosures of PHI: to Individuals and HHS

Procedure

- Request From Individual. Upon receiving a request from an individual (or an individual's representative) for disclosure of the individual's own PHI, the employee must follow the procedure for "Disclosures to Individuals Under Right to Access Own PHI."

- Request From HHS. Upon receiving a request from a HHS official for disclosure of PHI, the employee must take the steps established by the Privacy Official.

- Follow the procedures for verifying the identity of a public official set forth in "Verification of Identity of Those Requesting Protected Health Information."

- Disclosures must be documented in accordance with the procedure for "Documentation Requirements."

VI. Permissive Disclosures of PHI: for Legal and Public Policy Purpose

Procedure

- Disclosures for Legal or Public Policy Purposes. An employee who receives a request for disclosure of an individual's PHI that appears to fall within one of the categories described

below under "Legal and Public Policy Disclosures Covered" must contact the Privacy Official. Disclosures may be made according to procedures established by the Privacy Official.

- The disclosure must be approved by the Privacy Official.

- Disclosures must comply with the "Minimum-Necessary Standard."

- Disclosures must be documented in accordance with the procedure for "Documentation Requirements."

Legal and Public Policy Disclosures Covered

- Disclosures about victims of abuse, neglect or domestic violence, if the following conditions are met:

    - The individual agrees with the disclosure; or

    - The disclosure is expressly authorized by statute or regulation and the disclosure prevents harm to the individual (or other victim) or the individual is incapacitated and unable to agree and information will not be used against the individual and is necessary for an imminent enforcement activity. In this case, the individual must be promptly informed of the disclosure unless this would place the individual at risk or if informing would involve a personal representative who is believed to be responsible for the abuse, neglect or violence.

- For Judicial and Administrative Proceedings, in response to:

    - An order of a court or administrative tribunal (disclosure must be limited to PHI expressly authorized by the order); and

    - A subpoena, discovery request or other lawful process, not accompanied by a court order or administrative tribunal, upon receipt of assurances that the individual has been given notice of the request, or that the party seeking the information has made reasonable efforts to receive a qualified protective order.

- To a Law Enforcement Official for Law Enforcement Purposes, under the following conditions:

    - Pursuant to a process and as otherwise required by law, but only if the information sought is relevant and material, the request is specific and limited to amounts reasonably necessary, and it is not possible to use de-identified information.

    - Information requested is limited information to identify or locate a suspect, fugitive, material witness or missing person.

    - Information about a suspected victim of a crime (1) if the individual agrees to disclosure; or (2) without agreement from the individual, if the information is not to be used against the victim, if need for information is urgent, and if disclosure is in the best interest of the individual.

- Information about a deceased individual upon suspicion that the individual's death resulted from criminal conduct.

- Information that constitutes evidence of criminal conduct that occurred on the Employer's premises.

- To Appropriate Public Health Authorities for Public Health Activities.

- To a Health Oversight Agency for Health Oversight Activities, as authorized by law.

- To a Coroner or Medical Examiner About Decedents, for the purpose of identifying a deceased person, determining the cause of death or other duties as authorized by law.

- For Cadaveric Organ, Eye or Tissue Donation Purposes, to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs, eyes or tissue for the purpose of facilitating transplantation.

- For Certain Limited Research Purposes, provided that a waiver of the authorization required by HIPAA has been approved by an appropriate privacy board.

- To Avert a Serious Threat to Health or Safety, upon a belief in good faith that the use or disclosure is necessary to prevent a serious and imminent threat to the health or safety of a person or the public.

- For Specialized Government Functions, including disclosures of an inmate's PHI to correctional institutions and disclosures of an individual's PHI to an authorized federal Official for the conduct of national security activities.

- For Workers' Compensation Programs, to the extent necessary to comply with laws relating to workers' compensation or other similar programs.

VII. Disclosures of PHI Pursuant to an Authorization

Procedure

Disclosure Pursuant to Individual Authorization. Any requested disclosure to a third party (i.e., not the individual to whom the PHI pertains) that does not fall within one of the categories for which disclosure is permitted or required under these Use and Disclosure Procedures may be made pursuant to an individual authorization. If disclosure pursuant to an authorization is requested, the following procedures should be followed:

- Follow the procedures for verifying the identity of the individual (or individual's representative) set forth in "Verification of Identity of Those Requesting Protected Health Information."

- Verify that the authorization form is valid. Valid authorization forms are those that:

- Are properly signed and dated by the individual or the individual's representative;

- Are not expired or revoked [the expiration date of the authorization form must be a specific date (such as July 1, 2010) or a specific time period (e.g., one year from the date of signature), or an event directly relevant to the individual or the purpose of the use or disclosure (e.g., for the duration of the individual's coverage)];

- Contain a description of the information to be used or disclosed;

- Contain the name of the entity or person authorized to use or disclose the PHI;

- Contain the name of the recipient of the use or disclosure;

- Contain a statement regarding the individual's right to revoke the authorization and the procedures for revoking authorizations; and

- Contain a statement regarding the possibility for a subsequent re-disclosure of the information.

- All uses and disclosures made pursuant to an authorization must be consistent with the terms and conditions of the authorization.

- Disclosures must be documented in accordance with the procedure for "Documentation Requirements."

VIII. Disclosure of PHI to Business Associates

Definition of Business Associate

Business Associate is an entity or person who:

- performs or assists in performing a Plan function or activity involving the use and disclosure of PHI (including claims processing or administration; data analysis, underwriting, etc.); or

- provides legal, accounting, actuarial, consulting, data aggregation, management, accreditation, or financial services, where the performance of such services involves giving the service provider access to PHI.

Procedure

Use and Disclosure of PHI by Business Associate. All uses and disclosures by a "business associate" must be made in accordance with a valid business associate agreement. Before providing PHI to a business associate, employees must contact the Privacy Official and verify that a business associate contract is in place.

The following additional procedures must be satisfied:

- Disclosures must be consistent with the terms of the business associate contract.

- Disclosures must comply with the "Minimum-Necessary Standard." (Under that procedure, each recurring disclosure will be subject to a separate policy to address the minimum-necessary requirement, and each non-recurring disclosure must be approved by the Privacy Official.)

- Disclosures must be documented in accordance with the procedure for "Documentation Requirements."

IX. Requests for Disclosure of PHI From Spouses, Family Members, and Friends

The Plan and Employer will not disclose PHI to family or friends of an individual except as required or permitted by HIPAA. Generally, an authorization is required before another party, including spouse, family member or friend, will be able to access PHI.

- If an employee receives a request for disclosure of an individual's PHI from a spouse, family member or personal friend of an individual, and the spouse, family member, or personal friend is either (1) the parent of the individual and the individual is a minor child; or (2) the personal representative of the individual, then follow the procedure for "Verification of Identity of Those Requesting Protected Health Information."

- Once the identity of a parent or personal representative is verified, then follow the procedure for "Request for Individual Access."

- All other requests from spouses, family members, and friends must be authorized by the individual whose PHI is involved. See the procedures for "Disclosures Pursuant to Individual Authorization."

X. Disclosures of De-Identified Information

Definition of De-Identified Information

De-identified information is health information that does not identify an individual and with respect to which there is no reasonable basis to believe that the information can be used to identify an individual. There are two ways a covered entity can determine that information is de-identified: either by professional statistical analysis, or by removing 18 specific identifiers.

Procedure

- Obtain approval from the Privacy Official for the disclosure. The Privacy Official will verify that the information is de-identified.

- The Plan may freely use and disclose de-identified information. De-identified information is not PHI.

XI. Verification of Identity of Those Requesting Protected Health Information

Verifying Identity and Authority of Requesting Party. Employees must take steps to verify the identity of individuals who request access to PHI. They must also verify the authority of any person to have access to PHI, if the identity or authority of such person is not known. Separate procedures are set forth below for verifying the identity and authority, depending on whether the request is made by the individual, a parent seeking access to the PHI of his or her minor child, a personal representative, or a public official seeking access.

- Request Made by Individual. When an individual requests access to his or her own PHI, the following steps should be followed:
    - Request a form of identification from the individual. Employees may rely on a valid driver's license, passport or other photo identification issued by a government agency.
    - Verify that the identification matches the identity of the individual requesting access to the PHI. If you have any doubts as to the validity or authenticity of the identification provided or the identity of the individual requesting access to the PHI, contact the Privacy Official.
    - Make a copy of the identification provided by the individual and file it with the individual's designated record set.
    - If the individual requests PHI over the telephone, ask for his or her social Security number.
    - Disclosures must be documented in accordance with the procedure for "Documentation Requirements."
- Request Made by Parent Seeking PHI of Minor Child. When a parent requests access to the PHI of the parent's minor child, the following steps should be followed:
    - Seek verification of the person's relationship with the child. Such verification may take the form of confirming enrollment of the child in the parent's plan as a dependent.
    - Disclosures must be documented in accordance with the procedure "Documentation Requirements."
- Request Made by Personal Representative. When a personal representative requests access to an individual's PHI, the following steps should be followed:
    - Require a copy of a valid power of attorney or other documentation—requirements may vary state-by-state. If there are any questions about the validity of this document, seek review by the Privacy Official.
    - Make a copy of the documentation provided and file it with the individual's designated record set.
    - Disclosures must be documented in accordance with the procedure for "Documentation Requirements."

- Request Made by Public Official. If a public official requests access to PHI, and if the request is for one of the purposes set forth above in "Mandatory Disclosures of PHI" or "Permissive Disclosures of PHI," the following steps should be followed to verify the official's identity and authority:

    - If the request is made in person, request presentation of an agency identification badge, other official credentials, or other proof of government status. Make a copy of the identification provided and file it with the individual's designated record set.

    - If the request is in writing, verify that the request is on the appropriate government letterhead.

    - If the request is by a person purporting to act on behalf of a public official, request a written statement on appropriate government letterhead that the person is acting under the government's authority or other evidence or documentation of agency, such as a contract for services, memorandum of understanding, or purchase order, that establishes that the person is acting on behalf of the public official.

    - Request a written statement of the legal authority under which the information is requested, or, if a written statement would be impracticable, an oral statement of such legal authority. If the individual's request is made pursuant to legal process, warrant, subpoena, order, or other legal process issued by a grand jury or a judicial or administrative tribunal, contact the Legal Department.

    - Obtain approval for the disclosure from the Privacy Official.

    - Disclosures must be documented in accordance with the procedure for "Documentation Requirements."

XII. Complying With the "Minimum-Necessary" Standard

Procedures for Disclosures

- Identify recurring disclosures. For each recurring disclosure, identify the types of PHI to be disclosed, the types of person who may receive the PHI, the conditions that would apply to such access, and the standards for disclosures to routinely-hired types of business associates. Create a policy for each specific recurring disclosure that limits the amount disclosed to the minimum amount necessary to accomplish the purpose of the disclosure.

- For all other requests for disclosures of PHI, contact the Privacy Official, who will ensure that the amount of information disclosed is the minimum necessary to accomplish the purpose of the disclosure.

Procedures for Requests

- Identify recurring requests. For each recurring request, identify the information that is necessary for the purpose of the requested disclosure and create a policy that limits each request to the minimum amount necessary to accomplish the purpose of the disclosure.

- For all other requests for PHI, contact the Privacy Official, who will ensure the amount of information requested is the minimum necessary to accomplish the purpose of the disclosure.

Exceptions

- The "minimum-necessary" standard does not apply to any of the following:
    - Uses or disclosures made to the individual;
    - Uses or disclosures made pursuant to an individual authorization;
    - Disclosures made to HHS;
    - Uses or disclosures required by law; and
    - Uses or disclosures required to comply with HIPAA.

