



Policies and Procedures

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Policy Number:
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O.1
Overview

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OVERVIEW

The Arkansas Spinal Cord Commission was established by Act 311 of 1975 (ACA §§ 20-8-201) to develop and administer a program for the quality care, treatment, rehabilitation, and facilitation of independent living for individuals with spinal cord disabilities. The members of our governing Commission and our staff are committed to the provision of these services. In order to assure these services are of the highest quality and consistency, Agency policies and procedures have been developed.

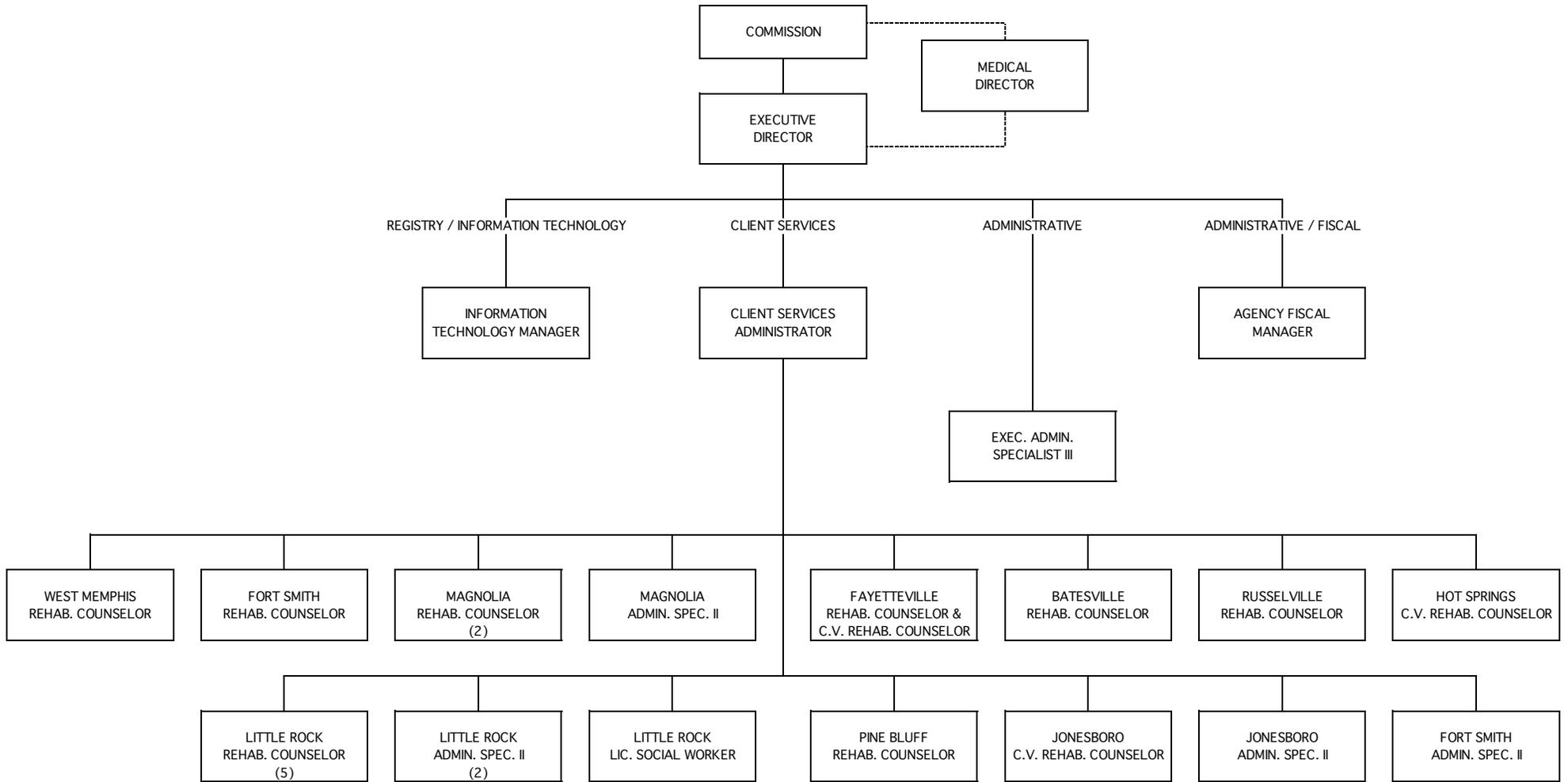
As a State Agency, the Arkansas Spinal Cord Commission functions under and adheres to all Arkansas State regulations, policies, and procedures. Applicable State policies and procedures manuals (including fiscal and personnel) and statutory regulations are maintained in the Administrative Office. Also maintained there are federal policies and procedures utilized to assure compliance for federal grants and projects.

This manual includes Agency policies and procedures, promulgated in accordance with State policies and regulations noted above. These policies are intended to provide guidance to employees of the Agency. No policies can address every possible situation that can arise in the work environment, but do establish parameters within which actions can be taken and decisions made. These policies are not intended to replace conscientious supervision and administration, but to work in concert with these to promote quality service delivery. Copies of this manual are maintained in the administrative offices and in every field office.

In addition, the Arkansas Spinal Cord Commission Case Management Services Procedure Manual provides guidance including policies, procedures, regulations, and documentation for the Case Management Program. Copies of this manual are on file in the administrative offices and field offices.

Questions or concerns related to policies and procedures in this or any of our other manuals should be addressed to the employee's supervisor.

ARKANSAS SPINAL CORD COMMISSION
 AGENCY DEPARTMENT STRUCTURE
 FY2019





Policy Number: A.1
Policy Name: Americans with Disabilities Act (ADA) Grievance Procedure

Policy and Procedures

Policy No: A.1
Section: Administrative
Effective: 01/01/09
Subject: AMERICANS WITH DISABILITIES ACT (ADA) GRIEVANCE PROCEDURE

PURPOSE

To provide a mechanism for resolution of grievances due to discrimination under the Americans with Disabilities Act for members of the public, clients, visitors and other non employees.

PROTOCOL

- A. The Arkansas Spinal Cord Commission has adopted an internal grievance procedure providing for prompt and equitable resolution of complaints alleging any action prohibited by the U.S. Department of Justice regulations implementing Title II of the Americans with Disabilities Act (ADA). Title II states, in part, that “no otherwise qualified disabled individual shall, solely by reason of such disability, be excluded from the participation in, be denied the benefits for, or be subjected to discrimination” in programs or activities sponsored by a public entity.
- B. Complaints should be addressed to the ADA Coordinator. The name(s) of the current coordinator(s) are available from the ASCC Central Office.
1. A complaint may be filed in writing or verbally, must contain the name and address of the person filing it, and a brief description of the alleged violation of the regulations.
 2. A complaint must be filed within 30 days after the complainant becomes aware of the alleged violation.
 3. An investigation, as may be appropriate, will follow a filing of complaint. The investigation will be conducted by the ADA Coordinator. This process will include an informal but thorough investigation, affording all interested persons and their representatives, if any, an opportunity to submit evidence relevant to the complaint. A report of the investigation and the complaint will be forwarded to the Executive Director within 20 days of receipt of complaint.



Policy Number: A.1
Policy Name: Americans with Disabilities Act (ADA) Grievance Procedure

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4. A written determination as to the validity of the complaint and a description of the resolution, if any, shall be issued by the Executive Director, and a copy forwarded to the complainant no later than 30 days after its filing.
5. The ADA Coordinator shall retain copies of all files and records of the Arkansas Spinal Cord Commission relating to the complaints filed.
 - a. The complainant may request a reconsideration of the case if he or she is dissatisfied with the resolution. The request for reconsideration should be made within fifteen (15) days of receipt of written determination to Chairperson, Arkansas Spinal Cord Commission, 5800 W 10th St, Suite 108, Little Rock, AR 72204.
6. The right of a person to a prompt and equitable resolution of the complaint filed hereunder shall not be impaired by the person's pursuit of other remedies such as the filing of an ADA complaint with the responsible federal department or agency. Use of this grievance procedure is not a prerequisite to the pursuit of other remedies.
7. This entire process is constituted to protect the substantive rights of interested persons to meet appropriate due process standards, and to ensure that Arkansas Spinal Cord Commission complies with the ADA and implementing regulations.



Policy Number: A.2
Policy Name: "Arkansas Whistle-Blower Act" Protection

Policy and Procedures

Policy No: A.2
Section: Administrative
Effective: 01/01/09
Subject: "ARKANSAS WHISTLE-BLOWER ACT" PROTECTION

PURPOSE

It is the policy of the Arkansas Spinal Cord Commission that an employee will be protected from discharge or retaliation because the employee reports *in good faith* the existence of any waste of public funds, property, or manpower or a violation or suspected violation of state law, rule, or regulation. This policy excludes federal funds, property, or manpower. The policy of the Arkansas Spinal Cord Commission regarding the "Arkansas Whistle-Blower Act" is consistent with Arkansas Code Annotated §§ 21-1-601 through 609.

PROCEDURE

- A. No adverse action will be taken against an employee or a person authorized to act on behalf of the employee, in the following situations:
1. If an employee alleges a violation under this Act, and does so in good faith,
 2. If an employee alleges a violation under this Act, and does so in good faith, and participates or gives information in an investigation, hearing, court proceeding, legislative or other inquiry, or in any form of administrative review; and/or
 3. If an employee alleges a violation under this Act, and does so in good faith, and has objected to or refused to carry out a directive that the employee reasonably believes violates a law, rule, or regulation adopted under the authority of the state.
- B. An adverse action is defined as discharging, threatening, discriminating, or retaliating against the employee in any manner that affects the employee's employment, including compensation, job location, rights, immunities, promotions, or privileges.
- C. Good faith is lacking when the state employee does not have personal knowledge of a factual basis for the communication or where the state employee knew or reasonably should have known that the communication of the waste or of the violation is malicious, false, or frivolous.



Policy Number: A.2
Policy Name: "Arkansas Whistle-Blower Act" Protection

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- D. The report of waste or violation should be made verbally or in writing to one of the employee's superiors or to an appropriate authority, such as:
1. A state, county, or municipal government department, agency, or organization having jurisdiction over criminal law enforcement, etc.;
 2. A member, officer, agent, investigator, auditor, representative, or supervisory employee of the body, agency, or organization; or
 3. The office of the Attorney General, Auditor of State, Arkansas Ethics Commission, Legislative Joint Audit Committee, Division of Legislative Audit, or Prosecuting Attorney's office.
- E. The report by the employee of such waste or violation must be made prior to any adverse action by the agency. Additionally, the report is to be made at a time and in a manner which gives the agency reasonable notice of need to correct the waste or violation.
- F. An employee who alleges a violation of the Act, and believes that the agency has acted adversely towards him/her because of the allegations, may utilize approved grievance or mediation procedures. The employee may subsequently bring a civil action in chancery court within 180 days of the alleged violation of the "Arkansas Whistle-Blower Act". Should such civil action occur, the employee has the burden of proof in establishing that he/she has suffered an adverse action for an activity protected under the Act. Additionally, the agency shall have an affirmative defense if it can establish that the adverse action taken against the employee was due to employee misconduct, poor job performance, or a reduction in workforce unrelated to a report made concerning violations under the Act.
- G. Additional guidance regarding the Arkansas Whistle-Blower Act Protection may be found in ACA § 21-1-601-609 or Department of Finance and Administration Office of Personnel Management Policy and Procedure Manual (www.state.ar.us/dfa/personnel_mgmt/opm_policy) under Section 185.00.



Policy Number: A.3
Policy Name: Anti-Fraud and Code of Ethics Policy

Policy and Procedures

Policy No: A.3
Section: Administrative
Effective: 01/01/09
Subject: ANTI-FRAUD AND CODE OF ETHICS POLICY

PURPOSE

The purpose of this policy is to implement systems and procedures that aid in the prevention of fraud and support Arkansas Spinal Cord Commission's (ASCC) culture and environment of honesty and ethical behavior. This policy is consistent with R1-19-4-505 of the Arkansas Financial Management Guide.

POLICY

In order to promote a culture of honesty and ethical behavior within ASCC, the following procedures are mandated:

I. CODE OF ETHICS

- A. All ASCC employees will receive a copy of the ASCC Code of Ethics. Supervisors are required to explicitly discuss the requirement that employees report conduct or transactions that violate ethical provisions or are fraudulent and the options of how to communicate these matters. To verify that employees have received a copy of the Code of Ethics, employees must sign and date the last page of the document when received. The original signed page from the Code of Ethics will be maintained in the employee's personnel file. Employees will be provided a copy for their records.
- B. ASCC hiring and orientation procedures will include an introduction to the Code of Ethics during new employee orientation. All employees receiving orientation shall sign and date the last page signifying that they have been provided a copy of the Code of Ethics. The employee's supervisor shall be responsible for ensuring that the original signed page from the Code of Ethics is placed in the employee's personnel file.
- C. During the annual performance review, or at the time of promotion, each employee must reaffirm that he or she has been made aware of the Code of Ethics



Policy and Procedures

by signing a Code of Ethics Annual Acknowledgement Statement. This statement shall be included with the employee's performance evaluation that is placed in the employee's personnel file.

- D. The ASCC Code of Ethics is included as part of this policy as *Attachment A*.
- E. The ASCC Code of Ethics Annual Acknowledgement Statement is included as part of this policy as *Attachment B*.

II. BACKGROUND CHECKS

Prior to extending job offers to applicants of positions that require the handling of cash or negotiable assets, a criminal history check shall be obtained from the Arkansas State Police. The Agency Fiscal Officer shall submit requests to the Arkansas State Police through the Information Network of Arkansas on behalf of ASCC.

III. INVESTIGATIONS OF FRAUD

- A. ASCC is committed to a thorough investigation of occurrences of alleged ethical violations, fraud, waste and abuse. In accordance with the Arkansas Financial Management Guide, the Office of Accounting's Internal Audit Section will be responsible for coordinating all investigations. The Internal Audit Section is authorized to request assistance from ASCC employees that have the experience required to assist or perform such investigations. Investigations will be conducted in a confidential manner. If investigations indicate that a loss of state funds has occurred, then the amount of loss shall be reported to the Division of Legislative Audit in accordance with R1-19-4-2004 of the Arkansas Financial Management Guide. In addition, any loss of state funds involving criminal activity shall be reported to the Arkansas State Police for a criminal investigation.
- B. ASCC employees shall be protected against any form of retaliation, including discharge, for reporting in good faith occurrences of ethical violations, fraud, waste and abuse of government resources as stated in the Arkansas Whistle-Blower Act Protection (A.2).
- C. Allegations of ethical violations or fraud may be reported to the Arkansas State Employees' Fraud, Waste, and Abuse Report Center (800-952-8248) or to the Office of Accounting – Internal Audit Section by telephone (501-682-0370). An employee may also choose to report ethical violations, fraud, waste or abuse by



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completing a Complaint Form, included as *Attachment C* to this policy. Complaint forms can be mailed directly to the Internal Audit Section at the following address:

Department of Finance and Administration
Office of Accounting/Internal Audit Section
1515 West 7th Street, Room 215
Little Rock, AR 72201

IV. EVALUATION OF ANTI-FRAUD PROCESSES AND CONTROLS

- A. In accordance with R1-19-4-505, ASCC will reduce fraud opportunities by (1) identifying fraud risks, (2) mitigating fraud risks and (3) implementing preventive and detective internal controls.
- B. The identification of fraud risks will be conducted through an agency-wide fraud risk assessment every two years. ASCC management will implement appropriate internal controls and change business processes when feasible to reduce fraud risks.
- C. The Office of Accounting's Internal Audit Section shall review the internal controls and changes made to business processes to determine if the control activities identified in the risk assessment are properly designed to mitigate the risk of fraud, waste and abuse of resources. This shall specifically include the internal control activities that are designed to prevent or detect fraud.
- D. The ASCC Executive Director will be responsible for completing or assuring completion of the biannual risk assessment in accordance with R1-19-4-505 of the Arkansas Financial Management Guide in cooperation with Arkansas Department of Finance and Administration Office of Accounting, Internal Audit Section.

V. STATEMENT OF FINANCIAL INTEREST

- A. Arkansas Code Annotated § 21-8-701(a)(4) and (5) and (c)(1) requires any agency head, department director, or division director of state government, as well as any public appointee to any state board or commission who is authorized or charged by law with the exercise of regulatory authority or who is authorized to receive or disburse state or federal funds to file a written statement of financial interest (SFI) by January 31 of each year.



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- B. All gubernatorial appointees appointed to state boards or commissions shall file a SFI covering the previous calendar year within thirty (30) days of appointment. Any person hired, promoted, appointed, or selected as an agency head, department director, or division director shall file a SFI covering the previous calendar year within thirty days of filling such position. These statements shall be filed with the Secretary of State, Election Division, on forms available from that office. Secretary of State's Office, Election Division; 026 State Capitol; 501-682-3476 or 800-482-1127 toll free.

VI. EXTRA INCOME STATEMENT

- A. Arkansas Code Annotated § 21-8-203 states, "...all state employees who are employed on a regular salary basis shall be required to disclose each source of income in excess of five hundred dollars (\$500) earned during any calendar year from sources other than their regular salary from employment or from professional or consultant services rendered for any public agency."
- B. Public agency is defined as (1) the agency with which a state employee is employed, a state board, commission, institution, office, or agency; (2) any city, county, or school district, or any agency, division, or instrumentality thereof, including those agencies, divisions, or instrumentalities which are funded in part with funds provided by state appropriations; or (3) any area or regional program in this State which derives financial support in whole or in part from state funds or from any nonprofit corporation, foundation, or organization.
- C. All ASCC employees who meet these requirements, shall file this statement with the Secretary of State. These statements shall be filed on or before January 31 of each year on forms available from the Secretary of State, Election Division, 026 State Capitol; 501-682-3476 or 800-482-1127 toll free.

VII. EMPLOYMENT RESTRICTIONS

- A. Governor's Executive Order 98-04 requires agencies to notify employees that Arkansas Code Annotated § 19-11-709 restricts the employment of state employees under certain conditions, both during the time they are employed by the state and after they leave state employment, including:
1. Employment of a current state employee involved in procurement by any party contracting with the state;



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2. Former employees from representing anyone other than the state under certain conditions in matters which the employee participated personally and substantially or which were within the former employee's official responsibility;
 3. Partners of a current or former state employee from representing anyone other than the state under certain conditions; and
 4. Selling to the state after termination of employment under certain conditions.
- B. Any current or former state employee who violates any of these employment restrictions is in breach of the ethical standards of Arkansas Code Annotated § 19-11-709. In addition to civil and administrative remedies, Arkansas Code Annotated § 19-11-712 allows the Chief Fiscal Officer of the State to impose, after notice and an opportunity for a hearing, any one (1) or more of the following:
1. Oral or written warnings or reprimands;
 2. Forfeiture of pay without suspension;
 3. Suspension with or without pay for specified periods of time; and
 4. Termination of employment.
- C. Pursuant to Arkansas Code Annotated § 19-11-702, any employee who shall knowingly violate any of these restrictions shall be guilty of a felony and upon conviction shall be fined in any sum not to exceed ten thousand dollars (\$10,000) or shall be imprisoned not less than one (1) nor more than five (5) years, or shall be punished by both.

VIII. EMPLOYEE DISCLOSURE REQUIREMENTS

- A. Governor's Executive Order 98-04 requires agencies to notify employees that they must report any benefit obtained from a state contract by a business in which the employee has a financial interest. The employee must report this benefit to the Chief Fiscal Officer of the State. The report is required by Arkansas Code Annotated § 19-11-706.



