

## WILD JUDY

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**From:** WILD JUDY  
**Sent:** Tuesday, March 01, 2016 4:42 PM  
**To:** 'CAPTIANA1@aol.com'  
**Subject:** RE: Public Request Supplemental

Received. Thank you.

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**From:** CAPTIANA1@aol.com [mailto:CAPTIANA1@aol.com]  
**Sent:** Tuesday, March 01, 2016 1:47 PM  
**To:** WILD JUDY  
**Subject:** Re: Public Request Supplemental

Judy,

As a supplemental request can you please forward the following.

Please supply the city procedure / policy / regulation / departmental rule / ordinance etc., that dictates the obligation of an employee of the WFD or DPW when calling in sick. (who they need to contact, when, how it is documented etc..)

Regards,

Rob Cote

In a message dated 2/25/2016 3:31:45 P.M. Eastern Standard Time, [JUDY.WILD@warwickri.com](mailto:JUDY.WILD@warwickri.com) writes:

Thank you.

**From:** [captiana1@aol.com](mailto:captiana1@aol.com) [mailto:captiana1@aol.com]  
**Sent:** Thursday, February 25, 2016 2:55 PM  
**To:** WILD JUDY  
**Subject:** Re: Public Request

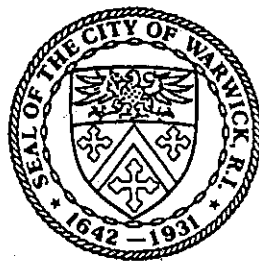
I'm sorry I was not clear on the last email. The request is for the WFD and DPW.

Thank you.

Rob Cote

-----Original Message-----

**From:** WILD JUDY <[JUDY.WILD@warwickri.com](mailto:JUDY.WILD@warwickri.com)>  
**To:** [captiana1 <captiana1@aol.com>](mailto:captiana1@aol.com)



JANE JORDAN  
PERSONNEL DIRECTOR

SCOTT AVEDISIAN  
MAYOR

**CITY OF WARWICK**  
**DIVISION OF PERSONNEL**  
3275 POST ROAD – WARWICK, RHODE ISLAND 02886  
TEL (401) 738-2000 · FAX (401) 732-7636  
TD.D. (401) 739-9150

March 8, 2016

Mr. Robert Cote  
captiana1@aol.com

Dear Mr. Cote:

In response to your request to supply the city's procedure/ policy / regulation / departmental rule / ordinance etc., that dictates the obligation of an employee of the WFD or DPW when calling in sick. (who they need to contact, when, how it is documented etc.), please refer to the following attached documents:

1. Collective Bargaining Agreement Article 17 – Sick Leave
2. Public Works Policy dated 1/20/2015 Requesting Sick Leave
3. Personnel memo dated 2/23/2005 – Sick Leave Notices

This completes the City's response to your APPA.

In accordance with RIGL 38-2-8, you may wish to appeal this decision to Mayor Scott Avedisian (3275 Post Road, Warwick, RI 02886). You may also wish to file a complaint with the Department of Attorney General (150 South Main Street, Providence, RI 02903) or the Rhode Island Superior Court of the county where the record(s) are maintained. It is also my understanding that additional information concerning the Access to Public Records may be available through the Attorney General's website at [www.riag.ri.gov](http://www.riag.ri.gov).

Thank you for your interest in keeping government open and accountable to the public.

