

COUNTY OF PIKE
POLICIES & PROCEDURES

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1.1 Welcome Statement

Welcome to employment with the County of Pike. The County relies upon its dedicated employees to provide the highest level of service to the citizens of Pike County.

This policy manual contains many of the County's policies. It is impossible to address every issue that may occur at work in this manual. If an issue is not addressed in this policy manual, please bring the issue to the attention of your Department Head or to the State's Attorney who will do their best to resolve any questions or concerns.

Elected office heads may adopt the policies and procedures of this County manual or may adopt separate policies and procedures in place of or in addition to this County manual to govern the internal operations of their respective offices. Employees of an elected office head shall follow the policies and procedures adopted by their elected office head. In cases where an elected office head has adopted this County manual as well as separate policies and procedures which conflict with this County manual, the separate policies and procedures of the elected office head will control.

Please acknowledge receipt and review of this policy manual by completing the acknowledgment form (Attachment #1) at the end of this manual and returning it to your Department Head.

1.2 At-Will Employment

This policy manual and the individual policies contained herein do not create any contractual rights. You are an at-will employee. That means that the employment relationship is for no definite or determinable period of time, and regardless of salary, position or rate of pay may be terminated by either the County or by the employee at any time with or without cause or notice. Nothing in this policy manual is meant to alter that relationship in any manner.

Furthermore, no manager, supervisor, or representative of the County has the authority to enter into any agreement or contract for employment for any specified duration, or to make any agreement, promise, guarantee or commitment that contradicts the above.

Any agreement that contradicts your at-will status must be approved by the County Board and will not be enforceable unless it is in writing and signed by you, your Department Head and by the County Board Chairperson. The agreement must specifically state that the at-will relationship between you and the County has changed and a new standard is to be applied.

Additionally, this policy manual cannot address every circumstance that may occur while you are performing your duties. It cannot list every act you are permitted or not permitted to do while employed or answer every question you may have.

Therefore, consult your Department Head if you have a question that this policy manual does not address. If something is not addressed in this policy manual, the County will act in its discretion and in accordance with the law.

The County also reserves the right to modify, supplement, or rescind any provision of this policy manual without notice.

Please note that only the County Board can approve changes to this policy manual and that those changes must be in writing and signed by the County Board Chairperson.

1.3 How to Use This Handbook

You should use this policy manual as a guide regarding the County's policies. If you have any questions regarding the policies, please direct your questions to your Department Head.

1.4 Worker Classifications

All employees contribute different skills and experience to the workplace. Duties and work schedules may vary by employee.

The County reserves the right to change this policy manual, including the employee classifications listed below, in its discretion and without notice.

Please also note that none of the classifications change the at-will relationship the County has with its employees.

Classifications

The classifications are:

Full-Time Employees

Part-Time Employees

Contract Employees

Temporary Employees

Volunteers

Non-Exempt or Exempt

Employees will also be classified as exempt or non-exempt.

Non-exempt employees are those employees that are eligible to receive overtime under state and federal law.

Exempt employees are employees that meet the criteria to be exempt from overtime under state and federal law.

1.5 Wage & Salary

Non-Exempt Employees

The Fair Labor Standards Act (FLSA) is a federal law which requires that most employees in the United States receive at least the federal minimum wage for all hours worked and receive overtime pay, or alternatively for public employees, compensatory time off, at the rate of one and one-half hours for each hour worked over forty (40) in a workweek. Note that law enforcement and fire protection employees may be entitled to overtime on the basis of a different workweek. Employees who are subject to minimum wage and overtime laws are called “non-exempt.” If you are eligible for overtime pay or compensatory time off (including pay due under our personnel policies or pursuant to a collective bargaining agreement), you must maintain a record of the total hours you work each day. These hours must be accurately recorded using our time-keeping system. You should not work any hours outside of your scheduled work day unless your supervisor has authorized the unscheduled work in advance. Do not start early, finish late, work during a meal break, or perform any extra work unless you are authorized to do so in advance, and the time is reported on your time-keeping record. You are required to verify that the reported hours worked are complete and accurate and that you have not worked any “off-the-clock” or unrecorded time. Your recorded hours worked must accurately reflect all regular and overtime hours worked, any absences, early or late arrivals, early or late departures and meal breaks. At the end of each workweek, you should submit your completed time record for verification and approval. When you receive each paycheck, please verify immediately that you were paid correctly for all regular and overtime hours worked.

Exempt Employees

Section 13(a)(1) of the FLSA, however, provides an exemption from both minimum wage and overtime pay for employees employed as bona fide executive, administrative, professional and outside sales employees. Section 13(a)(1) and Section 13(a)(17) also exempt certain computer employees. Job titles do not determine exempt status. In order for an employee to qualify as “exempt” from minimum wage and overtime, an employee’s specific job duties and salary must meet all the requirements of the Department of Labor’s regulations. If you are classified as an exempt, salaried employee, you will receive a salary which is intended to compensate you for all hours that you may work for the County. This salary will be set at the time of hire or whenever you become classified as an exempt employee. Your salary may be subject to review and modification from time to time, such as during salary review time.

Being paid on a “salary basis” means an employee regularly receives a predetermined amount of compensation on a weekly, or less frequent, basis. The predetermined amount cannot be reduced because of variations in the quality or quantity of work. Subject to exceptions listed below, an exempt employee must receive the full salary for any workweek in which the employee performs any work, regardless of the number of

days or hours worked. Exempt employees do not need to be paid for any workweek in which they perform no work. If the employer makes deductions from an employee's predetermined salary, i.e., because of the operating requirements of the business, that employee is not paid on a "salary basis." If the employee is ready, willing and able to work, deductions may not be made for time when work is not available.

Deductions from an exempt employee's pay are permissible under the following circumstances:

- When an exempt employee is absent from work for one or more full days for personal reasons other than sickness or disability;
- For absences of one or more full days due to sickness or disability if the deductions is made in accordance with a bona fide plan, policy or practice of providing compensation for salary lost due to illness;
- To offset amounts employees receive as jury or witness fees or for military pay;
- Or for unpaid disciplinary suspensions of one or more full days imposed in good faith for workplace conduct rule infractions;
- In the initial or terminal week of employment in the event you work less than a full week;
- For penalties imposed in good faith for infractions of safety rules of major significance;
- For weeks in which an exempt employee takes unpaid leave under the Family and Medical Leave Act.

An exempt employee's salary may also be reduced for certain types of deductions such as his or her portion of health, dental or life insurance premiums, state, federal or local taxes, social security, IMRF, or contributions to a 401(k) plan.

Please note that you will be required to use accrued vacation, personal or other forms of paid time off for full or partial day absences for personal reasons, sickness or disability. However, an exempt employee's salary will not be reduced for partial day absences if he or she does not have accrued paid time off.

Accurate Time-Keeping

It is a violation of this policy for any employee to falsify a time-keeping record or to alter another employee's time-keeping record. It is a violation of the County policy for another employee, manager, elected or appointed official to instruct another employee to incorrectly or falsely report hours worked or alter another employee's time-keeping record to over- or under-report hours worked. If any employee, manager, elected or appointed official instructs you to violate this policy, do not do so. You are to report it immediately to your Department Head or the County Clerk.

Prohibition of Improper Salary Deductions

It is our policy to comply with the salary basis requirements of the FLSA. Therefore, we prohibit any member of management, elected or appointed official from making

any improper deductions from the salaries of exempt employees. We want employees to be aware of this policy and that the County does not allow deductions that violate the FLSA.

Reporting Errors or Improper Deductions

We make every effort to ensure that all of our employees are paid correctly. Occasionally, however, an inadvertent error can occur. Please review your paystub every pay period. If you find an error, please call it to our attention immediately by reporting it to your Department Head.

If you believe that an improper deduction has been made from your salary, you should immediately report this to your Department Head.

Reports of errors or improper deductions will be promptly investigated. If it is determined that an error or improper deductions has occurred, it will be promptly corrected and you will be promptly reimbursed for any improper deduction made.

No employee will be retaliated against for reporting violations of this policy or for cooperating in an investigation of a reported violation.

2.1 Discrimination, Harassment, Bullying and Sexual Misconduct

Statement of Policy

It is the County's policy that it will not tolerate or condone discrimination, harassment or bullying on the basis of race, color, religion, sex, gender-identity, gender-expression, sexual orientation, pregnancy, childbirth, medical or common conditions relating to pregnancy and childbirth, genetic information, national origin, age, physical or mental disability, ancestry, marital status, military status, arrest record, unfavorable discharge from military service, order of protection status, citizenship status, or any other classification protected under federal or state law. Sexual misconduct is also prohibited. The County will neither tolerate nor condone discrimination, harassment, bullying or sexual misconduct by employees, managers, supervisors, elected officials, co-workers, or non-employees with whom the County has a business, service, or professional relationship. "Employee", for purposes of this policy only, includes any individual performing work for the County, an apprentice, an applicant for apprenticeship, or an unpaid intern. The County has appointed the State's Attorney as its Ethics Officer to receive and oversee investigations of complaints made pursuant to this policy and he is referred to in this policy as the County's "Ethics Officer". He can be contacted by email at zboren@pikecountyil.org or by phone at 217-285-5646. The County reserves the right to change the Ethics Officer from time to time.

Retaliation against an employee who complains about or reports any act of discrimination, harassment, bullying or misconduct in violation of this policy is prohibited. Retaliation against any employee who participates in an investigation pursuant to this policy is likewise prohibited. The County is committed to ensuring and providing a work place free of discrimination, harassment, bullying, sexual misconduct and retaliation. The County will take disciplinary action, up to and including termination, against an employee who violates this policy.

As set forth above, sexual harassment and sexual misconduct are prohibited. Sexual harassment includes unwelcome sexual advances, requests for sexual favors, or any other visual, verbal or physical conduct of a sexual nature when:

1. Submission to or rejection of this conduct explicitly or implicitly affects a term or condition of individual's employment;
2. Submission to or rejection of the conduct is used as the basis for an employment decision affecting the harassed employee or;
3. The harassment has the purpose or effect of unreasonably interfering with the employee's work performance or creating an intimidating, hostile or offensive work environment because of the persistent, severe or pervasive nature of the conduct.

Sexual harassment can occur in a variety of circumstances, including but not limited to the following:

- The employee as well as the harasser may be a woman or a man. The employee does not have to be of the opposite sex.
- The harasser can be the employee's supervisor, an agent of the employer, a supervisor in another area, a co-worker, or a non-employee.
- The employee does not have to be the person harassed but could be anyone affected by the offensive conduct.
- Unlawful sexual harassment may occur without economic injury to or discharge of the employee.
- The harasser's conduct must be unwelcome.

Each employee must exercise his or her own good judgment to avoid engaging in conduct that may be perceived by others as sexual harassment or harassment based on any status protected by law. The following are illustrations of actions that the employer deems inappropriate and in violation of our policy:

1. Unwanted sexual advances.
2. Offering employment benefits in exchange for sexual favors.
3. Retaliating or threatening retaliation after a negative response to a sexual advance or after an employee has made or threatened to make a harassment complaint.
4. Visual conduct such as leering, making sexual gestures, displaying sexually suggestive objects or pictures, cartoons, calendars or posters.
5. Verbal conduct such as making or using derogatory comments, using epithets or slurs, making sexually explicit jokes, or suggestive comments about a person's body or dress.
6. Written or electronic communications of a sexual nature or containing statements or images which may be offensive to individuals in a particular protected group, such as racial or ethnic stereotypes or stereotypes about disabled individuals.
7. Physical conduct such as unwanted touching, assaulting, impeding or blocking movements.

Sexual misconduct is strictly prohibited by the County and can include any inappropriate and/or illegal conduct of a sexual nature including, but not limited to, sexual abuse, sexual exploitation, sexual intimidation, rape, sexual assault, or ANY

sexual contact or sexual communications with a minor (including, but not limited to, conduct or communications which are written, electronic, verbal, visual, virtual or physical).

Responsibilities

A. Supervisors

Each supervisor shall be responsible for ensuring compliance with this policy, including the following:

1. Monitoring the workplace environment for signs of discrimination, harassment, bullying or sexual misconduct;
2. Immediately notifying law enforcement where there is reasonable belief that the observed or complained of conduct violates the criminal laws of the State of Illinois.
3. Immediately notifying the Department of Children and Family Services (DCFS) Hotline (1-800-25-ABUSE or 1-800-252-2873) if the observed or complained of conduct involves the abuse of a minor.
4. Immediately stopping any observed acts of discrimination, harassment, bullying or sexual misconduct and taking appropriate steps to intervene, whether or not the involved employees are within his/her line of supervision;
5. Immediately reporting any complaint of harassment, discrimination, bullying or sexual misconduct to the Ethics Officer; and
6. Taking immediate action to limit the work contact between the individuals when there has been a complaint of discrimination, harassment, bullying or sexual misconduct, pending investigation.