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- B. A state employee has a "financial interest" in a business if he/she:
1. Has received within the past year, or is presently or in the future entitled to receive, more than one thousand dollars (\$1,000) per year, as a result of ownership of any part of the business or any involvement in the business; or
 2. Owns more than a five percent (5%) interest in the business; or
 3. Holds a position in the business such as an officer, director, trustee, partner, employee, or the like, or holds any position or management.
- C. Any employee who knows or should have known of such benefit and fails to report the benefit to the director is in breach of the ethical standards of Arkansas Code Annotated § 19-11-706. In addition to existing civil and administrative remedies, Arkansas Code Annotated § 19-11-712 allows the Chief Fiscal Officer of the State to impose, after notice and an opportunity for a hearing, any one or more of the following for failure of the employee to report:
1. Oral or written warnings or reprimands;
 2. Forfeiture of pay without suspension;
 3. Suspension with or without pay for specified periods of time; and
 4. Termination of employment.
- D. Pursuant to Arkansas Code Annotated § 19-11-702, any employee who shall knowingly fail to report such benefit to the director shall be guilty of a felony and upon conviction shall be fined in any sum not to exceed ten thousand dollars (\$10,000) or shall be imprisoned not less than one (1) nor more than five (5) years, or shall be punished by both.
- E. Any ASCC employee meeting the requirements described above is responsible or filing this form annually. The form is available at www.state.ar.us/dfa/procurement/pro_eo9804.html or from the Agency Fiscal Officer.

ARKANSAS SPINAL CORD COMMISSION

Code of Ethics

The Arkansas Spinal Cord Commission (ASCC) Code of Ethics (Code) is the written document that supports the culture of ethical and efficient service to the citizens of the state provided by this department. The Code describes the behavior expected of employees that perform these services.

I. ARKANSAS SPINAL CORD COMMISSION CODE OF ETHICS

ASCC employees must comply with all applicable laws and regulations. ASCC will not condone employee conduct that either violates, or has the appearance of violating, the law, including the ethical provisions. This includes receiving payments for illegal acts, indirect contributions, rebates, or bribery.

If an employee is uncertain about the application or interpretation of any legal or procedural requirement, the employee should ask for guidance from his or her immediate supervisor.

II. CONFLICTS OF INTEREST

ASCC employees must perform their duties in an ethical manner. Employees must not use their position or knowledge gained from their position for private or personal advantage. Arkansas Code Annotated (A.C.A.) § 21-8-304 lists certain activities that are ethically prohibited activities for state employees and officials. If an employee becomes involved in a situation that could be considered a prohibited activity, the employee should immediately communicate all the facts to his or her immediate supervisor.

III. OUTSIDE ACTIVITIES, EMPLOYMENT, AND DIRECTORSHIPS

ASCC employees should avoid acquiring any business interest, engaging in outside employment or participating in any activity outside ASCC that would conflict with his or her official duties.

IV. RELATIONSHIPS WITH CLIENTS AND SUPPLIERS

Employees must adhere to A.C.A. § 19-11-705 in their relationships with clients and suppliers to avoid any conflict of interest. In addition, any employee who has or obtains

any benefit from a state contract with a business in which the employee has a financial interest shall make a disclosure to the Director of DFA in accordance with A.C.A. § 19-11-706 and the Rules and Regulations for Implementing Governor's Executive Order 98-04.

VI. GIFTS, ENTERTAINMENT, AND FAVORS

Employees must not accept entertainment, gifts, personal favors or preferential treatment that could influence, or appear to influence, their decisions in performing their job functions. Specific procurement law addressing gratuities is codified in A.C.A. § 19-11-707 and included in Part 4 of the Procurement Law and Regulations promulgated by the Office of State Procurement.

Refer to Rules and Gifts issued by the Arkansas Ethics Commission for detailed rules on gifts at: http://arkansasethics.com/rules/Rules_on_Gifts.doc.

VII. KICKBACKS AND PROHIBITED COMMISSIONS

ASCC employees must not receive kickbacks, prohibited commissions or other prohibited payments from third parties. Violations of this rule will result in imposition of the penalties provided by law. Specific procurement law addressing kickbacks and commissions is codified in A.C.A. § 19-11-707 and § 19-11-708 and included in Part 4 of the Procurement Law and Regulations promulgated by the Office of State Procurement.

VIII. ORGANIZATION FUNDS AND OTHER ASSETS

Employees who have access to ASCC funds in any form must follow the prescribed procedures for recording, handling, and protecting money as detailed in DFA's Financial Management Guide or other explanatory materials, or both. If an employee has knowledge of fraud or waste of public assets, the employee should immediately advise his or her immediate supervisor.

Personal use of ASCC funds or assets is strictly forbidden.

IX. ORGANIZATION RECORDS AND COMMUNICATIONS

ASCC's books and records must reflect accurate and timely recording of all business transactions. Full disclosure of assets, liabilities, receipts and disbursements must be made.

Employees must not make or engage in any false record or communication whether internal or external, including but not limited to:

- A. False expense, attendance, production, financial, or similar reports and statements.
- B. False advertising, deceptive marketing practices, or other misleading representations.

X. DEALING WITH OUTSIDE PEOPLE AND ORGANIZATIONS

Employees must not use their position or affiliation with ASCC when communicating regarding matters not involving ASCC business. Employees must not use organization identification, stationery, supplies, and equipment for personal or political matters.

When communicating publicly on matters that involve ASCC business, employees must not speak for ASCC on any topic, unless they are certain that the views they express are those of ASCC management, and that it is ASCC management's desire that such views be expressed publicly.

When dealing with anyone outside ASCC, including public officials, employees must take care not to compromise the integrity or damage the reputation of ASCC or any other entity.

XI. PROMPT COMMUNICATIONS

Employees of ASCC shall respond promptly and accurately to all requests for information and complaints, regardless of the source.

XII. PRIVACY AND CONFIDENTIALITY

When handling financial and personal information about customers or others with whom ASCC has dealings, observe the following principles:

- A. Collect, use, and retain only the personal information necessary for ASCC business. Whenever possible, obtain any relevant information directly from the person concerned. Use only reputable and reliable sources to supplement this information.
- B. Retain information only for as long as necessary or as required by law. Protect the physical security of this information.
- C. Limit internal access to personal information to those with a legitimate business reason to have the information. Use personal information only for the legitimate business purpose for which it was obtained. Release of any information to persons not involved with the stated business purpose should be made by management in

response to a Freedom of Information Act request. Any tax information that is confidential pursuant to A.C.A. § 26-18-303 should not be disclosed, except as allowed by law.

XIII. REPORTING SUSPECTED FRAUD

ASCC employees have a responsibility to report occurrences of ethical violations, fraud, waste or abuse of ASCC resources that can be verified through investigation. ASCC employees shall be protected against any form of retaliation, including discharge, for reporting, in good faith, occurrences of ethical violations, fraud, waste or abuse of ASCC resources as stated in the Arkansas Whistleblower Act (A.C.A. §§ 21-1-601-609). Investigations to substantiate reported allegations will be conducted in a confidential manner.

Allegations of ethical violations or fraud may be reported to the Arkansas State Employees’ Fraud, Waste, and Abuse Report Center (800-952-8248) or to the Office of Accounting – Internal Audit Section by telephone (501-682-0370). A complainant may also choose to report fraud, waste or abuse by completing a Complaint Form obtained at the following website http://www.arkansas.gov/dfa/accounting/acc_ia_fraud_reporting.html. Complaint forms can be mailed directly to the Office of Accounting – Internal Audit Section at the following address:

Department of Finance and Administration
Office of Accounting – Internal Audit Section
1515 West 7th Street, Room 215
Little Rock, AR 72201

My signature on this document indicates that I have read and fully understand the prohibited activities and my responsibilities to ASCC as listed in this Code of Ethics.

Name

Date

**ARKANSAS SPINAL CORD COMMISSION
CODE OF ETHICS
ANNUAL ACKNOWLEDGEMENT STATEMENT**

My supervisor/manager and I have reviewed and discussed the *ASCC Anti-Fraud and Code of Ethics Policy*. I understand that my signature on this document indicates that I have read and fully understand the prohibited activities and my professional ethical conduct responsibilities as an employee of the ASCC as described in *ASCC Anti-Fraud and Code of Ethics Policy*.

Employee signature

Date

Supervisor/Manager signature

Date

Note to Supervisor/Manager: *The review and discussion of ASCC Anti-Fraud and Code of Ethics Policy is an annual requirement. This signed document shall be placed in the employee's file along with the employee's annual performance evaluation.*

COMPLAINT FORM
DFA-OFFICE OF ACCOUNTING
Internal Audit Section (IA)

For IA use only
RECEIVED:
DATE
TIME

COMPLAINANT: (Optional)
NAME
ADDRESS
HOME TELEPHONE #
EMPLOYMENT
WORK TELEPHONE#

DETAILS OF SUBJECT:

DETAILS OF COMPLAINT:

RECEIVED BY:

For IA use only

ACTION TAKEN:

For IA use only



Policy Number: A.4
Policy Name: Freedom of Information Act

Policy and Procedures

Policy No: A.4
Section: Administrative
Effective: 01/01/09
Subject: FREEDOM OF INFORMATION ACT

PURPOSE

To conform with the Arkansas Freedom of Information Act (A.C.A. § 25-19-101-109).

PROTOCOL

Public business is to be performed in an open and public manner. A.C.A. § 25-19-101-109, the Arkansas Freedom of Information Act of 1987 (FOIA) assures that all citizens have a right to learn and to report fully the activities of their public officials. As a state agency, the Arkansas Spinal Cord Commission falls under this Act.

I. Public Records

A. Definition

Public records for the purpose of this policy include any writings, recorded sound, film, tape, electronic or computer-based information or data compilation in any form. It includes all records maintained in a public office or by public employees as part of their duties.

B. Exemptions

The FOIA exempts some public records from release. For the purposes of the Arkansas Spinal Cord Commission, the following records are deemed exempt:

1. State Income Tax Records.
2. Medical, educational, and adoption records. ASCC client files have been deemed by the Attorney General to be medical records and are exempt. For the purpose of this policy, the client case file includes not only the physical case file materials but also related materials which may be stored outside the file; such as, personal interview and survey responses and any material covered under an Institutional Review Board (IRB) consent form.



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This will include records covered by the federal HIPAA policies (see Client Confidentiality/HIPPA Privacy Practices policy, CS.2).

3. Unpublished memoranda, working papers and correspondence of the Governor, Legislators, Supreme Court Justices and the Attorney General.
 4. Documents protected from disclosure by a court order or rule.
 5. Files that would give an advantage to a competitor or bidder.
 6. Personnel records, if disclosure would constitute a clearly warranted invasion of privacy.
 7. Employee performance evaluation records unless at the end of administrative appeals, the records result in suspension or termination of an employee and the public has a compelling interest the records' release.
 8. Records containing measures, procedures, instructions or related data used to cause a computer or a computer system or network, including telecommunications networks or applications thereon, to perform security functions including, but not limited to, passwords, personal identification numbers, transaction authorization mechanisms, and other means of preventing access to computers, computer systems or networks, or any data residing therein.
 9. Other records defined in the Act.
- C. All requests for records under the Freedom of Information Act shall be referred to the Executive Director. In the absence of the Executive Director, requests will be referred to the Agency Fiscal Officer. Records will be released only by these individuals. Requests for inspection and copying of non-exempt records will be fulfilled during the regular business hours of the Commission. Records not in use or in storage will be released immediately; records in use or in storage will be released within three (3) days.

II. Public Meetings

A. Definition

Public meetings, for the purpose of this policy will include any formal or informal regular or special meeting of a governing body, including sub-bodies, where more



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than one member is present and business is discussed. Meetings of the Arkansas Spinal Cord Commission are deemed public meetings.

B. Notification of Meetings

In keeping with the FOIA, all media in the county where the meeting is to be held, covering regular meetings and those who ask to be notified of called meetings will be notified at least two hours in advance of all called meetings.

C. Executive Session

1. Executive Session, (excluding the public during a meeting) may only be called when the topic is employment, appointment, promotion, demotion, discipline or resignation of a specific public employee(s).
2. If invited by the governing body, the following individuals may attend an Executive Session:
 - a. The top administrator in an agency.
 - b. The employee's immediate supervisor.
 - c. The employee in question.
 - d. Any person being interviewed for top administrative position in the agency.
3. Action discussed in Executive Session must be ratified by a public vote. If no public vote is taken, the decision discussed in closed session has no legal effect.

D. Information for Public Guidance

1. Arkansas Spinal Cord Commission shall prepare and make available:
 - a. A description of its organization, including central and field offices, the general course and method of its operations, and the established locations, including, but not limited to, telephone numbers and street, mailing, electronic mail, and internet addresses and the methods by which the public may obtain access to public records;



Policy and Procedures

- b. A list and general description of its records, including computer databases;
- c. Its regulations, rules of procedure, any formally proposed changes, and all other written statements of policy or interpretations formulated, adopted, or used by the agency board, or commission in the discharge of its functions.
 - i. rules, regulations and opinions used in this section shall refer only to substantive and material items that directly affect procedure and decision-making.
 - ii. personnel policies, procedures, and internal policies shall not be subject to the provisions of this section.
 - iii. surveys, polls, and fact-gathering for decision-making shall not be subject to the provisions of this section.
 - iv. statistical data furnished to a state agency shall be posted only after the agency has concluded its final compilation and result.
- d. All documents composing an administrative adjudication decision in a contested matter, except the parts of the decision that are expressly confidential under state or federal law; and
- e. Copies of all records, regardless of medium or format, released under § 25-19-105 which, because of the nature of their subject matter, the agency, board, or commission determines have become or are likely to become the subject of frequent requests for substantially the same records.



Policy Number: A.5
Policy Name: Inclement Weather

Policy and Procedures

Policy No: A.5
Section: Administrative
Effective: 01/01/09
Subject: INCLEMENT WEATHER

PURPOSE

To outline office and staffing procedures during inclement weather.

PROTOCOL

The general policy regarding inclement weather is that state government does not normally close its offices because of hazardous driving conditions. However, the obligation to provide services to the citizens of the state must be balanced with the risk of danger to state employees. It is, therefore, appropriate that guidelines which reflect the needs of our citizens' and employees' safety be established, in accordance with Governor's Policy Directive GPD-7.

A. In the Little Rock Metropolitan area:

1. In the event of early morning severe inclement weather conditions, the Governor's Office will determine whether this inclement weather policy will be placed into effect and will announce its implementation, if warranted, including affected counties. On days declared to be covered by the inclement weather policy, all employees should be at their work stations by 10:00 a.m. Employees arriving by 10:00 a.m. will be given credit for a full day's attendance. Employees arriving after 10:00 a.m. will be charged the full amount of time involved in the tardiness, and employees not coming to work at all will be charged a full day's absence.
2. When severe inclement weather occurs during office hours, the Executive Director or designee will have the discretion to allow employees to leave work early for safety reasons. Decisions to allow employees to leave work early, however, should recognize the requirement to maintain designated critical personnel and assure service delivery to the citizens for the full workday. Employees who are on the job, and who are allowed to leave early, will not be charged leave for that time.



Policy and Procedures

3. The Executive Director or designee will immediately designate critical personnel, who will be required to reach their work stations by the time of regular office opening regardless of weather related conditions to assure that offices are open to the public and services are provided. Prior designation will allow critical personnel to prepare for weather conditions, and if need be, provide alternative methods of getting to work.

B. In the area outside the Little Rock Metropolitan area:

1. Arkansas Spinal Cord Commission will follow inclement weather policy implementation by the field supervisor in the Arkansas Rehabilitation Services office or the County Administrator of the Department of Human Services County Operations office, whichever is closest to the ASCC staff field office. If local media does not notify employees of implementation, it is the responsibility of the ASCC field office staff to contact the designated supervisor or administrator.
2. ASCC staff members will call his or her immediate supervisor or the ASCC Central Office (800-459-1517) general voice mail to report office closings or inclement weather policy implementation.
3. When the inclement weather policy is implemented by the Governor in an area outside the Little Rock metropolitan area, the attendance provisions applicable to employees in the Little Rock metropolitan area will be applied to employees in the affected area.



Policy and Procedures

Policy No: A.6
Section: Administrative
Effective: 09/01/12
Subject: RECORD RETENTION

PURPOSE

To establish a mechanism for the preservation, storage and timely disposal of all agency records as required by Act 918 of 2005 (A.C.A. § 25-18-601-605).

PROTOCOL

A. Definition:

1. A record for the purpose of this policy is any information or data captured in any form and media by the agency. All agency records are included in the Record Retention Schedule including but not limited to correspondence, fiscal, personnel and client case files.
2. It is important to note that some records are exempt from the Freedom of Information Act 5 U.S.C 552 as amended by Pub. L. No. 104-231, and are not to be released to the public. See Policy A.4 Freedom of Information Act for a list of exempt records. It should be noted that some agency records have historical value in chronicling agency activities and achievements. These historical records should be retained indefinitely.
 - a. This Records Retention Schedule:
 - i. enables prompt discard of records no longer needed.
 - ii. reduces staff time needed to access records.
 - iii. Reduces the number of records maintained.
 - iv. Reduces storage costs.
 - v. Saves filing and storage space.



Policy and Procedures

- vi. Preserves records that need to be available for a long period or permanently.
- b. This Records Retention Schedule identifies:
 - i. Records to be preserved.
 - ii. Length of time records are preserved.
 - iii. Location of preserved records.
 - iv. Method of preserving and discarding records.
 - v. Agency staff member(s) responsible for preserving and discarding records.

Staff members will familiarize themselves with the schedule and take responsibility for the records they have been assigned. Where appropriate, records will be labeled with the staff member assigned for their preservation and the date the records are to be reviewed for disposition. Questions regarding the schedule should be directed to the staff member's supervisor.

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

General Administrative Records 01

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
01001 Agency Directives, Internal Policies and Procedures	Arkansas Spinal Cord Commission Policies and Procedures Manual Arkansas Spinal Cord Commission Case Management Services Procedure Manual Arkansas Spinal Cord Commission Commissioner's Manual Arkansas Spinal Cord Commission Case Management Support Manual	Current hard copy and copies of old manuals stored in file cabinet in Suite 470, 4700-0003. Electronic copies of current and old manuals are stored on Executive Administrative Specialist's computer in Suite 470, 4700-0003. Responsible: Executive Administrative Specialist	Until superseded plus 3 years Disposition: Review/Destroy/Recycle
01002 Complaint Records	Records, paper or E-mail of complaints about agency services, staff or policies from clients or other members of the public Responses to complaints from ASCC Commission members or staff including any documents describing remediation	Hard copies maintained in Complaint Records file in storage room file cabinet in Suite 470, 4700-0010. Responsible: Executive Administrative Specialist	3 years after the final disposition of the complaint. <i>If a complaint becomes the subject of litigation, which involves ASCC, it must be included in and is subject to minimum retention period of a litigation record (5 years after final disposition) Refer to 06006 within this schedule.</i> Disposition: Review/Destroy/Recycle
01003 Correspondence - Substantive	Correspondence announcing new agency policies, policy changes or directives.	Original printed correspondence stored in creator's office in file folder labeled as Correspondence – Substantive. Original E-mail correspondence stored electronically on creator's computer in file folder labeled as Correspondence – Substantive. Responsible: Creator of Correspondence	4 years Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
01004 Correspondence – Non-Substantive	Arkansas Spinal Cord Commission communication that conveys information of temporary business importance or unremarkable communication concerning day-to-day office administration and activities.	Original printed correspondence stored in creator’s office in file folder labeled as Correspondence – Non-Substantive. Original E-mail correspondence stored electronically on creator’s computer in file folder labeled as Correspondence – Non-Substantive. Responsible: Creator of Correspondence	Record may be destroyed after it has served its intended purpose or is no longer of administrative value to the agency Disposition: Review/Destroy/Recycle
01005 News or Press Releases	News releases prepared and disseminated by ASCC staff to one or more media outlet or prepared for dissemination by staff. May include announcements of programs, services, educational events, client stories, solicitation of information or participants, educational messages.	Hard copies (includes printed E-mail correspondence) maintained in media release record file in storage room file cabinet in Suite 470, 4700-0010. Hard copies of each release developed and/or disseminated by staff in field offices will be sent to Central Office for storage. Responsible: Executive Administrative Specialist	1 Year Disposition: Review/Destroy/Recycle
01006 Publications, State	Arkansas Spinal Cord Commission Annual Report Arkansas Spinal Cord Commission Brochure ASCC Spinal Courier Any document developed by ASCC to be disseminated outside the agency for	Hard copies (includes printed E-mail correspondence) maintained in publications record file in storage room file cabinet in Suite 470, 4700-0010. Responsible: Information Technology (IT) Manager	Until the release of the next part in a series (i.e., serial publications issued in successive parts bearing numerical or chronological designations). If the publication is not part of a series: Until it has served its intended purpose. Or is replaced with updated version. One copy of each annual report and of each Spinal Courier issue will be maintained permanently for historical purposes Consistent with Arkansas Code Annotated: § 13-2-201