Sincerely,

/s/Jane Jordan  
Personnel Director

Enclosure

cc: Judy Wild, City Clerks

①

**Municipal Contract**

**ARTICLE 17  
SICK LEAVE**

- 17.1 All employees covered by this Agreement shall accumulate sick leave for each full calendar month of service in accordance with the following schedule.
- (a) 35 Hour Per Week Employees: These employees accumulate sick leave at the rate of 8.75 hours of sick leave for each completed month of service
  - (b) 40 Hour Per Week Employees: These employees shall accumulate sick leave at the rate of 10.00 hours sick leave for each completed month of service.
  - (c) Other Non-Standard Work Week and Part Time Employees: These employees shall accumulate sick leave at the rate of one fourth (1/4th) of their certified weekly work hours for each completed month of service.
  - (d) Maximum Sick Leave Per Month of Service: The maximum sick leave accumulation rate for all employees covered by this agreement is 10.00 hours for each completed month of service.
- 17.2 Unused sick leave can accumulate to a total of one hundred twenty (120) working days.
- 17.3 Sick leave usage shall be recorded as to the nearest two (2) hour period.
- 17.4 An employee shall be entitled to use his/her accumulated paid sick leave for any absence necessitated by his/her personal illness, off duty injury not incurred in supplemental employment with another employer, or enforced quarantine of the employee in accordance with community health regulations.
- 17.5 Sick Leave with pay for reasons described in Section 4 shall be granted only after the employee signs a form certifying that his/her absence from work was due to one of the reasons specified in Section 4 above; and if the employee has notified an agent(s) designated by the City no later than one-half (1/2) hour before his/her scheduled work day begins, (2nd and 3rd shifts shall give at least four (4) hours notice prior to his/her scheduled shift) unless it can be shown that it was impossible for him/her to give or cause such notice to be given said designated agent(s).
- 17.6 Employees with less than six (6) months continuous service with the City shall not be eligible for sick leave with pay.

- 17.7 The City reserves the right to require a Doctor's certificate before granting sick leave pay in cases where an employee may be suspected of being a malingerer or using sickness as a pretext to cover an unauthorized absence. This Doctor's certificate must include a brief diagnosis, prognosis and expected length of absence, and may be submitted directly to the Personnel Director by the employee. It is further understood by the employee covered by this Agreement that the City shall have the right to discipline or discharge any employee who abuses his/her sick leave.
- 17.8 Employees covered by this agreement shall be required to consult a qualified physician if he/she claims sick leave with or without pay in excess of three (3) consecutive working days. The City may require a written statement from the employee's physician certifying that the employee's condition prevented him/her from performing duties of his/her position before the employee's sick leave claim is granted. The statement from the physician must include a brief diagnosis, prognosis and expected length of absence.
- 17.9 An employee on authorized absence for more than ten (10) consecutive working days due to illness or for any period due to injury shall return to duty only after examination and release for work by a qualified physician. The City shall have the option to require the employee to consult a doctor of its choice for said examination and release at City expense. Said employee shall be restored to his/her position without loss of seniority except that such seniority shall not accumulate after one year of absence.
- 17.10 An employee shall be entitled to use his/her vacation allowance or compensatory time credits or any part thereof for unpaid absence due to personal illness or injury in lieu of paid sick leave, or for any illness or disability in the immediate family of the employee without regard to seniority upon application approved by his/her Department Head, Division Chief, or Agency Director. An employee who has an accumulation of sick time on the books cannot use vacation time, compensatory time, or any other accumulated time other than sick time to be compensated for time lost for illness. Only after accumulated sick time is exhausted may an individual use vacation time, compensatory time, or other time to be compensated for time lost for illness.
- 17.11 For each full calendar month over a twelve (12) month period from December 1 through November 30 of the following year during which an employee shall maintain a full ninety (90) work day accrual of sick leave, and shall not have used more than two (2) days of sick leave for that month, he/she shall be entitled to a payment of fifty percent (50%) of one and one-fourth (1¼) of his/her daily rate of pay for that month. Said payment shall be made on the first pay day in the month of December by separate check. No compensatory time earned nor vacation allowances may be applied to the sick leave accrued for the purposes of computing sick leave bonus paid under this section. Employees earning a full year's sick leave benefit in any year and who do not use any sick leave, shall be entitled to three day's payment in cash by separate check on the December 1<sup>st</sup> following. These three days will be deducted from the employee's sick leave allotment and from sick leave accrued. Notwithstanding the above, employees shall have the option of leaving three (3) days as part of the employee's accrued sick leave.

17.12 Time spent by an employee during which he is severed from the active payroll due to termination, layoff, or leave of absence shall not constitute service time for the purpose of acquiring sick leave benefits, provided, however, that time lost, not to exceed six (6) months due to occupational illness or occupational injury in connection with City employment shall be counted for the purpose of computing service time if the employee returns to the active payroll of the City.