B. Employees

Each employee is responsible for assisting in the prevention of discrimination, harassment, bullying and sexual misconduct through the following acts:

1. Refrain from participation in, or encouragement of, actions that could be perceived as discrimination, harassment, bullying or sexual misconduct;
2. Immediately reporting any violations of this policy to a supervisor or the Ethics Officer and law enforcement (if appropriate under the circumstances) and/or DCFS (if appropriate under the circumstances).

Employees are obligated to report violations of this policy as soon as they occur. An employee should not wait until the conduct becomes unbearable before reporting the prohibited conduct. All employees are obligated to report instances of prohibited conduct even if the conduct is merely observed and directed toward another individual and even if the other person does not appear to be bothered or offended by the conduct. All employees are obligated to report instances of prohibited conduct regardless of the identity of the alleged offender (e.g. man, woman, supervisor, elected official, co-worker, volunteer, vendor, member of public);and

3. Encourage any employee who confides that he/she is the victim of conduct in violation of this policy to report these acts to a supervisor.

Failure to take action to stop known discrimination, harassment, bullying or sexual misconduct may be grounds for discipline.

There is a clear line in most cases between a mutual attraction and a consensual exchange and unwelcome behavior or pressure for an intimate relationship. A friendly interaction between two persons who are receptive to one another is not considered unwelcome or harassment. Employees are free to form social relationships of their own choosing. However, when one employee is pursuing or forcing a relationship upon another who does not like or want it, regardless of friendly intentions, the behavior is unwelcome sexual behavior. An employee confronted with these actions is encouraged to inform the harasser that such behavior is offensive and must stop. You should assume that sexual comments are unwelcome unless you have clear unequivocal indications to the contrary. In other words, another person does not have to tell you to stop for your conduct to be harassment and unwelcome. Sexual communications and sexual contact with a minor are ALWAYS prohibited.

If you are advised by another employee that your behavior is offensive, you must immediately stop the behavior, regardless of whether you agree with the person's perceptions of your intentions.

The County does not consider conduct in violation of this policy to be within the course and scope of employment and does not sanction such conduct on the part of any employee, including supervisory and management employees.

Applicable Procedures

The County takes allegations of discrimination, harassment, bullying and sexual misconduct very seriously. It will actively investigate all complaints.

It is helpful for the employee to directly inform the offending individual that the conduct is unwelcome and must stop. The employee should use the County's

complaint procedure to advise the County of any perceived violation of this policy as soon as it occurs.

A. Bringing a Complaint

Any employee of the County who believes that there has been a violation of this policy may bring the matter to the attention of the County in one of the following ways:

1. Advising his or her supervisor or the Ethics Officer for the County; or
2. Advising the offending employee's supervisor or the County Clerk in the event that the alleged harasser is the Ethics Officer.

If the complaint involves someone in the employee's direct line of command, then the employee should go directly to the Ethics Officer.

The complaint should be presented as promptly as possible after the alleged violation of this policy occurs.

The County will take steps to ensure that complaints made are kept confidential to the extent permissible under the law. Individuals who are involved in an investigation under this policy are required to keep the matter confidential to the fullest extent permitted under the law.

B. Resolution of a Complaint

Promptly after a complaint is submitted, the County will undertake such investigation, corrective and preventive actions as are appropriate. In general, the procedures in resolving any complaints can (but will not necessarily) include any of the following items:

1. A meeting between the employee making the complaint and an individual designated by the County to investigate such complaints. Important data to be provided by the complaining employee includes the following:
 - a. A description of the specific offensive conduct;
 - b. Identification of all person(s) who engaged in the conduct;
 - c. The location where the conduct occurred;
 - d. The time when the conduct occurred;
 - e. Whether there were any witnesses to the conduct;

- f. Whether conduct of a similar nature has occurred on prior occasions;
 - g. Whether there are any documents which would support the complaining employee's allegations;
 - h. What impact the conduct had on the complaining employee.
- 2. While not required, the County encourages anyone who makes a complaint under this policy to provide a written statement setting forth the above details and attaching any pertinent records.
- 3. After a complaint is submitted by the employee, the alleged offending individual should be contacted by a designated representative of the County. The alleged offending individual should be advised of the charges brought against him or her, and may be provided with a copy of the written statement of complaint made by the complaining employee. The alleged offending individual should have an opportunity to fully explain his or her side of the circumstances, and may also submit a written statement, if desired.
- 4. After the alleged offending individual is interviewed, any witnesses identified by either the complaining employee or the alleged offending individual may be interviewed separately.
- 5. Once this investigation is completed, the County will take such action as is appropriate based upon the information obtained in the investigation. In the event that the County finds merit in the charges made by the complaining employee, disciplinary action will be taken against the offending employee. This disciplinary action may, but need not necessarily, include:
 - a. Verbal or written reprimand;
 - b. Placing the offending employee on a corrective action plan for a period of time to be identified;
 - c. Delay in pay increases or promotions;
 - d. Suspending the offending employee from work without pay;
 - e. Demotion;
 - f. Immediate termination.

6. Upon completion of the investigation, the County will advise the complaining employee of the results of the investigation, including action taken, if any, against the offending individual.

When investigating alleged violations of this policy, the County looks at the whole record including, but not limited to, the nature of the allegations, the context in which the alleged incidents occurred, and the statements of the parties and witnesses. A determination on the allegations is made from the facts on a case-by-case basis.

Non-Retaliation

Under no circumstances will there be any retaliation against any employee making a complaint of discrimination, harassment, bullying or sexual misconduct. Any act of retaliation by any party directed against a complaining employee, an accused employee, witnesses, or participants in the process will be treated as a separate and distinct complaint and will be similarly investigated. Complaints of retaliation should be addressed to the Ethics Officer or County Clerk. Illinois law provides protections to whistleblowers as set forth in the Whistleblower Act, 740 ILCS 174/15 and the Illinois Human Rights Act, 775 ILCS 5/6-101.

False Reports Prohibited

It is a violation of this policy for an employee to knowingly make a false report of discrimination, harassment, bullying, sexual misconduct or retaliation. An employee who is found to knowingly make a false report is subject to disciplinary action, as set forth in section **Applicable Procedures B. 5**, above.

Additional Resources

If you have any questions concerning the County's policies on this matter, please see your supervisor or the Ethics Officer. Further information may also be obtained from the Illinois Department of Human Rights, 312-814-6200, or the Equal Employment Opportunity Commission (EEOC), 800-669-4000. Confidential reports of harassment or discrimination may also be filed with these state agencies. For matters involving the abuse of minors the Illinois Department of Children and Family Services (DCFS) may be contacted by dialing 800-25-ABUSE.

Please acknowledge receipt and review of this policy by completing the acknowledgement form (Attachment 2) and returning to your supervisor.

2.2 Requests for Accommodation

It is the intent of the County to provide equal opportunity in its workplace for applicants and employees. Circumstances may arise where a reasonable accommodation for an applicant or employee is necessary to meet this objective.

Accommodations for Disability

The County will provide reasonable accommodation to any qualified individual with a disability as required under federal, state or local law so long as doing so does not cause the County undue hardship.

Other Accommodations

In addition to providing reasonable accommodation to persons with a disability, the County will provide reasonable accommodation for disability relating to pregnancy and for employees needing a religious accommodation as required under federal, state or local law so long as doing so does not cause the County undue hardship.

To Make an Accommodation Request

Employees should direct accommodation requests in person or in writing to their Department Head. All requests for accommodation will be evaluated on a case-by-case basis taking into consideration all known circumstances.

2.3 Conflict of Interest

Employees of the County should not allow personal or financial interests or activities to interfere with their duties on behalf of the County. The County expects employees to advance the County's mission of serving the public. The County expects employees to apply their time and effort appropriately to the County's business, and to use the County's resources only for the County's business.

A conflict of interest is a situation in which an employee's financial or other personal interests may directly or indirectly affect or have the appearance of affecting, his or her responsibilities or judgment on behalf of the County. It is the policy of the County to conduct the affairs of the County with the highest ethical and legal standards. The same is expected of every employee. As such, employees are directed to avoid any situation which may create a conflict, or the appearance of a conflict, between an employee's personal or financial interests and his/her duties on behalf of the County.

Employees who have questions or concerns with respect to this policy or with respect to a possible conflict of interest are to direct their questions or concerns to their Department Head.

2.4 Employment of Relatives

The County allows the employment of relatives under limited circumstances.

Relatives under this policy include:

Spouse/Partner, including common law spouse or civil union partner;

Parent;

Sibling;

Child;

Grandchild;

Under no circumstance will one relative be allowed to hire or supervise another or be in a position to influence the other's terms and conditions of employment.

2.5 Outside Employment or Work

Employees are prohibited from holding outside employment if that employment poses a conflict of interest with the employee's work for the County or if the job duties or hours of the other position hinder the employee's ability to perform to the best of his or her ability in his or her position with the County.

Employees are expected to notify their Department Head of any outside employment.

2.6 Disclosure of Confidential Information

In the course of your employment, you may have access to information, including but not limited to, private or personal information about other employees or citizens of the County of Pike that is confidential. Confidential information generally includes information that is exempt from disclosure under the Freedom of Information Act including but not limited to social security numbers, driver's license numbers, biometric identifiers, personal financial information, medical records, home and personal telephone numbers, personal email addresses, home addresses, personal license plate numbers, other information where the disclosure would constitute a clearly unwarranted invasion of privacy or information which is specifically exempted from disclosure by law. The disclosure of confidential information is strictly prohibited.

Any questions regarding whether information is confidential should be referred to your Department Head.

2.7 Safety

Safety is a priority at the County and the County is committed to providing a safe workplace for its employees and all visitors to the workplace.

Employees are required to do their part including wearing reasonably necessary safety equipment, following safety protocols, following manufacturer instructions for equipment and machinery, and using common sense.

Reporting Safety Incidents and Concerns

Employees should report safety incidents and concerns, including any injury, near injury or unsafe condition, to their Department Head immediately.

2.8 Preventing and Reporting Workplace Violence

The County prohibits violence in the workplace. Violent behavior is strictly prohibited on County property, on adjacent property, while working at any location on behalf of the County, in County vehicles or during events sponsored by the County. This prohibition includes not only actual acts of violence, but also direct or implied threats of violence. Employees who exhibit or threaten violent behavior will be subject to criminal prosecution and disciplinary action up to and including termination. The County takes all reports of violent behavior seriously, and will take appropriate action to investigate complaints and/or report complaints of violent behavior to law enforcement as appropriate.

Any employee who becomes aware of violent behavior or the threat of violent behavior (whether by another employee or by any other person) is directed to inform his or her supervisor immediately. Supervisors are directed to report all reports of violent behavior or threats of violent behavior immediately to the Sheriff who will conduct a prompt and thorough investigation. **In the case of an imminent danger, an emergency situation, or actual or suspected criminal conduct, employees and supervisors are directed to immediately contact law enforcement.**

The following is a non-exhaustive list of violent behavior that is prohibited by this policy:

- Fighting
- Physical restraint or confinement
- Assault
- Battery
- Horseplay
- Stalking
- Intentionally endangering the safety of another person
- Violent destruction of property
- Any other act that a reasonable person would perceive as a violent act.

2.9 Safe Driving

Safe driving of County vehicles or your own vehicle while conducting County business is required at all times.

The County prohibits the following acts while driving County vehicles or while driving another vehicle while performing duties for the County:

- Driving under the influence of alcohol or drugs;
- Operating any vehicle without a license;
- Disobeying any traffic laws;
- Operating a vehicle carelessly or negligently;
- Driving a vehicle without the use of a seatbelt or safety restraint;
- Operating a vehicle while holding or manually operating a cellular phone or other electronic device;
- Disabling vehicle safety devices, like airbags;
- Driving while distracted.

Violation of this policy may result in disciplinary action up to and including termination.