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
01006 Publications, State, continued	informational or educational purposes.		Copies of state publications must be submitted to the Arkansas State Library for document types and exemptions. The Arkansas State Library retains copies of all state publications as the State Document Depository and the State and Local Government Publications Clearinghouse. Publications are subject to periodic evaluation to determine if the publication merits further retention. Disposition: Review/Destroy/Recycle
01007 Presentations	Outlines or prepared media (i.e., PowerPoint presentations) of formal presentations made by ASCC staff to the public. Presentations made verbally without prepared outlines or media will not be included.	One copy of outline or prepared media for a specific presentation will be maintained, even if the presentation material is used by multiple staff. The creator of the presentation will be responsible for maintaining a hard copy or digital copy in a format that can be opened or replicated. Responsible: Creator of Documents	1 year Disposition: Review/Destroy/Recycle
01008 Papers and Reports	Research or position papers/reports published in a professional journal or submitted as a requirement to a research sponsor. Reports to legislative or other regulatory bodies.	At least one paper copy of the published paper or report will be maintained in Suite 400, 4000-0013. Responsible: IT Manager	4 years from date of publication. Disposition: Review/Destroy/Recycle
01009 Training Materials	Outlines or prepared media (i.e., PowerPoint presentations) of training materials made by ASCC staff to ASCC staff and/or the public. This will include staff orientation materials. Trainings, including staff orientation	One copy of outline or prepared media for a specific presentation will be maintained, even if the presentation material is used by multiple staff. The creator of the presentation is	1 year after updated or after it has served its intended purpose. Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
01009 Training Materials, continued	materials, made verbally without prepared outlines or media will not be included.	responsible for maintaining a hard copy/digital copy in a format that can be opened or replicated. Responsible: Creator of Materials	
01010 Strategic Plans	Agency annual or multi year strategic plans Agency annual priorities plans.	Hard copies stored in file cabinet in Suite 470, 4700-0003. Hard copies stored in file cabinet in Suite 470, 4700-0003. Responsible: Executive Administrative Specialist	Until plan is replaced by an updated version plus 5 years. Disposition: Review/Destroy/Recycle

Meeting Records 02

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
02001 Meeting – Agenda and Minutes of Governing Body	Arkansas Spinal Cord Commission Members’ meeting agenda and minutes	Hard copies ≤ 5 years old stored in binder on bookshelf (for easy access) in Suite 470, 4700-0003; Hard copies > 5 years old are labeled and maintained in storage room file cabinet in Suite 470, 4700-0010. Minutes prior to 2006 are stored in the Arkansas State Library Archives. Responsible: Executive Administrative Specialist	Permanent Disposition: None
02002 Meeting – Notes of Governing Body	Arkansas Spinal Cord Commission Members’ meeting notes, tape recordings	Typed minutes, tapes and digital recordings from current fiscal year	4 years

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
02002 Meeting – Notes of Governing Body, continued	and digital recordings.	are labeled and stored in file cabinet in Suite 470, 4700-0003. Notes, tapes and digital recordings are labeled and maintained in storage room file cabinet in Suite 470, 4700-0010. Responsible: Executive Administrative Specialist	Disposition: Review/Destroy/Recycle
02003 Supporting Documentation of Governing Body meetings	Arkansas Spinal Cord Commission Members' meeting documents which are referred to in minutes.	Hard copies are labeled and maintained in file cabinet in Suite 470, 4700-0003. Responsible: Executive Administrative Specialist	1 year Disposition: Review/Destroy/Recycle

Automated System Records 03

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
03001 Data or Database Dictionary	Spinal Cord Disability Registry (data) Spinal Cord Disability Registry (dictionary)	Computer database file maintained weekly and stored by the Executive Administrative Specialist in Suite 470, 4700-0003. Responsible: Executive Administrative Specialist A copy of the database is stored, monthly, in Suite 400, 4000-0013. Another copy is made monthly to portable media and stored in a locked file cabinet in Suite 400, 4000-0013 and offsite. Offsite location is	Until record is replaced by an updated version. Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
03001 Data or Database Dictionary, continued		determined by IT Manager. Paper documents maintained in a locked file cabinet in Suite 400, 4000-0013. Responsible: IT Manager	
03002 Network Design Files	Network topology and cable ID map for: Little Rock Magnolia	Paper documents maintained in a locked file cabinet in Suite 400, 4000-0013. Responsible: IT Manager	Until record is replaced by an updated version. Disposition: Review/Destroy/Recycle
03003 Network and System Usage Files	None		
03004 Support Service Files – Hardware	Computer and related equipment repair reports and warranties.	Paper documents of original purchase requests and invoices are stored in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager Paper requests for equipment purchase and repair are stored in Suite 400, 4000-0013. Responsible: IT Manager	As long as administratively valuable to the agency. Disposition: Review/Destroy/Recycle
03005 Systems and Applications Development Records	Spinal Cord Disability Registry Client Tracker	Computer files are stored on the IT Manager's computer and backup portable media in a locked file cabinet in Suite 400, 4000-0013. Responsible: IT Manager	Production copies until no longer useful for tracking system changes or until transfer of system data to a new operating environment. Disposition: Review/Erase/Destroy

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
03006 System and Database Backup Files	<p>Little Rock network backup files</p> <p>Field offices Documents</p> <p>Case Manager Tracker</p>	<p>Little Rock network computers are backed up daily to backup hard drive and duplicates are stored to portable media stored offsite at location to be determined by IT Manager.</p> <p>Responsible: IT Manager</p> <p>Field office unique documents are backed up at least monthly and stored offsite. Offsite location to be determined by field Case Managers.</p> <p>Responsible: field Case Managers</p> <p>Case Manager's Tracker is to be emailed to IT Manager for backup on a monthly basis.</p> <p>Responsible: Case Managers and IT Manager</p>	<p>Until 3 successive backup cycles have been completed or until the agency deems they are of no more value.</p> <p>Disposition: Review/Replace</p>
03007 System Security Access Files	Records created to document AASIS user access rights and privileges.	<p>Paper documents stored in file cabinet in Suite 470, 4700-0009.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>1 year</p> <p>Disposition: Review/Replace/Recycle</p>
03008 Source Code	None		
03009 Computer Operation Documentation	<p>Spinal Cord Disability Registry</p> <p>Client Tracker</p>	<p>Computer file stored in Suite 400, 4000-0013.</p> <p>Responsible: IT Manager</p>	<p>Until record is replaced by an updated version</p> <p>Disposition: Review/Replace.</p>

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Personnel and Human Resource Records 04

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
04001 Equal Employment Opportunity Plan	Agency policy and procedures related to EEO.	Current hard copy and copies of old manuals stored in file cabinet in Suite 470, 4700-0003. Responsible: Executive Administrative Specialist	Until plan is replaced by an updated version. Disposition: Review/Destroy/Recycle
04002 Training and Education Records	Registration materials, ASCC Training/Conference Request, meeting or seminar attendance by ASCC staff and Commission members.	Hard copies of training and education records for ASCC staff and Commission members, stored in locked file cabinet in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	4 years Disposition: Review/Destroy/Recycle
04003 Discrimination Complaint Case Files- Charges Filed	Any charge of discrimination filed against ASCC including all records of the charge, and records of any court or mediation proceedings.	Hard copies of discrimination complaint case files of charges filed, stored in locked file cabinet in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	3 years or until final disposition of the charge or action, whichever is greater. Disposition: Review/Destroy
04004 Discrimination Complaint Case Files-Charges Not Filed	Any documentation of allegation of discrimination where a charge has not been filed, including documentation of staff or client grievances filed in accordance with ASCC and state policy.	Hard copies of discrimination complaint case files of charges not filed, stored in locked file cabinet in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	3 years from incident report. Disposition: Review/Destroy
04005 Eligibility Verification Form and Records (I-9)	Documents that an employer has verified prospective employee is a U.S. citizen, resident alien or legal immigrant eligible to work in U.S., as required by U.S.	Hard copies of current employee files are stored in a locked file cabinet in Suite 470. 4700-0009.	3 years after date of hire or 1 year after separation date, whichever is later (as required within the Immigration Reform and Control Act of 1986/PL 99-603, Sec. 274)

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
04005 Eligibility Verification Form and Records (I-9), continued	Immigration and Naturalization Service.	Hard copies, log with back up to portable media, of terminated employee files in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	Disposition: Review/Destroy
04006 Employee Benefit Records	Documents pertaining to an employee's personal health information such as medical and dental benefit records, including E-mails from staff.	Hard copies of current fiscal year stored in locked file cabinet in Suite 470, 4700-0005. Previous fiscal years are labeled and maintained in storage room in boxes & file cabinet in Suite 470, 4700-0010. Responsible: Fiscal Administrative Specialist	5 years after separation or until closure of unresolved personnel issues, whichever is greater. Disposition: Review/Destroy
04007 Employee Personnel Records	Records documenting an individual's employment such as professional certification, promotions/demotions, performance evaluations, disciplinary actions, background checks and driving records.	Hard copy of files on current personnel, stored in a locked file cabinet in suite 470, 4700-0009. Hard copy of files on non-current personnel, stored with limited access in Suite 4700-0009. Hard copy files of non-current, older than 5 years, stored on a computerized log backed up to a portable media as well as a paper hardcopy, stored with the files in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	5 years from the date of separation or until closure of unresolved personnel issues whichever is greater. Disposition: Review/Destroy
04008 Employment History Records	Documentation of an employee's date of hire, date of separation/termination, position title(s) and pay-grade evidencing proof of	Computerized log generated and backed up to a portable media as well as a paper hard copy, stored in Suite	Permanent

ARKANSAS SPINAL CORD COMMISSION
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Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
04008 Employment History Records, continued	service.	4700-0009. Responsible: Agency Fiscal Manager	Disposition: Destroy documents not being kept on portable media that are older than 5 years old.
04009 Employee Wage & Hour Records	Records pertaining to time, leave and payroll deductions including, but not limited to, time sheets, leave requests, W-4, W-5, AR-4, and voluntary product payroll deductions.	Hard copies of current fiscal year stored in locked file cabinet in Suite 470, 4700-0005. Previous fiscal years are labeled in boxes & file cabinet in Suite 470, 4700-0010. Responsible: Fiscal Administrative Specialist	Until authorized by the legislative auditor Disposition: Review/Destroy
04010 Grievance Records and Reports	All E-mails (printed), paper documents and tape recordings related to a grievance filed by a ASCC staff member.	Hard copies and tapes, stored in locked file cabinet in Suite 470 4700-0009. Responsible: Grievance Officer	3 years after closure. Disposition: Review/Destroy
04011 Position Classification and Description Files	Documents job description by a position or class of positions.	Hard copies of spreadsheets stored in locked file cabinet in Suite 470 4700-0009. They are also stored in accounting database on PC in Suite 470, 4700-0009. Hard copies also stored by present position class and description in Agency Policy & Procedure manual, HR.9, Job Descriptions. Superseded policies stored in Suite 470, 4700-0003. Responsible: Agency Fiscal Manager	Until superseded plus three years. Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
04012 Recruitment, Hiring, Interview and Selection Records	Documentation of recruitment, selection, hire, and promotion of employees. Includes position descriptions, job announcements and advertisements, selection criteria, interview evaluations, and employment applications of all applicants.	<p>Hard copies of applications of employees are stored in their personnel files in locked storage cabinet in Suite 470, 4700-0009.</p> <p>Hard copies of applications of applicants not hired are maintained in file cabinets in Suite 470, 4700-0009.</p> <p>Hard copies of job announcements are stored in file with applications in Suite 470, 4700-0009.</p> <p>Files should be labeled with position, title, number, first date of open advertisement and date to be destroyed.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>3 years from date position is filled or until final disposition of the charge or action, whichever is greater. (see U.S. Code 29 C.F.R. 1602.31)</p> <p>Disposition: Review/Destroy</p>
04013 Unemployment Insurance Records and Reports	Documents regarding notification of application for, payment, denial, or appeal of unemployment claims or any other documents we file pertaining to unemployment.	<p>Hard copies of reports stored in a file cabinet in Suite 470, 4700-0009.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>5 years after case closure based on date of application (i.e., 6 years from date of application or notice.)</p> <p>Disposition: Review/Destroy</p>
04014 Workers Compensation Accident Reports	<p>Documents/reports of employee injuries to the Arkansas Workers Compensation Commission and AR Public Employee Claims Division.</p> <p>All documents regarding claim, including approval/disapproval, payment and other correspondence.</p>	<p>Hard copies of reports stored in locked file cabinet in Suite 470, 4700-0009. Files should be labeled with employee name, date of injury and date eligible for destruction.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>3 years from date of injury or case closure, whichever is longer.</p> <p>Disposition: Review/Destroy</p>
04015 Workers Compensation Illness Reports	Documentation of reports of the occurrence of occupational illnesses by employees.	Hard copies of reports stored in locked file cabinet in Suite 470,	6 years from date incident occurred (refer to Arkansas Code Annotated: § 11-9-702)

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
04015 Workers Compensation Illness Reports, continued	Documents/reports of the occurrence of occupational disease or occupational infection as reported to the Arkansas Workers Compensation Commission and Public Employee Claims.	4700-0009. Files should be labeled with employee name, date of onset and date eligible for destruction. Responsible Agency Fiscal Manager	Disposition: Review/Destroy

Fiscal Records 05

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
05001, 05014 Accounts Payable and Invoices	Current outstanding liabilities of the agency including records of payments of bills, goods and services, and vendor payments.	Hard copies, of all accounts payable liabilities and invoices except Client Services liabilities and invoices, stored as current and one prior fiscal year record, in Suite 470, 4700-0009. Hard copies of previous fiscal years records not noted above, stored in boxes & file cabinet labeled with contents and date of destruction in Suite 470, 4700-0010. Responsible: Agency Fiscal Manager Hard copies of current fiscal year Client Services liabilities and invoices, stored in Suite 470, 4700-0005. Hard copies of previous fiscal years records not noted above, stored in boxes & file cabinet labeled with contents and date of destruction in Suite 470, 4700-0010.	Until authorized by Legislative Auditor. (as required by Arkansas Code Annotated: § 19-4-1108) Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
05001, 05014 Accounts Payable and Invoices, continued		Responsible: Fiscal Administrative Specialist	
05002 Accounts Receivable	Current outstanding monies and funds owed the agency for goods and services.	<p>Hard copies of accounts receivable reconciliations current fiscal year and one prior year stored in Suite 470, 4700-0009.</p> <p>Hard copies from previous fiscal years stored in boxes & file cabinet labeled with file or box contents and date of destruction in Suite 470, 4700-0010.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108)</p> <p>Disposition: Review/Destroy/Recycle</p>
05003 Account Reconciliation	Reconciliations of agency funds and accounts, federal revenues/federal expenditures, capital assets/capital expenditures	<p>Hard copies of current fiscal year documents and one prior year stored in Suite 470, 4700-0009.</p> <p>Hard copies of previous fiscal years stored in boxes & file cabinet labeled with file or box contents and date of destruction in Suite 470, 4700-0010.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108)</p> <p>Disposition: Review/Destroy/Recycle</p>
05004 Biennial Budget Approved by Legislature	<p>The comprehensive financial plan for the agency's biennial operating budget that was approved by the legislature and forms a basis of the appropriation.</p> <p>Biannual budget proposal and annual operating plan</p>	<p>Hard copies of budget plans stored in binders by year in Suite 470, 4700-0009.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>Until authorized by the Legislative Auditor.</p> <p>Disposition: Review/Destroy</p>

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
05005 Appropriation, Budget and Fund Requests	<p>The comprehensive financial plan for the agency's biennial operating budget that was approved by the legislature and forms a basis of the appropriation.</p> <p>ASCC Appropriation, Budget, and Fund Requests including any supporting documentation created and/or used to justify and support legislative appropriation and allocation requests.</p>	<p>Hard copies of budget and fund request documentation stored in binders by year in Suite 470, 4700-0009.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>Until authorized by the Legislative Auditor.</p> <p>Disposition: Review/Destroy</p>
05006 Audit Report Prepared by the Arkansas Division of Legislative Audit.	<p>The final report of an audit performed on ASCC under the Arkansas Division of Legislative Audit.</p>	<p>Hard copies of reports stored in file cabinet in Suite 470, 4700-0009.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>Audit reports will be maintained for 5 fiscal years previous to the present fiscal year.</p> <p>Disposition: Review/Destroy</p>
05007 Bank Statements	<p>Current status of transaction activity of ASCC funds held at the State Treasury and/or a bank.</p>	<p>Hard copies of bank statements for current fiscal year plus 1 year previous are stored in a locked file cabinet in Suite 470, 4700-0009.</p> <p>Hard copies of bank statements for previous fiscal years are stored in boxes & file cabinet labeled with file or box contents and date of destruction in Suite 470, 4700-0010.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108)</p> <p>Disposition: Review/Destroy</p>
05008 Check Receipt Registers	<p>Cash Receipt transactions including but not limited to deposit slips and other records used to verify receipts, estimate revenues, and reconcile accounts.</p>	<p>Hard copies for current fiscal year plus 1 year previous are stored with bank statements in Suite 470, 4700-0009.</p> <p>Hard copies of previous fiscal years</p>	<p>Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108.)</p> <p>Disposition: Review/Destroy/Recycle</p>

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
05008 Check Receipt Registers, continued		stored in boxes & file cabinet, labeled with file or box contents and date of destruction. in Suite 470, 4700-0010. Responsible: Agency Fiscal Manager	
05009 Check Registers	Log of checks issued.	Hard copies of log are stored in locked filing cabinet in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108.) Disposition: Review/Destroy/Recycle
05010 Checks: Not Redeemed/Redeemed	Voided and not-redeemed checks, cancelled checks, and reissued checks; redeemed checks written on agency accounts.	Hard copies of current fiscal year voided, cancelled and reissued checks are stored in a file cabinet in Suite 470, 4700-0009. Hard copies of voided, cancelled and reissued checks of previous fiscal years stored in boxes and file cabinet, labeled with file or box contents and date of destruction in Suite 470, 4700-0010. Responsible: Agency Fiscal Manager	Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108) Disposition: Review/Destroy
05011 Competitive Bids & Competitive Bids Report Non-Client Services	Evaluation and award of bids to vendors and/or agencies including, but not limited to, requests for proposals, bid and quote lists, notices of bid openings, comparison summaries, or evidence of rejected and accepted bids, vendor correspondence.	Hard copies for current fiscal year of competitive bids, requests for proposals, bids & quote lists, notice of bid openings, comparison summaries, evidence of rejected or accepted bids & vendor correspondence for other than client services as well as the monthly Competitive Bid Report for all bids, stored in file cabinet in Suite 470,	Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108) Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
<p>05011 Competitive Bids & Competitive Bids Report Non-Client Services, continued</p> <p>Competitive Bids, Client Services</p>		<p>4700-0009.</p> <p>Hard copies of above documentation for prior fiscal years stored in boxes and file cabinet, labeled with contents and date of destruction in Suite 470 4700-0010.</p> <p>Responsible: Agency Fiscal Manager</p> <p>Hard copies of current fiscal year of client services competitive bids, requests for proposals/bids, 'No Bids' and vendor correspondence stored in Suite 470, 4700-0005</p> <p>Hard copies of client services documentation for prior fiscal years stored in file cabinets and boxes labeled with contents and dates of destruction in Suite 470, 4700-0010.</p> <p>Responsible: Fiscal Administrative Specialist</p>	
<p>05012 Debit/Credit</p>	<p>Records and reports of adjustment of dollar amounts in funds due to recording errors, transfers between accounts, receipt and verification of special deposits, and/or withdrawals.</p>	<p>Hard copies for current fiscal year plus 1 year previous are stored in filing cabinet in Suite 470, 4700-0009.</p> <p>Hard copies for previous fiscal years are stored in boxes & file cabinet labeled with file or box contents and date of destruction in Suite 470, 4700-0010.</p> <p>Responsible: Agency Fiscal Manager</p>	<p>Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108</p> <p>Disposition: Review/Destroy/Recycle</p>