XII. Documentation

Procedure

- Documentation. Employees shall maintain copies of all of the following items for a period of at least six years from the date the documents were created or were last in effect, whichever is later:
    - "Notices of Privacy Practices" that are issued to participants;
    - Copies of policies and procedures;
    - Individual authorizations;
    - When disclosure of certain PHI is made:
        - the date of the disclosure;
        - the name of the entity or person who received the PHI and, if known, the address of such entity or person;
        - a brief description of the PHI disclosed;
        - a brief statement of the purpose of the disclosure; and
        - any other documentation required under these Use and Disclosure Procedures.

Note: The retention requirement only applies to documentation required by HIPAA. It does not apply to all medical records.

XIII. Mitigation of Inadvertent Disclosures of PHI

Mitigation: Reporting Required. HIPAA requires that a covered entity mitigate, to the extent possible, any harmful effects that become known to us of a use or disclosure of an individual's PHI in violation of the policies and procedures set forth in this manual. As a result, if you become

aware of a disclosure of PHI, either by an employee of Plan or an outside consultant/contractor, that is not in compliance with the policies and procedures set forth in this manual, immediately contact the Privacy Official so that the appropriate steps to mitigate the harm to the individual can be taken.

XIV. Breach Notification Requirements

Compliance. The Plan will comply with the requirements of the HITECH Act and its implementing regulations to provide notification to affected individuals, HHS, and the media (when required) if the Plan or one of its business associates discovers a breach of unsecured PHI.

Procedures for Complying With Individual Rights

Individual Rights: HIPAA gives individuals the right to access and obtain copies of their protected health information that the Plan (or its business associates) maintains in designated record sets. HIPAA also provides that individuals may request to have their PHI amended, and that they are entitled to an accounting of certain types of disclosures.

I. Individual's Request for Access

"Designated Record Set" Defined

Designated Record Set is a group of records maintained by or for the Employer that includes:

- the enrollment, payment, and claims adjudication record of an individual maintained by or for the Plan; or
- other protected health information used, in whole or in part, by or for the Plan to make coverage decisions about an individual.

Procedure

Request From Individual, Parent of Minor Child, or Personal Representative. Upon receiving a request from an individual (or from a minor's parent or an individual's personal representative) for disclosure of an individual's PHI, the employee must take the following steps:

- Follow the procedures for verifying the identity of the individual (or parent or personal representative) set forth in "Verification of Identity of Those Requesting Protected Health Information."
- Review the disclosure request to determine whether the PHI requested is held in the individual's designated record set. See the Privacy Official if it appears that the requested information is not held in the individual's designated record set. No request for access may be denied without approval from the Privacy Official.
- Review the disclosure request to determine whether an exception to the disclosure requirement might exist; for example, disclosure may be denied for requests to access psychotherapy notes, documents compiled for a legal proceeding, information compiled during research when the individual has agree to denial of access, information obtained under a promise of confidentiality, and other disclosures that are determined by a health care professional to be likely to cause harm. See the Privacy Official if there is any question about whether one of these

exceptions applies. No request for access may be denied without approval from the Privacy Official.

- Respond to the request by providing the information or denying the request within 30 days (60 days if the information is maintained off-site). If the requested PHI cannot be accessed within the 30-day (or 60-day) period, the deadline may be extended for 30 days by providing written notice to the individual within the original 30 or 60-day period of the reasons for the extension and the date by which the Employer will respond.

- A Denial Notice must contain (1) the basis for the denial; (2) a statement of the individual's right to request a review of the denial, if applicable; and (3) a statement of how the individual may file a complaint concerning the denial. All notices of denial must be prepared or approved by the Privacy Official.

- Provide the information requested in the form or format requested by the individual, if readily producible in such form. Otherwise, provide the information in a readable hard copy or such other form as is agreed to by the individual.

- Individuals have the right to receive a copy by mail or by e-mail or can come in and pick up a copy. Individuals (including inmates) also have the right to come in and inspect the information.

    - If the individual has requested a summary and explanation of the requested information in lieu of, or in addition to, the full information, prepare such summary and explanation of the information requested and make it available to the individual in the form or format requested by the individual.

    - Charge a reasonable cost-based fee for copying, postage, and preparing a summary (but the fee for a summary must be agreed to in advance by the individual). This provision is not needed if the plan will not charge a fee.

    - Disclosures must be documented in accordance with the procedure "Documentation Requirements."

II. Individual's Request for Amendment

Procedure

Request From Individual, Parent of Minor Child, or Personal Representative. Upon receiving a request from an individual (or a minor's parent or an individual's personal representative) for amendment of an individual's PHI held in a designated record set, the employee must take the following steps:

- Follow the procedures for verifying the identity of the individual (or parent or personal representative) set forth in "Verification of Identity of Those Requesting Protected Health Information."

- Review the disclosure request to determine whether the PHI at issue is held in the individual's designated record set. See the Privacy Official if it appears that the requested information is not held in the individual's designated record set. No request for amendment may be denied without approval from the Privacy Official.

- Review the request for amendment to determine whether the information would be accessible under HIPAA's right to access (see the access procedures above). See the Privacy Official if there is any question about whether one of these exceptions applies. No request for amendment may be denied without approval from the Privacy Official**.**

- Review the request for amendment to determine whether the amendment is appropriate—that is, determine whether the information in the designated record set is accurate and complete without the amendment.

- Respond to the request within 60 days by informing the individual in writing that the amendment will be made or that the request is denied. If the determination cannot be made within the 60-day period, the deadline may be extended for 30 days by providing written notice to the individual within the original 60-day period of the reasons for the extension and the date by which the Employer will respond.

- When an amendment is accepted, make the change in the designated record set, and provide appropriate notice to the individual and all persons or entities listed on the individual's amendment request form, if any, and also provide notice of the amendment to any persons/entities who are known to have the particular record and who may rely on the unconnected information to the detriment of the individual.

- When an amendment request is denied, the following procedures apply:

    - All notices of denial must be prepared or approved by the Privacy Official. A Denial Notice must contain (1) the basis for the denial; (2) information about the individual's right to submit a written statement disagreeing with the denial and how to file such a statement; (3) an explanation that the individual may (if he or she does not file a statement of disagreement) request that the request for amendment and its denial be included in future disclosures of the information; and (4) a statement of how the individual may file a complaint concerning the denial.

    - If, following the denial, the individual files a statement of disagreement, include the individual's request for an amendment; the denial notice of the request; the individual's statement of disagreement, if any; and the Employer's rebuttal/response to such statement of disagreement, if any, with any subsequent disclosure of the record to which the request for amendment relates. If the individual has not submitted a written statement of disagreement, include the individual's request for amendment and its denial with any subsequent disclosure of the protected health information only if the individual has requested such action.

III. Processing Requests for an Accounting of Disclosures of Protected Health Information

Procedure

Request From Individual, Parent of Minor Child, or Personal Representative. Upon receiving a request from an individual (or a minor's parent or an individual's personal representative) for an accounting of disclosures, the employee must take the following steps:

- Follow the procedures for verifying the identity of the individual (or parent or personal representative) set forth in "Verification of Identity of Those Requesting Protected Health Information."

- If the individual requesting the accounting has already received one accounting within the 12 month period immediately preceding the date of receipt of the current request, prepare a notice to the individual informing him or her that a fee for processing will be charged and providing the individual with a chance to withdraw the request.

- Respond to the request within 60 days by providing the accounting (as described in more detail below), or informing the individual that there have been no disclosures that must be included in an accounting (see the list of exceptions to the accounting requirement below). If the accounting cannot be provided within the 60-day period, the deadline may be extended for 30 days by providing written notice to the individual within the original 60-day period of the reasons for the extension and the date by which the Employer will respond.

- The accounting must include disclosures (but not uses) of the requesting individual's PHI made by Plan and any of its business associates during the period requested by the individual up to six years prior to the request. (Note, however, that the plan is not required to account for any disclosures made prior to April 14, 2004. The accounting does not have to include disclosures made:

    - to carry out treatment, payment and health care operations;

    - to the individual about his or her own PHI;

    - incident to an otherwise permitted use or disclosure;

    - pursuant to an individual authorization;

    - for specific national security or intelligence purposes;

    - to correctional institutions or law enforcement when the disclosure was permitted without an authorization; and

    - as part of a limited data set.

- If any business associate of the Plan has the authority to disclose the individual's PHI, then Privacy Officer shall contact business associate to obtain an accounting of the business associate's disclosures.

- The accounting must include the following information for each reportable disclosure of the

individual's PHI:

- the date of disclosure;
- the name (and if known, the address) of the entity or person to whom the information was disclosed;
- a brief description of the PHI disclosed; and
- a brief statement explaining the purpose for the disclosure. (The statement of purpose may be accomplished by providing a copy of the written request for disclosure, when applicable.)

- If the Plan has received a temporary suspension statement from a health oversight agency or a law enforcement official indicating that notice to the individual of disclosures of PHI would be reasonably likely to impede the agency's activities, disclosure may not be required. If an employee receives such a statement, either orally or in writing, the employee must contact the Privacy Official for more guidance.
- Accountings must be documented in accordance with the procedure for "Documentation Requirements."

IV. Processing Requests for Confidential Communications

Procedure

Request From Individual, Parent of Minor Child, or Personal Representative. Upon receiving a request from an individual (or a minor's parent or an individual's personal representative) to receive communications of PHI by alternative means or at alternative locations, the employee must take the following steps:

- Follow the procedures for verifying the identity of the individual (or parent or personal representative) set forth in "Verification of Identity of Those Requesting Protected Health Information."
- Determine whether the request contains a statement that disclosure of all or part of the information to which the request pertains could endanger the individual.
- The employee should take steps to honor requests.
- If a request will not be accommodated, the employee must contact the individual in person, in writing, or by telephone to explain why the request cannot be accommodated.
- All confidential communication requests that are approved must be tracked.
- Requests and their dispositions must be documented in accordance with the procedure for "Documentation Requirements."

V. Processing Requests for Restrictions on Uses and Disclosures of Protected Health Information

Request From Individual, Parent of Minor Child, or Personal Representative. Upon receiving a request from an individual (or a minor's parent or an individual's personal representative) for access to an individual's PHI, the employee must take the following steps: Follow the procedures for verifying the identity of the individual (or parent or personal representative) set forth in "Verification of Identity of Those Requesting Protected Health Information."

- The employee should take steps to honor requests.
- If a request will not be accommodated, the employee must contact the individual in person, in writing, or by telephone to explain why the request cannot be accommodated.
- All requests for limitations on use or disclosure of PHI that are approved must be tracked.
- All business associates that may have access to the individual's PHI must be notified of any agreed-to restrictions.

Requests and their dispositions must be documented in accordance with the procedure for "Documentation Requirements."

3/1/13

INFORMATION TECHNOLOGY RESOURCE POLICY

1. GENERAL POLICY

1.1 **Background** and Content.

The City of La Crosse provides employees with access and use to a variety of information technology resources. These resources are provided to employees to allow them to be more efficient, productive and provide them with the information and tools that they need to perform their responsibilities as City employees. This document describes the policies that govern the use of technology in the City of La Crosse and describes ways to prevent and respond to a variety of threats including unauthorized access, disclosure, duplication, modification, diversion, destruction, loss, misuse, or theft of City information. This policy replaces and supersedes prior Information Services policies.

1.2 Objectives.

The City of La Crosses' business is conducted with computers dedicated to a single user's activity. Protection of these servers, computers and other devices and information handled by these systems is an essential part of doing business at City of La Crosse. This policy applies to all computers or other devices regardless if they are stand-alone or connected to the network.