2.10 Computer, Internet and Network Usage

The County has e-mail and internet access systems in place for County business. We also have software and systems in place that can monitor and record all internet usage. The e-mail and internet access systems in place are the sole property of the County. The technology is in place for business related to the County. Employees may use the technology for limited personal purposes as long as that use does not interfere with the employee's work, or jeopardize the integrity of the County computer system, e-mail system or internet access. The technology may not be used for any purpose which would violate County policies or state or federal law. If an employee is found to be abusing the technology, his or her access may be limited or eliminated altogether. An employee is also subject to discipline, up to and including termination. Nothing on the internet system or any property of the County, including phones or voice mail, is or can become the private property of any employee.

THERE CAN BE NO EXPECTATION OF PRIVACY OR ASSURANCE OF CONFIDENTIALITY FOR ANY MESSAGES OR FOR ANY USE OR PATTERN OF USAGE OF THE COUNTY INTERNET, PHONES OR ANY OTHER PROPERTY.

Management and Administration of the Internet and Phone System

We want you to be aware that our security systems are capable of recording for each and every user, each World Wide Web site visit, each chat, and each newsgroup or e-mail message accessed on each computer station within the County. The system is also capable of recording each file transfer into and out of our internal networks. We reserve at all times the right to monitor such activity. No employee should have any expectation of privacy as to any internet usage or telephone system. The management of the County may review internet activity, voice mail messages, and analyze usage patterns in an effort to maintain the highest levels of productivity. We reserve the right to inspect any and all files stored in private areas of our network in order to assure compliance with this policy.

The system must never be used to create or access offensive or disruptive messages. The display or access of any kind of sexually explicit image or document on the County system is a violation of both this internet policy and the County's nondiscrimination and harassment policy. In addition, sexually explicit material may not be archived, stored, distributed, edited or recorded using our network or computing resources. The County may use independently-supplied software and data to identify inappropriate or sexually-explicit internet sites. We may block access from within our networks to all such sites. If you find yourself inadvertently connected to a site that contains sexually explicit or offensive material, you must immediately disconnect from that site, regardless of whether that site has been previously deemed acceptable by any monitoring, screening or rating program.

The County's internet facilities and computing resources must not be used knowingly to violate the laws and regulations of the United States or any other nation, or the laws and regulations of any state, county, province or other local jurisdiction in any material way. Use of any County resources for illegal activity is grounds for immediate dismissal, and we will cooperate with any legitimate law enforcement agency in the investigation of such activity.

Any software or files downloaded via the internet into the County network become the property of the County. Any such files or software may be used only in ways that are consistent with their licenses or copyrights.

No employee may use the County facilities knowingly to download or distribute pirated software or data. No employee may use the County's internet facilities to deliberately propagate any virus, worm, "Trojan horse," or trap-door program code. No employee may use the County's internet facilities knowingly to disable or overload any computer system or network, or to circumvent any system intended to protect the privacy or security of another user.

Each employee using the internet facilities of the County shall identify himself or herself honestly, accurately and completely, including the County affiliation and function, when participating in County related chat groups, newsgroups, message boards, or discussion lists, or when setting up accounts on outside computer systems on behalf of the County. Employees may not represent their statements as official County policy or practice without proper authorization. Participating in non-County related chat groups, newsgroups, message boards or discussion lists by use of the County hardware is prohibited.

Any material posted to any forum, newsgroup, chat group, or internet site in the course of an employee's duties remains the property of the County. Employees are reminded that chat groups and newsgroups are public forums where it is inappropriate to reveal confidential County information, personal data, trade secrets, and any other material covered by existing County confidentiality policies and procedures. Employees releasing protected information via any internet facility, whether intentional or inadvertent, may be subject to disciplinary actions, including termination.

Use of the County internet facilities to commit infractions such as misuse of County assets or resources, sexual harassment, unauthorized public speaking and misappropriation or theft of intellectual property are also prohibited by County policy, and will be subject to discipline, including termination.

Since what material may be deemed offensive can vary between colleagues, customers, employees or suppliers, it is a violation of the County policy to store, view, print or redistribute any document or graphic file that is not directly related to the user's job or the County's business activities.

Employees may from time to time use the County internet facilities for non-business research outside of work hours provided they request permission from their supervisor before engaging in such use and provided all other usage policies are observed.

The County will comply with reasonable requests from law enforcement and regulatory agencies for logs, diaries and archives on any individual employee's internet activities.

Employees must take care to understand federal and state copyright, trademark, libel, slander and public speech control laws so that our use of the internet does not violate any laws which might be enforced against us.

Employees with internet access may download only software with direct business use, and must arrange to have such software properly licensed and registered. Downloaded software must be used only under the terms of its license.

Employees may not use the County's internet facilities to download entertainment software or games, or to play games over the internet, including games against opponents.

Employees with internet access may not use the County's internet facilities to download images or videos unless there is an explicit business-related use for the material.

Employees with internet access may not download any software licensed to the County or data owned or licensed by the County without explicit authorization from the supervisor responsible for the software or data.

Technical

No employee may create or implement any password other than the password issued by the County for voice mail, network or internet access, without permission of the employee's Department Head.

Security

The County has installed a variety of firewalls, proxies, address screening programs and other security systems to assure the safety and security of the County's networks. Any employee who attempts to disable, defeat or circumvent any County security facility will be subject to discipline, including immediate termination.

Computers that use their own modems to create independent data connections sidestep our network security mechanisms. An individual computer's private connection to any outside computer can be used by an attacker to compromise any

County network to which that computer is attached. That is why any computer used for independent dial-up or leased-line connections to any outside computer or network must be physically isolated from the County's internal networks. Only those internet services and functions with documented business purposes for the County will be enabled at the internet firewall.

EMPLOYEES WHO MISUSE THE COUNTY'S INTERNET/EMAIL SYSTEM MAY BE SUBJECT TO DISCIPLINE UP TO AND INCLUDING TERMINATION. REMEMBER THAT YOU HAVE NO EXPECTATION OF PRIVACY REGARDING COUNTY EQUIPMENT OR PROPERTY, INCLUDING BUT NOT LIMITED TO DESKS, COMPUTERS, INTERNET ACCESS, VOICE MAIL, OR E-MAIL.

2.11 Security of Portable Data Storage Devices

The County requires that employees who have been issued a County laptop or tablet computers, cell phones and other information storage devices take certain precautions to prevent theft or data breach.

With all portable data storage devices such as laptop or tablet computers, cell phones or other information storage devices the County requires that:

Strong passwords are used to secure information on the device;

No unauthorized persons are allowed to access to the information storage device;

Username or passwords are not shared with any person, with the exception of authorized employees;

Only authorized hardware, software or information security programs are installed on the device with authorization and approval from management;

Care is taken to ensure the device is properly locked and secured when it is not in the immediate possession of the employee.

In the event that a device is lost or stolen, or in the event that information security has been breached, employees are to advise their Department Head immediately.

2.12 Cell Phones

Employees are prohibited from using cell phones when engaged in the following activities:

While driving or operating a moving vehicle unless a hands free device is used;

While operating machinery;

While in close proximity to moving equipment or machinery;

At any time when the use of a cell phone might place you or others at risk.

Employees are discouraged from conducting personal business on portable electronic devices during work hours. Personal cell phone use during work hours should be limited to emergency situations. Employees are expected to mute or lower the ring tone volume on their personal cell phones during work hours so as not to disturb others. If cell phone use during work hours becomes necessary, employees are expected to exercise courtesy towards others in the workplace and to avoid being loud or disruptive.

2.13 Equipment/Supplies

The County provides equipment and supplies to assist employees in performing their work on behalf of the County. County provided equipment and supplies are solely to be used for work purposes.

Employees must use all equipment safely, for its intended use, and in accordance with manufacturer specifications. Employees are asked to conserve resources and use only those supplies necessary to perform their job.

The County prohibits the use of equipment or supplies for personal use.

2.14 Social Media Policy and Guidelines

This is the official policy for social media use at the County and provides guidance for employees and elected officials on their professional and personal use of social media.

All employees are responsible for knowing and understanding the policy.

Professional Use of Social Media

Before engaging in social media as a representative of the County, you must be authorized to comment by an elected official or Department Head. You may not comment as a representative of the County unless you are authorized to do so.

Once authorized to comment, you must:

- Disclose you are an employee or elected official of the County, and use only your own identity.
- Disclose and comment only on non-confidential information.
- Ensure that all content published is accurate and not misleading and complies with all County policies.
- Comment only on your area of expertise and authority.
- Ensure comments are respectful and refrain from posting or responding to material that is offensive, obscene, defamatory, threatening, harassing, bullying, and discriminatory, infringes copyright, breaches a Court order, or is otherwise unlawful.
- Refrain from making comments or posting material that might otherwise cause damage to the County's reputation or bring it into disrepute.

Personal Use of Social Media

The County recognizes that you may wish to use social media in your own personal life. This policy does not intend to discourage or unduly limit your personal expression or online activities.

However, you should recognize the potential for damage caused (either directly or indirectly) to the County in certain circumstances via your personal use of social media when you can be identified as an employee of the County. Accordingly, you should comply with this policy to ensure that risk of such damage is minimized. You are personally responsible for the content you publish in a personal capacity on any form of social media platform. Remember that all posts are public and often permanent. When in doubt, you should seek guidance from your Department Head on how to comply with this policy. The County reserves the right to read what you write or say publicly and make a determination if it meets this policy.

- Represent yourself accurately. Unless the County has designated you to

Speak officially for the County, you should not state that you write or speak on behalf of the County or that your viewpoints are the same as the County's, and you should make this clear to those reading or listening to your points of view.

- Do not disclose private or confidential information about the County, employees, or about citizens that you obtained through your employment with the County. Confidential information is information that is exempt from disclosure under Section 7 of the Illinois Freedom of Information Act, 5 ILCS 140/7.
- Even when using social media on a personal basis, employees may be disciplined for posting material that is, or might be construed as, vulgar, obscene, threatening, intimidating, harassing, or a violation of the County's workplace policies against discrimination, harassment on account of age, race, religion, sex, sexual orientation, ethnicity, nationality, disability, or other protected class, status, or characteristic.
- If you chose to identify your work affiliation on a social network, you should regard all communication on that network as you would in a professional network. Ensure your profile, photographs and related content is consistent with how you wish to present yourself with colleagues and clients.
- Employees who access social media during work hours or on the County owned equipment should still comply with the County computer usage policy. There is no right to privacy on the County owned equipment.
- The County may discipline employees for making a comment or posting any material that might otherwise cause damage to the County's reputation or bring it into disrepute. When the employee's comment is made as a citizen and not as an employee and is made on a matter of public concern, the County may discipline the employee in situations where the interests of the County in promoting efficient operations outweighs the interests of the employee in commenting on such matters of public concern.

Nothing in this policy shall be interpreted in a manner that unlawfully prohibits the right of employees to engage in protected concerted activity under the Illinois Public Labor Relations Act. The County has and always will comply fully with the obligations under the Illinois Public Labor Relations Act. Likewise, nothing in this policy shall be interpreted in a manner that unlawfully restricts an employee's rights under the federal or state Constitution. The County has and always will comply with Federal and State law.

A violation of this policy may subject an employee to discipline, up to and including termination.

2.15 Whistleblower Policy

Code of Conduct:

The County requires employees to observe the highest standards of business and personal ethics in conducting their duties on behalf of the County. Compliance with all applicable federal, state and local laws, rules and regulations is required. All employees are expected to fulfill their duties honestly and with integrity.

Reporting Responsibility:

Employees are encouraged and expected to report suspected violations of federal, state or local law, rules or regulations or suspected ethical violations.

Retaliation Prohibited:

The County prohibits retaliation against any employee who, in good faith, reports a suspected ethics violation or suspected unlawful conduct. Anyone who violates this policy against retaliation is subject to disciplinary action, including but not limited to, termination of employment.

Reporting Procedure:

The County has an open door policy and expects and encourages employees to address questions, concerns and complaints with their supervisor. Supervisors are required to report complaints regarding suspected unethical or illegal conduct in writing to the State's Attorney. If an employee is not comfortable speaking with his/her supervisor or is not satisfied with the supervisor's response, he/she may discuss the matter with the State's Attorney. If a complaint involves suspected conduct of the State's Attorney a complaint may be brought directly to the County Board. The State's Attorney is responsible for informing the County Board of all complaints of unethical or unlawful conduct pursuant to this policy.