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
05013 General Ledger Registers	An accounting of all fiscal transactions for the agency for each month including the monthly budget and financial statements as well as the quarterly reports to the Commission members.	Hard copies of current registers and one prior fiscal year stored in a file cabinet, by month, in Suite 470, 4700-0009. Hard copies for previous fiscal years are stored in boxes & file cabinet labeled with contents and date of destruction in Suite 470, 4700-0010. Responsible: Agency Fiscal Manager	Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108 Disposition: Review/Destroy/Recycle
05014 Invoices	See 05001		
05015 Journal Entry Registers	Not Applicable		
05016 Petty Cash Fund	Records of Petty Cash activity for ASCC including requests and authorization to establish petty cash funds, ledgers, statements, requests for disbursements, copies, receipts and invoices.	Hard copies of reconciliation and reimbursements for current fiscal year stored in Suite 470, 4700-0009. Hard copies for previous fiscal years stored in boxes & file cabinet labeled with contents and date of destruction in Suite 470, 4700-0010. Responsible: Agency Fiscal Manager	Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108 Disposition: Review/Destroy/Recycle
05017 Purchasing	Records of purchase of goods and services by the agency including but not limited to, purchase requisitions, orders, authorizations, contracts, encumbrances, and maintenance contracts.	Hard copies for current year purchase orders and purchase requisitions stored in filing cabinets in Suite 470, 4700-0009. Hard copies for all contracts are filed in Suite 470, 4700-0009. Hard copies for previous fiscal years	Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108 Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
05017 Purchasing, continued		stored in boxes & file cabinet labeled with file or box contents and date of destruction in Suite 470, 4700-0010. Responsible: Agency Fiscal Manager	
05018 Inventory and Capital Assets	Documents a listing of equipment and furniture owned by ASCC not including expendable supplies.	Hard copies of purchase and retirement documentation stored in filing cabinet in Suite 470, 4700-0009. Hard copies of M & R transactions and write off requests to DFA maintained in binders in Suite 470, 4700-0009. All agency equipment and furniture by location maintained on AASIS database. Responsible: Agency Fiscal Manager	Until authorized by Legislative Auditor. (As required by Arkansas Code Annotated: § 19-4-1108 Disposition: Review/Destroy/Recycle
05019 Transfers	ASCC does not create legal fund or other transfers between its own funds or other agencies' funds. All other transfer directions fall elsewhere in this document.		
05020 Travel Expenses	Records of travel expenses for agency travelers including, but not limited to, reimbursement claims, travel detail sheets, supporting documentation such as receipts, Training/Conference Request approval, spreadsheet, monitoring funds issued/used.	Hard copies of travel documents for current fiscal year stored in file cabinet in Suite 470, 4700-0005. Hard copies of documents for previous fiscal years labeled, in boxes and file cabinet in Suite 470, 4700-0010. Responsible: Fiscal Administrative Specialist	Until authorized by the legislative auditor (as required by Ark. Code Annotated 19-4-1108) Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Legal Records 06

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
06001 Complaint Files	Records of communications and other relevant documentation concerning complaints filed that result in litigation that involve ASCC or ASCC employee(s)	Records stored in file cabinet labeled with name of complainant, date of complaint and date of final disposition in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	3 years after final disposition. Disposition: Review/Destroy/Recycle
06002 Complaint Files – Regulated Entity	ASCC regulates no entities		
06003 Contracts/Agreements 06003 Contracts/Agreements, continued	Documents concerning ASCC contractual obligations including but not limited to contracts, professional service agreements, lease agreements and letters of agreement.	Hard copies of records stored in files labeled with contractor name in file cabinet in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	5 years after contract or agreement termination. Disposition: Review/Destroy/Recycle
06004 Freedom of Information Act (FOIA) Documentation	State FOIA request original documents and copies of agency response to request (not including records requested).	Individual files for each FOIA request and response are maintained in a file labeled with name of requestor and date of request cabinet in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	3 years after date of request. Disposition: Review/Destroy/Recycle
06005 Legal Opinions	Legal opinions received from Attorney General and of request for opinion (maybe hard copy or copy of E-mail transmission).	Individual files for each legal opinion request and response are maintained in a file cabinet labeled with topic and date of request in Suite 470, 4700-0009. Responsible: Agency Fiscal Manager	As long as administratively valuable to the agency, reviewed by agency Director annually to determine ongoing value. Disposition: Review/Destroy/Recycle

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
06006 Litigation Files	Documents the status of litigation involving ASCC, its officials or employees.	Individual files for each litigation are maintained in a file cabinet labeled with name of litigant and date of final disposition in Suite 470, 4700-0010. Responsible: Agency Fiscal Manager	5 years after final disposition Disposition: Review/Destroy/Recycle
06007 Permits/Licenses	ASCC issues no permits or licenses.		
06008 Permits/Licenses Applications	ASCC holds no permits or licenses.		

Grant Records 07

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
07001 Grants Issued – Application, Administrative and Program Files	ASCC does not award grants.		
07002 Grants Denied	ASCC does not award grants.		
07003 Grants Received	Documentation of all grant applications, both those funded and those denied including but not limited to request for proposals, application, notification of awards, fiscal and supporting documents reports and correspondence related to grant monitoring, audit, status, progress and final	Paper documents stored in file cabinet in Suite 470, 4700-0010. Responsible: Executive Director and Agency Fiscal Manager.	Until authorized by the legislative auditor or in compliance with grant regulations and specifications, whichever is greater. Disposition: Review/recycle; Shred/Destroy Media containing Personal IDs

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
07003 Grants Received, continued	<p>reports. All requests for grant modification or extension and other documents pertinent to the award and completion of the grant.</p> <p>Documentation of all client recruitment, selection, contact and participation involved in accomplishing a grant. This includes all participant files, informed consent forms, HIPAA forms, source records, data entry forms, code sheets, databases, analyses, interpretation and subsequent publications.</p>	<p>Paper documents and computer media stored in file cabinet in Suite 400, 4000-0010. Paper documents and computer media of participant files and documents with personal identifiers (if any) stored in a locked cabinet in Suite 400, 4000-0013.</p> <p>Responsible: IT Manager</p>	<p>Until authorized by the legislative auditor or in compliance with grant regulations and specifications, whichever is greater.</p> <p>Disposition: Review/recycle; Shred/Destroy Media containing Personal IDs</p>

Medical Records 08

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
08001 Open Client Cases	All open client case files	<p>Paper files stored in file cabinets by assigned Case Manager in their office.</p> <p>Responsible: All Case Managers</p>	<p>Indefinitely or until the case is closed</p> <p>Disposition: Send to Client Services Administrator</p>
08002 Closed Client Cases	<p>Deceased, Status 70 cases</p> <p>Moved out of state, Status 71 cases</p> <p>Unable to locate, Status 72 cases</p>	<p>Paper files stored in file cabinets in closed case file room Suite 400, 4000-0011.</p> <p>Paper files stored in file cabinets in closed case file room Suite 400, 4000-0011.</p> <p>Paper files stored in file cabinets in closed case file room Suite 400, 4000-0011.</p>	<p>Disposition: Retain for 1 year then culled and electronically scanned on a quarterly basis.</p> <p>Disposition: Retain for 3 years then culled and electronically scanned on a quarterly basis.</p> <p>Disposition: Retain for 3 years then culled and electronically scanned on a quarterly basis.</p>

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Record Number & Category Title	Description	Storage and Location Format	Minimum Retention Period
08002 Closed Client Cases, continued	No longer medically eligible, Status 73 cases	Paper files stored in file cabinets in closed case file room Suite 400, 4000-0011. Responsible: IT Manager and Executive Administrative Specialist	Disposition: Retain for 3 years then culled and electronically scanned on a quarterly basis.
08003 Not Eligible or Never Opened Cases	Not medically eligible, Status 20 cases.	Paper files stored in file cabinets in closed case file room Suite 400, 4000-0011. Responsible: IT Manager and Executive Administrative Specialist	Disposition: Retain for one year then the paper files are shredded on a quarterly basis.
08004 Culled Closed Client Cases Scanned Culled, Closed Client Cases	After retaining the closed client case files as required in section 08002, files are culled of non-essential documentation as indicated in the Culling Retention Schedule for Closed Client Cases. Culled closed client case file documents are electronically scanned and placed on portable media.	Paper documents stored in file cabinets in closed case file room, Suite 400, 4000-0011. Two copies of the PDF computer files on are stored in a locked file cabinet in Suite 400, 4000-0013 and one copy is stored offsite. Offsite location to be determined by IT Manager Responsible: IT Manager	Disposition: Not longer than one year. After the culled files are successfully scanned and copied then the paper case files are shredded on a quarterly basis. Disposition: As long as is administratively valuable to the agency then are destroyed.

ARKANSAS SPINAL CORD COMMISSION
Records Retention Schedule

Retention Schedule for Culling of Closed Case File for Electronic Scanning

Record Number & Category Title	Records to be Retained
Culling of Closed Client Cases	Form 2, Case Closure Notification Form 3, Surveillance Questionnaire Form 9, Protected Health Information (PHI) Tracking Log Form 10, Authorization/Statement of Account Form 13, Certificate of Medical Eligibility Old form 14, Certificate of Ineligibility Form 14, Client Annual Review Summary Old form 15, Application for Services Form 16, Financial Resources Information Form 18, all ASCC Case Narratives Old form 22, Client Referral (pink) Form 22 or 22R, Initial Interview/Assessment Form 23, Medical Eligibility Determination Form 28 or 28R, Independent Living Plan Form 30, last Client General Information Sheet DHHS-100, Application for SSBG Services (Title XX) and last redetermination



Policy Number: A.7
Policy Name: Use of ASCC Vehicle

Policy and Procedures

Policy No: A.7
Section: Administrative
Effective: 01/01/09
Subject: USE OF ASCC VEHICLE

PURPOSE

To promote safe, efficient use of agency vehicle.

PROTOCOL

The ASCC vehicle will be maintained by the Central Office staff. The following procedures are to be followed when using the ASCC vehicle:

- A. Reserve the vehicle at least 24 hours in advance, trips out of town will have first priority, then it will be first come, first served.
- B. The vehicle log must be completed by the driver each time the vehicle is used. The driver is responsible for logging the date, driver's name, beginning mileage, ending mileage, whether the gas tank was filled and any comments regarding working condition of the vehicle.
- C. The vehicle keys, gas card and vehicle log may be picked up from the vehicle coordinator in Central Office. If the vehicle will be returned after 4:00 p.m., please make arrangements for disposition of the vehicle keys before the trip.
- D. When you return the vehicle, make sure there is at least 1/2 tank of gas left, if not, fill it up. Return all gas receipts to the vehicle coordinator.
- E. Keep the vehicle clean!! If you have trash, dispose of it before leaving the vehicle. If it needs washing, inform the vehicle coordinator and write it on the vehicle log.
- F. If you notice maintenance needs, write it on the vehicle log and inform the vehicle coordinator when returning the clipboard.
- G. Park in a parking space in the designated parking lot (see map on clipboard). Never park in handicapped or visitors spaces.



Policy Number: A.7
Policy Name: Use of ASCC Vehicle

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- H. Any parking tickets or moving violations received while the vehicle is in your possession are the responsibility of the driver.
- I. The vehicle may not be used for personal business; it is for official use only.
- J. When a state-owned vehicle is involved in an accident in Pulaski County and it cannot be driven from the site of the accident, you should make arrangements to have the vehicle towed to the Marketing and Redistribution facility at 6620 Young Road, Little Rock.
 - 1. Should an accident occur or the vehicle becomes inoperable outside of Pulaski County, the vehicle should be towed to the nearest state facility, such as Vocational Technical School.
 - 2. All accidents or incidents should be reported to the Central Office immediately.
- K. Before using the vehicle, a photocopy of the employee's driver's license and a copy of the employee's car insurance policy must be on file at Central Office and updated as expiration occurs.
- L. Seat belts are to be worn at all times while operating or riding in the vehicle, failure to wear seat belts may result in termination.



Policy Number: A.8
Policy Name: Vehicle Safety Program

Policy and Procedures

Policy No: A.8
Section: Administration
Effective: 01/01/09
Subject: VEHICLE SAFETY PROGRAM

PURPOSE

To comply with state mandate on vehicle safety program.

PROTOCOL

The state has mandated institution of a vehicle safety program. In order to comply with this, the following procedures will be followed.

- A. Every employee or passenger in a state car or in a personal car on state business is required to use a seat belt. Failure to do so may result in termination.
- B. If an employee's job makes it necessary to travel in his/her personal vehicle, whether routinely or occasionally, he/she is required to maintain liability insurance on that vehicle in order to be eligible to receive mileage reimbursement. Proof of coverage must be on file at Central Office and updated as expiration occurs.
- C. As a condition to employment, all employees will sign a Authorization to Operate State Vehicles and Private Vehicles on State Business (VSP-1) form and understand that a motor vehicle record will be obtained annually in order to disclose past driving records.
- D. Each employee is required to provide proof of an Arkansas drivers license and public liability insurance in order to operate state or personal vehicles on state business.
- E. High-risk drivers will be identified by the use of a points system. The points system assigns a numerical value for various driving offenses and violations incurred. Multiple violations may result in an employee losing privilege to drive on state business. A description of the point system is available from the Agency Fiscal Officer.
- F. All accidents will be reported immediately to the Executive Director or Agency Fiscal Officer. Any accident in the state vehicle must be reported to local police immediately and a police report obtained. A written report will be required when there is damage to a state vehicle. Copies of the report form are available from the Central Office.



Policy Number: A.9
Policy Name: Appropriate Use of the Internet
and Electronic Mail

Policy and Procedures

Policy No: A.9
Section: Administrative
Effective: 01/01/09
Subject: APPROPRIATE USE OF THE INTERNET AND ELECTRONIC MAIL

PURPOSE

To comply with the state mandate (Act 1287 of 2001) to establish and implement a policy regarding the appropriate use of the internet and electronic mail (e-mail).

PROTOCOL

I. NEED

- A. The Arkansas Spinal Cord Commission (ASCC) believes that the internet is an efficient and timely tool that can be used by agency employees to accomplish government functions, to conduct internal business, business with other governmental agencies, and with the public.
- B. ASCC considers internet access to be a privilege and a legitimate tool for employees who agree to use the resource in a considerate and responsible manner. ASCC can benefit from the use of the internet in the following ways:
 - 1. Provides an efficient method for the exchange of information within the agency, between governmental agencies, and the general public.
 - 2. Connects the agency to the statewide governmental e-mail system.
 - 3. Allows access to state government information systems (e.g., AASIS).
 - 4. Allows access to participation in regional discussion groups of a professional nature.
 - 5. Allows access to university libraries, catalogs, newspapers, the National Library of Medicine, and other internet resources for research purposes.



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II. ACCESS

- A. ASCC will make internet access available to all agency employees. ASCC provides internet access to about 25 employees at any given time. ASCC contracts with Arkansas Rehabilitation Services (ARS) and the Department of Human Services (DHS) to provide internet access for some field office employees. Employees who receive their internet access through ARS or DHS are expected to comply with ARS and DHS rules for internet access.
- B. Access to the internet may be filtered to block the display of certain content.

III. PRIVACY

ASCC has the right, but not the duty, to monitor all communications and downloads that pass through its network and equipment, at its sole discretion. Any information retained on ASCC's network and equipment may be disclosed to outside parties or to law enforcement authorities.

IV. UNACCEPTABLE USE

- A. Employees are expected to conduct themselves professionally in the workplace and to refrain from using agency office equipment for activities that are inappropriate. Misuse or inappropriate personal use of agency office equipment includes, but is not limited to:
 - 1. The creation, copying, transmission, or retransmission of greeting cards, video, sound or other large file attachments that can degrade the performance of the entire network.
 - 2. Access to pornography or hacker sites opens the agency to unacceptable security risk and is considered inappropriate use.
 - 3. Using agency systems as a staging ground or platform to gain unauthorized access to other systems.
 - 4. The creation, copying, transmission, or retransmission of chain letters or other unauthorized mass mailings regardless of the subject matter



Policy and Procedures

5. Using agency office equipment for activities that are illegal, inappropriate, or offensive to fellow employees or the public. Such activities include, but are not limited to: hate speech, or material that ridicules others on the basis of race, creed, religion, color, sex, disability, national origin, or sexual orientation.
6. The creation, download, viewing, storage, copying, or transmission of sexually explicit or sexually oriented materials.
7. The creation, download, viewing, storage, copying, or transmission of materials related to illegal gambling, illegal weapons, terrorist activities, and any other illegal activities or activities otherwise prohibited, etc.
8. Downloading, copying, and/or playing of computer video games.
9. Use for commercial purposes or in support of "for-profit" activities or in support of other outside employment or business activity (e.g., consulting for pay, sales or administration of business transactions, sale of goods or services).
10. Engaging in any outside fund-raising activity, endorsing any product or service, participating in any lobbying activity, or engaging in any prohibited partisan political activity.
11. Use for posting agency information to external news groups, bulletin boards or other public forums without authority. This includes any use that could create the perception that the communication was made in one's official capacity as a state government employee, unless appropriate agency approval has been obtained or the use is not at odds with the agency's mission or positions.
12. Any use that could generate more than minimal additional expense to the agency (e.g., subscribing to unofficial LISTSERV or other services which create a high-volume of e-mail traffic).
13. The unauthorized acquisition, use, reproduction, transmission, or distributions of any controlled information including computer software and data, that includes privacy information, copyrighted, trademarked or material with other intellectual property rights (beyond fair use), proprietary data, or export controlled software or data.



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14. The purchase of personal goods and services (shopping over the internet); and
 15. Any use that reflects poorly on ASCC or the State of Arkansas.
- B. Employees are also expected to safeguard unauthorized access to ASCC electronic information resources. Appropriate access to electronic information resources includes, but is not limited to:
1. Not disclosing any information concerning access control mechanism without proper authorization.
 2. Treating all information maintained on ASCC computer systems as strictly confidential and not releasing any information to an unauthorized person.
 3. Storing information under secure conditions and making every effort to protect the data.
 4. Understanding that legitimate use of a computer or network does not extend to whatever I am capable of doing, but rather, only to job duties I have been authorized to perform.
 5. Not accessing, modifying, or copying programs, files or data of any sort belonging to other users without obtaining prior authorization from the appropriate authority (owner of record, CIO, or designee).
 6. Immediately notifying the Information Technology Manager if any data is lost or stolen.

V. E-MAIL

- A. Electronic mail is provided to support open communication and the exchange of information between staff and other appropriate entities who have access to a network. This communication allows for the collaboration of ideas and the sharing of information. E-mail is a necessary component of teamwork at ASCC.
- B. E-mail is subject to all policies regarding acceptable/unacceptable uses of the internet.



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- C. E-mail resembles speech in its speed and lack of formality. However, unlike speech, e-mail leaves a record that is often retrievable even after the sender and recipient delete it. Thus, the user should not consider e-mail to be either private or secure.
- D. The agency will permit third party access to private e-mail only where written consent has been obtained from both the sender and recipient except to investigate illegal activity, misuse of the system, to resolve a technical problem, or similar circumstances. Any electronic record (including e-mail) that serves to document the organization, functions, policies, decisions, procedures, operations, or other activities is considered public record and subject to the Arkansas Freedom of Information Act 5 U.S.C 552 as amended by Pub. L. No. 104-231 (FOIA). See Freedom of Information Act (A.4).
- E. The agency will attempt to provide an electronic messaging environment that provides data confidentiality and integrity; however, all ASCC e-mail messages can be accessed by the network administrator in an emergency or to resolve a technical problem. The agency cannot be responsible for web-based e-mail systems such as Yahoo, AOL, etc. Employees should be aware of the risks associated with the use of both types of systems.
- F. Users should take note that the agency business generated on e-mail is a public record, subject to public inspection, and is not confidential, unless specifically cited by statute. When an e-mail message is a public record, it shall be retained in accordance with State statutes. E-mail messages of only transitory value need not be saved. In fact, the failure to routinely delete these messages clogs information systems, strains storage resources, and creates agency liability risks.

VI. PUBLIC DOMAIN MATERIAL

Any user may download public domain programs for job-related use, or may redistribute a public domain program non-commercially. However, doing so assumes all of the risks regarding the determination of whether or not a program is in the public domain.