2. Definitions

2.1 Employee

All regular full time, regular part time, limited term employees, seasonal employees, temporary employees, interns, employees from other agencies working within the City government, volunteers, and appointed and elected officials granted access and use to the City of La Crosse's Information Resources are considered, under this policy, employees of the City of La Crosse.

2.2 Contractors.

All persons contracted with the City of La Crosse to work on systems, equipment or machinery that requires access to the network or connects to the City's network or that uses a computer or any type of technology and that may also need to access those systems remotely to maintain them.

2.3 Information Technology Resources

For the purpose of this policy, the City of La Crosse will define Information Technology Resources as any equipment, hardware, or software that is assigned and available for employees to use in the course of their employment. These resources included, but are not limited to, fax machines, printers, software applications, Internet access, voice mail, e-mail, office computers, scanners,

multimedia equipment, computer terminals, telephones, radios, PDA's and Smartphones and various networks.

2.4 IT.
The Information Technology Department formerly referred to as the Information Services Department, IS Department, IT Department and other similar variations thereof.

3. Scope

3.1 Involved Persons.
This policy statement applies to all employees, contractors, consultants, temporaries, and other workers at City of La Crosse, including those workers affiliated with third parties that access City of La Crosse's computer networks. Throughout this policy, the words "worker" or "user" will be used to collectively refer to all such individuals. By his/her use of, or access to the City's personal computers, information and data systems, and computer networks, the individual expressly agrees to abide by this policy and to be subject to these provisions.

3.2 Involved Systems.
This policy statement applies to all computer and data communication systems owned by and/or administered by the City of La Crosse.

4. Violations

4.1 Non-Compliance.
City of La Crosse workers who violate this policy will be subject to disciplinary action up to and including termination.

4.2 Mandatory Reporting.
All suspected policy violations, system intrusions, virus infestations, and other conditions that might jeopardize City of La Crosse information or City of La Crosse information systems must be immediately reported to IT.

5. Privacy and Personal Use

Unless contractual agreements dictate otherwise, all information stored on or transmitted by City of La Crosse computer and communications systems (including, but not limited to, e-mail systems, Internet/Intranet access) are City of La Crosse property.

To properly protect and manage this property, City of La Crosse management reserves the right to examine all information stored in or transmitted by these systems. Workers have no expectation of privacy associated with the information they store in or send through these systems. Such information is subject to applicable open records laws and records retention policies, and can be accessed during court proceedings, investigations or public records

requests. Because this information is City of La Crosse property, users must not put it to uses that have not been explicitly approved by their Department Head or designee and consistent with this policy.

6. Hardware and Software

6.1 Software Use

Only work related software will be used on City computers. No personal software, even if bought by an individual specifically for their office computer, may be installed and used without prior authorization (in writing,) from the Department Head and the IT Department. This includes and is not limited to games, screen savers, utilities, and communications software. The IS Department should be consulted if there are any questions or issues relating to this matter.

The use of software to access personal email services and Internet access services is prohibited. This applies to personal services such as but not limited to Hotmail, MSN, Gmail, and Internet Service Providers.

Determination of misuse will be made by the Department Head and/or Human Resources. Department Head and/or Human Resources may request computer surveillance from the IT Department in compliance with the Computer Surveillance Policy without user's consent to determine if misuse has occurred.

6.2 Copying & Software Duplication

The copying of software for any reason is expressly prohibited. Any software in use on any City Computer must be a legally licensed copy. The terms and conditions that are found in most commercial software packages prohibit copying their product. The operating license of each commercial software package will establish the final guidelines as to the legality of the copying activity in the event a question arises.

Anyone who knowingly or unknowingly duplicates copyrighted software material is subjecting the City of La Crosse and themselves to substantial penalties under the law.

6.3 Backup

The IT Department will backup server's data on a daily basis. Users should store all their data in the appropriate folders that are on the city servers. NO data should be stored locally on any computer, laptop or any other electronic device that is not stored on the server. The IT Department may not be able to assist users who might lose data as a result of such data not being stored on the City Servers.

6.4 Hardware Purchases

IT will determine, in cooperation with affected Departments when appropriate, the most cost-efficient and compatible equipment to purchase. The purchase order will be done as needed or in bulk, to be taken care of by the IT Department. IT will setup

the computers and make them network ready and install them on site for final use. All purchases of technology will be done by the IT Department.

6.5. Software Purchases

All software purchases without exception should be approved by the IT Department. This will ensure compatibility and consistency with the City Information System.

All original copies of software and manuals shall be given to the IT Department for safe keeping. If additional licenses or copies need to be installed the IT Department will be in charge of doing this in coordination with the interested department.

6.6 Hardware Installation

The IT Department will install all relevant network hardware and hardware resources including desktop hardware. The use of persons or services not authorized by the IT Department to assist, consult, and or install hardware or software or any peripherals to any computer equipment that belongs to the City shall not be permitted. The IT Department will make determinations on any work to be done by external persons/agencies and hence ensure that the work done will not negate the current direction of the City's Information System.

6.7 Connecting Personal/Non-City Owned Hardware to City Information System

Personal/Non-City Owned hardware* shall not be permitted to connect to the City Information System (including the network and City Computers) without prior written authorization from the IT Director. Examples of such hardware include, but are not limited to: laptop computers, private personal computers, associated peripherals, personal wireless communications devices, Personal Digital Assistants, joysticks, mouse, monitors, desktops, network devices, including any other peripherals that may be used to interface to a City computer or the City Information System.

* Personal/Non-City owned hardware: Computer and Communications hardware of any kind not belonging to the City.

6.8 Connecting Modems to City phone lines

Connecting a modem/router to a City phone line is prohibited.

6.9 Public Records Information

The IT Department keeps a record of all computer activity. Except as otherwise provided by law, all records are public and subject to disclosure upon request. Notwithstanding, all such records of activity and information remain the records of the department that typically creates and maintains said record within the normal course of its business. The mere fact that the IT Department facilitates the storage of such records on behalf of another department does not elevate the IT Director to be the legal custodian of said records. Rather, the custodian for such records shall be the department head of the corresponding department.

7. Internet and E-mail

7.1 **Internet**

Employees shall only use the Internet and the resources found therein for research and information gathering for official City business.

The network hardware and software possessed by the City has the capability to monitor computer and Internet activity by user. The network is configured to prevent employees from visiting sites that are primarily for personal use and unlikely to be helpful in conducting City business (see list below).

Under no circumstances shall an employee, unless directly related to their work, or unless requested by their manager or Department Head, visit any Internet site that is of a questionable nature. These sites include and are not limited to:

a. Pornographic Sites
b. Sites with Nudity
c. Sites pertaining to Child Pornography
d. Sites that deal with illegal activity
e. Gaming
f. Personal Banking
g. Shopping
h. Streaming Media
i. Blogs
j. Chats

Social Media sites are addressed in the Social Media Policy.

7.2 Accessing Blocked Sites

Access must be authorized and requested by the Department head to Information Services submitted as a service request for employees to access a particular site blocked by the system which is needed in order to perform the employee's duties. IT will provide access at the direction of the Director of Human Resources or their designee, the Department head or manager being responsible for that access.

7.3 E-mail

The Email system is the property of the City of La Crosse and is provided to employees to assist them in conducting City business. Electronic Mail should not be used for personal business.

All messages composed, sent or received on the Email system are and remain the property of the City of La Crosse. Employees do not have a personal privacy right in any matter created, stored in or sent from the City's Email system. Email is NOT secure.

The guidelines below will apply to all e-mail records (incoming and outgoing) in order to comply with current state statutes and public record laws.

a. E-mail is NOT secure! If the content of the mail is sensitive, consider using other forms of delivery.

b. The Director of IT is considered the custodian of all records maintained on the Information Systems, except as otherwise provided in § 6.9.
c. All e-mail you send/receive is automatically retained and archived for at least 7 years before being destroyed.

7.4 Prohibited Activities – E-mail

Employees are prohibited from sending e-mail or otherwise using the email system in connection with any (but not limited to) of the following activities:

a. Engaging in personal business or entertainment.
b. Engaging in illegal, fraudulent, or malicious activities.
c. Engaging in the unlawful use of the e-mail system as set forth in Wisconsin Statutes.
d. Sending or storing offensive, discriminatory, disruptive, obscene, or defamatory material.
e. Annoying or harassing other individuals.
f. Using another individual's account or identity without explicit authorization.
g. Attempting to test, circumvent, or defeat security or auditing systems without prior written authorization of the Director of IT.
h. Accessing, retrieving or reading e-mail messages sent to other individuals without that individual's prior written authorization.
i. Permitting any unauthorized individuals to access the City's e-mail system.
j. Sending out mass Email with the intent of disrupting the Email system (SPAM).
k. Sending non work related attachments (like pictures, graphics, music, video, chain letters, etc)

7.5 Files and Attachments

Attachments are documents and programs that are "attached" to an Email message that is being sent to a recipient. The IT Department keeps software installed on our servers that monitor for viruses on incoming and outgoing email.

7.6 Web Filtering and Monitoring

In the event of a failure of the City's Web filter, the Director of the IT Department and Director of Finance, Deputy Director of Human Resources or their designee reserve the right to monitor web usage of all users on a daily basis until said Web Filter is brought back in to service.

8. Resource Usage

8.1 Personal Use

Information Resources are the property of the City of La Crosse and are provided to employees to conduct their day-to-day operations. The use of such resources for personal use of any kind is not permitted. In no event can any equipment, software, hardware or related peripherals be removed from the City premises without prior authorization from the Department Head and the IT Director and signing the VPN Policy.

8.2 Unacceptable Use

Each employee is provided with access to and use of a variety of information resources. These resources are to assist you in the course of your employment and for no other reason. Examples of unacceptable uses include (but not limited to):

a. Unauthorized use.
b. Illegal purposes.
c. Transmittal of threatening, abusive, obscene, lewd, profane, or harassing material or material which suggests any lewd or lascivious act.
d. Intentionally preventing or attempting to prevent the disclosure of your identity with the intent to frighten, intimidate, threaten, abuse or harass any other person.
e. Transmittal or distribution of material that is confidential to the City.
f. Disruption of network services, such as distributing computer viruses.
g. Interception or alteration of network traffic.
h. Use of someone else's identity and password for access to information resources without proper authorization.
i. Attempts to evade, disable, or "crack" passwords or other security provisions of systems on the network.
j. Reproduction and/or distribution of copyrighted materials without appropriate authorization.
k. Electronic media and service shall not be used in a manner that is likely to cause network congestion or significantly hamper the ability of other people to access and use the system.

9. City Network System

The IT Department offers a network with a variety of services available, including but not limited to the following: file storage, print services, Internet, VPN (Virtual Private Network) access to the City's network, e-mail and other applications. These services will be available to all authorized users of the city information system.

9.1 Network Access

A user name and standard password shall control network access. User names/email addresses are required to be the same as the user's legal name.

The end user shall choose a password that is alphanumeric in nature. The password shall be changed in a period not exceeding 60 days to protect the integrity of the information systems. The network will remind users when their passwords need to be changed. The criteria have been selected to protect the integrity of the City Information Systems.

9.2 VPN Access

Employees who wish to either take their work home or have a need to work from home may access their stored resources by accessing them via the Internet through a VPN (Virtual Private Network) Connection. Full Internet access is available via this mode; however keep in mind

that all policies of network usage, monitoring and privacy apply to the VPN connection. To obtain remote access to the City's network a VPN and a Remote Access request/acknowledgement forms must be submitted to IT.