2.16 Accident Reporting Policy

EMPLOYEE INJURIES:

Employees:

Any employee who is injured while on duty (regardless of severity) shall report the injury to his/her supervisor immediately both verbally and in writing by completing the following form:

Injury Report (Attachment #3).

The Injury Report shall include the following: the date, time, place injury occurred, how the injury occurred, the type of injury, the identity of any witnesses, and whether medical assistance was obtained. The report shall be submitted **to the supervisor** within 24 hours.

Supervisors:

Supervisors, after being so informed of the accident or incident, shall then complete and/or assure completion of all relevant and required documents within 24 hours. The documents include:

- Supervisors Report (Attachment #4),
- Witness Report (Attachment #5)
- IL Form 45, Employer's First Report of Injury (Attachment #6) (if needed), and
- Authorization for Release of Health Information (Attachment #7).
- Wage Statement (Attachment #8) *if employee will be receiving work comp*

Once completed, these documents should then be forwarded to the County Clerk along with the Employee Injury Report.

Witnesses:

Any employee witnessing or receiving a report of an injury to a visitor shall verbally report the injury to the employee's supervisor immediately. The employee may also be required to complete a written

- Injury Report (Attachment #3).

Supervisors are required to submit all required information to the County Clerk.

PROPERTY/VEHICLE ACCIDENTS:

Any accident involving County property, vehicles, or involving a privately owned vehicle being operated for County business shall be reported immediately to the employee's supervisor both verbally and in writing by completing the following:

- Preliminary Property/Casualty Claim Report (Attachment #9)
- Automobile Accident Form (Attachment #10), or
- Property Form (Attachment #11) or
- General Liability (Attachment #12)

The form shall include the following: the date, time, place incident occurred, how the incident occurred, the identity of any witnesses, and the extent and type of damage, if

applicable. The report shall be submitted to the County Clerk within 24 hours. Employees are also required to notify law enforcement when appropriate.

2.17 Travel Expense Reimbursement Policy

The County has, by resolution, limited and regulated the reimbursement of all travel, meal, and lodging expenses of officers and employees to those expenses required for official business of the County.

Types of Official Business for which Travel, Meal, and Lodging Expenses are Allowed

- A. Travel, meal, and lodging expenses shall be allowed only for those expenses required for:
 - 1. official business of the County in the ordinary course of employment; or
 - 2. educational conferences approved in advance by a County employee's supervisor; or
 - 3. training approved in advance by a County employee's supervisor; or
 - 4. any other work-related travel purpose approved in advance by a County employee's supervisor.
- B. Office/department heads need not seek advance approval of official travel.

Maximum Allowable Reimbursement for Travel, Meal, and Lodging Expenses

- A. Travel
 - 1. All mileage for travel expenses appropriate under this resolution shall be reimbursed at the applicable IRS rate.
 - 2. Reimbursement for any non-mileage travel expense (train or airplane, for example) must be pre-approved by a County employee's supervisor. However, an office or department head need not seek advance approval for official travel.
 - 3. Reasonable parking fees or cab fare will be reimbursed, but the County employee must produce a receipt showing that the parking fees or cab fare were incurred during the period of official travel, and were for the purpose of the official travel.
- B. Meals
 - 1. The cost of meals during travel that falls under this resolution shall be reimbursed up to \$40 per day for a full day of official travel. For a partial day of official travel (for example, the travel day before a conference when all travel is accomplished in the afternoon/evening), the cost of meals shall be reimbursed up to \$20 per partial day.
 - 2. No meal costs will be reimbursed unless the County employee produces receipts showing costs actually incurred.

3. No meal costs will be reimbursed for same-day travel within a 75 mile radius of Pike County, Illinois, unless specifically appealed to the Finance Committee of the Pike County Board.

C. Lodging

1. The cost of lodging expenses incurred during travel that falls under this resolution shall be reimbursed as follows:
 - a. For conferences and training events, County employees will be reimbursed for lodging expenses up to the amount of the applicable conference rate. If there are no additional rooms available at the applicable conference rate, then County employees will be reimbursed for lodging expenses up to 120% of the applicable rate.
 - b. For official travel not involving a conference or training event, or for conference attendance if there is no applicable conference rate, County employees will be reimbursed for lodging expenses up to the applicable Government Services Administration (GSA) rate available at www.gsa.gov.
 - c. Any lodging expenses projected to exceed the limits in paragraphs a. and b. above must be approved in advance by the employee's supervisor or office head.
2. Reasonable tips incidental to lodging expenses may be reimbursed.

Exclusions

- A. Under no circumstances shall any County employee, officer, or office head be reimbursed for the purchase of alcoholic beverages.
- B. Under no circumstances shall any County employee, officer, or office head be reimbursed for entertainment expenses. "Entertainment" includes, but is not limited to, shows, amusements, theaters, circuses, sporting events, or any other place of public or private entertainment or amusement, unless ancillary to the purpose of the program or event.
- C. If any lodging expenses are approved under paragraph C. 1. c. herein, such expenses may only be reimbursed if approved by roll call vote at an open meeting of the Pike County Board.
- D. If any member of the Pike County Board submits any travel expenses for reimbursement, such expenses may only be reimbursed if approved by roll call vote at an open meeting of the Pike County Board.
- E. The provisions of this resolution shall only apply in the absence of a departmental travel reimbursement policy (including any union contract provisions, if applicable). To the extent a County department has a travel reimbursement policy different from the policy set out in this resolution, the departmental travel reimbursement policy shall control. However, to the extent

this resolution covers areas not addressed by a departmental travel reimbursement policy, this resolution shall control in accordance with the Local Government Travel Expense Control Act.

Standardized Form for Submission of Travel, Meal, and Lodging Expenses

- A. The Travel Reimbursement Request Form (Attachment #14) shall be used by County employees to request reimbursement for travel, meal, and lodging expenses.

All documents submitted in accordance with this policy are public records subject to disclosure under the Freedom of Information Act.

2.18 Firearms in the Workplace

The County seeks to protect the safety of employees, visitors and citizens of the County. In recognition of the Illinois Firearm Concealed Carry Act (430 ILCS 66) and the Illinois Firearm Owners Identification Card Act (430 ILCS 65), the County adopts the following policy.

Definition: *Employee*, for purposes of this policy, shall mean all persons performing work for the County in any job classification, including but not limited to, full-time employees, part-time employees, temporary employees, seasonal employees, probationary employees, contractual employees, elected or appointed officials, elected or appointed members of any committee or commission, volunteers working on behalf of the County or volunteers working on behalf of any elected or appointed official.

This definition shall not include, for purposes of this policy, law enforcement officers who are specifically authorized by law to carry a firearm or any other employee specifically authorized by law, other than pursuant to the Illinois Firearm Concealed Carry Act, to carry a firearm.

Prohibited Conduct:

- I. Pursuant to this policy, employees of the County are prohibited from carrying or possessing firearms in any of the following areas, except as otherwise authorized by State or Federal law, and may be subject to discipline up to and including immediate termination for violating this policy.

Employees are prohibited from carrying on their person or otherwise possessing firearms:

- A. In any building, portion of a building or real property controlled by the County;
- B. At any work location controlled by the County;
- C. At any job site controlled by the County;
- D. In any vehicle owned, leased or under the control of the County;

Employees are prohibited from carrying on their person:

- E. At any time or in any area other than the employee's residence that is associated with the employee's work with the County;
- F. In any area prohibited by state law;
- G. In any area where firearms are prohibited under federal law.

- II. Employees are also prohibited from carrying a firearm on or into one of the prohibited areas defined by the Illinois Firearm Concealed Carry Act while acting within the course and scope of his or her employment and may be subject

to disciplinary action up to and including termination for violating this policy. Prohibited areas are defined by the Illinois Firearm Concealed Carry Act as:

- A. Any building, real property, and parking area under the control of a public or private elementary or secondary school;
- B. Any building, real property, and parking area under the control of a pre-school or child care facility, including any room or portion of a building under the control of a pre-school or child care facility. Nothing in this paragraph shall prevent the operator of a child care facility in a family home from owning or possessing a firearm in the home or license under this Act, if no child under child care at the home is present in the home or the firearm in the home is stored in a locked container when a child under child care at the home is present in the home.
- C. Any building, parking area, or portion of a building under the control of any officer of the executive or legislative branch of government, providing that nothing in this paragraph shall prohibit a licensee from carrying a concealed firearm onto the real property, bikeway, or trail in a park regulated by the Department of Natural Resources or any other designated public hunting area or building where firearm possession is permitted as established by the Department of Natural Resources under Section 1.8 of the Wildlife Code.
- D. Any building designated for matters before a circuit court, appellate court, or the Supreme Court, or any building or portion of a building under the control of the Supreme Court.
- E. Any building or portion of a building under the control of a unit of local government.
- F. Any building, real property, and parking area under the control of an adult or juvenile detention or correctional institution, prison, or jail.
- G. Any building, real property, and parking area under the control of a public or private hospital or hospital affiliate, mental health facility, or nursing home.
- H. Any bus, train or form of transportation paid for in whole or in part with public funds, and any building, real property and parking area under the control of a public transportation facility paid for in whole or in part with public funds.
- I. Any building, real property, and parking area under the control of any establishment that serves alcohol on its premises, if more than 50% of the establishment's gross receipts within the prior 3 months is from the sale of alcohol. The owner of an establishment who knowingly fails to prohibit concealed firearms on its premises as provided in this paragraph or who knowingly makes a false statement or record to avoid the prohibition on concealed firearms under this paragraph is subject to the penalty under subsection (c-5) of Section 10-1 of the Liquor Control Act of 1934.
- J. Any public gathering or special event conducted on property open to the public that requires the issuance of a permit from the unit of local government, provided this prohibition shall not apply to a licensee who

must walk through a public gathering in order to access his or her residence, place of business or vehicle.

- K. Any building or real property that has been issued a Special Event Retailer's license as defined in Section 1-3.17.1 of the Liquor Control Act during the time designated for the sale of alcohol by the Special Event Retailer's license, or a Special use permit license as defined in subsection (q) of Section 5-1 of the Liquor Control Act during the time designated for the sale of alcohol by the Special use permit license.
- L. Any public playground.
- M. Any public park, athletic area, or athletic facility under the control of a municipality or park district, provided nothing in this Section shall prohibit a licensee from carrying a concealed firearm while on a trail or bikeway if only a portion of the trail or bikeway includes a public park.
- N. Any real property under the control of the Cook County Forest Preserve District.
- O. Any building, classroom, laboratory, medical clinic, hospital, artistic venue, athletic venue, entertainment venue, officially recognized university-related organization, property, whether owned or leased, any real property, including parking areas, sidewalks, and common areas under the control of a public or private community college, college or university.
- P. Any building, real property, or parking area under the control of a gaming facility licensed under the Riverboat Gambling Act or the Illinois Horse Racing Act of 1975, including an inter-track wagering location licensee.
- Q. Any stadium, arena, or the real property or parking area under the control of a stadium, arena, or any collegiate or professional sporting event.
- R. Any building, real property, or parking area under the control of a public library.
- S. Any building, real property, or parking area under the control of an airport.
- T. Any building, real property, or parking area under the control of an amusement park.
- U. Any building, real property, or parking area under the control of a zoo or museum.
- V. Any street, driveway, parking area, property, building, or facility, owned, leased, controlled, or used by a nuclear energy, storage, weapons, or development site or facility regulated by the federal Nuclear Regulatory Commission. The licensee shall not under any circumstance store a firearm or ammunition in his or her vehicle or in any compartment or container within a vehicle located anywhere in or on the street, driveway, parking area, property, building, or facility described in this paragraph.
- W. Any area where firearms are prohibited under federal law.

Firearm Storage: Any employee who does not possess a valid license to carry a concealed firearm is prohibited from bringing a concealed firearm, as defined in the Illinois Firearm Concealed Carry Act, onto a parking lot owned, leased or under the control of the County. The Act defines a concealed firearm as a loaded or unloaded handgun.

An employee of the County with a valid license to carry a concealed weapon who chooses to carry a concealed weapon while driving to and from work and park in a parking lot owned, leased or under the control of the County must store his or her firearm or ammunition concealed in a case within a locked vehicle or locked container out of plain view within the vehicle in the parking area. The Illinois Firearm Concealed Carry Act defines “case” to include a glove compartment or console that completely encloses the concealed firearm and ammunition, the trunk of the vehicle, or a firearm carrying box, shipping box or other container. An employee with a valid license to carry a concealed weapon may carry a concealed weapon within a prohibited parking lot area only for the limited purpose of storing or retrieving a firearm within the vehicle’s trunk, provided the licensee ensures the concealed firearm is unloaded prior to exiting the vehicle. An employee with a valid license to carry a concealed firearm must make certain that the firearm is properly stored in accordance with this policy and Illinois law prior to acting in the course and scope of his or her employment.