VII. RESPONSIBILITIES

- A. **The ASCC Executive Director and the Information Technology Manager** have agency-wide responsibilities to manage information technology (IT), including security, and to formulate agency policies on IT.



Policy and Procedures

- B. **Agency supervisors** should ensure that employees are informed of appropriate use of agency office equipment and information technology as part of their introductory and on-going training. Agency supervisors are also responsible for enforcing this policy.
- C. **Employees** are accountable to follow policy and procedures regarding internet use and to be responsible for their own personal and professional conduct.

VIII. SANCTIONS FOR MISUSE

Unauthorized or improper use may result in loss of use or limitations on the use of the information technology resources, disciplinary or adverse actions, termination, criminal penalties, and/or the employee being held financially liable for the cost of improper use.

IX. CONSENT

All employees will sign a consent form stating that they have read this Internet Use Policy and agree to comply with all its terms and conditions before being provided internet access.



Policy Number: A.9
Policy Name: Appropriate Use of the Internet
and Electronic Mail

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Internet Use and Electronic Mail Policy Consent Form

I recognize that the use of all ASCC electronic information resources is a privilege and that I must adhere to the mandated policies. My signature below indicates I understand the terms of the Appropriate Use of the Internet and Electronic Mail policy, and agree to comply with its terms and provisions.

ASCC makes no warranties of any kind, whether expressed or implied, for the service that is the subject of this policy. In addition, ASCC will not be responsible for any damages whatsoever which employees may suffer arising from or related to their use of any ASCC electronic information resources, whether such damages be incidental, consequential or otherwise, or whether such damages include loss of data resulting from delays, non-deliveries, mistaken deliveries, or service interruptions whether caused by either ASCC's negligence, errors, or omissions. Users must recognize that the use of ASCC electronic information resources is a privilege and that the policies implementing usage are requirements that mandate adherence.

Employee (Signed) _____ Date: _____

Supervisor (Signed) _____ Date: _____



Policy Number: A.10
Policy Name: Management and Sale of Agency
Surplus Computer Equipment

Policy and Procedures

Policy No: A.10
Section: Administrative
Effective: 01/01/09
Subject: MANAGEMENT AND SALE OF AGENCY SURPLUS COMPUTER EQUIPMENT

PURPOSE

To comply with the state mandate (Act 1401 of 2001 and Act 970 of 2005) to establish and implement a policy to guide the management of agency surplus computer equipment and electronics, and a plan for the sale of such equipment.

PROTOCOL

I. MANAGEMENT OF AGENCY COMPUTERS AND ELECTRONIC EQUIPMENT

- A. All new or used computer and electronic equipment shall be inventoried and shall be installed by the Agency Fiscal Officer and the Information Technology Manager.
- B. The Agency Fiscal Officer and the Information Technology Manager will maintain inventory control documentation of computer and electronic equipment purchased for agency use. The inventory will include the inventory tag number, purchase price, date of purchase, brand name, type of equipment, model number, serial number and any other identifying data, as well as the name and location of the Primary Agency User.
- C. All computer and electronic equipment not in service within the agency or not intended for future use by the Primary Agency User shall be returned to the Information Technology Manager.
- D. The Agency Fiscal Officer and the Information Technology Manager may keep a back stock of used computer hardware and electronics for the purpose of parts harvesting for the repair, maintenance, and upgrade of computers in use by the agency and also for loan to employees while repairs are conducted.
The back



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stock, whenever feasible, shall not exceed ten percent (10%) of the number of computers within the agency.

II. DETERMINING COMPUTERS OR ELECTRONIC EQUIPMENT AS SURPLUS

- A. No used computer or electronic equipment shall be considered surplus and delivered to the Marketing and Redistribution Section of the Office of State Procurement of the Department of Finance and Administration (M&R) until after the equipment has met the following criteria:
1. The Information Technology Manager has thirty (30) days after the receipt of the used equipment from the Primary Agency User to examine the equipment and to evaluate whether or not it can be put to further use by the agency in accordance with the Executive Chief Information Officer's policy on replacement of computer and electronic equipment; and
 2. The Information Technology Manager has determined that the equipment is not currently needed by the agency; is not anticipated to be utilized by the agency within the next six (6) months; and/or that the equipment is obsolete for further agency use; or
 3. There is a back stock of used equipment which exceeds ten percent (10%) of the number of computers in the agency and the equipment which has been held as back stock by the agency for more than six (6) months.

III. DEGAUSSING OF COMPUTER HARD DRIVES

- A. The Information Technology Manager shall be responsible for the degaussing of all computer hard drives before their delivery to M&R. The Information Technology Manager shall also be responsible for determining the appropriate methods of degaussing computer hard drives and shall complete and sign a certificate in accordance with the Executive Chief Information Officer's policy that degaussing has been accomplished.
- B. All hard drives of surplus computer equipment shall be degaussed within ninety (90) days after replacement.



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IV. SURPLUS EQUIPMENT

Computer and electronic equipment determined to be surplus will be sent by the Agency Fiscal Officer and the Information Technology Manager to M&R for sale, auction, recycling, donation, demanufacturing, or disposal. Surplus computer and electronic equipment will be sent to M&R or a date for delivery to M&R will be set within one hundred twenty (120) days after replacement.

V. NO WARRANTY

Agency computers and electronic equipment delivered to M&R are on an "as is" basis, without any warranty of any kind by the agency.

VI. DISBURSEMENT OF REVENUES

- A. Funds generated from the sale of agency surplus computer and electronic equipment by the Marketing and Redistribution Section of the Office of State Procurement of the Department of Finance and Administration, either internally or via the internet shall be allocated as follows:
1. Fifty percent (50%) of the proceeds shall be returned to the agency,
 2. Twenty-five percent (25%) of the proceeds shall be deposited with the Marketing and Redistribution Section of the Office of State Procurement of the Department of Finance and Administration; and
 3. Twenty-five percent (25%) of the proceeds shall be deposited in the Computer and Electronic Recycling Fund established by Act 1410.

VII. DEFINITIONS

For purposes of this Policy and Procedure, the following definitions apply.

- A. **Agency** – Arkansas Spinal Cord Commission.
- B. **Agent** - The person(s) in agencies responsible for purchasing and/or maintaining computer equipment. The fiscal agent's responsibilities may also lie with the



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same person(s) with the computer equipment maintenance responsibilities. In smaller agencies, this may be one person, and in large agencies it may be several people.

- C. **Computer** - A programmable electronic machine that performs high-speed mathematical or logical operations or that assembles, stores, correlates, or otherwise processes information. In addition, the term “computer” as used in this policy refers to all computer related equipment; such as, printers, keyboards, cables, monitors, hubs, switches, removable hard drives, external CD copiers, scanners, modems, etc.
- D. **Degauss** - To erase information from.
- E. **Demanufacturing** - End of life disposition of electronic devices and computers; includes recovery of hard drives and chips with resale value, the removal of commodities, such as copper, aluminum, and gold for sale to scrap consumers, the removal and hazardous waste disposal of toxins and heavy metals, and the shredding or melting of materials that can be sold and manufactured into new products.
- F. **Director** - The Executive Director of the Arkansas Spinal Cord Commission.
- G. **Electronics** - Devices utilizing electrons and electric circuits including household appliances, televisions, recording and playing devices for music or video tapes, compact discs and digital technology.
- H. **Employee** – An individual who is a permanent employee of the agency and who occupies a regular salaried position.
- I. **Fund** - The Computer and Electronic Equipment Recycling Fund established by Act 1410 of 2001.
- J. **Marketing and Redistribution**- The Marketing and Redistribution Section of the Office of State Procurement of the Department of Finance and Administration (M&R).
- K. **Primary Agency User (PAU)** - The agency employee who has been utilizing the individual computer or electronic equipment in the course of his/her job duties. If the computer or equipment is put to use by another employee of the agency after the initial one, that employee will become the Primary Agency User (PAU). The



Policy and Procedures

Information Technology Manager will note the Primary Agency User change on the inventory control documents.

- L. **Recycle** - The use of previously manufactured materials including metal, glass, and plastic in the manufacture of new products.
- M. **Reuse** - Use of electronics, computers, and equipment for harvesting of spare parts, resale or donation.
- N. **Surplus Computer Equipment** - Computer components no longer in use in the agency that have residual market value.

VIII. TIMELINE FOR THE SALE OF SURPLUS COMPUTERS AND ELECTRONIC EQUIPMENT

<u>Day/Up-to-Day</u>	<u>Action</u>
1	Information Technology Manager takes receipt of equipment.
30	Information Technology Manager determines if equipment is surplus.
90	Information Technology Manager must degauss surplus hard drives.
120	Date set for delivery of equipment to M&R.



Policy Number: HR.1
Policy Name: Catastrophic Leave Bank Program

Policy and Procedures

Policy No: HR.1
Section: Human Resources
Effective: 01/01/09
Subject: CATASTROPHIC LEAVE BANK PROGRAM

PURPOSE

To assist eligible employees during medical emergencies by providing access to additional paid leave time.

PROTOCOL

In accordance with Arkansas Code Annotated § 21-4-203, 21-4-214, 6-63-601, and 6-63-602 (amended Act 194 of 2003), the Arkansas Spinal Cord Commission provides access to a catastrophic leave bank for employees. Since the Commission is a small agency and may not be able to sustain an agency leave bank to meet the needs of our staff, the Arkansas Spinal Cord Commission applied and was accepted as a member agency of the Department of Finance and Administration, Office of Personnel Management (OPM) Catastrophic Leave Bank Program.

- A. The Executive Director appoints one ASCC staff member to represent ASCC on the OPM Catastrophic Leave Committee. This individual serves as the Agency liaison to the program and provides ASCC staff with information and technical assistance about the program.
- B. Applications for catastrophic leave should be obtained from the Agency Fiscal Officer, completed, and submitted to the applicant's supervisor for approval.
- C. ASCC employees are subject to all eligibility and procedure requirements of the OPM Catastrophic Leave Bank Program. No catastrophic leave will be granted other than through the Catastrophic Leave Bank Program.
- D. The OPM Catastrophic Leave Bank Program Policy follows and is to be considered the ASCC policy.



Policy Number:
Policy Name:

A.11
Electronic Records and
Electronic Signatures

Policy and Procedures

Policy No: A.11
Section: Administrative
Effective: 01/01/15
Subject: Electronic Records and Electronic Signatures

PURPOSE

To comply with the state mandate (Act 722 of 2007) to permit the use of electronic records and electronic signatures. Documents requiring original signatures when submitted electronically by email, scan or fax will be accepted and considered an original signature.

PROTOCOL

I. GENERAL

- A. The Arkansas Spinal Cord Commission (ASCC) permits the use of electronic records or electronic signatures, including but not limited to scanned or faxed copies, when allowed for by state law and other ASCC policies.
- B. Unauthorized usage of electronic signatures shall be treated with the same accord as unauthorized usage of an original signature.

II. EXTERNAL REFERENCES

- A. A.C.A. §25-31-101 - Arkansas Electronic Records and Signatures Act
- B. A.C.A. §25-32-101 - Uniform Electronic Transactions Act
- C. SS-70-011 – Electronic Signature Standard
- D. State of Arkansas Policy Statement on the User of Electronic Signatures by State Agencies, June 2008



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III. DEFINITIONS

For purposes of this Policy and Procedure, the following definitions apply.

- A. **Digital Signature** - A type of electronic signature that relies on a public key infrastructure (PKI) to provide a unique identifier and link the signature to the record, authenticating both the signer and the document.

- C. **Electronic Signature** - An electronic sound, symbol, or process attached to or logically associated with a record and executed or adopted by a person with the intent to sign the record. The term “electronic signature” is often confused with that of a “digital signature.” However, a digital signature (defined above) is a specific type of electronic signature. The definition for “electronic signature” is not technology-specific; it does not require the use of any particular hardware or software application, but allows for any technology that can properly authenticate the signer and the signed document. It can include the use of such technologies as email, faxes and imaging, or more exotic technologies.

- D. **Record** - A record means information that is inscribed on tangible medium or that is stored in an electronic or other medium and is retrievable in perceivable form. Record includes both electronic records and printed, typewritten, and tangible records.



Policy Number: HR.1
Policy Name: Catastrophic Leave Bank Program

Policy and Procedures

OFFICE OF PERSONNEL MANAGEMENT Catastrophic Leave Bank Program

POLICY

I. PURPOSE

This policy establishes a Catastrophic Leave Bank Program to be administered by the Office of Personnel Management (OPM) of the Department of Finance and Administration (DFA) as authorized by Arkansas Code annotated §§ 21-4-203, 21-4-214, 6-63-601 and 6-63-602 (as amended by Act 194 of 2003). The OPM Catastrophic Leave Bank Program creates no expectation or promise of continued employment with a participating state agency or institution of higher education, and is intended simply to assist eligible employees during medical emergencies.

II. ELIGIBILITY REQUIREMENTS FOR CATASTROPHIC LEAVE

- A. The applicant must be a regular, non-faculty, benefits-eligible, full-time, employee of an agency/institution participating in the OPM Catastrophic Leave Bank. A person who works less than full time (forty (40) hours per week) is excluded from this definition and, as such, is ineligible to participate as a donor or recipient in the OPM Catastrophic Leave Bank Program. Requests for exceptions may be submitted to OPM for review.
- B. The employee, if covered by the “Uniform Attendance and Leave Policy Act”, must have been employed by the State of Arkansas for more than two (2) consecutive years in a regular, full-time position. Non-classified employees of institutions of higher education must have been employed by the state institution of higher education for more than two (2) consecutive years.
- C. Subject to A.C.A. § 21-4-214 state agency employees must have exhausted all sick, annual, holiday and compensatory leave time, and, at the onset of the illness or injury, had to his or her credit at least eighty (80) hours of combined sick and annual leave. “Onset of Illness” means the initial beginning or start, as certified by a physician, of the medical condition which created the need for the catastrophic leave request. If a recurrence of the same illness necessitates a subsequent catastrophic leave request, the eligibility requirement that the employee have eighty (80) hours of combined sick and annual leave at the onset



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of the illness will not be required on the illness recurrence date. The requirement of 80 hours combined leave at the onset of the illness/injury and exhaustion of all such leave does not apply to institution of higher education nonclassified employees. Effective February 21, 2003, as authorized by Act 194 of 2003, the “80-hour requirement” may be waived for an otherwise eligible employee if an “extraordinary circumstance” is declared by an agency director or president of an institution of higher education due to the applicant providing documentation that one of the following conditions has occurred:

1. The employee applying for catastrophic leave bank program benefits on or after February 21, 2003, had, during the previous two (2) year period, another, medically documented, catastrophic illness, as defined by this policy, which was not compensated under the State of Arkansas Catastrophic Leave Bank Program and caused the exhaustion of all annual and/or sick leave, or
 2. The employee applying for catastrophic leave bank program benefits on or after February 21, 2003, had, during the previous two (2) year period, exhausted his or her sick and annual leave as a direct result of supplementing workers’ compensation benefits, which were received due to an on-the-job injury or illness with the State of Arkansas.
- D. If the illness or injury is that of an employee and is covered by workers’ compensation, the compensation based on catastrophic leave when combined with the weekly workers’ compensation benefit received by the employee shall not exceed the compensation being received by the employee at the onset of the illness or injury.
- E. The employee has not been disciplined for leave abuse during the past two (2) years.
- F. No employee shall be eligible for approved catastrophic leave in excess of six (6) months (1,040 hours) unless it can be ascertained that the employee has been denied disability retirement or Social Security benefits. However, the employee has the option of reapplying for additional leave at the conclusion of the catastrophic leave period.
- G. No employee shall be approved for catastrophic leave unless that employee is, or is reasonably expected to be, on leave-without-pay status as a result of the catastrophic illness.



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- H. In no case shall the employee be granted catastrophic leave beyond the date certified by a physician as the date when the employee is able to return to work because the health of either the employee or the qualifying family member has sufficiently improved.
- I. No employee shall be approved for catastrophic leave unless that employee has provided an acceptable medical certificate from a physician (or other individual as provided by A.C.A. §§ 21-4-201 *et seq.* and 6-63-602) supporting the continued absence and setting forth that the employee is, and will continue to be, unable to perform the employee's duties due to a catastrophic illness of the employee or a qualifying family member. Information about the employee's assigned duties shall be made available to the physician and to the Catastrophic Leave Committee.
- J. For purposes of this program, the following definitions apply:
1. **Catastrophic Leave Bank** means a pool of accrued annual and sick leave voluntarily donated by employees, which may be approved for use by employees who meet catastrophic illness/injury eligibility requirements.
 2. **Catastrophic Illness** means a medical condition of an employee or spouse or parent of the employee or of a child of the employee which may be claimed as a dependent under the Arkansas Income Tax Act of 1929, as certified by a physician that requires an employee's absence from duty for a prolonged period of time and which, except for the catastrophic leave program, would result in a substantial loss of income to the employee because of the exhaustion of all earned sick, annual, holiday and compensatory leave.
 3. **Prolonged Period of Time** means a continuous period of time (minimum of thirty (30) working days) whereby a medical condition prevents the employee from performing the employee's duties.
 4. **Medical Condition** means a personal emergency limited to catastrophic and debilitating medical situations, severely complicated disabilities and/or severe accidents of the employee or a qualifying family member which cause the employee to be unable to perform their job, require a prolonged period of recuperation and/or require the employee's absence from duty as documented by a physician or other individual as provided in A.C.A. § 21-4-201 *et seq.* Disabilities resulting from elective surgery do not qualify for catastrophic leave.



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5. **Dependent Child Certification:** Complete the “Dependent Child Certification Form” sign and attach to the catastrophic leave request. If the child was acquired after the most current income tax filing, provide other proof, i.e., birth certificate, adoption order, etc.
6. **Substantial Loss of Income** means a continuous period of time where the employee will not be compensated by the employing state agency/institution due to a medical condition after the exhaustion of all earned sick, annual, holiday and compensatory leave.

III. DONATIONS OF LEAVE TO THE OPM CATASTROPHIC LEAVE BANK

The director/head of each participating agency/institution shall screen leave donated by the employees of that agency/institution to ensure that the following criteria are met:

- A. Accrued leave may only be donated to the OPM Catastrophic Leave Bank in one (1) hour increments.
- B. No employee of a participating agency/institution shall be allowed to donate leave to the OPM Catastrophic Leave Bank if such donation will reduce that employee’s accrued sick and annual leave balance to less than eighty (80) hours. This restriction does not apply to employees who are terminating their employment.
- C. Annual and/or sick leave which has been donated to the OPM Catastrophic Leave Bank may not be restored to the employee who donated the leave time.
- D. Approved donations of leave shall be transmitted to the OPM Catastrophic Leave Bank by submitting an approved donor form.

IV. OPM CATASTROPHIC LEAVE BANK COMMITTEE

A. Membership

The OPM Catastrophic Leave Bank encompasses the employees of the Department of Finance and Administration and various smaller



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agencies/institutions for whom an independent catastrophic leave bank is not feasible due to their size. The Committee shall be comprised of at least five (5) members representing a cross section of the participating agencies/institutions and appointed by the directors/heads of those agencies/institutions. The Committee shall elect a chairperson from the committee membership.

B. Responsibility

The purpose of the Committee will be to review all catastrophic leave requests, ensure that all eligibility requirements are met, and make recommendations to the directors/heads of participating agencies/institutions. The Committee shall make determinations of continuing eligibility.

V. CATASTROPHIC LEAVE BANK ADMINISTRATION

The OPM Catastrophic Leave Bank will be administered in accordance with the following guidelines:

- A. Applications for catastrophic leave shall be reviewed on a first filed, first reviewed basis. Approval does not guarantee that a catastrophic leave applicant will receive leave should there be a zero balance in the OPM Catastrophic Leave Bank.
- B. Members of the Committee will review applications from employees of participating agencies for catastrophic leave and make recommendations to the requesting employee's agency director/institution head.
- C. Determinations by the OPM Catastrophic Leave Committee shall be reviewed by the agency director/institution head.
- D. Participating agency directors/institution heads cannot grant catastrophic leave exceeding that approved by the OPM Catastrophic Leave Committee; however, appeals may be made or the employee may reapply for additional hours.
- E. If the agency director/institution head does not agree with the OPM Catastrophic Leave Committee's final recommendations, he/she may appeal to the State Personnel Administrator.