9.3 Passwords & Encryption

The use of individual passwords or encryption with the exception of the password to log on to the network is prohibited. Such passwords include:

a. Windows Logon Passwords
b. Screensaver Passwords
c. Hardware Passwords
d. Document Passwords & Encryption
e. Hard Drive Encryption

Users will be required to have a password to access the Citywide Network. To protect the City network, all users shall log out of the network when they are away from their terminal for any significant length of time and when they leave for the day. Turning off a computer automatically logs the user off. The User will be held accountable for any other person using their computer under the users name and password.

9.4 Security

For all users who on the City Network (on a network, Internet, etc.), the following security guidelines have been set to abide by:

a. Users may not seek to gain unauthorized access to information resources to which they have not been given access.
b. Users are responsible for properly safeguarding any administrative data such as logins and passwords, and are held accountable for any activity that occurs under their login name and password. Any unauthorized activity on an account must be reported to the Department Head and IT Director immediately.

c. Users may not obtain copies of files, or modify files of other users of the City of La Crosse.

d. Users may not seek information on other data or passwords belonging to other users, or misrepresent other users of the City of La Crosse.

e. Users must respect the confidentiality of other individuals' electronic communications.

Employees are prohibited from engaging in, or attempting to engage in:

1. Monitoring or intercepting the files or electronic communications of other employees or third parties.
2. Obtaining access to systems or accounts they are not authorized to use.
3. Using another person's login and password information without their explicit permission. (Keep in mind that the person's for which user name and password is being used will be held accountable for all activity being done)
4. Breaching, testing, or monitoring computer or network security measures.

f. Anyone obtaining electronic access to other organizations', businesses, companies', municipalities', or individuals' materials must respect all copyrights and cannot copy, retrieve, modify, or forward copyrighted material except those that are permitted by the copyrighted owner.

g. All logins and activity, including system administration, may be logged electronically.

9.4.1 Unauthorized use

Accessing computer resources on machines used by other persons without their expressed permission is considered a hacking/cracking. This form of activity is prohibited on the City Information Systems. Hacking/cracking is considered a violation of the law and is a punishable offense under the law (a felony offense).

9.5 Confidential Information

The IT Department will take all steps to maintain the confidentiality and the security of the Data stored in the Network Servers. The steps include physical security, Network password access, file, and folder security. All other departments shall collaborate with the IT department to ensure data integrity and security.

10. Administrative Issues

10.1 Intellectual Property

a. Any and all documents, applications, programs, software, systems, hardware or designs conceptualized, designed, created or applied during any period an employee receives remuneration from the City and/or created during work hours or at home for the purpose of use at and for the City of La Crosse becomes the property of the City of La Crosse.

b. Any and all documents, applications, programs, software, systems, hardware or designs conceptualized, designed, created or applied during a period in which an employee was hired as an independent consultant or contractor to perform such duties shall be the property of the City of La Crosse.

10.1.1 Web Publishing Requests from External Organizations

The City's web site (www.cityoflacrosse.org) shall be limited to the publishing of activity and information originating from/pertaining to the organization of the City of La Crosse.

The City of La Crosse is not responsible for the content, nature, viewpoints, opinions and timeliness of any external web pages and/or links connected to or otherwise published on the City web site.

It is allowed under this policy for the City of La Crosse to have links from its website to other governmental sites, sister cities, and other local community organizations closely related with the City of La Crosse. These requests may be forwarded to the City Attorney to ascertain the appropriateness of the requested link(s).

10.2 Record Retention

Current Local Ordinances, State and Federal Statutes pertaining to the retention of public records shall prevail with respect to record retention.

10.3 Audit

Any audits to determine compliance with this policy will be conducted in accordance with the Computer Surveillance Policy.

10.4 Temporary Employees

Department Heads will need to inform the IT Department when their unpaid interns and other temporary employees who need access to the City Information System are no longer with the City.

10.5 Support

The IST Department will only provide physical support and troubleshooting for Information Technology Resources at City owned buildings.

11. Errors & Omissions

This policy is designed to enable employees to maximize their use of resources available to them. The City firmly believes that knowing the bounds of activity protects both the individual employee and the City from potential disciplinary and liability issues.

While this policy is not all encompassing, the City believes that each user would apply their own standards of professional, moral and ethical conduct when using the IT resources. This does not mean that any item/event/activity NOT mentioned in this document is a condoned act. Any items not mentioned in this policy that relates to inappropriate behavior, actions with respect to the IS system will be addressed on a case-by-case basis. It should be kept in mind that prevailing City policies are still in effect and applicable to potential Information Services issues.

12. Violations & Disciplinary Action

Violations of this policy have the potential of exposing the City to substantial risks including legal liability, and may result in disciplinary action up to and including discharge.

The Department head together with the Director of Finance, Deputy Director of Human Resources or their designee, the Director of IT and the City Attorney will investigate reported violations to determine if any action is justified.

Except as otherwise provided by law, the IT Committee is responsible for initiating disciplinary action concerning any Council Member's noncompliance with this policy.

9/27/11; R2/22/15; 9/15/15; R01/01/2018

MOTOR VEHICLE OPERATIONS POLICY

POLICY INTENT: To establish vehicle operator regulations and standards and to ensure an acceptable level of proficiency and safety is met by city employees operating city vehicles.

APPLIES TO: The policy applies to all city employees who are assigned to operate a city vehicle or their personal vehicle to accomplish essential functions of their position. Employees that use a city vehicle or their personal vehicle to perform a city work function on an occasional basis are also covered by this policy. The policy also applies to applicants for employment when the position they are applying for includes the operation of a city vehicle.

I. Policy

The City of La Crosse has the authority to determine who will drive a city vehicle, to establish vehicle operator standards, and to revoke the privilege of driving city vehicles for failure to meet the standards. This policy defines the minimum standards for all city employees. Nothing herein will be construed as to limit the city from setting higher standards that may be needed to meet the particular operational needs and requirements of an individual position and/or department.

II. Definitions

A. Driving Record Abstract Program: A vehicle record subscription service program provided by the Department of Transportation that automatically sends a driving record abstract whenever a conviction or sanction is posted to an enrolled employees' driving record. This includes violations, suspensions, restrictions, revocations, or any action that is taken that may affect an employees' driving privilege.

B. Preventable Crash: Any vehicle accident in which the driver/operator failed to do everything he/she reasonably could have done to prevent the accident, unless such accident occurs in the responsible execution of an employees' job responsibilities. (Example: police pursuit or apprehension)

C. Vehicle Crash: Any occurrence involving a city-owned, rented, leased or travel-reimbursed motor vehicle or trailer which results in property damage, personal injury or death.

D. Employee: For purposes of this policy, all regular full-time city employees, part-time employees and/or temporary employees.

E. City vehicle: Any City of La Crosse owned, rented, leased or travel reimbursed motor vehicle or trailer including personal vehicles used by an employee for city business. A personal vehicle used to travel to and from work is not considered a city vehicle. Personal vehicles used occasionally for city business are not considered city vehicles when not used for city business.

F. Authorized passengers: Employees, co-workers and other personnel performing city related business. Additional passengers may be authorized by a higher management level in exceptional cases provided that such actions are reasonable and do not impede the delivery of municipal services.

III. Regulations

A. Employees who drive a city vehicle in the performance of their duties will be enrolled in the Driving Record Abstract Program.

B. Each driver's privilege to operate a city vehicle on official city business extends only as long as the driver operates the vehicle in a safe and efficient manner. A record of preventable crashes, or other disqualifying violations and/or convictions may result in appropriate disciplinary action up to and including removal of the driving privileges and termination of employment for those employees for which driving a city vehicle is an essential function of their position. For employees who occasionally use city vehicles and such use is not an essential function of the position, a lesser standard shall be used.

C. Employees will operate all vehicles used for city business safely and economically. To accomplish this, employees must comply with the following regulations:

1. All drivers will have a valid state driver's license with the appropriate certifications and/or endorsements required by law for the type or types of vehicles used in the performance of their duties.

2. All occupants will wear seat belts, whether operating or riding in a city vehicle, unless their specific work function is excepted from such standards by state law, for example, law enforcement personnel.

3. Engaging in distracting activities including, but not limited to, eating, putting on makeup, reading or changing radio stations, is also strongly discouraged while driving, even when in slow-moving traffic. (Law enforcement activities are excluded from this provision.)

4. Use of alcohol, drugs or other substances, including certain over-the-counter cold or allergy medications that in any way impair driving ability, is prohibited.

5. All employees are expected to follow all driving laws and safety rules such as adherence to posted speed limits and directional signs, use of turn signals and avoidance of confrontational or offensive behavior while driving. (Law enforcement activities are excluded from this provision.)

6. Employees are encouraged to use city vehicles instead of their own cars for official city business whenever practical.

7. No employee will drive a city vehicle unless the employee's supervisor has authorized them to do so.

8. Personal vehicles may be used to perform city business with prior approval of the department head. Employees using their personal vehicles will be reimbursed for approved miles at the standard business mileage rate established by the IRS, after submittal of the appropriate form to the Finance Department.

9. City vehicles will be used for city business only and will not normally leave the city limits without authorization, unless it is necessary to accomplish assigned tasks.

10. Unauthorized passengers and/or drivers are prohibited from operating or riding in a city vehicle.

11. Employees will observe all traffic laws, rules and regulations and the dictates of common sense and good judgment. The vehicle operator is responsible for all traffic and parking fines.

12. Employees may not take city vehicles home overnight unless authorized by their department head to perform city business from their home or have a reasonable expectation to be called back to perform city business.

13. Employees required to possess a commercial driver's license shall comply with applicable city work rules and State/Federal regulations regarding drug and alcohol use including testing requirements.

14. Rules and regulations regarding employee use of city motor vehicles and/or personal vehicles used to perform a city function which are specific to each operating department shall also apply.

D. Employees may use city vehicles for travel to lunch if they are on city business in a location where driving to obtain their personal vehicle would result in an extra and unnecessary expenditure of time and money, (i.e. employees are permitted to go to nearest restaurant), or when the employee has a reasonable expectation that they will be called to return to duty during the lunch period.

E. Employees authorized to take a city vehicle home after their normal scheduled hours must report the number of miles "to and from home" to the Finance Department on a monthly basis and are responsible for any taxes due associated with this benefit.

F. Each employee driving a city vehicle on city business will inspect the vehicle to assure that the vehicle is in sound operating condition. This includes a basic inspection to ensure the proper operation of the lights, seat belts, emergency flashers, wipers, and other essential safety equipment. Any vehicles found to be unsafe to operate must be reported to the supervisor, who will contact the MSC garage to evaluate the reported problem. Personal vehicles used as city vehicles must be kept in a safe operating condition by the employee as outlined in paragraph (K) below.

G. Employees will immediately report all vehicle crashes involving city vehicles and complete a MOTOR VEHICLE ACCIDENT REPORT/DRIVER'S STATEMENT form as required. (Law enforcement required to complete a MOTOR VEHICLE CRASH/DRIVER'S STATEMETN.) Employees will cooperate in the investigation of all vehicle crashes or property damage crashes as follows:

1. Employees must promptly report any accidents to local law enforcement as well as to their department head.

2. Employees are expected to report any moving or parking violations received while driving a city vehicle on city business.

H. Employees who operate a city vehicle in the performance of their duties, must notify their immediate supervisor within 24 hours, or the start of the next work shift, whichever is earlier, if

their license is expired, suspended, revoked, or confiscated by a law enforcement agency. Additionally, employees must notify their supervisor within 24 hours, or the start of the next work shift, whichever is earlier, upon reinstatement of their driver's license. Failure to notify their supervisor may be cause for disciplinary action.

I. The Director of Engineering and Public Works is responsible for the coordination of the City of La Crosse fleet safety programs on a city-wide basis. Vehicle inspection and maintenance program for all city vehicles is the responsibility of the department using and/or maintaining the city vehicle.