17.13 A City Department Head or Agency Director may, with the written approval of the Director of Personnel, upon consultation and with the concurrence of the Finance Director, advance up to fifteen (15) days paid sick leave upon application of an employee whose paid sick leave has been exhausted due to extended illness or injury and any advance sick leave granted under this section shall be deducted from the employee's future accumulation.

17.14 Employees covered by this Agreement agree to participate in a Wellness Program to be initiated by the City. It is further understood that participation in the program will be voluntary on the part of the employee.

- (a) Wellness Incentive: Employees participating in the City's Health insurance plan and who meet the wellness criteria established by the City, in consultation with the Union, shall receive a payment incentive up to a maximum of \$300.00 per year for an individual's health insurance plan and up to \$500.00 per year for a family health insurance plan. The earned Wellness Incentive payment shall be awarded to active employees beginning FY 2013 in the month of April in each fiscal year following the employee's participation in the Wellness activities.

The wellness incentive program will integrate preventative and wellness behaviors into the medical plan. Examples of possible activities include completion of the health assessment, obtaining a primary care physician, wellness coaching programs, preventive screenings, non-smoker or completion of smoking cessation programs, and /or participation in a program that measures key points in assessing an individual's overall health.

17.15 Employees shall be allowed to use a maximum of seven (7) days of accumulated sick leave per fiscal year in the event of illness in the immediate family or use (3) days of accumulate sick leave for personal time off or any combination of both. Personal sick leave allowance must receive prior approval from the employee's supervisor, which approval shall not be unreasonably withheld by the City.

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CITY OF WARWICK  
DEPARTMENT OF PUBLIC WORKS  
925 SANDY LANE  
WARWICK, RI 02889  
TEL. 401-738-2000 Ext. 6500  
FAX 401-732-5208

SCOTT AVEDISIAN  
MAYOR

DAVID PICOZZI  
DIRECTOR

PLEASE POST

PLEASE POST

**MEMORANDUM**

TO: All Public Work Employees  
FROM: David Picozzi, Public Works Director  
DATE: January 20, 2015  
SUBJECT: POLICY – Requesting Sick Leave

Please be advised that effective immediately all employees in the Public Works Department who are requesting time off due to sick leave are to call the Public Works Department at least ½ prior to the requested time off. Also, when calling the department for sick leave, you are to speak directly with a supervisor as leaving messages at the Public Works Department will no longer be an acceptable means to request time off. If no one is available at the Public Works Department when you call, you are to call back until you speak directly with a supervisor.

This procedure is to be followed, if not, it will be determined that your request for sick leave was not approved and you will be considered away without approved leave and will not be compensated. Failure to follow this policy may also result in discipline.

**PUBLIC WORKS DEPARTMENT**

③

**MEMORANDUM**

**TO:** Department Heads, Division Chiefs and Supervisors  
**FROM:** Oscar K. Shelton, Personnel Director  
**DATE:** February 23, 2005  
**SUBJECT:** Sick Leave Notices

It has come to the Personnel Department's attention that doctor's sick slips that have been requested from employees are not being filled out completely. All sick notes disabling an employee in excess of three consecutive working days must indicate a brief diagnosis, a brief prognosis, any limitations, and the expected length of absence. Furthermore, disability notes indicating an extended absence must be updated periodically. Doctor's notes should **not** be accepted that read "until further notice" without an explanation and/or medical updates. The employee may submit disability notes directly to the Personnel Department.

If an employee is out more than ten consecutive working days, due to illness, he/she is not to return to work without a release for work by a qualified physician

Also, disability slips requested from an employee due to illness should be received immediately and not upon the employee's return to work.

***Those employees who fail to submit a proper sick note should not receive their accrued paid sick leave until a fully completed disability slip has been received.***

If you have any questions, please contact the Personnel Department.

O.K.S.

*James G. McLaughlin*  
Chief



*Headquarters*  
*(401)-468-4049*  
*Fax # 468-4001*

*111 Veterans Memorial Drive.*  
*Warwick, R.I.*  
*02886*

March 21, 2016

Mr. Robert Cote  
74 Janet Drive  
Warwick, RI 02886

Dear Mr. Cote:

This letter is in response to the types of leave that is able to be awarded to members of the Department. All members requesting permission for leave are to call one of the two on duty Battalion Chiefs before the beginning of the shift and that information is entered by the Battalion Chief who received the call for shift accountability.