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- F. If the agency director/institution head does not agree with the State Personnel Administrator's decision, an appeal may be made to the Director of the Department of Finance and Administration.
- G. The DFA Director's decision is final and binding on all parties.
- H. Only eligible employees of participating agencies/institutions may participate in the OPM Catastrophic Leave Bank Program.
- I. Catastrophic leave may be granted or donated in one (1) hour increments only.
- J. Catastrophic leave shall not be awarded retroactively.
- K. Catastrophic leave which would result in a negative balance in the OPM Catastrophic Leave Bank shall not be approved.
- L. Employees on catastrophic leave will continue to accrue leave in accordance with existing state leave policies and will receive the normal state benefits, such as agency/institution contributions to insurance and retirement. Employees on catastrophic leave will also continue to receive their normal rate of pay. Catastrophic Leave will not change an employee's increase eligibility date; however, the award of the next merit salary increase will be delayed beyond the anniversary date for the same number of work days that the employee was on leave without pay and/or catastrophic leave.
- M. In the event that an employee on catastrophic leave is terminated, retires, dies or returns to work prior to expiration of previously approved catastrophic leave time, all unused catastrophic leave shall be returned to the OPM Catastrophic Leave Bank.
- N. Leave earned while an employee is on catastrophic leave shall, as a condition of voluntary participation in the program, be assigned to the OPM Catastrophic Leave Bank, and any restrictions concerning the maintenance of minimum leave balances shall not apply to such assignment. If an employee is on catastrophic leave for even one day in an accrual period, all leave earned during that period shall be returned to the OPM Catastrophic Leave Bank. Exceptions may be made for employees awarded intermittent leave.
- O. An employee may be dismissed if such employee fails to report to work promptly at the expiration of the period of approved/granted catastrophic leave. Nothing, however, shall prevent the agency/institution from accepting satisfactory reasons



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provided by the employee, in advance of the date the employee is scheduled to return to work, and from granting leave without pay status to an employee prior to or after the expiration of such catastrophic leave if in the view of the agency director/institution head such action is warranted. Supervisors should not take disciplinary action for such leave until the application has been formally approved or denied.

- P. Alleged or suspected abuse of the OPM Catastrophic Leave Bank Program shall be investigated, and on a finding of wrongdoing, an employee shall repay all of the leave hours awarded from the OPM Catastrophic Leave Bank and shall be subject to such other disciplinary action as is determined by the participating agency director/institution head.

VI. RECORD KEEPING

The OPM Catastrophic Leave record keeping procedure will track the following:

- A. The amount of leave donated by each employee, the rate of pay and dollar value of such donated leave at the time of donation;
- B. The amount of Catastrophic Leave awarded, including the name of the recipient, position number, rate of pay and SSN; and
- C. Any other such data as required by the Director of the Department of Finance and Administration.

VII. PROHIBITION OF COERCION

An employee may not directly or indirectly intimidate, threaten or coerce, or attempt to intimidate, threaten or coerce, any other employee for the purpose of interfering with any such employee with respect to donating, receiving or using annual or sick leave. Any report of such described instances shall be reported in writing to the director/head of the participating agency/institution. All written reports of such described instances shall be investigated thoroughly and appropriate disciplinary action may be taken for any substantiated violation.



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OFFICE OF PERSONNEL MANAGEMENT Catastrophic Leave Bank Program

PROCEDURE

I. APPLICATION FOR CATASTROPHIC LEAVE

A. Part I

1. Requests for catastrophic leave may be initiated by employees or their designees by completing Part I of the Recipient Application Form. The applicant shall obtain the timekeeper's verification of actual or projected leave exhaustion dates (Part III of the Recipient Application Form), attach a Physician's Certification of the illness, a Liability Agreement and a Dependent Child Certificate, if applicable, shall also be attached and submit the application to his/her supervisor.

B. Part II

1. The supervisor shall certify whether or not **formal written disciplinary action** has been taken during the past two (2) years and explain the **specific** circumstances which caused the employee to exhaust his/her leave (not simply "past illness", etc.). A brief listing of the employee's specific job duties may be required by the OPM Catastrophic Leave Committee. After signing the request, the supervisor will submit the application to the personnel/payroll representative.

C. Part III

1. The personnel/payroll representative will verify that the employee is in a full-time, regular position and, if applicable, the status of Workers' Compensation. The personnel/payroll representative will process the request with the employee's Latest Hire Date and Career Service Date. The section titled Disability Insurance is to be completed only for institution employees.
2. After completing and signing Part III of the OPM Catastrophic Leave Bank Recipient Application Form, the personnel/payroll representative will send it to the OPM Catastrophic Leave Bank c/o the OPM Catastrophic Leave Bank Chairperson, Department of Finance and



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Administration, Office of Personnel Management, 201 DFA Building, P. O. Box 3278, Little Rock, Arkansas 72203-3278. The Chairperson will date stamp the application, assign a case number, and present the request at the next regularly scheduled or special committee meeting.

D. Part IV, V & VI

1. The Committee's recommendation will be forwarded to the recipient's agency director/institution head for approval and signature. The employee will receive written notification of the decision. The agency/institution will retain three copies to be distributed to 1) the appropriate supervisor, 2) the appropriate timekeeper and 3) the agency catastrophic leave bank file. The original will be returned to OPM to be entered into the database and retained in the master file. Reports showing leave currently accrued in the Catastrophic Leave Bank and applications pending will be provided to the Committee by OPM as requested or needed.

II. DONATION OF CATASTROPHIC LEAVE

- A. Employees may donate leave to the OPM Catastrophic Leave Bank by completing Part I of the OPM Catastrophic Leave Bank Program Donor Application Form, and submitting the form to the appropriate timekeeper for verification of leave balances.
- B. The timekeeper will complete Part II of the form verifying the employee's leave balances.
- C. The timekeeper will submit the form to the agency/institution personnel/payroll representative for verification of the employee's employment status and rate of pay.
- D. The agency/institution personnel/payroll office will obtain the signature of the agency director/institution head approving the donation.
- E. Signed copies of the donor form will be retained in the employee's personnel file and the agency's/institution's catastrophic leave bank file.
- F. The **original** of the donor form is to be sent to the OPM Catastrophic Leave Bank, c/o OPM Catastrophic Leave Bank Record Keeper, Department of Finance and Administration, Office of Personnel Management, 201 DFA Building, P. O. Box



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3278, Little Rock, Arkansas 72203-3278. The Office of Personnel Management will date stamp the donation and enter the donated leave into the database. The original of the donor form will be retained in the OPM Catastrophic Leave Bank master file.

III. TRANSMISSION OF ACCRUED OR RETURNED LEAVE TO THE OPM CATASTROPHIC LEAVE BANK

- A. The Returned or Accrued Leave Transmittal Form is to be completed by agency/institution timekeepers who will retain a copy for their files and send the **original** to the OPM Catastrophic Leave Bank, c/o OPM Catastrophic Leave Bank Record Keeper, Department of Finance and Administration, Office of Personnel Management, 201 DFA Building, P. O. Box 3278, Little Rock, Arkansas 72203-3278.
- B. Leave earned by employees on catastrophic leave will be transmitted **monthly** to the OPM Catastrophic Leave Bank using the Returned or Accrued Leave Transmittal Form.
- C. Any Catastrophic leave which, for any reason, is not used by the employee to whom it was awarded shall be returned to the OPM Catastrophic Leave Bank using the same form and procedure noted in paragraph III.B. above.
- D. Returned or accrued leave will be added to the catastrophic leave database by the Office of Personnel Management. Reports will be provided to the agency/institution personnel/payroll office as needed.
- E. Questions concerning catastrophic leave reports or Catastrophic Leave Bank status should be addressed to the OPM Catastrophic Leave Chairperson.

IV. MISCELLANEOUS

- A. Arkansas Code Annotated § 19-6-109(c) allows state agencies to receive and deposit all non-revenue receipts and/or miscellaneous earnings to be credited to the fund of fund account from which the agency draws its support. Therefore, any cash donations made voluntarily by a Catastrophic Leave Bank Program recipient may be received, and deposited accordingly, by a Catastrophic Leave Bank Program Committee in the appropriate agency/institution fund or fund account.



Policy Number: HR.2
Policy Name: Criminal Background Checks

Policy and Procedures

Policy No: HR.2
Section: Human Resources
Effective: 01/01/09
Subject: CRIMINAL BACKGROUND CHECKS

PURPOSE

To comply with state mandate to assure that background checks are completed on all state employees who have direct contact with children and elderly persons.

PROTOCOL

In accordance with A.C.A. § 12-12-1513, the Arkansas Spinal Cord Commission will obtain a state and national criminal background check on all agency employees who have direct contact with children.

- A. For the purpose of this agency, direct contact is defined as unsupervised one-to-one contact with individuals under the age of 18.
- B. Based on the above definition, ASCC Case Managers (Rehabilitation Counselor III, Senior Case Manager) are the only employees whose job responsibilities place them in a position to have direct contact with children.
- C. All new state employees hired into an ASCC Case Manager position after September 1, 1997 will undergo a state and national criminal background check as a condition of employment. If the Commission can verify that the applicant has been employed with a state agency in a position that includes direct contact with children within 60 days previous to submission of the application or has lived continuously in Arkansas for the past five (5) years, only a state background check is required.
- D. Applicants with a criminal background will not be considered for employment.
- E. Employees with a criminal background will be terminated unless a special consideration exists.
- F. The Arkansas Spinal Cord Commission will assume cost of completing the background check.



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Policy No: HR.3
Section: Human Resources
Effective: 01/01/09
Subject: DRUG FREE WORKPLACE

PURPOSE

To assure a drug free work environment for the well being of all employees, consumers and the public at large.

PROTOCOL

Drug abuse and use at the workplace are subjects of immediate concern in our society. These problems are extremely complex and ones for which there are no easy solutions. From a safety perspective, the use of drugs may impair the well being of all employees, the public at large, and result in damage to state property. Therefore, it is the policy of the State of Arkansas that the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance in a state agency's workplace is prohibited. Any employee violating this policy will be subject to discipline up to and including termination. The specifics of this policy are as follows:

- A. State agencies will not differentiate between drug users and drug sellers. Any employee who gives or in any way transfers a controlled substance to another person or sells or manufactures a controlled substance while on the job or on agency premises will be subject to discipline up to and including termination.
- B. Each employee is required by law to inform the agency within five (5) days after he/she is convicted for violation of any federal or state criminal drug statute where such violation occurred on the agency's premises. A conviction means a finding of guilt (including a plea of *nolo contendere*) or the imposition of a sentence by a judge or jury in any federal court, state court or other court of competent jurisdiction.
- C. Arkansas Spinal Cord Commission must notify the U.S. Government agency with which it is under contract within 10 days after receiving notice from the employee or otherwise receives actual notice of such a conviction.
- D. If an employee is convicted of violating any criminal drug statute while in the workplace, he/she will be subject to discipline up to and including termination. Alternatively, the agency may require the employee to successfully finish a drug abuse program sponsored by an approved private or governmental institution.



Policy Number: HR.3
Policy Name: Drug Free Workplace

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- E. As a condition of further employment on any federal government contract, the law requires all employees to abide by this policy.



Policy Number: HR.4
Policy Name: Employee Benefits

Policy and Procedures

Policy No: HR.4
Section: Human Resources
Effective: 01/01/09
Subject: EMPLOYEE BENEFITS

PURPOSE

To enumerate the benefits available to employees of the State of Arkansas.

PROTOCOL

Employees of the State of Arkansas are entitled to numerous benefits. These are listed and described briefly below. For additional information on benefits the employee should contact the Central Office.

A. Deferred Compensation

State employees are eligible to participate in a deferred compensation program. Money is placed in an account and interest earned through this program is not subject to current federal or state income taxes until withdrawn from the account. Withdrawals are limited until retirement. This is designed to provide a tax-favored way for employees to supplement Social Security and pension benefits.

B. Workers' Compensation

1. State employees are covered by Workers' Compensation for job related injuries or illnesses. This provides protection from expenses incurred due to job-related injuries or illness. After six (6) days of absence, due to job related injuries or illness an employee may be entitled to 66% (2/3) of their salary up to a set maximum, for the duration of their absence. Other benefits include payments made to survivors of deceased employees with job related injuries and to those who sustain job related disabilities. Additional information regarding Workers' Compensation is available by contacting the Central Office.
2. All work-related injuries must be reported to the employee's supervisor immediately. Reporting forms are available from the Agency Fiscal Officer.



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C. Health Insurance

1. State employees are eligible to participate in the State Health and Life Insurance Plan. The state contributes a portion of the employee's premium. Employee payments are payroll deductible. Participation is voluntary and the employee must request enrollment.
2. Health insurance provides several optional plans. A base amount of life insurance is included in each plan. Additional optional life insurance is available, as well as dependent health and life insurance.
3. An employee is eligible for insurance on the first day of the month following one (1) month of employment. At age 65, rates and benefits are reduced.

CI. Employees Assistance Program (EAP)

The state Employees Benefits Division offers state employees who purchase state health insurance and covered family members the Employee Assistance Program (EAP) to provide immediate professional assistance with personal, work related or emotional issues. A trained professional will assist with making an appointment with a licensed therapist or provide names and telephone numbers for network therapists. More information may be obtained by visiting the New Directions Behavioral Health (NDBH) website at <https://www.ndbh.com/> or by calling NDBH at 1-877-300-9103.

CII. Optional Insurance Plans

Supplementary optional insurance plans such as life, income protection, cancer and others are available at reasonable rates to state employees. Information is available from the Central Office.

CIII. Retirement and Social Security

All full time state employees are covered by the Arkansas Public Employees Retirement Systems (APERS) and the federal Social Security System. Employees are vested in the retirement system after five (5) years of service. To receive full benefits, the employee must have 28 years of service or reach age 65. The amount of benefits for each program is based on the highest **three years** salary average, except disability retirement, which has separate rules. A deferred retirement option (DROP) is available to employees with



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28 years of service in the APERS. Information is available at the Central Office. For additional information on retirement, go to www.apers.org.

G. Credit Unions

Employees' financial needs can be addressed through these non-profit institutions owned and controlled by its members. Services vary with each credit union and most offer payroll deductions.

H. Pay Periods and Paychecks

Employees are paid biweekly (26 pay periods per year). Bi-weekly pay periods begin on Sunday and end on Saturday. All employees receive paychecks by direct deposit. Bi-weekly remuneration statements detailing salary, payroll deductions and leave balances are mailed to all field staff and hand delivered to all Little Rock staff by the payday Friday.

I. Career Service Recognition Payments

A. Annual career service payments are made to reward long-term state employees. Employees are eligible upon completion of ten (10) or more years of service in a regular full time position. Career service recognition payments are made on the designated employment anniversary. The following scale is presently used to calculate annual payments:

1.	10 through 14 years of state service	\$800
2.	15 through 19 years of state service	\$1000
3.	20 through 24 years of state service	\$1200
4.	25 or more years of state service	\$1500



Policy Number:

HR.5

Policy Name:

Employee Conduct
Standards

Policy and Procedures

Policy No: HR.5
Section: Human Resources
Effective: 01/01/09
Subject: EMPLOYEE CONDUCT STANDARDS

PURPOSE

To maintain a high standard of employee performance and assure fair and consistent treatment of employees.

PROTOCOL

I. RESPONSIBILITIES OF MANAGEMENT AND EMPLOYEES

It is the responsibility of the supervisor/manager to orient employees to standards of conduct, to monitor employee conduct, establish and maintain a positive work environment, and administer conduct standards and penalties consistently and objectively.

It is the responsibility of the employee to be familiar with conduct standards, follow policies and conduct their activities in a professional manner, participate in any administrative investigations of standards violations and carry out penalties that may be assessed.

II. EQUAL OPPORTUNITY STATEMENT

Conduct standards will be administered in an objective and good faith manner without regard to race, sex, age, religion, national origin, disability, or political affiliation.

III. PROGRESSIVE DISCIPLINE

All formal disciplinary actions are progressive in nature unless the situation is serious enough to warrant immediate termination. The principle of progressive discipline requires warnings of progressive penalties and assistance to be given in improving unacceptable behavior. Progressive discipline actions may include verbal warnings, written warnings, suspension (without pay), and discharge.



Policy Number:

HR.5

Policy Name:

Employee Conduct
Standards

Policy and Procedures

- A. To the extent that is reasonable and within the scope of requirements of this policy, employees shall be given the opportunity to alter negative behavior through the use of positive or constructive corrective action.
- B. Penalties for violation of standards shall be administered by supervisors, managers, and administrators in a neutral, consistent, even-handed, and nondiscriminatory manner. Supervisors are expected to use good judgment in determining the seriousness of violations and the disciplinary penalties. Supervisors must be able to justify by documented facts in each case that there has been a violation and that the penalty is appropriate.
 1. **Oral Warning** - A verbal notice to inform the employee that he/she has violated a conduct standard and that if such violation is repeated within six (6) months, a more severe disciplinary action (written warning) will be issued or suspension without pay may be imposed depending on the seriousness of the violation. A copy of the documentation of the oral warning will be given to the employee and placed in the employee's personnel file.
 - a. **Note** - Depending on the seriousness of the violation, a second oral warning may be issued for the same offense. A second oral warning will be considered a stronger reprimand and will also require that a written notice be placed in the employee's personnel file. The notice will include the date of warning, the violation discussed, and a statement signed by the employee attesting to the fact that he/she understands that this is the final oral warning to be given prior to a written warning. Employee will be given a copy of the documentation of the second oral warning.
 2. **Written Warning** - The written notification must inform the employee that his/her violation of a standard has been documented and that more severe disciplinary action up to and including discharge will be taken if an equal or more substantial violation occurs. If the same or similar unacceptable behavior is repeated, the supervisor may suspend the employee (without pay) for a specified period or take the action required to discharge the employee depending on the seriousness of the violation. A copy of the written warning will be given to the employee and placed in the employee's personnel file.



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3. **Suspension** - A strong action to be used for major violations of standards, repeated violations of standards or when management determines that the charge and/or the job atmosphere warrants the immediate removal of the employee for a specified period of time. Dates of suspension are to be scheduled as soon as possible following the imposition of the penalty. Suspension shall be without pay. The number of days will be determined by the seriousness of the violation. An employee may not be suspended more than twice or an accumulation of more than 30 working days. Further violations will result in discharge. The decision to suspend must be approved by the Executive Director.
4. **Discharge** - An action to be imposed against an employee where the nature of the violation is extreme or the accumulation of violations has reached the limit, and it has been determined that it is in the best interest of the agency that the employment of the employee be terminated. A recommendation to discharge an employee may be made by the immediate supervisor after a thorough and documented administrative review of the situation, but the final decision to discharge must be approved by the Executive Director.

IV. APPEAL PROCESS

Any employee against whom disciplinary and/or termination action has been taken may appeal such action as appropriate through the ASCC Employee Grievance Procedure (HR.6).

V. DOCUMENTATION

Supervisors will be responsible for documenting each disciplinary action taken. Orderly recording of standard violation(s) will be made the day the violation is verified and disciplinary action taken. Recordings will be specific and detailed in clear factual statements. Documentation records must include:

- A. Cause for disciplinary action including nature of offense and standard (rule) which has been violated.
- B. Disciplinary action taken.



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- C. Assistance and/or advice given to the employee to eliminate the need for more drastic future action.
- D. Standards expected in the future. Specify date that expectations are to be met.
- E. Consequences if standards are not followed.
- F. Employee's response to the violation and disciplinary action.
 - 1. Documentation of an oral warning must be signed and dated by the supervisor and placed in the supervisor's employee file. Documentation of an oral warning may be removed from the supervisor's employee file at the end of six (6) months if no other infraction has occurred. Documentation of the written warning must be signed and dated by the employee and the supervisor. A copy of the documentation will be placed in the employee's personnel file. If the employee refuses to sign the written warning, the Executive Director will be asked to obtain the employee's signature. If the employee still refuses to sign, a statement regarding the employee's refusal must be signed by both the supervisor and the Executive Director and added to the documentation. Documentation of Suspension must be signed and dated by the employee, supervisor, and the Executive Director. A copy of the documentation will be placed in the employee's personnel file.