J. Candidates for employment for positions that are required to operate a city vehicle will be hired in accordance with the driver qualification standards and driving record standards outlined in this policy.

K. Employees driving a personal vehicle for city business are required to keep their vehicle properly licensed and insured, and in a safe mechanical operating condition including having a current certification of automobile insurance on file with the City Clerk's Office.

IV. Driver Qualification Standards

A. The City has the right to review any and all circumstances related to the driving history of an employee and/or job applicant. Driver's qualifications will be evaluated through the following:

1. Previous employer's reference.

2. Motor vehicle records through the Department of Transportation.

3. Review of personnel file to consider driver training received, record of preventable crashes, driving history, driving certifications, and vehicle operator record.

4. Law enforcement information network.

B. Qualified drivers will meet the following standards:

1. Possess a valid driver's license of the proper class with the appropriate certifications and/or endorsements required by law for the type or types of vehicles used in the performance of their duties.

2. Possess a driving record that meets all performance and other driving record standards specified in this policy.

3. Capable of passing a physical examination certifying the employee's ability to operate a motor vehicle.

4. Capable of passing written tests on driving regulations whenever required.

5. Capable of passing driving tests appropriate to their position.

6. Have demonstrated proficiency with the particular type of vehicle or equipment they will routinely operate.

C. Employees whose job description includes driving a city vehicle as an essential function who do not continue to meet the driver qualification standards may have their driving privilege

removed and may be subject to disciplinary action up to and including termination of employment. Employees who use a city vehicle on an occasional basis, which is not an essential job function, shall have a lower standard.

D. Candidates for employment for positions that require the operation of a motor vehicle as an essential function of the position who do not meet the driver qualification standards will be disqualified.

V. Driving Record Standards

A. The City has the right to review any and all circumstances related to the driving history of an employee and/or job applicant. The pattern of violations, the seriousness, the surrounding circumstances and the number and frequency of motor vehicle violations will be considered. For purposes of establishing time frames for disqualification of the driving privilege, the City will use the date of the actual violation.

B. The following offenses and/or conditions will disqualify an employee from driving a city vehicle:

1. Failure to possess, or loss of a valid operator's license, either through suspension or revocation or for any other reason, including the appropriate certifications and/or endorsements required by law for the type or types of vehicles used in the performance of duties; or

2. Conviction of a driving related felony in the past seven (7) years.

C. For employees who operate a city vehicle as an essential function of their position, the following conditions or convictions that cause immediate concern and may be cause for disqualification of the driving privilege or may be cause for disciplinary action and/or retraining include the following:

1. A serious offense such as operating under the influence of alcohol or drugs, operating while impaired, unlawful blood alcohol level, negligent homicide, driving while license suspended or revoked.

2. Two (2) at fault crashes in the past three (3) years, or

3. The accumulation of more than six (6) points in the past twelve (12) months, or more than ten (10) points in the past three (3) years; or

4. A pattern of preventable crashes and/or property damage.

The above list is representative only. The City reserves the right to discipline employees for acts or omissions which are not listed.

D. Candidates for employment for positions requiring a driver's license who do not meet the driving record standards will be disqualified.

VI. Supervisory and Managerial Responsibilities

A. The specific responsibilities of supervisory and managerial employees are identified below.

1. Department Heads or their designees will:

a. Identify and then notify the Human Resources Department of all employees who operate a city vehicle in the performance of their duties to be certified as eligible to operate a city or personal vehicle to perform city business and to be included in the Driving Record Abstract Program.

b. Ensure that all employees identified in section (a) above, are informed of this policy.

c. Ensure the safe maintenance and operation of all assigned city vehicles.

d. Ensure that all vehicle operators are trained in the safe operation of all assigned motor vehicles.

e. Enforce citywide and departmental vehicle operation standards and procedures.

2. Supervisors will:
    a. Ensure the safe operation and maintenance of assigned municipal vehicles.

    b. Administer and enforce all citywide and departmental policies and procedures regarding vehicle operation.

3. Human Resources will:
    a. Prior to making a conditional offer of employment will verify that the candidate has a valid state driver's license with the appropriate certifications and/or endorsements required by law for the type or types of vehicles used in the performance of their duties.

    b. Evaluate motor vehicle records received from the appropriate State agency in accordance with the Driver Qualification Standards and Driving Record Standards and confer with department heads and supervisors as appropriate.

    c. Maintain the Driving Record Abstract Program and provide consultation to department heads as needed.

NURSING MOTHERS IN THE WORKPLACE POLICY

OVERVIEW

This policy establishes guidelines in compliance with Section 7(r) of the Fair Labor Standards Act. Section 7(r) requires employers provide the following for nursing mothers in the workplace:

1. Provide reasonable break time for an employee to express breast milk for her nursing child for one year after the child's birth each time such employee has a need to express the milk; and
2. A place, other than a bathroom, that is shielded from view and free from intrusion from co-workers and the public, which may be used by an employee to express milk.
   An employer shall not be required to compensate an employee receiving reasonable break time under paragraph (1) for any work time spent for such purposes. It is imperative that employees, supervisors, and managers follow this policy.

REQUEST PROCEDURE

Upon request by the employee, the Employee Wellness Coordinator, department manager or supervisor will provide the following information:

1. An explanation of the policy for nursing employees who wish to express breast milk.
2. Particular times for taking breaks. This will be determined based on the needs of the nursing employee.
3. The location of the private space that will be made available for the employee wishing to express breast milk during the work day.

REASONABLE BREAK TIME

Employees will be required to use their normal break or meal time for this purpose. Please note the frequency of breaks as well as the duration of each break will likely vary. Duration will depend on 1) time to get to and from the space provided, 2) time to set up equipment, 3) pump efficiency, 4) clean-up time and 5) time to store the milk. For time spent for this purpose the employee will be required to use accrued leave for all time spent in excess of the normal break or meal time.

PRIVATE SPACE

The Employee Wellness Coordinator will work with the employee's supervisor or manager to arrange a space, other than a bathroom, that is "shielded from view" and "free from intrusion" from coworkers and the public. This space may include an individual's office, or another office not in use. When it is not practical to provide a room such as an office, the requirement can be met by creating a space with partitions or curtains. All windows in the designated room must be covered to ensure the space is "shielded from view." With any space provided for expressing milk, the supervisor or manager must ensure the employee's privacy through means such as signs that designate when the space is in use, or a lock on the door.

In order to be a functional space that may be used by a nursing employee to express breast milk, at a minimum, the space must contain a place for the nursing employee to sit, and a flat surface, other than the floor, on which to place the pump. Ideally, the space will have access to electricity, so that a nursing employee can plug in an electric pump rather than use a pump with battery power.

6/10/11; R01/01/2019

OUTSIDE EMPLOYMENT POLICY

POLICY: A City employee is permitted to engage in outside employment or business activities provided that such outside employment or business activity does not present a conflict of interest with the employee's city job and/or does not hinder the objective and impartial performance of his/her city duties, bring discredit on the City, or impair the efficiency of the employee's municipal work. In addition, the use of City supplies or equipment for the purpose of outside employment or business activity is prohibited.

LIMITATIONS: Outside employment or business activity may not be permitted if it would constitute a conflict of interest, violate the City's Code of Ethics, violate the principles of professional conduct for the respective employee or would tend to bring discredit to the City department or any of its members.

Any injury or sickness contracted by reason of outside employment or business activity is not the responsibility of the City of La Crosse, and the use of City provided sick leave for such purpose is prohibited. Where an accident or disease causing injury arises out of any employee's outside employment or business activity, liability exists against the outside employer through applicable provisions of the Worker's Compensation statutes.

REQUEST FOR APPROVAL OF OUTSIDE EMPLOYMENT: An employee who is unsure whether such outside employment violates this policy is encouraged to complete the "Request For Approval Of Outside Employment" form.

PENALTIES AND CONSEQUENCES OF NON-COMPLIANCE: Any employee, supervisor, and/or manager employed by the City of La Crosse who engages in acts in violation of this policy is subject to disciplinary action up to and including discharge.

Effective 4/11/05

PRIVACY IN THE LOCKER ROOM POLICY

PURPOSE:
The purpose of this policy is to communicate Wisconsin law relating to individual's right to privacy while in an area operated as a locker room facility. The further purpose of this policy is to fulfill the statutory requirement that any person that owns or operates a locker room in the State of Wisconsin adopt and implement a written policy that conforms with the provisions of Wis. Stats. 175.22.

POLICY:
All persons who utilize a locker room may reasonably expect a high level of privacy from being observed or having their image captured by a recording or surveillance device without his/her knowledge and consent. Expressly prohibited in the locker room are:

a. Use of a recording or surveillance device, which includes a cellular phone, to capture, record, or transfer an image of a nude or partially nude person in the locker room.
b. Capturing a representation of a person depicting that person nude or partially nude without that person's knowledge and consent.
c. Capture, record, transfer, display, reproduce or distribute, a representation of a nude or partially nude person depicted without the person's knowledge and consent.
d. Unauthorized interviewing of persons within the locker room.

Anyone who is aware of the use of a recording or surveillance device, which may be in violation of this policy, should immediately report the use to the Director of Human Resources or their designee.

VIOLATIONS:
Any employee who intentionally violates this policy may be subject to discipline, up to and including discharge. Additionally, a violation may result in criminal and/or civil penalties, including without limitation, those under section 942.08, 942.09 and 995.50, Wis. Stats.

11/11/08; R 01/01/2018

REPORTING RESPONSIBILITY IN EMPLOYMENT POLICY

The City of La Crosse wants to ensure its personnel practices related to employee hiring, promotion and transfer do not create the potential of a conflict of interest or favoritism. These practices must be consistently conducted in a manner to ensure open competition, provide equal opportunity and prohibit discrimination consistent with all laws and applicable collective bargaining provisions.

It is the policy of the City of La Crosse that close relatives, partners, those in a dating relationship or members of the same household are not permitted to be in positions that have a reporting responsibility to each other. Close relatives are defined for this policy as spouse, domestic partner, parents (in-laws), grandparents, children (in-laws), uncle, aunt, nephew, niece, siblings (in-law), step relatives, cousins and domestic partner relatives. A reporting responsibility is defined as working directly for or supervising someone who can initiate or participate in decisions involving a direct or perceived benefit to a person. Such decisions could include hiring, retention, transfers, promotions, wages, schedules, assignments, discipline, performance assessment and/or leave requests.

If employees begin a dating relationship or become relatives, partners or members of the same household where one party is now in a supervisory position over the other, both employees are required to inform their Department head and Human Resources of the relationship. The Department head and Human Resources will confer as to the best method to resolve the potential conflict.

The City reserves the right to take appropriate action to maintain fairness in its personnel policies and practices when there is the potential for a conflict of interest because of the relationship between employees.

The following actions are prohibited:

The Mayor and Common Council members are prohibited from applying for city employment while holding elected office and must resign their elected position before being eligible to apply for employment with the City.

All City employees and elected officials are prohibited from seeking any unfair advantage for any applicant for an employment position with the City or attempting to unduly influence any person in the selection process for a City position. Anyone with information of any such attempts to seek an unfair advantage or attempts to unduly influence any person in the selection process for City employment positions, shall immediately report the same to the Human Resources Department.

Any applicant for a City employment position who canvasses or contacts any member of the Common Council, an appointing authority, or any person involved in the screening or examination of applicants outside scheduled procedures, in order to obtain preferential consideration in connection with any appointment to any City employment position, shall be disqualified from appointment. This provision shall apply to all applicants whether or not currently employed by the City.

Duties and Responsibilities of City Employees

Any City employee who has knowledge about a violation of any provisions of this policy shall report such violation to the Human Resources Department. The Human Resources Department shall investigate alleged violations of this policy and appropriate action will be taken.