In accordance with the current collective bargaining agreement between the City of Warwick and Local 2748, International Association of Firefighters, members requesting leave is addressed in Article VIII, sections 1-6 which includes sick, personal and bereavement leave.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "J. McLaughlin", written over the word "Sincerely,".

James G. McLaughlin  
Chief of Department



CBA 7/1/12 - 6/30/15

days of sick leave.

**SECTION 4.5 SICK LEAVE PAY UPON DISABILITY RETIREMENT FOR SERVICE CONNECTED DISABILITY**

In any case where an employee retires due to service-connected disability, as set forth in this Agreement, leaving unused accumulated sick leave, the City shall pay one-half ( $\frac{1}{2}$ ) of the amount of accrued unused sick leave to the employee upon his or her retirement.

**SECTION 5. BEREAVEMENT LEAVE**

Bereavement Leave for the following reasons shall not be charged against sick leave:

- a.. In the case of the death of a mother, father, spouse, child, brother or sister, grandparent, grandchild, mother-in-law, father-in-law, or in cases of other members of the employee's immediate family with the approval of the Chief, each employee covered by this Agreement shall be entitled to a leave of absence with pay from the time of notification of death to and including the day following the burial of the deceased, except in cases where unusual travel distances exist, such period may be extended up to three (3) days or more if needed, and provided further, that in the case of employees of the Jewish faith, said leave shall be for the actual period of mourning observed, but not to exceed seven (7) days from the day of burial.
- b. In the case of death of relatives other than as provided in Paragraph (b) above, such leave of absence with pay shall be for not more than one (1) day to permit attendance at the funeral of said persons, if the leave is first approved by the Chief of the Department. (Affidavit may be required)

**SECTION 6. PAYMENT FOR UNUSED SICK LEAVE AFTER MAXIMUM ACCUMULATION**

In any case where an employee has accumulated his or her or her maximum sick leave entitlement under Section 1 hereof, he or she shall, at the end of each year, be entitled to be paid for one-half ( $\frac{1}{2}$ ) of his or her unused, yearly sick leave entitlement, pro-rated on a monthly basis, not to exceed ten (10) days. Such payment is to be made on the

CBA 7/1/12 - 6/30/15

basis of said employee's daily rate of pay and shall be paid to the employee by the last day of each month.

**SECTION 7. PERSONAL LEAVE DAYS**

All employees shall be entitled to two (2) personal days per year. Such personal days will be deducted from the employee's sick leave and shall be available only when manpower is available and no overtime is incurred as a result of taking such days.

**ARTICLE IX**

**SECTION 1. INJURIES AND ILLNESS**

The City agrees to pay to any injured firefighter who is incapacitated by reason of injuries received or sickness contracted in the performance of his or her duties such amounts and for such periods of time as it is legally obligated to pay.

**SECTION 2. MEDICAL CARE FOR INJURIES OR ILLNESS IN LINE OF DUTY**

Medical care for those injured or who contract illness in the line of duty shall be as follows:

Those members injured or who contract illness in the line of duty whose condition requires admittance to a hospital shall have the right to select a hospital and physician from the staff of that hospital. The choice shall be made by the employee, or if his or her condition prevents him or her from making his or her choice, the choice shall be made by his or her nearest relative who may be available at the time, provided however, that the fees of such hospital and/or doctor are reasonable and consistent with the prevailing rates for such services in the Rhode Island medical community.

In other cases which do not require hospitalization, the employee shall have the right to a specialist of his or her own choice from the staff of a hospital for initial treatment at the hospital and for subsequent treatment at the selected physician's office, provided however, that the fees of such hospital and/or doctor are reasonable and consistent with the prevailing rates for such services in the Rhode Island medical community.

