LSU HEALTH CARE SERVICES DIVISION BATON ROUGE, LOUISIANA DISASTER PAY POLICIES AND PROCEDURES

POLICY NUMBER: 4548-24

CATEGORY: Human Resources

CONTENT: Disaster Pay Policies and Procedures

APPLICABILITY: This policy shall be applicable to employees of the

Health Care Services Division Administration (HCSDA) and Lallie Kemp Medical Center

(LKMC) for defined employees.

EFFECTIVE DATE: Issued: June 28, 2006

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INQUIRIES TO: Human Resources Administration

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Note: Approval signatures/titles are on the last page

LSU HEALTH CARE SERVICES DIVISION DISASTER PAY POLICY AND PROCEDURES

I. STATEMENT OF POLICY

It shall be the policy of the Health Care Services Division (HCSD) to establish payment to classified and certain categories of unclassified employees, as defined in this policy for hours worked during certain disasters, pandemics, official closures, and/or quarantines in accordance with the provisions of this policy and Civil Service Rules. Prior approval from the HCSD Chief Executive Officer (CEO) and/or Designee is required.

Unclassified employees paid on a monthly basis <u>may</u> be paid in accordance with the provisions of this policy only with <u>prior</u> approval from the HCSD CEO or Designee.

Note: Any reference herein to Health Care Services Division (HCSD) also applies and pertains to Lallie Kemp Medical Center (LKMC).

II. IMPLEMENTATION

This policy and subsequent revisions to the policy shall become effective upon approval and signature of the HCSD Chief Executive Officer (CEO) or Designee.

III. DEFINITIONS

For purposes of this policy, the following words or phrases shall have the following meaning:

- A. <u>Activation Team</u> A list of employees designated and certified by the Hospital Administrator as follows:
 - 1. Required to remain on-duty/on-site during official closure, partial closure, and/or quarantine.
 - 2. Required to provide treatment to designated patient groups as result of declared pandemic/disease outbreak. This may also include those employees required to provide continued operations of the Hospital due to safety and health concerns. Hospital is not officially closed.
 - 3. Required to accompany patients to a safer location during an evacuation.
 - 4. The list of employees shall include employee name, Department, and job title.

- B. <u>Disaster:</u> Civil disorders, floods, hurricanes, peril or danger from weather conditions, local emergencies, natural disasters, or disease outbreaks considered life threatening.
- C. <u>GOHSEP</u>: Governor's Office of Homeland Security & Emergency Preparedness (formerly known as Office of Emergency Preparedness OEP).

D. HCSD Employees:

- 1. Classified Employees FT/PT, Probational, Permanent, Temporary WAE Appointment, Job Appointment
- 2. Unclassified Employees Regular Bi-weekly, Students, Health Care Professionals (HCP), other bi-weekly 4.1(d) 1's and 4.1. (d)2's.
- 3. Unclassified Employees paid on a monthly basis <u>may</u> only be paid additional compensation if prior approval has been received from HCSD CEO and/or Designee.

E. <u>Official Closure:</u>

- 1. Lallie Kemp Medical Center shall be the point at which the Hospital's "Disaster Plan" is implemented and normal operations cease.
- 2. Administration Offices shall be the point at which the HCSD CEO and/or Designee declares the office officially closed.

Note: HCSD Administration employees domiciled at another location other than official Administrative Offices shall follow any closure directions being implemented in their parish/domicile.

- F. <u>Partial Closure/Quarantine:</u> Shall be at the point where a quarantine is imposed in only a specified area of Hospital due to treatment of highly infectious patient. Only authorized persons are allowed in the area.
- G. <u>Premium Pay/Hazard Pay</u>: Hourly rate authorized by Civil Service and administered at the discretion of the HCSD CEO and/or Designee. This pay may be used to perform hazardous duties, extra duties, and/or work in unusual situations or locations. Premium Pay/Hazard Pay is temporary in nature and NOT a part of base pay.

IV. PAYMENT

A. Employees <u>may be paid</u> time and one-half for <u>all</u> hours worked as follows (prior approval required):

- 1. Periods of time designated as "official closure" due to Civil disorders, floods, hurricanes, peril or danger from weather conditions, local emergencies, and/or natural disasters,
- 2. Periods of time designated as "partial closure/quarantine" due to treatment of highly infectious patients.
- 3. Periods of time designated as a result of declared pandemic/disease outbreak considered life threatening. Hospital is not "officially closed".
- 4. Hours worked as requested at the GOHSEP, shelters, and/or various off-site medical stations or special needs center.
- 5. Hours on-duty to accompany patients to a safer location during an evacuation.
- 6. Specific time frames (date and time) will be determined by the Hospital Administrator and approved by the HCSD CEO and/or Designee.
- B. When designated time frames approved by the HCSD CEO and/or Designee or Civil Service have expired, regular Civil Service and/or FLSA overtime rules shall be applied and followed.
- C. Special premium pay/hazard pay may also be paid in addition to disaster pay at the discretion and direction of the HCSD CEO and/or Designee in accordance with Civil Service rules and directives.
- D. In the event disaster pay is not approved, regular Civil Service and/or FLSA overtime rules shall be applied and followed.

V. DOCUMENTATION

For auditing purposes, documentation shall be required to justify any approved payment of time and one-half disaster pay for all hours worked.

It shall be the responsibility of the LKMC Hospital Administrator along with the LKMC Human Resources Department to establish and implement procedures as follows:

- A. Process to capture all hours worked during an "official closure" or partial closure/quarantine.
- B. Process shall include back-up <u>manual procedures</u> in the event of a power outage making the time collection process inoperable.
- C. Maintaining documentation of the authorization given for the office closure.

VI. REPORTS

Reports shall be provided as requested by the HCSD Administration and/or any other governing body.

VII. EXCEPTIONS

The HCSD CEO or Designee may waive, suspend, change or otherwise deviate from any provision of this policy they deem necessary to meet the needs of the agency as long as it does not violate the intent of this policy; state and/or federal laws; Civil Service Rules and Regulations; LSU Policies/Memoranda; or any other governing body regulations.

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