It shall be the responsibility of each City Department Head to enforce this employment policy in their respective departments and seek the advice of the Human Resources Department on this topic.

It is the responsibility of the Human Resources Department to advise City Department Heads on how best to enforce this policy and to facilitate the resolution of prohibited employment practices in the least disruptive manner possible.

A violation of this policy may lead to disciplinary action up to and including termination of employment.

SEXUAL HARASSMENT POLICY

Harassment on the basis of sex, or gender identity or expression is a violation of Title VII (Federal Law). It is also a violation of Wisconsin Statutes 111.36 (b). Sexual Harassment, either verbal or physical, is an unlawful employment practice and will not be tolerated by the City of La Crosse.

Definition

Sexual Harassment is defined as:

1. "Unwelcome sexual advances, unwelcome physical contact of a sexual nature or unwelcome verbal or physical conduct of a sexual nature including but not limited to deliberate, repeated making of unsolicited gestures or comments, or the deliberate, repeated display of offensive sexual graphic material which is not necessary for business purposes."

2. "Engaging in sexual harassment; or implicitly or explicitly making or permitting acquiescence in or submission to sexual harassment the term or condition of employment or the basis of any part for any employment decision affecting an employee; or permitting sexual harassment to substantially interfere with an employee's work performance or to create an intimidating, hostile work environment."

Procedure

1. Any and all concerns which any employee of the City may have, related to this issue, should be brought immediately to the attention of the Director of Human Resources or their designee or a supervisor with whom they are comfortable. The rights of an employee to raise such issues are protected under Title VII and Wisconsin Statutes.

Penalty

Any and all employees of this City, who engage in such prohibited behavior will subject themselves to disciplinary action up to and including discharge.

RETALIATION PROHIBITED: The City of La Crosse takes all complaints seriously and, as such, will take prompt action to investigate the above described complaint in a fair, impartial manner. Confidentiality will be maintained to the extent possible. Any incidence of retaliation due to the filing of this complaint will not be tolerated and should be reported to the Human Resources Department immediately.

5/8/90; R 4/18/01; 11/4/16; R 01/01/2018

SOCIAL MEDIA POLICY

The City of La Crosse respects the right of employees to use social media and does not discourage employees from self-publishing, self-expression and public conversation and does not discriminate against employees who use these mediums for personal interests and affiliations or other lawful purposes. Employees are expected to follow the guidelines and policies set forth to provide a clear line between you as the individual and you as the employee of the City of La Crosse.

1. Employees are encouraged to be careful in their use of social media to avoid the appearance of using that media in an official capacity.

2. If one should identify themselves as a City employee during their use of social media on a personal level, the profile and any related content should be consistent with how you wish to present yourself to your colleagues, supervisors and the public.

3. Employees shall make it clear that he or she is speaking for themselves and not on behalf of the City of La Crosse. If any information posted is related in any way to the work an employee performs or any topics related to the City, a disclaimer must be used such as, "[t]he opinions expressed on this site are my own and do not reflect the opinions of the City of La Crosse."

4. Employees shall refer to the guidelines set forth in the Information Technology Resource Policy when utilizing City computers or other City supplied devices. Do not use City of La Crosse email addresses to register on social networks, profiles, blogs or other online tools utilized for personal use.

5. Employees shall refrain from using social media during work hours or on equipment the City provides, unless it is work-related as authorized by your supervisor or manager and consistent with City policy. See City Government Social Media Policy for additional information.

6. Employees are personally responsible for their commentary on all social media sites and can be held personally liable for commentary that is considered defamatory, obscene, proprietary or libelous by any party.

7. Employees can be disciplined for using social media in a manner that violates City policies or during work hours. Information posted on social media sites can be used by the City as evidence in disciplinary actions.

8. When using social media, employees are encouraged to be fair and respectful to fellow employees, supervisors, customers, residents, suppliers or people who work on behalf of the City of La Crosse. If employees decide to post complaints or criticisms, they shall avoid using statements, photographs, video or audio that could be reasonably viewed as malicious, obscene, threatening or intimidating, or that disparages customers, members of the public, other employees or suppliers or that may constitute harassment or bullying.

Examples of such conduct might include offensive posts meant to intentionally harm someone's reputation or the City's reputation. Further examples are posts that could contribute to a hostile work environment on the basis of race, sex, disability, religion or any other status protected by law or City policy. Malicious gossip and the activities mentioned here will not be tolerated.

9. Employees cannot post the name, trademark or logo of the City, company-privileged information, including copyrighted information or city-issued documents, or photographs of other employees, residents, vendors or suppliers taken in their capacity as City employees.

10. Employees should not link from a City internal or external web site to a personal social media site without the permission of their Department director and the assigned administrator.

11. Employees are advised that social media platforms may be subject to legal discovery including subpoenas in legal proceedings.

TEMPORARY ASSIGNMENT OF ALTERNATIVE PRODUCTIVE WORK POLICY

The City of La Crosse desires that employees, unable to perform the essential functions of their regular job because of an injury or illness that temporarily prevents their return to regular assigned duty, where possible, be temporarily assigned alternative productive work subject to necessary medical certification and available work. The City of La Crosse desires to obtain the benefits of a temporary assignment of alternative productive work which maintains a level of activity which is productive and serves a therapeutic purpose which quickens the employee's return to regular assignment.

Procedure

1. An employee injured or suffering an illness, at or away from work, will provide to their supervisor as soon as possible, written certification of any restrictions imposed upon them by a medical provider. This will include the projected duration of the restriction(s).
   Fire Department: In addition to the above, written certification shall include kind or nature of the illness or injury.
2. The department supervisor/manager will evaluate the restriction(s) and determine if temporary assignment of alternative productive work is available, and if the employee is qualified to perform the available work. Department management may recommend assignment of the restricted employee to such available work for the hours that such work is available.
3. It is expressly understood that:
   a. No obligation exists for the City to provide, convert a regular job, or create a temporary assignment of alternative productive work.
   b. Temporary assignment of alternative productive work does not create a regular employment opportunity, and is in-fact made as a temporary assignment only which will terminate when the employee's restrictions allow him/her to return to their essential duties of their regular job, however generally will not exceed sixty (60) calendar days in duration. The specific end date of assignment will be communicated clearly in writing to the employee upon temporary assignment of alternative productive work. Vacation and paid Holidays may be excluded in calculating the sixty (60) calendar days period.
      Fire Department: Temporary assignment will not exceed sixty (60) light duty work days in duration. Vacation and paid Holidays shall be excluded in calculating the sixty (60) light duty work days period.
   c. At the employee's choice, unused accrued vacation may be used in lieu of a temporary assignment to alternative productive work.
      Fire Department: In addition to the above, this policy shall have no impact on the Fire Department General Order 28 – Alternative Productive Work.
   d. The amount of temporary assignment of alternative productive work available in any department will be determined by the department supervisor/manager based on the number of employees assigned such duty status.
      Fire Department: In addition to the above, (first come- first served, assuming the employee is qualified to perform the work).
   e. The employee may be assigned to perform those duties of the regular job that the employee may perform without restriction or limitation, in addition to those duties assigned temporarily because of restrictions due to injury or illness.
   f. An employee who meets the requirement to receive a workers' compensation entitlement and who is medically deemed as able to return to a temporary assignment of alternative productive work, may decline such temporary assignment if it is offered. As a result, the

employee may lose workers' compensation payments, but is entitled to remain on FMLA leave until the FMLA leave entitlement is exhausted.

g. Temporary assignment of alternative productive work may be considered only when an employee is unable to perform the essential functions of their regular job.

h. An employee's regular work schedule may change during the temporary assignment of alternative productive work to accommodate the department's needs.
   Fire: An employee shall be assigned alternative work on an eight (8) hour day, forty (40) hours per week schedule. If the ill or injured employee demonstrates to the Chief that an eight (8) hour day, forty (40) hours per schedule would cause hardship, the Fire Chief shall provide a short period of time for the employee to make arrangements to accommodate such schedule.

4. The Human Resources representative will be contacted immediately by a supervisor prior to their making a recommendation of assignment of a restricted employee to temporary assignment of alternative productive work status. The recommendation will be reviewed and approved by the Human Resources representative for compliance with FMLA, WFMLA, ADA, WC, WFEA and this policy.

5. All temporary assignment of alternative productive work will be reviewed each thirty (30) calendar day period by the respective department supervisor/manager and the Human Resources representative.

6. Alternative work assignments shall be within the same bargaining unit (i.e. ATU, IAFF, LPPNSA, LPPSA).

7. Fire Department: While assigned to temporary alternative work, the employee shall not be precluded from using sick leave if they become injured or ill due to a new circumstance, for which they are certified by their health care practitioner as unable to return to work.

8. Fire Department: An employee who is unable to perform the essential duties of their regular job, due to injury or illness that temporarily prevents their return to regular assigned duty, may request to be temporarily assigned to alternative productive work subject to necessary medical certification. If available, and qualified to perform the alternative productive work, assignment shall not be denied.

R 12/2/13
(combined policies of Fire 2/14/13, and General 10/30/08)

TUITION REIMBURSEMENT POLICY

The City of La Crosse recognizes the value to the City and its employees of additional education related to their occupation. Therefore, the City will provide tuition reimbursement to eligible employees who voluntarily participate in approved college courses in accordance with the following guidelines:

Eligibility:

a. Eligible employees are those non-represented and SEIU employees covered within the Employee Handbook.
b. Employees must be regular full time or regular part-time employees who are considered to be in good status, and are not on a Leave of Absence status without pay.
c. Employee must have completed one (1) year of employment with the City of La Crosse prior to applying for tuition reimbursement, and
d. The employee will be obligated to continue employment for one (1) year with the City of La Crosse beginning at the completion of the last reimbursed course.
e. An employee terminating employment before the completion of the service obligation (as noted in "d" above) shall be required to reimburse the City, on a prorated basis, for any tuition paid by the City of La Crosse within the last 12 months of employment with the City. Reimbursement may be obtained by personal payment from the employee, deducting the amount from the last paycheck or deducting an equivalent amount from accrued leave balances. This provision may be waived if determined to be appropriate by the Director of Finance, Deputy Director of Human Resources or their designee.

Covered Coursework:

a. Tuition reimbursement is designed for undergraduate and graduate college level coursework offered through an accredited college, university or technical school. Doctorate level work is not reimbursable. The City reserves the right to approve the standards of approved coursework and learning institutions.
b. Coursework must have a clear and direct relationship to the employee's current work or profession. This policy is not intended to fund education that will qualify an employee for a new trade, business or career.
c. All requests for tuition reimbursement must be submitted to the Department Head a minimum of 30 days prior to beginning of class. Requests received after this timeframe will not be eligible for tuition reimbursement. Application forms are available in Human Resources.
d. All courses must be approved by the Department Head and the Director of Human Resources or their designee.
e. Must have attached course credits, i.e. "audited" classes will not be approved for reimbursement.
f. Seminars, workshops, professional conferences and coursework taken through a Continuing Education Program do not qualify for tuition reimbursement under this policy.

Limits:

a. A maximum of $15,000 is available for tuition reimbursement per calendar year, with a maximum of $750 per employee per calendar year, subject to the $15,000 cap. Should the full $15,000 not be requested, the reimbursement per employee may increase, subject to approval by the Director of Human Resources or their designee.
b. An employee shall have a tuition reimbursement cap of twelve (12) credits per calendar year.
c. If there are more than 20 requests for $750, or other requests totaling more than $15,000 are made, a pro-rata reimbursement would be approved.
d. The Director of Human Resources or their designee has the discretionary right to deny or pro-rate reimbursements.