VI. CONDUCT STANDARDS AND PENALTIES FOR NONCOMPLIANCE

- A. Each employee shall be made fully aware of all conduct standards that may be promulgated and with which employees are expected to abide and the consequences for violation of such standards while employed by the agency. New employees will be given a copy of this policy at time of hire or their first day on the job. Current employees will receive a copy of each subsequent revision. In all cases, policy dissemination will be documented by the employee signing an acknowledgement of receipt of the policy. The receipt will be placed in the employee's personnel file.
- B. Accordingly, all employees of the agency shall be expected to abide by the following standards, which are established as guidelines to give a measure of consistency in the administering of discipline within the agency and any other conduct standards that may be subsequently adopted by the agency.



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Standards/Actions	Oral	Written	Suspension	Discharge
<p>A. Employees are expected to perform at a level commensurate with the job specifications and performance standards.</p> <p>1. Unsatisfactory work performance.</p> <p>2. Inability to perform assigned duties.</p>	<p></p> <p>X</p> <p>X</p>	<p></p> <p>X</p> <p>X</p>	<p></p> <p>X</p> <p>X</p>	<p></p> <p>X</p> <p>X</p>
<p>B. Employees are expected to report immediately to supervisor when unable to be at duty station. Time away from duty station must have prior approval. Working hours, break periods, and lunches will be strictly observed.</p> <p>1. Unauthorized absence.</p> <p>2. Verified misuse of sick leave (i.e., claiming to be sick as an escape from duty).</p> <p>3. Chronic failure to adhere to work hours (i.e., tardiness, extended lunch breaks, leaving early).</p> <p>4. Abandonment of job.</p>	<p>X</p> <p>X</p> <p>X</p> <p></p>	<p>X</p> <p>X</p> <p>X</p> <p></p>	<p>X</p> <p>X</p> <p>X</p> <p></p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p>
<p>C. Employees will maintain a courteous and respectful attitude in dealing with clients, co-workers, subordinates, supervisors, and members of the public.</p> <p>1. Discourteous or inappropriate treatment of clients, public, or other employees.</p> <p>2. Threats, profane or abusive language to clients, other employees, or the public.</p>	<p>X</p> <p></p>	<p>X</p> <p>X</p>	<p>X</p> <p>X</p>	<p>X</p> <p>X</p>



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Standards/Actions	Oral	Written	Suspension	Discharge
3. Actions of abuse directed toward any person which takes advantage (actual or attempted) for personal gain.		X	X	X
D. Employees will refrain from any discrimination or harassment based on race, sex, age, religion, national origin, disability, or political affiliation. 1. Willful discrimination or harassment. 2. Non-willful action resulting in the effect of discrimination or harassment.				X
1. Willful discrimination or harassment.				X
2. Non-willful action resulting in the effect of discrimination or harassment.		X	X	X
E. Employees shall exercise reasonable, responsible and maintenance care for agency equipment, materials, property, and facilities. Possession of agency equipment must have proper approval from supervisor. 1. Unauthorized possession, misuse, or unauthorized use of equipment, materials, property, or facilities.	X	X	X	X
F. Employees are expected to perform work assignments within the scope of the job descriptions and follow all reasonable instructions issued by supervisors. Refusal to perform or carry out such duties, responsibilities, or instructions will be construed as insubordination. 1. Refusal to perform or carry out work related instructions, when such instructions are reasonable and would not pose a safety or welfare hazard to the employee.				X
1. Refusal to perform or carry out work related instructions, when such instructions are reasonable and would not pose a safety or welfare hazard to the employee.		X	X	X



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Standards/Actions	Oral	Written	Suspension	Discharge
2. Failure to accept authority by lack of cooperation with, and/or being argumentative to supervisor(s).	X	X	X	X
G. Employees are required to give a clear, complete, and accurate picture in completing applications, work records, written statements/information, client records, investigations, and claims for reimbursement.				
1. Unintentional falsification of work records, written statements/ information, client information and/or files.	X	X	X	X
2. Falsification of work records, employment applications, other forms, or applications, or written statements/ information.				X
3. Intentional falsification of client information and/or files.				X
4. Fraudulent claims for reimbursement or benefit.				X
H. The property of others will be respected by all employees. All funds are to be properly handled as required by the agency accounting system.				
1. Mishandling of agency funds.		X	X	X
2. Theft of agency property or funds.				X
3. Misuse/abuse of property.		X	X	X



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Standards/Actions	Oral	Written	Suspension	Discharge
<p>I. Employees will be familiar with rules and regulations regarding confidential information in agency records. Information in these records will be used only to conduct agency business.</p> <p>1. Unauthorized release of sensitive information/reports.</p> <p>2. Unauthorized disclosure of confidential information, records, and files of agency clients and/or personnel.</p>		X	X	X
<p>J. The personal conduct of an employee shall be such as to pose no threat to himself/herself and/or others or interfere in any way with the operation of the agency during work hours and/or on agency property.</p> <p>1. Bribery.</p> <p>2. Gambling.</p> <p>3. Physical abuse of other employee(s), client(s) and/or member(s) of the public.</p> <p>4. Possession of firearms and/or other weapons deemed to be lethal.</p> <p>5. Reporting for work under the influence of illegal drugs or alcohol and/or possession or use of illegal drugs or alcohol during working hours and/or while on/in state property/building/vehicle.</p> <p>6. Conviction or admission (where there is no reasonable doubt) of a felony or capital offense.</p>		X	X	X



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Standards/Actions	Oral	Written	Suspension	Discharge
K. Employees are expected to strive for a high level of productivity by demonstrating professional conduct in their work habits.				
1. Apparel or attire not meeting agency dress code.	X	X	X	X
2. Excessive personal use of agency telephone or personal long distance calls at agency expense.	X	X	X	X
3. Disruptive activities, horseplay or practical jokes.	X	X	X	X
4. Frequent visitors that interfere with agency business.	X	X	X	X
5. Inappropriate use of agency resources, i.e., computer, internet usage.	X	X	X	X
L. Other infractions deemed to be detrimental or not in the best interest of the agency, clients, and/or other employees.	X	X	X	X



Policy Number:

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Policy No: HR.6
Section: Human Resources
Effective: 07/01/14
Subject: EMPLOYEE GRIEVANCE PROCEDURE (DISPUTE RESOLUTION RULES AND PROCEDURES)

PURPOSE

To provide employees with a prompt review, impartial consideration, and an equitable disposition of grievances. The purpose of these rules and procedures is to establish a dispute resolution process pursuant to Arkansas Code Annotated §§ 21-1-701 through 704 for the prompt review, impartial consideration, and equitable disposition of Arkansas state employee grievances.

These rules and procedures also encourage alternative means of discussion and resolution among supervisory employees and their employees.

I. DEFINITIONS

Administrative Record - The case file specific to each grievance assembled according to the Office of Personnel Management (“OPM”) Administrative Record Rules.

Administrative Review Hearing - An internal fact-finding hearing before Hearing Officers.

Adverse Action - To discharge threaten, or otherwise discriminate or retaliate against a public employee in any manner that affects the employee’s employment, including compensation, job location, rights, immunities, promotions, or privileges.

Appeal - A written request by a party to OPM for a review by the State Employee Grievance Appeal Panel of a final decision from the Commissioner.

Disciplinary Action - Termination, suspension, involuntary demotion, written reprimands, and non-new-hire probation.

Dispute Resolution - A procedure that allows parties to constructively manage conflicts through grievances or mediation.

Employee - A person regularly appointed or employed in a position of state service by the state agency for which he or she is compensated on a full-time basis or on a pro rata basis for whom a class title and pay grade are established in the appropriation act for the state



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agency in accordance with the Uniform Classification and Compensation Act. An employee on initial new-hire probationary status is not an employee for purposes of these rules and procedures. An employee does not include a supervisory employee.

Grievance - A complaint by an employee regarding a disciplinary action, discrimination, harassment, or the approval/denial of compensatory time made by the supervisory employee, but not including compensation and conditions which are beyond the control of the state agency or are mandated by law.

Grievance Officer - The person designated by the state agency as having the responsibility for acting as the liaison between the employee and the state agency.

Hearing Officers - An impartial committee of persons appointed to review the facts of the grievance and make a recommendation for resolution to the Commissioner.

Mediation - A collaborative problem-solving and joint decision-making process between the employee and supervisory employee, through utilization of a third-party neutral (mediator).

Party - The employee filing the grievance or the supervisory employee against whom the grievance has been filed.

State Agency - The Arkansas Spinal Cord Commission.

State Employee Grievance Appeal Panel (“Panel”) - An impartial appeal panel established to review the facts of the grievance and issue a binding decision.

Supervisory Employee - An individual having authority in the interest of a state agency to hire, transfer, suspend, lay off, recall, promote, discharge, assign, reward, or discipline other employees of the state agency; or if his or her exercise of authority requires the use of independent judgment and is not of a merely routine or clerical nature, the responsibility to direct other employees of the state agency by which he or she is employed.

II. POLICY

Employees shall be given the opportunity to resolve complaints or grievances they believe adversely affect their employment or working conditions through the established dispute resolution process of this state agency to ensure fair resolution of their complaint or grievance within a reasonable period of time.



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The state agency and the employee shall take all reasonable efforts to settle a complaint or grievance as quickly as possible. Informal discussion between a supervisory employee and employee is encouraged.

Participation in the dispute resolution process is voluntary. The dispute resolution process may be terminated by the employee at any stage if an agreement between the parties is reached.

A party may be represented at each step of the dispute resolution process except during informal discussions between the employee and supervisory employee held prior to the filing of a grievance. Attorney's fees shall not be awarded.

These procedures established herein recognize the employment-at-will doctrine and its exceptions as defined by the Arkansas Supreme Court and do not confer a property right in employment, either expressed or implied.

Access to any of these procedures does not prohibit an employee from utilizing remedies outside these procedures. An employee reserves the right to file a complaint with a federal entity or pursue the matter in court.

III. PROCEDURES

If the complaint is not resolved by informal discussion with the supervisory employee, the employee may contact the Grievance Officer, or his or her designee, who shall assist the employee in initiating the formal dispute resolution process.

The employee has five (5) business days from the date of the disputed action to submit the Dispute Resolution Form to the Grievance Officer. An employee shall complete the Dispute Resolution Form completely and provide sufficient information detailing the nature of the disputed action. Incomplete forms will not be accepted.

An employee shall not be subject to adverse action for utilizing the dispute resolution process.

All complaints or grievances shall be processed through the state agency's Grievance Officer and shall be handled as follows:

1. The employee has the option to choose mediation or proceed to the Administrative Review hearing and shall clearly indicate on the Dispute Resolution Form which option is selected as the first step.



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2. Determination
 - a. The Grievance Officer shall determine whether the complaint is grievable or eligible for mediation.
 - b. If the Grievance Officer and employee are unable to agree on whether a complaint is grievable or eligible for mediation, then the complaint shall be sent to the Grievance Coordinator at OPM for review by the Panel.
 - c. The final determination on whether a complaint is grievable or eligible for mediation shall be determined by the Panel within seven (7) business days of the Grievance Coordinator's receipt of the complaint.
 - d. If the decision states that the complaint is grievable or eligible for mediation, then the employee may proceed to mediation.
3. If the supervisory employee does not consent to mediation, the first step shall be the Administrative Review Hearing.
4. The Grievance Officer shall be responsible for assembling the Administrative Record pursuant to OPM's Administrative Record Rules.

A. Mediation

An employee may request mediation if the complaint concerns an allegation that the employee has been:

- i. Terminated;
- ii. Demoted;
- iii. Suspended for fourteen (14) or more days; or
- iv. Subject to adverse action by his or her state agency for
 1. Communicating in good faith to an appropriate authority:
 - a. The existence of waste of public funds, property, or manpower, including federal funds, property, or manpower administered or controlled by a public employer; or
 - b. A violation or suspended violation of a law, rule or regulation adopted under the laws of this state or a political subdivision of the state;
 2. Participating or giving information in an investigation, hearing, court proceeding, legislative or other inquiry, or in any form of administrative review; or
 3. Objecting or refusing to carry out a directive that the employee reasonably believes violates a law, rule, or regulation adopted under the authority of the laws of the state or a political subdivision of the state.

The mediation shall be held within ten (10) business days of both parties agreeing to mediate.



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OPM shall maintain a roster of certified Mediators and shall be responsible for assigning a mediator.

A Mediator is not required to be an attorney but shall be certified by the Arkansas Alternative Dispute Resolution Commission. The Mediator shall not be employed by the state agency that is a party to the mediation.

A party may be represented by an attorney or other representative at the mediation.

The mediation shall be confidential; however, the Settlement or Non-settlement Agreement is subject to the Freedom of Information Act.

The Settlement or Non-settlement Agreement shall be signed by the parties and become a part of the Administrative Record.

Within one (1) business day of the conclusion of the mediation, the mediator shall provide a copy of the Settlement or Non-settlement Agreement to the Commissioner.

Settlement Agreement – If the parties reach a settlement during mediation, the dispute resolution process is considered resolved and the settlement is binding on the parties.

Non-settlement Agreement – If the parties reach a Non-settlement Agreement during mediation, the employee may request within three (3) business days of the Non-settlement Agreement an internal Administrative Review Hearing before the Hearing Officers.

B. Administrative Review Hearing

The Grievance Officer shall coordinate and schedule the hearing to be held within ten (10) business days of receipt of the employee's request.

The Grievance Officer shall be responsible for assembling the Administrative Record and providing copies to the parties and the Hearing Officers.

The hearing shall be recorded and may be transcribed at the discretion of the Hearing Officers and become a part of the Administrative Record.



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A party may have any persons having knowledge of matters relevant to the grievance present at the hearing to provide testimony. The Grievance Officer is responsible for notifying any state agency witnesses. The employee is responsible for notifying any witnesses that are not an employee of the state agency. The Hearing Officers may request to hear testimony from any persons having knowledge of matters relevant to the grievance that are not already requested to be present.

A party or the Hearing Officers may “Invoke the Rule”, excluding all non-party witnesses from the hearing room unless they are testifying.

A party may present additional evidence. If accepted by the Hearing Officers the evidence shall become a part of the Administrative Record as an exhibit.

Within three (3) business days of the conclusion of the hearing, the Hearing Officers shall issue a typewritten recommendation summarizing the hearing and explaining in detail the basis for his or her decision. The Hearing Officers shall provide a copy to the Commissioner, the parties, and the Grievance Officer. The recommendation shall become a part of the Administrative Record.

The Commissioner shall review the recommendation and issue a final decision within five (5) business days.

C. Appeal to OPM

If an employee is not satisfied with the decision reached by the Commissioner, he or she may appeal, using a form provided by OPM, and request nonbinding mediation or an appeal hearing before the Panel.

If an employee chooses nonbinding mediation as the first appeal step, he or she does not waive his or her right to later request an appeal hearing before the Panel; however, written reprimands, allegations of discrimination or harassment, and denial of compensatory time are not eligible for nonbinding mediation.

A request for nonbinding mediation shall be filed with the state agency’s Grievance Officer no later than fifteen (15) business days of receipt of the Commissioner’s decision.

A request for an appeal hearing before the Panel shall be filed with the state agency’s Grievance Officer no later than ten (10) business days of receipt of the Commissioner’s decision or ten (10) business days of the unsuccessful mediation.



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Dispute resolution forms and rules can be found on the Arkansas Department of Finance & Administration website, linked below.

DF&A Website Link: <https://www.dfa.arkansas.gov/personnel-management/dispute-resolution/>



Policy Number: HR.7
Policy Name: Fair Labor Standards Act/
Compensatory Time

Policy and Procedures

Policy No: HR.7
Section: Human Resources
Effective: 01/01/09
Subject: FAIR LABOR STANDARDS ACT/COMPENSATORY TIME

PURPOSE

To provide procedures regarding the administration of the Fair Labor Standards Act (FLSA) for employees of the Arkansas Spinal Cord Commission.

PROTOCOL

The Arkansas Spinal Cord Commission, as a state agency, conforms with Subchapter 16 of Chapter 4 of Title 19 in adopting the Fair Labor Standards Act as the basic wage and hour policy of the state. The Fair Labor Standards Act establishes guidelines to administer overtime and compensatory time.

It is declared to be the policy of the State of Arkansas that overtime payment is the least desirable method of compensation for overtime work. It is the responsibility of the agency to administer overtime in the best interests of the State of Arkansas.

I. OVERTIME

It is the policy of the Arkansas Spinal Cord Commission that overtime pay will not be utilized as compensation for hours worked over the scheduled work week hours. All compensation will be made in paid time off.

II. EMPLOYEE CLASSIFICATIONS

A. There are two classifications of employees for the purposes of compensating overtime worked in accordance with the Fair Labor Standards Act.

1. Exempt Employees

Are those employees who, as defined by the Fair Labor Standards Act (FLSA), have responsibilities that are Supervisory, Administrative, or whose work requires knowledge obtained through advanced education or



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requires original and creative talents. These exemptions include: exempt executive (EE), exempt administrative (EA) and exempt professional (EP).

- a. For the purposes of the Arkansas Spinal Cord Commission, in accordance with the State Office of Personnel Management, the following positions are exempt:

<u>Title</u>	<u>Grade</u>	<u>Class Code</u>
Executive Director (EE)	99	9992
Client Services Administrator (EE)	22	M071
Agency Program Coordinator (EA)	21	R298
Accounting Supervisor II (EA)	21	A008
Senior Rehabilitation Counselor (EP)	20	M127
Rehabilitation Counselor III (EP)	19	M056

- b. Employees in these grades will not be eligible for FLSA compensatory time.
- c. These employees will be compensated for overtime worked by offset time.

2. Non-Exempt Employees

Are those full-time employees whose normal work period is a 40-hour week and who do not meet the exempt criteria above. Non-exempt employees under the Fair Labor Standards Act may accrue compensatory time at a rate of one and one-half times the number of hours worked in excess of 40 hours.

- a. For the purposes of the Arkansas Spinal Cord Commission, in accordance with the State Office of Personnel Management, the following positions are non-exempt (NE):

<u>Title</u>	<u>Grade</u>	<u>Class Code</u>
Administrative Assistant I/II	15/17	R009/R011
Secretary I/II	11/13	K155/K153
Rehabilitation Assistant I/II	11/14	K020/K021

- b. Employees in this classification are eligible for FLSA compensatory time.



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III. FAIR LABOR STANDARDS ACT (FLSA) COMPENSATORY TIME

A. Definition

FLSA compensatory time is awarded to employees classified as non-exempt when the employee physically works in excess of 40 hours in the work week. This time is computed at one and one-half times the excess time worked.

B. Accrual

1. FLSA compensatory time will be approved only in those circumstances where excess hours (over 40) are required to accomplish established agency duties.
2. All compensatory time must be approved **in advance** of excess hours worked by the Executive Director or Designee. No compensatory time will be approved in retrospect.
3. Compensatory time will be accrued in increments not less than 15 minutes.
4. No more than eight (8) hours of compensatory time will be approved in any 24-hour period.
5. An employee may not accumulate a total of more than forty (40) hours of compensatory time at any time.
6. Training time will **not** be counted as compensable if:
 - a. It occurs outside normal work hours.
 - b. Attendance is voluntary.
 - c. Employee does not perform any productive work (normal job duties).
 - d. The course meeting/seminar is not directly related to the employee's job (i.e., required for employment).
7. All requests for compensatory time should be made on the Request for Compensatory/Offset Time form (ASCC-15) and submitted to the Executive Director or Designee for approval.



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C. Usage

1. Supervisory approval is required for use of earned compensatory time.
2. Requests should be submitted on an Application for Leave Form (ASCC-19), in advance of taking leave. "Comp/Offset Time" should be specified under the "Type" section of the form.
3. Compensatory time will not be used in increments less than 15 minutes.
4. Compensatory time must be earned before it can be used.
5. Compensatory time may be used in lieu of annual leave.
6. Compensatory time may be used in lieu of sick leave.
7. No lump sum payments will be made for compensatory time upon resignation, retirement, or termination; therefore, it is the responsibility of the employee and the supervisor to schedule compensatory time use in advance of the last day.

D. Record Keeping

FLSA Compensatory Time accrual and use will be recorded and maintained by the Personnel/Payroll Officer. It will be maintained separately from all other forms of leave recorded.