Any possession of firearms in accordance with the Firearm Owners Identification Card Act is allowed under this policy.

Policy Violations: Any employee who violates this policy is subject to discipline up to and including termination of employment, and shall be considered as acting outside the scope and course of his or her duties and/or employment. The County will not defend or indemnify any employee for an act or omission in violation of this policy.

2.19 Identity Protection Policy

It is the policy of the County to protect social security numbers from unauthorized disclosure in accordance with the Illinois Identity Protection Act, 5 ILCS 179/1 *et. seq.* All employees of the County are required to comply with this Identity Protection Policy ("Policy"). For purposes of this policy, only, "employee" shall be defined as any person performing work on behalf of the County including, but not limited to, full-time, part-time, seasonal, temporary or contractual employees, volunteers, interns, and elected or appointed officials.

Any employee of the County who has access to social security numbers in the course of performing their duties will be trained to protect the confidentiality of social security numbers and will be trained on the requirements of this Policy. Training will include instructions on the proper handling of information and documents that contain social security numbers from the time of collection through the destruction of the information or documents.

The County prohibits the following:

- A. Publicly posting or publicly displaying in any manner an individual's social security number;
- B. Printing an individual's social security number on any card required for the individual to access products or services provided by the County;
- C. Requiring an individual to transmit his or her social security number over the Internet, unless the connection is secure or the social security number is encrypted;
- D. Printing an individual's social security number on any materials that are mailed to the individual, through the U.S. Postal Service, any private mail service, electronic mail, or any similar method of delivery, unless State or federal law requires the social security number to be on the document to be mailed.

Notwithstanding any provision in this Policy to the contrary, social security numbers may be included in applications and forms sent by mail, including, but not limited to, any material mailed in connection with the administration of the Unemployment Insurance Act, any material mailed in connection with any tax administered by the Department of Revenue, and documents sent as part of an application or enrollment process or to establish, amend, or terminate an account, contract, or policy or to confirm the accuracy of the social security number. A social security number that may be permissibly mailed under this Policy may not be printed, in whole or in part, on a postcard or other mailer that does not require an envelope, or be visible on an envelope without the envelope having been opened.

The County prohibits the following:

- A. The collection, use or disclosure of a social security number from an individual, unless (1) required under State or federal law, rules, or regulations, or the collection, use, or disclosure of the social security number is otherwise necessary for the performance of that agency's duties and responsibilities; (2) the need and purpose for the social security number is documented before collection of the social security number; and (3) the social security number collected is relevant to the documented need and purpose;
- B. Requiring an individual to use his or her social security number to access an Internet website;
- C. Using the social security number for any purpose other than the purpose for which it was collected.

Notwithstanding any provision in this Policy to the contrary, social security numbers may be collected, disclosed or used in the following circumstances:

- A. The disclosure of social security numbers to agents, employees, contractors, or subcontractors of a governmental entity or disclosure by a governmental entity to another governmental entity or its agents, employees, contractors, or subcontractors if disclosure is necessary in order for the entity to perform its duties and responsibilities, and if disclosing to a contractor or subcontractor, prior to such disclosure, the individual acting on behalf of the County first receives from the contractor or subcontractor a copy of the contractor's or subcontractor's policy that sets forth how the requirements imposed under this Policy of protecting an individual's social security number will be achieved;
- B. The disclosure of social security numbers pursuant to a court order, warrant, or subpoena;
- C. The collection, use, or disclosure of social security numbers in order to ensure the safety of: State and local government employees; persons committed to correctional facilities; local jails, and other law enforcement facilities or retention centers; wards of the State; youth in care as defined in Section 4d of the Children and Family Services Act, and all persons working in or visiting a State or local government agency facility;
- D. The collection, use, or disclosure of social security numbers for internal verification or administrative purposes;
- E. The disclosure of social security numbers by a State agency to any entity for the collection of delinquent child support or of any State debt or to a

government agency to assist with an investigation or the prevention of fraud;

- F. The collection or use of social security numbers to investigate or prevent fraud, to conduct background checks, to collect a debt, to obtain a credit report from a consumer reporting agency under the federal Fair Credit Reporting Act, to undertake any permissible purpose that is enumerated under the federal Gramm-Leach-Bliley Act, or to locate a missing person, a lost relative, or a person who is due a benefit, such as a pension benefit or unclaimed property benefit.

Only employees who are required to use or handle information or documents that contain social security numbers are permitted to have access to such information or documents.

When the County must request an individual provide a social security number, it must be provided in a manner that makes the social security number easy to redact if the record is required to be released as part of a response to a public records request.

When collecting a social security number, or upon request by an individual, the County will provide a statement of the purpose or purposes for which the County is collecting and using the social security number provided.

Any individual responding to a Freedom of Information Act request or other request for records, must redact social security numbers from the information or documents before allowing the public inspection or copying of the information or documents.

This Policy does not apply to the collection, use or disclosure of a social security number as required by State or federal law, rule, or regulation.

This Policy does not apply to documents that are recorded with a county recorder or required to be open to the public under any State or federal law, rule or regulation, applicable case law, Supreme Court Rule, or the Constitution of the State of Illinois. Notwithstanding this section, county recorders must comply with 5 ILCS 179/35.

If a federal law takes effect requiring any federal agency to establish a national unique patient health identifier program, any employee of the County that complies with that federal law shall be deemed to be in compliance with this Policy.

The County prohibits the encoding or embedding of a social security number in or on a card or document, including, but not limited to, using a bar code, chip, magnetic strip, RFID technology, or other technology, in place of removing the social security number as required by this Policy.

This Policy must be provided to the Pike County Board of the County of Pike within thirty (30) days of approval and employees will be promptly advised of the existence of this Policy and will be provided a copy of this Policy promptly upon approval.

The County will make a copy of this Policy available to any member of the public, upon request.

If this Policy is amended in the future, a copy will be provided to the Pike County Board of the County of Pike, and employees will be promptly advised of the amended Policy and provided with a copy of the Policy.

This Policy does not supersede any more restrictive law, rule, or regulation regarding the collection, use or disclosure of social security numbers.

Anyone violating this policy is subject to disciplinary action, up to and including termination of employment and/or criminal prosecution as provided in 5 ILCS 179/45 or any other applicable law.

3.1 Time off to Vote

Employees are requested to vote before or after work if possible. However, if polls are open only during work hours or you are unable to vote before or after work registered voters may take time to vote during work so long as the time taken does not exceed two hours. Employees must request time off to vote in advance of the election date, and the County reserves the right to specify the time frame during which the employee may be absent to vote.

3.2 Jury and Witness Duty

All employees are granted time off from work to perform jury duty or if summoned to testify as a witness.

Any fee received by an employee for serving on a jury or providing testimony will be deducted from the employee's wages during paid time off.

Requesting Leave

To request time off employees must provide a copy of the jury or witness summons to their Department Head within 10 days of receipt.

Return to Work

While serving on a jury or testifying as a witness, employees are required to advise their Department Head about their availability for work each day. Employees who are released from jury duty or witness testimony during the work day are expected to report to work immediately.

3.3 Military Leave

The County will comply with all applicable federal, state and local laws providing military leave and benefit protections to employees. Questions or requests for leave should be directed to the employee's Department Head.

3.4 Family Medical Leave and Military Leave Policy

This policy document supersedes any other existing policy or policy document governing the handling of leave taken pursuant to the Family and Medical Leave Act of 1993 ("FMLA"). It is intended to conform with the County's obligations under 29 C.F.R. §825.300.

ELIGIBILITY

To be eligible for FMLA benefits, an employee **must**:

- (1) have worked for the County for a total of 12 months; and
- (2) have worked at least 1,250 hours over the previous 12 months.

LEAVE ENTITLEMENT

A covered employee is entitled to up to a total of 12 workweeks of unpaid leave in a 12 month period for one or more of the following reasons:

- For the birth of a son or daughter, and to care for the newborn child;
- for the placement with the employee of a son or daughter for adoption or foster care;
- to care for the employee's spouse, son or daughter or parent (but not parent-in-law) who has a serious health condition,
- when the employee is unable to perform the functions of the employee's job because of a serious health condition, or because of incapacity due to pregnancy, prenatal medical care or child birth.

Leave to care for a newborn child or for a newly placed child must conclude within 12 months after the birth or placement.

Spouses employed by the same employer may be limited to a ***combined*** total of 12 workweeks of family leave for the following reasons:

- birth and care of a child;
- for the placement of a child for adoption or foster care, and to care for the newly placed child; and,
- to care for an employee's parent who has a serious health condition.

Eligible employees with a spouse, son, daughter, or parent on active duty or call to active duty status in the National Guard or Reserves in support of a contingency operation may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal

arrangements, attending counseling sessions, and attending post-deployment reintegration briefings.

An eligible employee who is the spouse, son, daughter, parent, or next of kin of a covered servicemember who is recovering from a serious illness or injury sustained in the line of duty on active duty, is entitled to up to 26 weeks of unpaid leave in a single 12-month period to care for the servicemember. A covered servicemember is a current member of the Armed Forces, including a member of the National Guard or Reserves, who has a serious injury or illness incurred in the line of duty on active duty that may render the servicemember medically unfit to perform his or her duties for which the servicemember is undergoing medical treatment, recuperation, or therapy; or is on the temporary disability retired list. An eligible employee is entitled to a combined total of 26 workweeks of leave for any FMLA-qualifying reason during the single 12-month period, but is entitled to no more than 12 weeks of leave for:

- the birth of a son or daughter of the employee and in order to care for such son or daughter;
- because of the placement of a son or daughter with the employee for adoption or foster care;
- in order to care for the spouse, son, daughter or parent with a serious health condition;
- because of the employee's own serious health condition,
- or because of a qualifying exigency.

Under some circumstances, employees may take FMLA leave intermittently – which means taking leave in blocks of time, or by reducing their normal weekly or daily work schedule.

- If FMLA leave is for birth and care or placement for adoption or foster care of a son or daughter, use of intermittent leave is subject to the employer's approval.
- FMLA leave may be taken intermittently whenever **medically necessary** to care for a seriously ill family member or seriously ill or injured servicemember, or because the employee is seriously ill and unable to work.

The terms “son or daughter” are defined as biological, adopted, or foster child, a stepchild, a legal ward, or a child of a person standing in loco parentis, who is under 18 years of age or 18 years of age or older and incapable of self-care because of a mental or physical disability. An employee stands in loco parentis to a child when the employee intends to assume the responsibilities of a parent with regard to the child through either day-to-day care or financial support.

SERIOUS HEALTH CONDITION

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents the qualified family member from participating in school or other daily activities.

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

LEAVE AVAILABILITY CALCULATION

The County has adopted the "rolling 12 month period" method of calculating available FMLA leave for all types of leave with the exception of leave to care for a seriously ill or injured servicemember. Under the rolling 12-month period, in order to determine the amount of available FMLA leave, the calculation is made each time an employee commences an FMLA leave. From that date, the preceding 12 month period is examined. Any FMLA leave used during that preceding 12 months is deducted from the 12 weeks annual leave granted by the FMLA. The employee is entitled to take no more than the remaining balance of FMLA leave.

For FMLA leave requests made to care for a covered servicemember with a serious injury or illness, the single 12-month period begins on the first day the eligible employee takes FMLA leave.

SUBSTITUTION OF PAID LEAVE

Any employee taking FMLA leave is required to substitute and use any remaining paid "leave" benefits which are available or become available during the FMLA leave. This includes vacation, personal, sick days, and comp time. Such paid leave is substituted for the unpaid FMLA leave, and is not in addition to such FMLA leave.

All other FMLA leave is unpaid.

MEDICAL INSURANCE BENEFITS WHILE ON FMLA LEAVE

During FMLA leave, the County will maintain the employee's health coverage under any group health plan, under the same terms as if the employee had continued to work. If the employee was required to pay a portion of the premiums for coverage, that obligation continues while on leave. Payment is expected to be made in the same amounts, and at the same time (i.e. each payroll date) as was made while working. If any payment is more than 30 days late, medical coverage may be canceled pursuant to the FMLA Rules and Regulations.