Covered Costs:

a. The City will reimburse tuition costs and the cost of textbooks up to $50.00 per class in accordance with the limitations described above. Other associated costs will not be covered (i.e. parking, mileage).

b. Tuition will be reimbursed to qualified employees based on their final grade:

A = 100%
B = 100%
C or Pass = 80%
D, F, Fail, Incomplete, Withdrawn, repeated courses, audited courses etc, will not be reimbursed.

Plus (+) or minus (-) grades will be paid based on the letter grade assigned with no consideration for other indicators.

Reimbursement:

a. Upon completion of the course, eligible employees must submit a copy of their grades AND a receipt from the educational institution showing payment for such courses. Textbook receipts should also be turned in at this time. These must be submitted to Human Resources within 30 days from the date the grades were sent to the employee to be eligible for reimbursement.
b. Reimbursement for approved expenses will occur following receipt proof of grades and tuition/textbook payments. Reimbursement amounts will be based on the number of participating employees and/or set maximum per employee.
c. The City will adhere to IRS regulations regarding Educational Assistance programs.
d. Funding available for part-time employees shall be on a pro-rated basis.
e. Funding available will be offset by any stipends, grants or scholarships received by the employee.

Responsibility:

a. Work schedules **are not** to be reduced for participating employees. The employee must take the course during non-scheduled work hours or during periods of approved leave.
b. All course homework must be completed during **non-scheduled** work hours, unless approved in advance by the Department Head and the Director of Finance, Deputy Director of Human Resources or their designee.
c. Use of City equipment for the purpose of the course is not permitted, unless approved in advance by the Department Head and the Director of Human Resources or their designee.
d. Employee must complete a "Tuition Reimbursement Application Form" and submit it to their Department Head a minimum of 30 days prior to the commencement (beginning) of the class.
e. Employee must submit grades and receipt from the educational institution to Human Resources within the established timeframes.

While the City is interested in aiding employees to improve or extend their job skills through outside education, participation in the program does not imply any guarantee of advancement in position or wages.

R 01/01/2018

VOLUNTARY LEAVE DONATION PROGRAM
FOR SPOUSE AND DEPENDENTS OF CITY EMPLYEES

GENERAL
The purpose of this policy is to provide an employee who has exhausted all leave time during a qualified Family and Medical Leave crisis with a means of financial assistance through the contributions of vacation and/or compensatory time from fellow employees.

PROGRAM BENEFIT
The Voluntary Leave Donation Program allows City Employee's to voluntarily donate earned vacation or compensatory leave to a Shared Leave Bank for use by another City Employee with a qualifying Family Medical Leave crisis of a family member. All regular part-time and regular full-time (non-Library) employees are eligible under this program.

DEFINITIONS

- *"Family Medical Leave Crisis"* is a medical condition of an employee's family member (defined below) that meets the definition of "Serious Health Condition" under the Federal Family and Medical Leave Act (FMLA), and the duration of the serious medical condition is expected to be more than 30 continuous calendar days, per the Certification of Health Care Provider form as contained in the completed FMLA materials. It is the employee's responsibility to ensure that the Certification of Health Care Provider form is thoroughly completed by the Healthcare Practitioner and provided to Human Resources.

- *"Family Member"* includes:
    - Employee's legal spouse
    - Employee's dependent children, including adopted, step, and foster children

RECIPIENT ELIGIBILITY
To be eligible as a Recipient in this program, it must be determined that:

- The Recipient has applied for and received approval for leave under the Family and Medical Leave Policy due to the serious health condition of their family member. (Donated leave may not be used for family leave following the birth of a child, placement of a child for adoption or foster care, or bonding of a child.)
- The Recipient must have exhausted all paid sick leave, vacation or other paid leave, or is expected to soon exhaust such leave in order to request shared leave under this program.
- The period in which an employee may receive donated leave is the period of Family and Medical qualified leave which would otherwise be unpaid because all leave balances have been reduced to zero.
- The potential Recipient has signed a Request for Assistance, authorizing minimum disclosure of the need for assistance under this program.
- The Recipient must specify the number of days needed, not to exceed the expected length of the leave due to the medical condition, up to 90 consecutive calendar days.

DONOR ELIGIBILITY
To be eligible as a Donor in this program, it must be determined that:

- The Donor has earned vacation or compensatory time in their bank
- The Donor is in active pay status
- The Donor has signed a Voluntary Leave Transfer form relinquishing all rights and claims to their donated leave. Participation is done on a strictly voluntary basis.

SHARED LEAVE BANK
Vacation or Compensatory time donated will be placed in a separate Shared Leave Bank. Elections will be made on an annual basis. Total annual employee contributions to the shared leave bank shall not exceed 90 days. Should the amount of shared leave in the bank be insufficient for approved requests, additional elections will be solicited. There will be no carryover of unused shared leave left in the shared leave bank on December 31st.

When a Voluntary Leave Transfer form is signed, Vacation or Compensatory time may only be donated in increments of full days (defined by the hours of work of the Donor) per donation.

CONFIDENTIALITY
Requests for Assistance will remain confidential. Human Resources will notify applicable payroll staff of the recipient and the number of shared leave days to be deposited into their individual vacation bank. Information regarding the nature of the serious medical condition and the afflicted family member will remain confidential in the employee's medical file. In addition, the names of the donors shall remain anonymous and confidential.

NOT ALLOWED
- No donation is allowed for purposes of a recipient's vacation.
- Once transferred, the donation is final. A Donor may not withdraw a voluntary transfer once it has been signed.

ACCRUALS AND OTHER BENEFITS
During the use of donation leave time, all other benefits would continue to accrue to the employee (i.e. sick leave, vacation, seniority, etc.).

OTHER PROVISIONS AND ACKNOWLEDGEMENTS
A recipient may receive a maximum donated leave of up to 90 consecutive calendar days under this program. A provision may be made to allow employees the opportunity to borrow from their next year's vacation accrual for absences beyond this time.

The amount of donated leave granted to an employee may not extend beyond December 31st of the respective year. On January 1st of the next year the employee is eligible for a new 12 weeks of FMLA, thus the employee would be required to use all accrued leave prior to requesting/receiving shared leave for a Family and Medical Leave crisis.

All donations of eligible leave shall be voluntary. No employee may intimidate, threaten, or coerce any other employee with respect to donating or receiving leave under this policy. Individual leave records that apply to Shared Leave are confidential and no individual employee shall receive renumeration of any kind for leave donated.

All determinations regarding qualifications to receive donated leave under this program are final and not subject to the grievance procedure.

EFFECTIVE DATE
This program shall remain in effect until notified otherwise.

R 01/07

WORK INJURY REPORTING POLICY

A. PURPOSE & SCOPE

The purpose of this policy is to outline responsibilities and procedures for supervisors and employees when involved in accidents or injuries on work time and to meet Federal Occupational Safety and Health Administration and State Department of Workforce Development recording requirements.

The City of La Crosse is committed to working with its employees to provide a safe and productive work environment. In order to prevent accidents, timely and accurate accident reporting and investigation is essential. This policy provides guidelines for proper reporting and investigation. It is imperative that injured employees, supervisors, and department heads follow this policy.

B. PROCEDURES

All City employees shall adhere to the following procedures when an accident or injury occurs:

1. The Department Head and supervisors in each department are expected to be aware of all work-related injuries and to be sure that employees know it is their responsibility to report accidents and injuries at once. It is also the responsibility of each department head to be sure that supervisors assist the Safety Coordinator to investigate injury claims.

2. Workers compensation forms to be completed for each workplace injury or illness are available from the Supervisor, Human Resources or Sharepoint (under Human Resources).

Employees First Report of Injury – to be completed by the employee and submitted to their supervisor **within 24 hours** of the accident or injury.

Employers First Report of Injury – to be completed by the supervisor of the injured employee and submitted to Human Resources.

Employers Work Injury Report – to be completed by the Safety Coordinator.

3. If the injured employee seeks medical attention they are to provide the Physician's Status Report (provided to the employee by their health care practitioner) to their supervisor following each doctor's visit. The report shall provide the medical diagnosis, treatment, restrictions, next appointment date/time, and work-related recommendations for the employee's return to work. The employee must have a physician's authorization for time lost due to a work-related injury. Supervisors will forward copies of all medical slips to Human Resources.

a. If immediate medical attention is not needed, the employee can still obtain treatment from his/her choice of medical providers at a later date. The employee shall take the City's workers compensation appointment form to the medical provider. These forms shall be returned to Human Resources.

b. Whenever medical attention for a work-related injury is sought, the employee shall submit a return-to-work slip to their direct supervisor **prior** to returning to work.

c. The City has the right to verify an injury/illness through an independent medical exam.

C. RESPONSIBILITIES

1. The Human Resources Department is responsible for:

a. Monitoring and reviewing all investigations to ensure accuracy and prompt response.

b. Providing technical assistance to supervisors when needed.

c. Following up to see that recommendations made as a result of an investigation are evaluated and that an appropriate course of action is taken, including any disciplinary measures.
d. Reporting/acting as liaison with workers compensation third party administrator.
e. Serving as City contact with employee's health care practitioner in regards to the workers compensation injury.

2. Each Department Head (or designee) is responsible for:

a. Evaluating recommendations that come out of each accident investigation and taking appropriate actions to prevent future accidents.
b. Following up to see that corrective action is implemented.
c. Fulfilling the duties of the department supervisors (as listed below) when a supervisor is not available.

3. Supervisors/Managers of non-sworn employees are responsible for:

a. Promptly reporting all accidents to Human Resources. Contacting Human Resources as soon as possible (during business hours) if a serious accident occurs, or if the employee seeks medical treatment or misses work due to an injury sustained on the job.
b. In the absence of the employee, the supervisor will complete the *Employee's First Report of Injury* to the best of their knowledge. Such form will remain unsigned. Upon return of the employee, the supervisor shall review the *Employee's First Report of Injury* with the injured employee and obtain the injured employee's signature on the Report.
c. Working with Human Resources, the employee and the work restrictions detailed on the Physician Status Report to return the employee to work on restricted or full duty, if applicable.
d. Obtaining the employee's completed Return-to-Work Slip prior to the employee returning to work and forwarding this form to Human Resources upon receipt from the employee or employee's health care provider.
e. Forward all Physician's Status Reports and Workers Compensation forms to Human Resources as soon as possible.

4. Supervisors/Managers of Sworn Officers are responsible for:

a. Promptly reporting all accidents to Human Resources. Contacting Human Resources as soon as possible (during business hours) if a serious accident occurs, or if the employee seeks medical treatment or misses work due to an injury sustained on the job.
b. In the absence of the employee, the supervisor will complete the *Employee's First Report of Injury* to the best of their knowledge. Such form will remain unsigned. Upon return of the employee, the supervisor shall review the *Employee's First Report of Injury* with the injured employee and obtain the injured employee's signature on the Report.
c. Working with Human Resources, the employee and the work restrictions detailed on the Physician Status Report to return the employee to work on restricted or full duty, if applicable.
d. Obtaining the employee's completed Return-to-Work Slip prior to the employee returning to work and forwarding this form to Human Resources upon receipt from the employee or employee's health care provider.
e. Forward all Physician's Status Reports and Workers Compensation forms to Human Resources as soon as possible.

