



HUMAN RESOURCE SERVICES
1515 Hughes Way, Long Beach, CA 90810
(562) 997-8651

November 2018

To: All Schools and Offices
From: Human Resource Services
Subject: Certificated Pregnancy Disability and Child Bonding Leave Procedures

Attached please find Certificated Pregnancy Disability Leave (PDL) procedures and forms updated to comply with recent changes in state law. Please use the revised forms and procedures immediately. Employees should be provided a copy of the Certificated *Pregnancy Disability Leave* instructions and *Notice of Rights* whenever information or forms related to maternity, paternity, adoption, bonding, or child care leave is requested. You should continue to use your current forms for Classified employees.

Pregnancy Disability Leave (PDL) covers time when an employee is unable to work (as certified by her health care provider) due to pregnancy, childbirth, or related condition(s). PDL does *not* cover time off to bond with a newborn or newly placed child; it covers only the mother's disability from work.

- (1) *Certificated Pregnancy Disability Leave* instructions and *Notice of Rights*
- (2) *Request for Absence Due to Pregnancy Disability* form
- (3) *Return to Work from Pregnancy Disability Leave* form
- (4) *Request for Leave of Absence* form
- (5) *Request for Parental Leave* form

Instructions for processing Pregnancy Disability Leave forms:

PDL forms do **not** need to be forwarded to Employment Physician Services. Statutory Leave forms do **not** need to be completed.

- (A) *Request for Absence Due to Pregnancy Disability* form
 1. Top portion of form is completed by employee.
 2. Employee then takes *Request for Absence* form to be completed by their personal physician.
 3. Completed *Request for Absence* form is returned to site payroll person/secretary.
- (B) Site payroll person/secretary reports employee absence as a Long Term Absence in the LTA section of on-line Payroll as MAT/SICK or MAT/STAT (if sick leave is exhausted) in remarks section. Employees are limited to 100 days statutory leave per fiscal year.
- (C) *Return to Work from Pregnancy Disability Leave* form
 1. Employee calls site payroll person/secretary to notify birth date of baby.
 2. Employee returns completed *Return to Work* form to site payroll person/secretary.
 3. A copy of this form must also be provided to Human Resource Services (HRS) if the employee is requesting child bonding leave.

At the conclusion of PDL, when the mother is released to return to work, she may request paid Parental Leave under the California Family Rights Act (CFRA), if eligible. A father or domestic partner of a new mother may request Parental Leave under CFRA, if eligible. Either adoptive parent may take Parental Leave, if eligible. If the employee is not eligible for CFRA leave, he/she may request unpaid Parental Leave. Any requested Bonding time under CFRA must be utilized within one year of the child's date of

birth and/or placement. Therefore, please note the Leave of Absence form specific to this request has also been revised.

General Information

- ◆ PDL is granted for the period the employee is physically unable, due to pregnancy or related conditions, to perform the duties required of her position. Disability is determined by the employee's health care provider.
- ◆ For an **uncomplicated** pregnancy, the period of disability before the estimated date of birth is typically one month or less and is determined by the employee's physician. Recovery usually continues for 4 to 6 weeks.
- ◆ In the case of a **complicated** pregnancy or birth, the period of disability is typically more than one month before the estimated date of birth and recovery may be longer than the usual 6 weeks.
- ◆ Recovery time from a pregnancy typically continues for approximately 4 to 8 weeks following the birth of a child. Your medical provider must certify the length of your recovery time. Therefore, the length of time may vary due to individual needs resulting in less or additional time in comparison to the typical 4 to 8 weeks.
- ◆ If the employee is physically unable to return to work at the end of the 6 or 8 week recovery period, a physician's verification with the estimated date of return to work is required. If the employee's condition permits her to return to work at an earlier date (i.e., prior to 4 weeks' recovery), a release from her physician with the estimated date of return to work is required.
- ◆ If a holiday occurs within a week taken as FMLA leave, the week is counted as a week of FMLA leave. This is only true if a holiday falls within a block of leave time. However, if school is closed for a week or more, these days do not count against the employee's CFRA/FMLA leave entitlement.

Pregnancy Disability Leave Coverage and Benefits

- ◆ Accumulated sick leave applies to the period of disability. If accumulated sick leave does not cover the full period of disability, statutory sick leave is used at half pay. Paid sick leave and statutory leave apply to the period of disability. If the employee exhausts statutory leave, contact HRS; continued leave without pay may be available.
- ◆ District-paid health benefits are provided for the duration of approved PDL. You may contact your site secretary/payroll clerk for information regarding your accumulated sick leave.

After Pregnancy Disability Leave (CFRA Parental

- ◆ Effective January 1, 2017, AB2393 states that eligible certificated employees may take a paid leave up to 12 weeks for the purpose of child bonding under the California Rights Act (CFRA) per Education Code § 44977.5. Employees will utilize sick leave until exhausted, and then receive [half pay/statutory pay] for the remainder of the 12 weeks. Any available leave under the Family Medical Leave Act (FMLA) will run concurrently with CFRA child bonding leave. The maximum leave available in a 12-month period is 12 work weeks. Employees must have been employed by the District for at least one year to qualify for child bonding leave.
- ◆ Half pay/Statutory leave utilized for the purpose of parental leave following the pregnancy disability leave is not deducted from an eligible employee's 100 days of statutory leave balance.

- ◆ An unpaid Child Care Leave may be taken following PDL and CFRA Parental leave for a period coterminous with a semester, a track (year round), or a school year. A second year of Child Care Leave may be granted upon request. **Child Care Leave is without pay or health benefits.** Health insurance may be maintained at the employee's expense. Information regarding cost and procedures is available from the Benefits desk in the Risk Management Office, (562) 997-8236. If applicable, please see your union agreement for additional information.