In cases which are of minor nature (minor lacerations, abrasions, contusions, etc.), the

- b. In the case of death of relatives other than as provided in Paragraph (b) above, such leave of absence with pay shall be for not more than one (1) day to permit attendance at the funeral of said persons, if the leave is first approved by the Chief of the Department. (Affidavit may be required)

#### **SECTION 6. PAYMENT FOR UNUSED SICK LEAVE AFTER MAXIMUM ACCUMULATION**

In any case where an employee has accumulated his or her or her maximum sick leave entitlement under Section 1 hereof, he or she shall, at the end of each year, be entitled to be paid for three-fourths (3/4) of his or her unused, yearly sick leave entitlement, pro-rated on a monthly basis, not to exceed fifteen (15) days. Such payment is to be made on the basis of said employee's daily rate of pay and shall be paid to the employee by the last day of each month.

#### **SECTION 7. PERSONAL LEAVE DAYS**

All employees shall be entitled to two (2) personal days per year. Such personal days will be deducted from the employee's sick leave and shall be available only when manpower is available and no overtime is incurred as a result of taking such days.

### ***ARTICLE IX***

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## WILD JUDY

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**From:** captiana1@aol.com  
**Sent:** Tuesday, March 29, 2016 10:50 AM  
**To:** WILD JUDY  
**Cc:** McLaughlin James G; JORDAN JANE; PICOZZI DAVID; Keiser Bruce; Peter - Legal Team; Mayor Scott Avedisian  
**Subject:** Re: Public Request Supplemental

Chief,

I am in receipt of the response from the request for information pertaining to the city procedure / policy / regulation / departmental rule / ordinance etc., that dictates the obligation of an employee of the WFD or DPW when calling in sick. Can you please complete the request.

Your response states the employee contacts the Battalion Chief on duty and the information is entered by the Battalion Chief. My question is - Where is the information entered, and who is responsible for contacting the replacement of the individual who is calling out sick? How is that sick day compiled on the employees time sheets?

Please complete the request.

Regards,

Rob Cote



**CITY OF WARWICK**  
OFFICE OF THE CITY CLERK  
3275 POST ROAD  
WARWICK, RHODE ISLAND 02886  
TEL. (401) 738-2000, ext. 6221  
FAX (401) 732-7640  
T.D.D. 739-9150

**SCOTT AVEDISIAN**  
MAYOR

**JUDY WILD**  
CITY CLERK

April 11, 2016

Robert Cote  
Captianal@aol.com

Dear Mr. Cote:

Thank you for your public records request of March 29, 2016.

This letter will complete this request.

Response complied by: James G. McLaughlin, Fire Chief

Record(s) Requested:

1. **"Where is the information entered, and who is responsible for contacting the replacement of the individual who is calling out sick? How is that sick day compiled on employee's time sheet?"**

**Response:** Please see attached response from Chief McLaughlin.

In accordance with RIGL 38-2-8, you may wish to appeal this decision to Mayor Scott Avedisian (3275 Post Road, Warwick, RI 02886). You may also wish to file a complaint with the Department of the Attorney General (150 South Main Street, Providence, RI 02903) or the Rhode Island Superior Court of the county where the record(s) are maintained. It is also my understanding that additional information concerning the Access to Public Records Act may be available through the Attorney General's website at [www.riag.ri.gov](http://www.riag.ri.gov).

Thank you for your interest in keeping government open and accountable to the public.

Sincerely,

/s/ Judy Wild  
Judy Wild  
Warwick City Clerk

*James G. McLaughlin*  
Chief



*Headquarters*  
*(401)-468-4049*  
*Fax # 468-4001*

*111 Veterans Memorial Drive.*  
*Warwick, R.I.*  
*02886*

April 5, 2016

Mr. Robert Cote  
74 Janet Drive  
Warwick, RI 02886

Dear Mr. Cote:

Please consider this as the response to your public request on March 29, 2016.

Question: Where is the information entered?

There is no document responsive to this request.

Question: Who is responsible for contacting the replacement of the individual who is calling out sick?

There is no document responsive to this request.

Question: How is that sick day compiled on the employees time sheets?

There is no document responsive to this request.

Sincerely,

A handwritten signature in black ink, appearing to read "J. McLaughlin", written in a cursive style.

James G. McLaughlin  
Chief of Department