An employee can elect not to continue medical coverage while on leave. If this election is made, the County will immediately place the coverage into COBRA.

If the coverage is continued while on FMLA leave, and the employee does not return to work at the end of the FMLA leave period, the County will bill the employee for the amount of premiums paid by the County during the leave period unless the employee does not return to work due to a reason exempted from this provision by FMLA Rules and Regulations.

No other employment benefits provided by the County to employees are continued during FMLA leave. All such benefits are instead held in abeyance until the employee returns to work. Use of FMLA leave will not result in the loss of any employment benefit that accrued prior to the start of an employee's leave.

PROCEDURE FOR REQUESTING FMLA LEAVE

An employee must provide the County with at least 30 days advance notice before FMLA leave is to begin if the need for the leave is foreseeable. If 30 days notice is not possible, such as because of a lack of knowledge of approximately when leave will be required to begin, a change in circumstances, or a medical emergency, notice must be given as soon as practicable.

Employees must provide sufficient information for the County to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees must also inform the County if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees will also be required to provide certification as specified below, and may be required to provide periodic recertification supporting the need for leave.

Any employee taking leave to care for the employee's covered family member with a serious health condition, or due to the employee's own serious health condition that makes the employee unable to perform one or more of the essential functions of the employee's position must be supported by a certification issued by the health care provider of the employee or the employee's family member. An employee taking leave because of a qualifying exigency or to care for a covered servicemember with a serious injury or illness must also be supported by a certification issued by a health care provider except that an employee taking leave to care for a covered servicemember may provide an invitational travel order (ITO) or an invitational travel authorization (ITA) in lieu of certification for the leave taken through the expiration of the ITO or ITA. Copies of the certification forms can be obtained from your supervisor or at www.dol.gov/whd/fmla. Employees are required to furnish the above-referenced

certifications at the time the employee gives notice of the need for leave or within 15 calendar days thereafter. In the case of unforeseen leave, certification must be provided within 5 business days after the leave commences. FMLA leave may be denied in accordance with the FMLA Rules and Regulations if appropriate certification is not provided.

CONSEQUENCES OF TAKING FMLA LEAVE

Any FMLA leave taken will be counted against the available leave allowed by statute. Any employee seeking to return to work after leave taken because of the employee's own "serious health condition" must submit a medical certification of fitness to return to duty, signed by the attending health care provider, before the employee will be allowed to return to work. Failure to comply with this requirement does not extend the leave.

On return from FMLA leave, the employee will be returned to the same position the employee held when leave commenced, or to an equivalent position with equivalent benefits, pay, and other terms and conditions of employment. The County reserves the right to deny restoration to "key employees" as defined by the FMLA regulations where restoration will cause "substantial and grievous economic injury" to the operations of the County.

If the employee is unable to perform an essential function of the position because of a physical or mental condition, including the continuation of a serious health condition or an injury or illness also covered by workers' compensation, the employee has no right to restoration to another position under the FMLA. The employee may, however, fall under the Americans with Disabilities Act (ADA).

EMPLOYER RESPONSIBILITIES

The County must inform employees requesting leave whether they are eligible under FMLA. If they are, the notice must specify any additional information required as well as the employees' rights and responsibilities. If they are not eligible, the County will provide a reason for the ineligibility.

The County must inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If the County determines that the leave is not FMLA-protected, the employer must notify the employee.

UNLAWFUL ACTS BY EMPLOYERS

The FMLA makes it unlawful for any employer to:

- Interfere with, restrain, or deny the exercise of any right provided under FMLA;

- Discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

ENFORCEMENT

An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against an employer.

FMLA does not affect any Federal or State law prohibiting discrimination, or supercede any State or local law or collective bargaining agreement that provides greater family or medical leave rights.

REFERENCE TO FMLA NOTICE POSTER

The County has posted in each department, a notice setting forth the relevant provisions of the FMLA. The terms of the notice are incorporated in this policy document as if they were specifically set forth. Each employee is charged with familiarizing himself/herself with the contents of the notice concerning all applicable employee rights and obligations under the FMLA.

3.5 Workers' Compensation

The safety and health of our employees is very important to the County. Despite our best efforts at prevention, accidents in the workplace can sometimes occur.

When an employee is injured in his or her scope of employment, the employee may be eligible for workers' compensation benefits.

Reporting Injuries

An employee is required to report any and all injuries that occur or may have occurred while performing his or her job duties as soon as he or she is aware of the injury to their Department Head.

Retaliation Prohibited

The County prohibits retaliation against any employee for reporting a workplace injury or filing a workers' compensation claim. Any employee that retaliates against another employee for making a good faith request for workers' compensation is subject to discipline or termination.

3.6 Victims' Economic Security and Safety Policy

Unpaid Leave for Employees due to Domestic and Sexual Violence

The County will provide up to **twelve (12) weeks of unpaid leave** from work to an employee who is a victim of domestic or sexual violence (or who has a family or household member who is a victim of domestic or sexual violence) to address domestic or sexual violence if the employee is:

- (A) **seeking medical attention** for, or recovering from, physical or psychological injuries caused by domestic or sexual violence to the employee or the employee's family or household member;
- (B) **obtaining services from a victim services organization** for the employee or the employee's family or household member;
- (C) **obtaining psychological or other counseling** for the employee or the employee's family or household member;
- (D) **participating in safety planning, temporarily or permanently relocating**, or taking other actions to increase the safety of the employee or the employee's family or household member from future domestic or sexual violence or ensure economic security; or
- (E) **seeking legal assistance or remedies** to ensure the health and safety of the employee or the employee's family or household member, including preparing for or participating in any civil or criminal legal proceeding related to or derived from domestic or sexual violence.

"Family or household member" means a spouse, parent, son, daughter, other person related by blood or by present or prior marriage, other person who shares a relationship through a son or daughter, and persons jointly residing in the same household whose interests are not adverse to the employee as it relates to the domestic or sexual violence.

"Parent" means the biological parent of an employee or an individual who stood in loco parentis to an employee when the employee was a son or daughter. "Son or daughter" means a biological, adopted, or foster child, a stepchild, a legal ward, or a child of a person standing in loco parentis, who is under 18 years of age, or is 18 years of age or older and incapable of self-care because of a mental or physical disability.

PERIOD OF LEAVE: Employee shall be entitled to a total of 12 workweeks (**note that employers with less than 50 employees can provide 8 weeks instead of 12**) of unpaid leave during any 12-month period. (This policy does not create a right for an employee to take unpaid leave that exceeds the unpaid leave time allowed under, or is in

addition to the unpaid leave time permitted by, the federal Family and Medical Leave Act.) Leave may be taken intermittently or on a reduced work schedule.

EXISTING LEAVE: The employee may use any available paid or unpaid leave (including family, medical, sick, annual, personal, etc.) from employment, pursuant to Federal, State or local law, a collective bargaining agreement, or an employment benefits program or plan, in substitution for any period of such leave for an equivalent period of leave.

EMPLOYEE NOTICE REQUIREMENTS: The employee shall provide the County with **at least 48 hours' advance notice** of the employee's intention to take the leave, unless providing such notice is not practicable.

When an unscheduled absence occurs, the County will not take any action against the employee if the employee, **within a reasonable period after the absence** (generally defined herein as 15 days) provides certification as shown under the next section.

EMPLOYEE CERTIFICATION: The County may require the employee to provide certification to the Employer that:

- (A) the employee or the employee's family or household member is a victim of domestic or sexual violence; and
- (B) the leave is for one of the purposes enumerated in the first paragraph above.

The employee shall provide such certification to the County within a reasonable period after the County requests certification.

An employee may satisfy the above certification requirement by providing to the County a **signed and dated statement** of the employee, and upon obtaining such documents the employee shall provide:

- (A) **documentation** from an employee, agent, or volunteer of a victim services organization, an attorney, a member of the clergy, or a medical or other professional from whom the employee or the employee's family or household member has sought assistance in addressing domestic or sexual violence and the effects of the violence;
- (B) a **police or court record**; or
- (C) other corroborating evidence.

CONFIDENTIALITY: All information provided to the County, including a statement of the employee or any other documentation, record, or corroborating evidence, and the fact that the employee has requested or obtained leave pursuant to this policy, shall be **retained in the strictest confidence by the County**, except to the extent that

disclosure is: (1) requested or consented to in writing by the employee; or (2) otherwise required by applicable Federal or State law.

RESTORATION TO POSITION: In general, an employee who takes leave under this policy shall be entitled, on return from such leave:

- (i) to be restored by the County to the position of employment held by the employee when the leave commenced; or
- (ii) to be restored to an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment.

LOSS OF BENEFITS: The taking of leave under this policy shall not result in the loss of any employment benefit accrued prior to the date on which the leave commenced. An employee may elect to substitute available paid leave for any period of leave under this policy. An employee will not be required to substitute available paid leave for the leave provided under this policy.

An employee who takes leave under this policy for the intended purpose of the leave shall be entitled, upon return from such leave, to be restored to the same position or to an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment.

However, the employee is not entitled to:

- the accrual of any seniority or employment benefits during any period of leave; or
- any right, benefit, or position of employment other than any right, benefit, or position to which the employee would have been entitled had the employee not taken the leave.

REPORTING TO THE EMPLOYER: The County may require an employee on leave under this policy to **report periodically to the County** on the status and intention of the employee to return to work.

MAINTENANCE OF HEALTH BENEFITS: Except as provided under “Loss of Benefits,” during any period that an employee takes leave under this policy the County shall maintain coverage for the employee and any family or household member under any group health plan for the duration of such leave at the level and under the conditions coverage would have been provided if the employee had continued in employment continuously for the duration of such leave.

FAILURE TO RETURN FROM LEAVE: The County may recover the premium that the County paid for maintaining coverage for the employee and the employee's

family or household member under such group health plan during any period of leave under this policy if:

- (i) the employee **fails to return** from leave under this policy after the period of leave to which the employee is entitled has expired; and
- (ii) the employee **fails to return** to work for a reason other than:
 - (I) the continuation, recurrence, or onset of domestic or sexual violence that entitles the employee to leave; or
 - (II) other circumstances beyond the control of the employee.

The County may require an employee who claims that the employee is unable to return to work because of a reason described in (I) or (II) above to provide, within a reasonable period after making the claim, certification to the County that the employee is unable to return to work because of that reason.

An employee may satisfy the certification requirement above by providing to the County:

- a sworn statement of the employee;
- documentation from an employee, agent, or volunteer of a victim services organization, an attorney, a member of the clergy, or a medical or other professional from whom the employee has sought assistance in addressing domestic or sexual violence and the effects of that violence;
- a police or court record; or
- other corroborating evidence.

The County will not fail to hire, refuse to hire, discharge, constructively discharge, or harass any individual exercising their rights under this policy or otherwise discriminate against any individual exercising their rights under this policy with respect to the compensation, terms, conditions, or privileges of employment of the individual, or retaliate against an individual in any form or manner for exercising their rights under this policy.

LEAVE AVAILABILITY CALCULATION: The County has adopted a “rolling 12 month period” method of calculating available leave. In order to determine the amount of available leave, the calculation is made each time an employee commences leave. From that date, the preceding 12 month period is examined. Any leave used during that preceding 12 months is deducted from the 12 weeks annual leave provided by law under this policy. An employee is entitled to take no more than the remaining balance of leave.

REFERENCE TO REQUIRED POSTING: The County has posted in each department, a poster setting forth the relevant provisions of the Victims' Economic Security and Safety Act. The terms of that poster are incorporated in this policy document as if they were specifically set forth. Each employee is charged with familiarizing him/herself with the contents of that poster concerning all applicable employee rights and obligations under the Act.

3.7 Health Care Benefits

Health care benefits are available to eligible employees. Employees will be advised at the time of hiring as to available benefits.

3.8 School Visitation Leave

In accordance with the School Visitation Rights Act, an employee who has worked for the County for at least six (6) consecutive months and works at least a half-time schedule may take up to eight (8) hours off during any school year, and no more than four (4) hours in one day to attend school conferences or classroom activities related to the employee's child, provided that the conference or classroom activity cannot be scheduled during non-working hours. Before taking leave pursuant to this policy, an employee must have exhausted all accrued vacation leave, personal leave, compensatory leave and any other leave that may be granted to the employee except for sick leave and disability. Employees who intend to take leave pursuant to this policy are required to provide a written request at least seven (7) days in advance to their supervisor. In emergency circumstances, only twenty-four (24) hours' notice will be required. The employee is required to consult with his or her supervisor to schedule the leave so as not to unduly disrupt operations. Employees who take leave pursuant to this policy will be given a reasonable opportunity to make up the time taken off on a different day or shift as directed by the employer, but in no circumstances shall such make-up hours be scheduled so that they result in overtime pay to the employee. Employees are not required to make up the time, and if they choose not to do so, shall not be compensated for the time off. Employees are required to provide verification of the school visit to their supervisor within two (2) working days. Failure to provide verification may result in disciplinary action.