5. **Safety Coordinator is responsible for:**
    a. Ensuring that an investigation is completed for every work injury or accident that involves City employee(s) and reviewing all investigations to ensure accurate and prompt response.
    b. Ensuring all departmental accident investigation forms are completed and submitted to Human Resources within 24 hours of the accident or injury, and ensuring that supplemental reports are also submitted timely to Human Resources.
    c. With the exception of work injuries involving sworn protective officers Safety Coordinator shall promptly respond to the scene of the injury/accident and conduct a scene investigation, take photos, collect possible evidence, interview the injured employee and interview witnesses. Interview the injured employee and any witnesses separately from each other.
    d. Complete and submit the Employer's Work Injury Report (facts and findings report) within 24 hours of the accident or injury to Human Resources, and any and all subsequent reports as may be necessary. This includes any recommended corrective action.

6. **Employees are responsible for:**
    a. Reporting all accidents to his/her supervisor immediately.
    b. Cooperating fully with a City investigation of any accident, even if the employee was not the person injured in the accident.
    c. Working with his/her supervisor to complete, sign and submit the *Employee's First Report of Injury* to Human Resources within 24 hours of the accident or injury, and any and all subsequent reports as may be necessary.
    d. Ensuring that their health care practitioner provides the physician's status report and City-supplied forms concerning medical diagnosis and treatment and any work-related recommendations for a return to work.
    e. Providing their supervisor with Physician Status Reports following each appointment.
    f. Providing a completed Return-to-Work slip to his/her immediate supervisor prior to returning to work if he/she sought medical treatment or missed work due to an accident or injury sustained on the job.

Failure to follow this policy, or providing false or misleading statements, or filing false claims may result may result in disciplinary action, up to and including discharge.

4/11

Workers Compensation Appointment – Reimbursement Policy

This policy covers all exempt and nonexempt employees. Employees whose work schedule is fully encompassed within the hours of 7:00 a.m. – 5:00 p.m. are eligible for the city reimbursement stated below, as the City recognizes the scheduling dilemma for employees whose work schedule parallels the health care professions general business hours. Employees whose work schedule falls outside the 7:00 a.m. – 5:00 p.m. parameters (to include regular part-time and platoon shift employees) who would not have the scheduling difficulties, thus are not eligible for the city reimbursement.

1. Employees are encouraged to schedule any workers compensation appointments either during the first one and one-half hour or the last one and one-half hour of their scheduled work day. In recognition of doing so, and creating an efficient workforce, the City will reimburse the employee at their scheduled rate of pay for the lost time to attend the appointment, up to one and one-half hour **(calculated from the beginning or end of their scheduled shift – not from their appointment)**. The employee is expected to return to work immediately following the appointment if the appointment ends prior to the end of their work shift, unless the time required to travel back to work would result in returning after the work shift has ended. If the appointment is in the morning, the employee must report to work prior to going to the appointment, unless it is not possible to report to work and be at the appointment on time.
2. *This reimbursement is not a requirement of workers compensation statutes, but a City reimbursement program.*
3. The City will not provide reimbursement for time taken in excess of the one and one-half hour from the start of work time or the end of work time. In these instances the employee would be required to use accrued forms of leave (i.e. vacation, sick leave, personal business) for the excess time which does not fall within the one and one-half hour, calculated from their scheduled start or end time.
4. Reimbursement would only cover the time at the appointment which is during their normal work hours (i.e. 2:00 p.m. scheduled appointment lasts until 4:00 p.m. Employee's work schedule is 7:00 a.m. – 3:00 p.m. Employee would receive reimbursement from 1:30 p.m. to 3:00 p.m.).
5. Appointments scheduled outside of the city reimbursement hours described above will not be reimbursed by the City. The employee would be required to use accrued forms of leave (i.e. vacation, sick leave, personal business) for such visits.
6. The employee will be required to have their treating healthcare provider complete a Workers Compensation Time Report, which would provide the time arrived for the appointment, time of the scheduled appointment, time left and name/address of facility/preparer. The employee is required to provide this to their supervisor upon returning to work on their next regular scheduled day for which the employee is present in order to receive the city reimbursement. If the Workers Compensation Time Report is not provided to the supervisor on their next regular scheduled work day for which they are present they will <u>not</u> receive city reimbursement, therefore he/she will be required to use accrued leave (i.e. sick leave, comp time, vacation or personal business). The employee would also be required to provide their

supervisor with a status report from their treating healthcare provider following each appointment.

7. In some cases special treatment is required (MRI, CAT Scan). In such cases the City would provide reimbursement for the appointment occurring during work time, assuming the employee provides the supervisor with the required completed Workers Compensation Time Report.
8. With the exception of accrued leave, this policy is the only form of payment an employee may receive for scheduled workers compensation appointments while working.
9. An employee *may* be eligible for reimbursement through workers compensation for lost time due to a workers compensation injury if they are disabled, thus unable to work (known as TPD – temporary partial disability; or TTD – temporary total disability). Workers compensation statutes / eligibility criteria will apply in these cases.
10. Any special treatment or exceptions for payment through the City's Workers Compensation – Reimbursement policy would be handled through Human Resources.
11. Nothing contained herein is intended to alter or reduce any individual employee's right to benefits under the Workers Compensation Act or Family and Medical Leave Act.

02/18/08; R 12/2/13

WORKPLACE ENVIRONMENT POLICY

Policy:

It is the official policy of the City of La Crosse that actions that result in a hostile work environment for City employees are prohibited. It is understood that cause based disciplinary actions do not constitute a hostile work environment as defined under this policy.

The City of La Crosse intends to provide a work environment that is respectful, healthful, comfortable and free from intimidation, hostility, or other offenses, which might interfere with work performance or the work environment. It is the policy of the City of La Crosse that a hostile work environment is counterproductive to the efficient delivery of municipal services and is a violation of work rules applicable to all City employees. Harassment of any sort, whether verbal, physical, and/or visual, will not be tolerated.

Definitions:

Hostile Work Environment refers to work place conditions or harassment by coworkers, managers, supervisors, or outside vendors consisting of conditions in which an employee cannot perform their job without feeling harassed or threatened.

1. Hostile Work Environment is work place conditions or harassment consisting of an environment in which an employee cannot perform their job without feeling harassed or threatened.

2. A hostile work environment may consist of but is not limited to:
   - Verbal abuse and/or derogatory comments against an employee for whatever reason.
   - Displaying derogatory or offensive materials.
   - Physical contact, intimidation or violence against an employee.
   - Challenges over an employee's authority.
   - Deliberate destruction of property and/or sabotage.
   - Jokes, horseplay, pranks, passive aggressive acts or other such acts.
   - Disparate treatment of employees, without a reasonable basis.
   - Imposition or enforcement of unreasonable work rules for the sole purpose of exerting power over others.

Procedure To Report and Resolve Complaints:

1. All City employees are responsible for keeping the work place environment free of harassment. Any employee who becomes aware of an incident of harassment, whether by witnessing the incident or becoming aware of it, must report it immediately to the Human Resources office or a supervisor with whom they are comfortable.

2. When a department head and/or the Human Resources Department becomes aware that harassment may exist they are obligated to take prompt and appropriate action, whether or not the victim supports this action. All reports of harassment will be investigated by the respective department head and/or the Director of Human Resources or their designee with due regard for the privacy of all involved parties.

Penalties and Consequences of Hostile Actions:

Any and all employees, supervisors and/or managers of the City of La Crosse who engage in acts in violation of this policy will subject themselves to disciplinary action up to and including discharge.

RETALIATION PROHIBITED: The City of La Crosse takes all complaints seriously and, as such, will take prompt action to investigate any complaint in a fair, impartial manner. Confidentiality will be maintained to the extent possible. Any incidence of retaliation due to the filing of this complaint will not be tolerated and should be reported to the Human Resources Department immediately.

7/6/98; R 4/18/01; 11/4/16; R 01/01/2018

POLICY ON WORKPLACE VIOLENCE

PURPOSE

It is the intent of the City of La Crosse to provide a safe and secure working environment for our employees and customers. Therefore, the City of La Crosse will not tolerate any harassment, intimidation, violent act, or threat of violence against any employee, visitor or client. This includes any direct, conditional or implied threat, intentional act, or other conduct, which reasonably arouses fear, hostility, intimidation, or the apprehension of harm.

GENERAL POLICY

The City of La Crosse has a zero tolerance policy towards workplace violence, or the threat of violence, by any of its employees, customers, the general public and/or anyone who conducts business with the City. Abusive language, verbal threats and/or gesturing, and/or physical fighting by any employee is prohibited.

No weapon shall be brought into the workplace or carried in City vehicles, whether or not an individual has a permit to carry such weapon. Banned weapons includes firearms and other objects intended to cause harm to oneself or others. Use of any object, as an actual or intended weapon, shall be considered a violation of this policy. The one exception is that law enforcement officers may possess department issued weapons as authorized by the Chief of Police and or Police Department.

This policy applies to all City of La Crosse full-time, part-time and casual/seasonal employees.

DEFINITION

Workplace violence includes, but is not limited to, verbal abuse or harassment, threats, physical attack or property damage. A threat is the expression of an intent to cause physical or mental harm regardless of whether the person communicating the threat has the present ability to carry out the threat and regardless of whether the threat is contingent, conditional, or future. Physical attack is an intentional hostile physical contact with another person such as hitting, fighting, pushing, shoving, or throwing objects. Property damage is intentional damage to property that includes property owned by the City, employees, customers, vendors and citizens.

EMPLOYEE RESPONSIBILITY

City of La Crosse employees have a responsibility for fostering and maintaining a safe and secure workplace. All employees are expected to adhere to specific security and safety procedures as prescribed by their department. If workplace violence is perceived the employee is to remove self from the threat as soon as possible. All employees have a duty to report to their supervisor any threats they have witnessed or received which may have been committed by another employee or an external individual such as a customer, vendor, or citizen. This is regardless of the relationship between the individual who initiated the threat or threatening behavior and the person(s) who were threatened or were the focus of the threatening behavior. Even without an actual threat, employees should also report any behavior that they have witnessed which they regard as threatening or violent, when that behavior occurs on the job during working hours, on City owned property or at a location where an employee is conducting official City business.

The City of La Crosse will not tolerate any harassment, retaliatory, or other prohibited action, either directly or indirectly, against the individual who reported the incident of violent behavior. Action of this type must be reported to the supervisor immediately for investigation. Any employee found to have harassed or retaliated against an individual reporting workplace violence will be subject to discipline, up to and including discharge from employment with the City of La Crosse.

If the matter involves a supervisor, then the report of the workplace violence should be made to the Department Head, Director of Human Resources or their designee or other City of La Crosse supervisor.

If the matter is critical, for which a serious threat or injury occurs, employee should immediately obtain emergency police intervention or medical response if required.

EMPLOYER RESPONSIBILITY

The City of La Crosse will take steps to prevent and respond to all instances of violence and threats of violence, which occur on our premises or in the performance of official business outside of the premises.

Upon notification of workplace violence, the supervisor will assess the incident, and immediately contact the Department Head and Director of Human Resources or their designee. A thorough investigation will be conducted to determine the facts of the reported incident.

Any employee found to have violated this policy will be subject to discipline, up to and including discharge. Said employee may be referred to EAP, independent of any disciplinary action.

Any person who engages in an act of violence or alleged act of violence in a City of La Crosse facility may be removed from the facility, and may be banned from entering any City of La Crosse facility until an investigation is completed.

Any employee who is the victim of workplace violence will be offered the services of EAP to assist in coping with any effects of the incident. Employee should also complete an Employee Occupational Injury and Illness Report if the incident of workplace violence has resulted in injury. If the employee cannot complete the form the supervisor shall do so.

The City recognizes that false accusations of workplace violence can have severe adverse effects. The City expects all employees shall act honestly and responsibly in complying with and enforcing this policy.

ORDERS OF PROTECTION OR RESTRAINT

If an employee obtains court-ordered protection that extends to the workplace from any other individual, the employee is required to notify his/her supervisor immediately.

4/04; R 01/01/2018