Summer and Year-round Pregnancy Disability Leave

- ◆ Employees on traditional calendar who expect the birth of a child during the summer recess must file the Request for Absence Due to Pregnancy Disability Leave form indicating their health care provider approves the employee to work to the end of the current school year. A traditional (10-month) calendar employee is not entitled to paid leave during the summer recess unless the PDL extends beyond the opening of the new school year.

Paternity/Parental Bonding Leave

- ◆ A father, spouse or domestic partner of a new parent may request Parental Bonding (aka Child Bonding) Leave under CFRA, if eligible.
- ◆ An employee who chooses to take Parental Leave must use available sick leave for a maximum of 12 workweeks. Employees will utilize sick leave until it is exhausted, and then they will receive parental statutory leave/half pay for the remainder of the 12 weeks. Employees must have been employed by the District for at least one year to qualify for parental leave. "Parental Leave" means leave for the reason of the birth of an employee's child, or the placement of a child with an employee in connection with adoption or foster care. Employees have one year from the child's birth, foster placement, or adoption to use the leave. Any available leave under the Family Medical Leave Act (FMLA) and child bonding leave under the California Family Rights Act (CFRA) run concurrently with Parental Leave.
- ◆ If a holiday occurs within a week taken as CFRA/FMLA leave, the week is counted as a week of CFRA/FMLA leave. This is only true if a holiday falls within a block of leave time. However, if school is closed for a week or more, these days do not count against the employee's CFRA/FMLA leave entitlement

✓ *Steps to follow for a Pregnancy Disability Leave:*

- ❑ **Upon determination of pregnancy disability**, notify your site manager and obtain *the Request for Absence Due to Pregnancy Disability* form (pink) and *Return to Work from Pregnancy Disability Leave* form (green) from your site payroll clerk/secretary. Forms are completed by employee and health care provider, as required, and returned to your payroll clerk/secretary. A copy of the *Return to Work from Pregnancy Disability Leave* must also be provided to Human Resource Services if a request for Child Bonding leave is being submitted.
- ❑ **As soon as practical prior to delivery**, submit the *Request for Absence Due to Pregnancy Disability* form (pink) to your site payroll clerk/secretary.
- ❑ **As soon as practical after the birth of the baby**, notify your payroll clerk of the date of birth. At that time, your estimated return to work date can be determined. If you plan to request parental leave or an unpaid child care leave, that start date can be estimated as well.
- ❑ **Your baby must be added to your health insurance contract within 30 days of the date of birth.** This coverage is not automatic. Contact the Benefits Service Center at 866-844-9744 to request an application.
- ❑ **At the time of your return to work appointment**, the *Return to Work from Pregnancy Disability Leave* form (green) should be completed and signed by your health care provider.
- ❑ **If you plan to return to work immediately following PDL**, the *Return to Work from Pregnancy Disability Leave* form, (green), must be submitted to your site payroll clerk/secretary at least one week prior to your return.
- ❑ **If you plan to request CFRA Parental Leave (if eligible) or unpaid Child Care Leave**, complete the *Return to Work from Pregnancy Disability* form and the appropriate leave form indicating the dates of leave. A Request for Parental Leave must be submitted along with your return to work form *if* you are requesting CFRA leave benefits. CFRA-eligible employees will continue to receive District-paid fringe benefits and statutory pay while on CFRA Parental leave for a maximum of 12 work weeks. *These forms must be returned to your site with a copy to Human Resource Services.*

If you are requesting Child Care Leave without pay, submit a *Request for Leave of Absence* form indicating the dates of leave and submit the form to your site. District-paid benefits are discontinued if you are on Child Care Leave, but coverage may be continued at your own expense. Contact the Risk Management Office, Benefits desk, (562) 997-8236, regarding cost and procedure for payment of benefits.

- ❑ **While on Child Care Leave** you must notify Human Resource Services by March 1 of your intent to return the following school year, or request a second year of child care leave.



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**REQUEST FOR ABSENCE DUE TO PREGNANCY DISABILITY LEAVE
(Employee Is Disabled Due to Pregnancy, Childbirth, or Related Condition(s))**

Instructions: All employees requesting absence due to pregnancy-related disability leave (PDL) must submit this completed form (Sections I, II and III) to their payroll clerk/secretary.

I. EMPLOYEE

Last Name

First Name

MI

School/Site

Track Job Title

Grade/Subject Taught

Home Address

City

Zip Code

Phone No.

II. ATTENDING PHYSICIAN'S STATEMENT – Certification for Paid Sick Leave

Note to Physician: This form verifies the dates when the employee will first be unable to work due to a pregnancy- or childbirth-related condition. If the employee may continue working but requires accommodation at work, please attach a separate sheet specifying (1) the type(s) of accommodation required; (2) the dates when the employee requires the accommodation; and (3) the expected date the employee must stop working.

This patient is not able to continue working beginning on:

_____/_____/_____. The estimated date of delivery is: _____/_____/_____.
(month) (day) (year) (month) (day) (year)

Signature of Physician

Name of Physician (please print or type)

Date

Address (Number and Street)

City

State/Zip Code

Phone No.

III. EMPLOYEE'S STATEMENT

This form has been signed by my health care provider. I have read the information regarding *Pregnancy Disability Leave of Absence* and *Notice of Rights and Obligations*. I understand the time necessary for me to be absent from my regular duties due to pregnancy-related disability will be charged to my sick leave/vacation/statutory leave balance. I further understand that if I exhaust my accumulated leave balance in the course of this leave, the remaining time will be in leave-without-pay status.

Signature of Employee

Date

Request for Absence Due to Maternity (Pregnancy-Related Disability)