3.9 Nursing Mother Policy

The County will provide reasonable unpaid break time each work day to an employee who needs to express breast milk for her infant child. Break time must, if possible, run concurrently with any break time already provided to the employee. A private room (other than a restroom) will be made available to the employee to use for this purpose.

4.1 Work Hours

Your supervisor will advise you of your work schedule upon hiring. Work schedules are subject to change based on the County's needs.

Requests to alter your work schedule must be made to your Department Head in writing. The County retains sole discretion to determine work hours and schedules.

4.2 Attendance

Regular and consistent attendance by all employees is critical to the operation of the County. Attendance during scheduled work hours is an essential aspect of every position at the County. Employees are expected to be present and ready to begin work at their work station at the scheduled start of their shift and are expected to diligently perform their work duties through the end of their shift, except during scheduled breaks or lunch periods. An employee who exhibits unsatisfactory attendance or repeated tardiness may be subject to discipline up to and including termination. Employees are expected to notify their supervisors at least one (1) hour prior to the start of their shift (or as soon as possible in case of emergency) if they will be absent or late for work, advising the supervisor of the reason for the absence or late arrival, and (in the case of a late arrival) advising when the employee expects to arrive at work. Failure to properly report an absence or late arrival in accordance with this policy may result in disciplinary action up to and including termination.

4.3 Personnel Files

Personnel files will be maintained on each employee in accordance with the provisions of the Personnel Record Review Act. Employees may review their personnel files in accordance with the Personnel Record Review Act.

4.4 Dress

Employees are expected to present themselves professionally. Good hygiene and grooming are expected. Appropriate work attire will be determined by Department Heads and be consistent with job duties.

4.5 Record Retention Policy

The Illinois Local Records Act prohibits a public entity from destroying public records without first receiving approval from the Local Records Commission. The Local Records Act defines a public record as “any book, paper, map, photograph, born digital electronic material, digitized electronic material, electronic material with a combination of digitized and born-digital material or other official documentary material, regardless of physical form or characteristics, made, produced, executed or received by any agency or officer pursuant to law or in connection with the transaction of public business and preserved or appropriate for preservation by such agency or officer, or any successor thereof, as evidence of the organization, function, policies, decisions, procedures, or other activities thereof, or because of the informational data contained therein.” 50 ILCS 205/2. A public record may take the form of an electronic record, including but not limited to, emails (and/or attachments thereto), text messages or other electronic data. In order to ensure compliance with the Local Records Act, employees are prohibited from altering, destroying or deleting public records unless and until appropriate approval has been received from the Local Records Commission. Any questions with respect to this policy should be directed to Department Heads.

4.6 Motor Vehicle Record (MVR) Checks

Introduction

The purpose of this policy is to ensure the safety of those individuals who drive County vehicles or personal vehicles on County business and to ensure the safety of their passengers and the public.

Policy Statements

- All drivers must be authorized to drive for work purposes.
- The County vehicles are not to be used for personal or non-work related purposes.
- The County reserves the right to review both the driver's license and MVR of all authorized drivers at any time.
- MVR review will typically be run for authorized drivers a minimum of every 6 months.
- For positions which require driving as an essential function, applicants will receive a conditional offer of employment, contingent upon the results of the MVR review.

Requirements to Become an Authorized Driver

- Must be a current employee or contracted individual.
- Must complete the Employee Authorization for MVR Review (Attachment #13).
- Must present and maintain a favorable MVR (see guidelines below)
- Must provide a current copy of a valid driver's license for the type of vehicle to be driven.

Driver Responsibilities

- It is the driver's responsibility to operate the vehicle in a safe manner to prevent injuries and property damage.
- Drivers must have a valid driver's license for the type of vehicle to be operated, and must keep the license(s) with them at all times while driving. All CDL drivers must comply with all applicable D.O.T. regulations, including successful completion of medical, drug, and alcohol evaluations.
- All drivers and passengers must wear seat belts.
- Employees must report all accidents, regardless of severity, to the police and to the County. Failing to stop after an accident and/or failure to report an accident may result in disciplinary action, including termination.
- Authorized drivers are prohibited from reading or typing text messages, emails or posts of any type while driving. Phone use is also prohibited, unless a hands free device is used. Authorized drivers are prohibited from surfing the internet or reviewing websites or posting on social media or other websites while

driving. Authorized drivers are prohibited from taking or posting photos while driving.

- Distracted driving of any type is prohibited.
- It is the responsibility of all authorized drivers to report the loss, bond issuance, suspension and/or revocation of his/her driver's license immediately to the County.
- All traffic violations (including parking tickets), citations and fines incurred when driving for work purposes are the sole responsibility of the authorized driver.
- Driving for work purposes while under the influence of intoxicants or other illicit drugs is forbidden and is sufficient cause for discipline, including termination.
- Authorized drivers who perform safety sensitive functions must inform the County if taking any medications that may affect their ability to safely operate an automobile.
- Drivers are responsible for the security of vehicles being used by them. The vehicle engine must be shut off, ignition keys removed, and vehicle doors locked whenever the vehicle is left unattended. If the vehicle is left with a parking attendant, only the ignition key is to be left.

The following is a non-exhaustive list of conduct resulting in traffic convictions that may result in rescinding an offer of employment, terminating driving privileges, or other disciplinary action, up to and including termination.

- Reckless or negligent driving
- Driving while impaired by or under the influence of alcohol or drugs
- Homicide, negligent homicide, or involuntary manslaughter by vehicle
- Fleeing or attempting to elude police officers
- Driving without a license or while license is suspended or revoked
- Hit and run or failure to stop after an accident
- Using a motor vehicle for the commission of a felony
- Operating a motor vehicle without the owner's authority (theft)
- Speeding
- "At fault" accident
- Any moving violation.

**Acknowledgment of Receipt and Understanding of the Policy Manual
for the County of Pike**

I have read, reviewed, and understand the regulations and policies stated in the County of Pike Policy and Procedures Manual. I will comply with the policies contained in this policy manual. I understand that neither this policy manual nor any of the individual policies contained in it is a contract for employment and that I am an at-will employee, which means that my employment may be terminated at any time without cause or notice by either the County or me.

Printed Name: _____

Signature: _____

Date: _____

**Acknowledgment of Receipt and Understanding of Policy against Discrimination,
Harassment, Bullying, and Sexual Misconduct**

Please respond to the following questions, circle appropriate answer and initial:

Have you read, and do you understand this policy? Yes No Initials: _____

Do you have any questions about this policy? Yes No Initials: _____

Do you know how to file a complaint should
you ever have a problem with discrimination
harassment, bullying, sexual misconduct or
retaliation or if you see inappropriate behaviors
at work? Yes No Initials: _____

If you ever have a problem or concern regarding
discrimination, harassment, bullying, sexual misconduct or retaliation in the
workplace, please list three individuals who within our organization you can address
your concerns with:

1) _____ 2) _____ 3) _____
Initials: _____

Are you aware of any behaviors going on either in
our workplace or outside the workplace that may
impact the workplace and that are inconsistent
with this policy? Yes No Initials: _____

Employee Signature: _____ Date: _____

Print name: _____

I certify that the above person has received the Policy against Discrimination,
Harassment, Bullying and Sexual Misconduct and that I have reviewed this checklist
with him/her.

Supervisor Signature: _____ Date: _____

Print name: _____

Attachment #3

Injury Report

(to be completed by injured employee/visitor)

Full Name: _____ SS# _____ Date of Birth _____

Date of Injury: _____ Time of Injury _____ AM/PM

Date Reported to Supervisor _____ What Department do you work for? _____

Primary Phone: _____ Secondary Phone _____ Email _____

☐ Male ☐ Female Marital Status: ☐ Single ☐ Married ☐ Divorced # Dependents: _____

Home Address: _____

Hire Date: _____ Last Day Worked _____ Time Began Work _____

Accident Info:

Location of Accident/Address: _____

Explain how the accident happened:

What body part was injured and how was it affected?

What were you doing when the accident occurred? _____

Is what you were doing part of your regular job duties? ☐ Yes ☐ No If No, why were you performing the duties that caused you to be injured?

Who else saw the incident? _____

To whom did you report the incident? _____

Have you received first aid or medical attention? ☐ Yes ☐ No

Were you treated in the Emergency Room? ☐ Yes ☐ No

Check One: ☐ On Premise

Were you hospitalized overnight as an inpatient? ☐ Yes ☐ No

☐ Outside medical assistance

Has your doctor taken you off of work? ☐ Yes ☐ No

☐ Both

What did the doctor say was wrong with you? _____

Name, address, phone, and fax # (if available) of medical facility where treatment was sought: _____

Date/Time of treatment: _____ Date of next appointment _____

Prior Workers' Compensation Claims? ☐ Yes ☐ No

If yes, please explain using 2nd sheet if necessary (i.e. date, body part, injury specifics):

I agree that the above is true and accurate

Employee's Signature: _____ Date: _____

Attachment #4

Supervisor Report

Injured Employee Name: _____ Today's Date _____

Your Name: _____ Your Phone Number: _____

Relationship with injured employee: ☐ Immediate Supervisor ☐ Other Explain: _____

Date and Time of Incident: _____ Where did the accident occur? _____

What was the employee doing when the incident occurred?

What objects or substance, if any harmed the employee? _____

Did the Employee receive first aid or medical attention? ☐ Yes ☐ No ☐ On Premise ☐ Outside medical assistance

Were they treated in the Emergency Room? ☐ Yes ☐ No

Were they hospitalized overnight as an inpatient? ☐ Yes ☐ No Did the doctor take them off of work ☐ Yes ☐ No

If treatment or first aid was given onsite, explain the type of care they received:

If treatment was given away from the worksite, list the name and address of the facility it was given:

What was the reason the employee was in the area that the accident occurred? Were they supposed to be in that area?

How did the accident occur? _____

Who else saw the accident? _____ Who did you report it to? _____

What body part(s) was injured and how was it affected? _____

What was the employee doing at the time of the accident? _____

What were the environmental conditions at the time of the accident? _____

What were the sequence of events that led up to the accident? _____

What was done immediately after the incident?

What unsafe conditions or actions contributed to the accident?

What system design and implementation problems contributed to the accident??

What actions can and will be taken to reduce unsafe conditions and actions?

I agree the above is true and accurate

Supervisor's Name (please print): _____

Supervisor's Signature: _____ Date: _____

Attachment #5

Witness Report (to be completed by accident witness)

Injured Employee Name: _____

Your Name: _____ Your Phone Number: _____

Your Address: _____

Your relationship with injured employee (check one): ☐ Co-worker ☐ Other

Date/Time of Incident: _____ Today's Date/Time: _____

What was the employee doing when the incident occurred? _____

What materials, equipment or tools were involved? _____

What were the environmental conditions at the accident site? _____

What was the sequence of events that led up to the accident? _____

What was done immediately after the incident? _____

I agree the above is true and accurate

Witness Name (please print): _____

Witness' Signature: _____ Date: _____

Attachment #6

ILLINOIS FORM 45: EMPLOYER'S FIRST REPORT OF INJURY

Please type or print.

Employer's FEIN	Date of report	Case or File #	Is this a lost workday case? Yes / No
Employer's name		Doing business as	
Employer's mailing address			
Nature of business or service			SIC code
Name of workers' compensation carrier/admin.		Policy/Contract #	Self-insured? Yes / No
Employee's full name		Social Security #	Birthdate
Employee's mailing address			Employee's e-mail address
Male / Female	Married / Single	# Dependents	Employee's average weekly wage
Job title or occupation			Date hired
Time employee began work AM PM	Date and time of accident		Last day employee worked
If the employee died as a result of the accident, give the date of death.		Did the accident occur on the employer's premises? Yes / No	
Address of accident			
What was the employee doing when the accident occurred?			
How did the accident occur?			
What was the injury or illness? List the part of body affected and explain how it was affected.			
What object or substance, if any, directly harmed the employee?			
Name and address of physician/health care professional			
If treatment was given away from the worksite, list the name and address of the place it was given.			
Was the employee treated in an emergency room? Yes / No		Was the employee hospitalized overnight as an inpatient? Yes / No	
Report prepared by	Signature		Title and telephone #

Please send this form to the ILLINOIS WORKERS' COMPENSATION COMMISSION 4500 S. SIXTH ST. FRONTAGE RD. SPRINGFIELD, IL 62703-5118 IC45 6/09

By law, employers must keep accurate records of all work-related injuries and illness (except for certain minor injuries). Employers shall report to the Commission all injuries resulting in the loss of more than three scheduled workdays. Filing this form does not affect liability under the Workers' Compensation Act and is not incriminatory in any sense. This information is confidential.

Attachment #7

AUTHORIZATION FOR RELEASE OF HEALTH INFORMATION

Participant Name:	Social Security Number:	Birth Date:
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I hereby authorize _____; _____; _____ (my health care provider(s)) to release and disclose the medical information and other records listed below that may include Protected Health Information about me to IPMG Employee Benefits Services (IPMG), at 225 Smith Road, St. Charles, IL 60174. "Protected Health Information" or "PHI" includes any information that relates to (1) My past, present or future physical or mental health or condition; or (2) Health care I have received or will receive; or (3) Payment for health care I have received or will receive.

Purpose of Disclosure. All such medical and PHI may be disclosed to IPMG and/or individuals working on its behalf for purpose of informing them of my medical condition and treatment, as reasonably requested for workers' compensation purposes, certification and payment of medical expenses, and discharge planning, ongoing case management, wellness service coordination, and other integrated care management services as disclosed to me by IPMG at the time of this Authorization.

The following specific information to be disclosed:

[] All medical and billing records or any other information maintained by you (including records prepared by others that are in your possession) regarding the above listed Participant;
or only the following:

- [] Health Treatment [] Dental Treatment [] Vision Treatment
- [] Other _____
- [] Records related to the following treatment: _____
- [] Related to the following time period(s): _____ to _____

I understand that the records to be disclosed pursuant to this Authorization may contain records or information relating to treatment or participation in the following: Initials

- ✓ Federally assisted drug or alcohol abuse programs _____
- ✓ HIV Testing or HIV or AIDS Status _____
- ✓ Diagnosis and Treatment of Mental or Psychological Health _____
- ✓ Genetic testing information and/or records _____

I understand that such information is subject to special protections pursuant to state and federal laws. By my initials, I authorize the use or disclosure of such records if they are otherwise included within the scope of this Authorization

I understand that IPMG shall be authorized to use and disclose my PHI in the manner provided under applicable law, including the Health Insurance Portability and Accountability Act (HIPAA), as described in its *Notice of Privacy Rights*. I have the right to revoke this Authorization in writing, except to the extent the provider has taken action in reliance upon this Authorization. I also understand a photocopy or facsimile of this Authorization shall be considered as effective and valid as the original. I understand that I may see and copy the information described on this form if I ask for it, and that I may obtain a copy of this form after I sign it. *I understand that this Authorization is voluntary and that I may refuse to sign this Authorization.* My refusal to sign will not affect my ability to seek and receive treatment, payment for submitted claims or maintain other eligibility for any other coverage provided under my employer's employee benefit plan(s).

I understand that my Protected Health Information may also be used or disclosed for purposes of responding to the lawsuit or claim brought by me or involving me. I understand that my PHI may be made available to various parties also involved with or defending such legal action by me or involving me, and that the information, once disclosed, might no longer be subject to certain state or federal privacy protections once released.

This Authorization expires on the earlier of _____, 201__ or the following event: _____, but such expiration will not be effective as to records already released in reliance on the Authorization.

 Signature of Participant or Personal Representative

 Date

Personal Representative Section

If a Personal Representative executes this form, that Personal Representative warrants that he or she has authority to sign this form on the basis of:

- ☐ Legal Authority (Power of Attorney, etc.) Please attach documentary evidence.
- ☐ Parent, Guardian or other individual acting *in loco parentis*
- ☐ Written Designation by the Patient or Participant

Attachment #8

WAGE STATEMENT

Employer: _____

Employee: _____

Date employee ceased to work: _____ Date of hire: _____

Number of hours employee is scheduled to work per week _____ Work comp claim number _____

Is employee paid by hour, day, week or month? _____ At what rate? _____

State the date and amount of any pay increase during the past 52 weeks:

Date: _____ Amount: _____ Date: _____ Amount: _____

Date: _____ Amount: _____ Date: _____ Amount: _____

Dates Incl. of Each Week Pd				Hrs Wkd	Regular Pay	Overtime Pay	Dates Incl. of Each Week Pd				Hrs Wkd	Regular Pay	Overtime Pay
From (mm/dd)	To (mm/dd)	Year (yyyy)					From (mm/dd)	To (mm/dd)	Year (yyyy)				
1							27						
2							28						
3							29						
4							30						
5							31						
6							32						
7							33						
8							34						
9							35						
10							36						
11							37						
12							38						
13							39						
14							40						
15							41						
16							42						
17							43						
18							44						
19							45						
20							46						
21							47						
22							48						
23							49						
24							50						
25							51						
26							52						
SUBTOTAL weeks 1-26				0.00	\$0.00	\$0.00	SUBTOTAL weeks 27-52				0.00	\$0.00	\$0.00
							GRAND TOTAL				0.00	\$0.00	\$0.00

This is a correct statement of Employee's earnings as actually taken from our Payroll Records.

Employer's signature: _____ Title: _____

Attachment #9

Illinois Counties Risk Management Trust Preliminary Property/Casualty Claim Report

Report Date: _____		Insured's Name: _____	
What Are You Reporting (please circle one)?		Claim	Incident Only
Coverage Type (please circle applicable coverage):			
Auto Accident	General Liability	Law Enforcement	
Public Officials	Property/Inland Marine	Other: _____	
Date of Occurrence: _____		Time of Occurrence: _____	
Insured's Contact Name: _____		Phone Number: _____	
Address/Location of Occurrence: _____			
What Department Was Involved in Occurrence? _____			
Description of Occurrence: _____			
Type of Injury: _____			
Injured Party's Name: _____		Phone Number: _____	
Injured Party's Address: _____			
Insured's Property Damaged: _____			
Police Report Filed At: _____		Report Number: _____	
Witnesses: _____			
Additional Information for an Auto Loss:			
Insured Vehicle?	Yes	No	Personal Vehicle? Yes No
		Insurance Company: _____	
Insured Vehicle:	Make: _____	Model: _____	
	Year: _____	VIN: _____	
Insured Driver: _____			
Other Vehicle:	Make: _____	Model: _____	
	Year: _____	VIN: _____	
Other Party Owner: _____		Phone Number: _____	
Other Party Owner Address: _____			
Other Property Damaged: _____			
Additional Information or Specific Instructions: _____			
Reported By: _____ Title: _____			

Please fax report and additional information to 630-587-7755

Attachment #10

Illinois Counties Risk Management Trust

Incident Reporting for All Claims Other than Workers Compensation

AUTOMOBILE ACCIDENTS

DATE COMPLETED: _____ DEPARTMENT _____

DEPARTMENT CONTACT _____

(Name and phone #)

ADDRESS/LOCATION OF INCIDENT: _____

DATE OF INCIDENT: _____ TIME OF INCIDENT: _____

POLICE DEPARTMENT: _____ REPORT #: _____

COUNTY VEHICLE? Yes ____ No ____ PERSONAL VEHICLE? Yes ____ No ____

Insurance Company: _____

VEHICLE DESCRIPTION: _____

(type of vehicle i.e. vehicle #, year, make model)

INSURED DRIVER: _____

OTHER PARTY OWNER: _____

(name, address, phone #)

OTHER DRIVER: _____

(If other than driver: name, address, phone #)

OTHER PARTY VEHICLE: _____

(Type of vehicle i.e year, make and model)

INJURED PARTY: _____

(name, address, phone)

TYPE OF INJURY: _____

WITNESSES/PASSENGERS: _____

DESCRIBE IN DETAIL WHAT HAPPENED: _____

PERSON COMPLETING: _____

This form should be sent with any other related information on non-workers compensation related claim reporting.

Attachment #11

Illinois Counties Risk Management Trust

Incident Reporting for All Claims Other than Workers Compensation

PROPERTY DAMAGE

DATE COMPLETED: _____ DEPARTMENT _____

DEPARTMENT CONTACT _____

(Name and phone #)

ADDRESS/LOCATION OF INCIDENT: _____

DATE OF INCIDENT: _____ TIME OF INCIDENT: _____

POLICE DEPARTMENT: _____ REPORT #: _____

COUNTY PROPERTY: _____

(Other than auto i.e. building, street light, traffic light, etc.)

WITNESSES: _____

DISCRIPTION OF INCIDENT: _____

PERSON COMPLETING: _____

This form should be sent with any other related information on non-workers compensation related claim reporting.

Incident Reporting for All Claims Other than Workers Compensation

GENERAL LIABILITY

DATE COMPLETED: _____ DEPARTMENT _____

DEPARTMENT CONTACT _____

(Name and phone #)

ADDRESS/LOCATION OF INCIDENT: _____

DATE OF INCIDENT: _____ TIME OF INCIDENT: _____

POLICE DEPARTMENT: _____ REPORT #: _____

COUNTY PROPERTY: _____

(Other than auto i.e. building, street light, traffic light, etc.)

AT-FAULT PARTY: _____

(Name, address & Telephone #)

INJURED PARTY: _____

(Name, Address & Telephone #)

TYPE OF INJURY: _____

WITNESSES: _____

DISCRIPTION OF INCIDENT: _____

PERSON COMPLETING: _____

This form should be sent with any other related information on
non-workers compensation related claim reporting.

Attachment #13

Employee Authorization for MVR Review

I acknowledge that I have reviewed the information contained in the County MVR policy and a copy of the policy has been furnished to me. As a driver of a County vehicle or a private vehicle on County business I understand that it is my responsibility to operate the vehicle in a safe manner and to drive defensively to prevent injuries and property damage.

I also understand that the County will periodically review my Motor Vehicle Record to determine continued eligibility. In accordance with the law, I have been informed that a MVR will be periodically obtained on me for continued qualification and employment purposes.

I acknowledge the receipt of the MVR policy and authorize the County or its designated agent to obtain a MVR report. This authorization is valid as long as I am an employee or employee candidate and may only be rescinded in writing.

Employee Name (printed)

Employee Signature

Date

Attachment #14

PIKE COUNTY OFFICIAL TRAVEL REIMBURSEMENT REQUEST FORM

1. Date(s) of official travel: _____
2. Location of official travel: _____
3. Purpose of official travel: _____
4. Mileage reimbursement request: Please reimburse me at the applicable IRS rate for _____ miles driven on _____ (date(s)) using my vehicle.
5. Other travel (non-mileage) reimbursement request: \$ _____ for _____ (describe travel) on _____ (date(s)). I hereby certify that this non-mileage official travel was pre-approved by my supervisor/office head.
6. Parking or cab fare reimbursement request: \$ _____ for parking or cab fare on _____ (date(s)). I am attaching receipts showing actual parking or cab fare expenses incurred.
7. Meals reimbursement request: \$ _____. I am attaching receipts showing actual meal expenses incurred, and I certify that I am not requesting more than \$40 reimbursement for a full day of official travel, and not more than \$20 reimbursement for a partial day of official travel.
8. Lodging reimbursement request: \$ _____. I am attaching receipts showing actual lodging expenses incurred, and I certify that my lodging expenses do not exceed (check one)
____ The applicable conference rate for conferences and training events, or 120% of the applicable conference rate if there were no more rooms available at the applicable conference rate.
____ The applicable Government Services Administration (GSA) rate available at www.gsa.gov if the official travel was not for a conference or a training event, or if there was no applicable conference rate.
____ An amount that was pre-approved by my supervisor or office head.
9. Tip reimbursement request: \$ _____. I certify that I actually paid this amount in tips related to my official travel.
10. I understand that if my actual travel expenses exceed the County's thresholds, I will only be reimbursed up to the County's reimbursement thresholds.
11. I hereby certify that everything in this Travel Reimbursement Request Form is true and correct. Submitted by:

Employee Name (print)

Date

Approved by
(signature of supervisor)

Employee job title/office

Employee Signature

Approval Date