IV. OFFSET TIME

A. Definition

Offset time is defined for the purposes of this policy as the provision of compensation to FLSA Exempt employees hour for hour time off in reimbursement for work performed in excess of employee's regularly scheduled workday. Offset time is computed as the actual number of excess hours worked.

B. Accrual

1. Offset time will be approved only in those circumstances where excess hours (over 40) are required to accomplish established agency duties.



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2. All offset time must be approved **in advance** of excess hours worked by the Executive Director or Designee. No offset time will be approved in retrospect.
3. Offset time will be accrued in increments not less than 15 minutes.
4. No more than eight (8) hours of offset time will be approved in any 24-hour period.
5. An employee may not accumulate a total of more than forty (40) hours of offset time at any time.
6. Training time will **not** be counted as compensable if:
 - a. It occurs outside normal work hours.
 - b. Attendance is voluntary.
 - c. Employee does not perform any productive work (normal job duties).
 - d. The course meeting/seminar is not directly related to the employee's job (i.e., required for employment).
7. All requests for offset time should be made on the Request for Compensatory/Offset Time form (ASCC-15) and submitted to the Executive Director or Designee for approval.

C. Usage

1. Supervisory approval is required for use of earned offset time.
2. Requests should be submitted on an Application for Leave Form (ASCC-19), in advance of taking leave. "Comp/Offset Time" should be specified under the "Type" section of the form.
3. Offset time will not be used in increments less than one hour.
4. Offset time must be earned before it can be used.
5. Offset time **may** be used in lieu of annual leave until balance is completed.
6. Offset time may be used in lieu of sick leave.



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7. No lump sum payments will be made for offset time upon resignation or retirement or termination, therefore, it is the responsibility of the employee and the supervisor to schedule offset time use in advance of the last day.

D. Record Keeping

Offset time accrual and use will be recorded and maintained by the Personnel Payroll Officer. It will be maintained separately from all other forms of leave recorded.

V. RIGHTS AND PRIVILEGES

Under the provision of the ASCC Employee Grievance Procedure (HR.6), any employee covered under this policy may file a complaint regarding any perceived unfair treatment or violation of this policy. In addition, any employee covered under FLSA may file a complaint directly with the Wage and Hour Division of the U.S. Department of Labor.



Policy Number:
Policy Name:

HR.8
Leave Policy

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Policy No: HR.8
Section: Human Resources
Effective: 01/01/09
Subject: LEAVE POLICY

PURPOSE

To establish agency procedures for eligibility, accrual and use of annual, sick, maternity, court and jury, holiday, without pay, Workers' Compensation, military, educational, family medical, children's educational activity, disaster service volunteer, and organ donor leave.

PROTOCOL

I. ANNUAL LEAVE

A. Definition

1. Annual leave shall mean vacation time with pay. Annual leave is leave requested and/or used by the employee for a vacation, personal reason or emergency situation, or for sickness/disability after accumulated sick leave, Fair Labor Standards Act (FLSA) compensatory time, offset time, and holiday leave are exhausted.

B. Eligible Employees

1. Any employee in a regular salaried position who works full time and any employee who works less than full time, but at least 1,000 hours per year, is eligible to accrue annual leave.

C. Non-eligible Employees

1. Emergency, hourly, intermittent, extra help and per diem employees are not eligible to accrue annual leave.

D. Accrual for Eligible Employees

1. Eligible full time employees accrue leave at the rate shown in the timetable listed below. Employees who work less than full time, but at least half time, accrue annual leave in the same proportion as time worked.



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For example, employees who work half time would receive half of the annual leave accrual shown on the timetable.

2. Annual Leave Accrual Timetable:

<u>Years of Employment</u>	<u>Monthly</u>	<u>Annually</u>
Through 3 Years	8 hours	96 hours
Beginning 4 through 5 Years	10 hours	120 hours
Beginning 6 through 12 Years	12 hours	144 hours
Beginning 13 through 20 Years	14 hours	168 hours
After 20 Years	15 hours	180 hours

3. Accrual rates will change the first day of the month following eligibility for the next higher accrual rate.
4. All annual leave is cumulative. However, no employee may have more than 240 hours (30 days) accumulation on December 31st of each year. Accrued leave may exceed 240 hours during the calendar year, but those hours in excess of 240 will be lost if not used by December 31st of each year.
5. Years of employment may be continuous state employment or an accumulation of service, when the employee was out of state service for a time. Seniority for reinstated employees will be brought forward in completed years of service only. For example, an employee worked for the state for a total of 2 years and 10 months before termination of employment. After a period of time, the employee is rehired and would then be eligible to receive credit for his/her completed whole years of prior service. In this example the credit would be 2 years.
6. Annual leave accrued during a calendar month is not considered to be earned by an active employee until the last working day of the month.
7. Terminating employees whose last workday is prior to the 15th of the month do not accrue annual leave for that month.
8. Annual leave is granted on the basis of workdays, not calendar days. Non-work days, such as holidays and weekends, are not charged as annual leave.
9. Employees continue to earn annual leave at their normal accrual rate when on annual, sick, FLSA compensatory time, offset time, and holiday leave.



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Annual leave may not be accumulated during a period of leave without pay (LWOP) when such leave is for 10 or more cumulative days within a calendar month.

10. Annual leave must be earned before it can be authorized for use.
11. Employees transferring, without a break in service, between state agencies shall retain all accumulated annual leave.

E. Use

1. An employee may request to use annual leave at any time after the leave has been accrued. However, the supervisor must approve the leave request before the leave can be taken. The supervisor grants the leave request at such time or times as will least interfere with the efficient operation of the agency. Unauthorized leave is a violation of this leave policy, and will result in leave without pay being charged to the employee. Other sanctions may be imposed under ASCC Employee Conduct Standards (HR.5).
2. Annual leave requests for more than 10 consecutive days must be approved by the Executive Director.
3. Annual leave may be used in a minimum of 15-minute increments.
4. Employees shall not borrow from anticipated future accruals and may not use annual leave accrued by other employees.

F. Payment Upon Termination

1. Upon termination, resignation, retirement, death, or other action by which a person ceases to be an active employee of the state, the amount due the employee or his/her estate from accrued and unused annual leave shall be paid in a lump sum. If the employee is beginning a period of active duty for military service and requests that such leave not be liquidated by a lump sum payment, the balance may be held in escrow by the state and reinstated upon the employee's return to state employment. The lump sum may not exceed 240 hours (30 days) of annual leave.
2. An employee receiving such additional compensation shall not return to state employment until the number of days for which he/she received the additional compensation have expired. However, the employee may reimburse the agency which made the lump sum payment for the number of days paid but not yet expired. Reimbursement must be made before the



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date of employment. Such reimbursement will result in the appropriate number of days being reinstated to the employee's accrued annual leave.

II. SICK LEAVE

A. Definition

1. Sick leave shall mean leave with pay used when the employee is unable to work because of illness, injury, or for medical, dental, or optical treatment. Sick leave may also be granted to employees due to death or serious illness of a member of the employee's immediate family. Immediate family means the father, mother, sister, brother, spouse, child, grandparent, grandchild, in-law, or any individual acting as a parent or guardian of the employee.

B. Eligible Employees

1. Any employee in a regular salary position who works full time and any employee who works less than full time, but at least 1,000 hours per year, is eligible to accrue sick leave.

C. Non-eligible Employees

1. Emergency, hourly, intermittent, extra help and per diem employees are not eligible to accrue sick leave.

D. Accrual for Eligible Employees

1. Any employee who works a minimum of 1,000 hours per year in a regular salary position shall accrue sick leave. Employees who work less than full time, but more than 1,000 hours per year, accrue sick leave in the same proportion as time worked.
2. Employees accrue sick leave at the rate of 8 hours (1 day) for each complete month of service, or 96 hours (12 days) per year.
3. The maximum sick leave accrual is 120 days (960 hours).
4. Sick leave accrued during a calendar month is not considered to be earned by an active employee until the last working day of the month, and the leave must be earned before it can be used.



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5. An employee may not accumulate sick leave when on leave without pay when such leave is for 10 or more cumulative work days within a calendar month.
6. Employees continue to earn sick leave at the normal accrual rate when they are on sick, annual, FLSA compensatory time, offset time, catastrophic or holiday leave.
7. Sick leave is granted on the basis of work days, not calendar days. Non-work days, such as holidays and weekends (off days), are not charged as sick leave.
8. Employees shall not borrow from anticipated future accruals and may not use sick leave accrued by other employees.

E. Use

1. Sick leave may be used for only the following purposes:
 - a. When the employee is unable to work because of illness or injury; or for medical, dental or optical treatment.
 - b. Death or serious illness of a member of the employee's immediate family. Immediate family is defined as the father, mother, sister, brother, spouse, child, grandparent, grandchild, in-law or any individual acting as a parent or guardian of an employee.
2. The use of sick leave is contingent upon the occurrence of one of the events listed above. If the event never occurs, the employee is not entitled to the sick leave benefits.
3. Request to use sick leave for purposes of medical, dental or optical examinations, hospital stays, funerals for immediate family as defined in Item II.A, should be made in advance.
4. If the nature of the illness makes it impossible to apply for leave in advance, notification of absence shall be given as soon as possible, on each day of absence, to the supervisor or designee. Doctor's orders may be provided as notification of extended absence to preclude daily notification.
5. Application for sick leave must be submitted within two (2) working days after the employee's return to work. Failure to do so may result in disciplinary action.



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6. Employees who are on sick leave for five (5) or more consecutive days must furnish a certificate of illness from an attending physician. The certificate must be provided to employee's supervisor upon the employee's first day at work after the illness. A certificate from a Christian Science practitioner listed in *The Christian Science Journal* may be substituted in lieu of a physician's certificate. Failure to do so may result in disciplinary action.
7. When a supervisor has evidence to suspect misuse of sick leave, an attending physician's certificate or a certificate from a Christian Science practitioner listed in *The Christian Science Journal* may be required by the supervisor for any amount of sick leave. If the employee is unable to furnish this verification or if notification to the supervisor is not made in accordance with this policy, such absence will be unauthorized leave. Unauthorized leave is a violation of this policy, and will result in leave without pay being charged to the employee. Other sanctions may be imposed under ASCC Employee Conduct Standards (HR.5).
8. Sick leave may be used in a minimum of 15-minute increments.
9. Holidays and other non-working days during a period of sick leave shall not be charged as sick leave.
10. Absences due to sick leave except in the case of maternity leave, shall be charged in the following order: (1) earned sick leave; (2) FLSA compensatory time/offset time; (3) earned annual leave; (4) accrued holiday leave; (5) leave without pay.

F. Termination, Transfer

1. Employees transferring between state agencies and/or state supported institutions of higher education, without a break in service, shall at the time of transfer retain all accumulated sick leave.
2. Employees are not entitled to payment for accrued and unused sick leave when they terminate their employment except as listed in II.G.

G. Sick Leave Incentive Upon Retirement

1. An employee or beneficiary of an employee of any agency (except institutions of higher education) of the state upon retirement or death, becomes eligible to receive compensation for accumulated unused sick leave as follows:



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- a. If the employee has accumulated at least fifty (50) days, but less than sixty (60) days of sick leave, the employee shall receive an amount equal to fifty percent (50%) of the number of accrued sick leave days (rounded to the nearest day) times fifty percent (50%) of the employee's daily salary.
- b. If the employee has accumulated at least sixty (60) days, but less than seventy (70) days of sick leave, the employee shall receive an amount equal to sixty percent (60%) of the number of accrued sick leave days (rounded to the nearest day) times sixty percent (60%) of the employee's daily salary.
- c. If the employee has accumulated at least seventy (70) days, but less than eighty (80) days of sick leave, the employee shall receive an amount equal to seventy percent (70%) of the number of accrued sick days (rounded to the nearest day) times seventy percent (70%) of the employee's daily salary.
- d. If the employee has accumulated at least eighty (80) or more days of sick leave, the employee shall receive an amount equal to eighty percent (80%) of the number of accrued sick leave days (rounded to the nearest day) times eighty percent (80%) of the employee's daily salary. [For example: An employee with an accrued, unused sick leave balance of ninety (90) days and has a daily salary of \$100. To calculate the sick leave incentive, multiply 90 days of leave by 80% equals 72 days. Multiply \$100 daily salary by 80% equals \$80. Multiply 72 days by \$80 equals \$5,760 payment.]
- e. For purposes of this section of the regulations, the employee's daily salary will be determined by dividing the employee's base annual salary by two hundred and sixty (260).
- f. In no event shall an employee or beneficiary of an employee receive a sick leave incentive amount that exceeds seven thousand five hundred dollars (\$7,500), upon retirement or death of an employee.

III. MATERNITY LEAVE

- A. Maternity leave is to be treated as any other leave for illness or disability, with the exception that an employee may elect to take leave without pay rather than exhaust sick and annual leave.



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IV. COURT AND JURY DUTY

- A. A state employee serving as a juror in state or federal court shall be entitled to full compensation in addition to any fees paid for such services, and such services or necessary appearances in any court, shall not be counted as annual leave.
- B. If a state employee is subpoenaed as a witness to give a deposition or testimony in state or federal court, at a hearing, or before any body with power to issue a subpoena, the state employee is:
 - 1. Entitled to his or her salary if the employee is a witness in a matter:
 - a. Within the employee's scope of state employment.
 - b. Outside the employee's scope of state employment and the employee is not serving as a paid expert witness or is not a party to the matter.
 - 2. Required to take annual leave to attend the deposition, hearing, or appear in court only if the matter is outside of the employee's scope of state employment and the employee is serving as a paid expert witness or is a party to the matter.
 - 3. Entitled to retain any witness fees that may be tendered to him or her under state or federal law or court rules only if the matter is:
 - a. Outside the employee's scope of state employment; or
 - b. The employee is a party to the matter other than as a representative of the state employer.
 - 4. Entitled to retain any mileage fees that may be tendered to him or her under state or federal law or court rules only if the matter is:
 - a. Within the employee's scope of state employment.
 - b. The employee uses a personal vehicle for travel in obeying the subpoena.
 - c. The employee's employer does not reimburse the employee for travel expenses.



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- d. Outside the employee's scope of state employment and the employee does not use a state-owned vehicle for travel in obeying the subpoena.
5. If the state employee is subpoenaed for purposes under IV.A. to appear on a non-work day, the employee may retain any witness and mileage fees tendered to him or her.

V. HOLIDAY LEAVE TIME

A. Definition

1. The Arkansas Spinal Cord Commission will observe the following legal holidays:

New Year's Day	January 1
Dr. Martin Luther King, Jr.'s and Robert E. Lee's Birthday	3rd Monday in January
George Washington's Birthday and Daisy Gatson Bates Day	3rd Monday in February
Memorial Day	Last Monday in May
Independence Day	July 4
Labor Day	1st Monday in September
Veteran's Day	November 11
Thanksgiving Day	4th Thursday in November
Christmas Eve	December 24
Christmas Day	December 25
Employee's Birthday	An employee is granted one day to celebrate his/her birthday

2. The Governor may issue an Executive Proclamation and proclaim additional days as holidays in observance of special events or for other reasons. These will also be observed.
3. ASCC offices located in Pulaski County must remain open when a holiday occurs during a general or special session of the legislature except Martin Luther King Jr.'s Birthday, when the legislature will be adjourned. Offices must maintain the minimum number of employees required to conduct state business. These offices are permitted to close by Resolution of the General Assembly.



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4. Holidays falling on a Saturday will be observed on the preceding Friday. Holidays falling on a Sunday will be observed on the following Monday.

B. Eligibility for Holiday Pay and/or Equivalent Time Off

1. An employee in a regular salaried position is eligible to receive holiday pay only if he/she is in a pay status on the last scheduled work day before the holiday and is at work at least one hour on the first work day following the holiday or on approved paid leave.
2. When a holiday falls while an employee is on annual or sick leave, that day will be charged as a holiday and will not be charged against the employee's annual or sick leave.
3. Alternate provisions will be made for employees who cannot take holidays as scheduled.
4. Holiday leave (including birthday) must be taken within twelve (12) months of the date of accrual or will be forfeited.

VI. LEAVE WITHOUT PAY (LWOP)

A. Use

1. Employees may not take leave without pay (LWOP) as authorized by Arkansas Code Annotated § 21-4-210 until all their annual leave has been exhausted, except in the cases of maternity leave, inclement weather as designated by state policy, budget reductions, and agency disciplinary actions. In the case of maternity leave, such employee may elect to take leave without pay, without exhausting accumulated annual and sick leave. In the case of disciplinary actions, the agency may place an employee in disciplinary leave without pay status in accordance with the ASCC Employee Conduct Standards (HR.5).
2. The Executive Director may grant continuous leave without pay. Any such period shall not exceed six (6) continuous months. Each request for leave without pay (LWOP), as authorized by Arkansas Code Annotated § 21-4-210, is to be considered on a case-by-case basis. Upon expiration of any six (6) month period of LWOP, additional extensions, up to six (6) months each may be requested by the employee if updated justification with appropriate documentation is provided.



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B. Approval

1. Approval or disapproval of requests for leave without pay as an accommodation will be determined based upon impact on ASCC's operation and mission and whether approval would create an undue hardship on the agency.
2. "Undue hardship" is defined as "an action requiring significant difficulty or expense" when considered in relationship to a number of factors. These factors may include, but not necessarily be limited to, the nature of the position occupied by the employee and cost of the request in relation to the size, resources, nature and structure of the agency's operation and mission. Thus, whether or not an accommodation request would create an undue hardship focuses on the resources and circumstances of the particular state agency in relationship to the cost or difficulty of providing a specific leave request. Undue hardship refers not only to financial difficulty, but also to requests that are unduly extensive, substantial, or disruptive, or those that would fundamentally alter the nature of operation of the agency. The Executive Director will assess, on a case-by-case basis, whether a particular request for leave without pay (LWOP) would cause undue hardship. Every request will be evaluated separately to determine if it would impose an undue hardship on the agency, taking into account:
 - a. The nature and cost of the request.
 - b. The overall financial resources of the agency.
 - c. The number of persons employed by the agency.
 - d. The effect on expenses and resources of the agency; and
 - e. The impact of the request on the agency.
3. The Executive Director may declare an undue hardship where a leave request accommodation would be unduly disruptive to other employees' ability to work efficiently. For example, if granting leave would prevent other employees from doing their jobs, then the significant disruption to the operations of the agency constitutes an undue hardship. In some situations, an employee may be able to provide only an approximate date of return because treatment and recuperation do not always permit exact timetables. If an agency is able to show that the lack of a fixed return date imposes an undue hardship, then it can deny the leave. An undue hardship could result if the agency can neither plan for the employee's return nor



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permanently fill the position. In other situations, the agency may be able to be flexible.

C. Loss of Leave Accrual

1. An employee who accumulates ten (10) consecutive or nonconsecutive days of leave without pay (LWOP) during any one calendar month loses the leave accrual (annual and sick) for that month only. The annual leave that is lost due to the LWOP is based on the rate of accrual authorized for that employee.

D. Insurance Coverage

1. Employees may continue to participate in agency insurance programs during the period of LWOP. Employees who choose this option must pay the total cost (employee deduction and employer matching) of the coverage. However if an employee is on FMLA or Workers' Compensation related leave, agencies are required to remit the employer's matching portion of coverage.
2. Employees having kept their group insurance in effect while on LWOP are to be fully reinstated in insurance programs when they return to duty. However, employees on FMLA leave are eligible for reinstatement in the insurance program even if the employee failed to pay their premium while on FMLA. Upon return from FMLA LWOP employees are responsible for payment of the total amount of premiums that are in arrears. Employees who receive less than ten (10) hours of pay in a given period and who do not have Workers' Compensation Leave, Military Leave, or FMLA Leave approved for that pay period will be responsible for the employee premium as well as the employer portion of their medical insurance.

E. Reinstatement

1. The employee will be reinstated with full rights at the end of the period of leave without pay (LWOP). An employee who is on LWOP and returns within the required six (6) months continues to earn credited service toward the next rate in the leave accrual schedule just as the employee who had never gone on LWOP. A returning employee's leave accrual rate will not be affected by periods of LWOP, nor will the time of entitlement to a change in leave accrual rate be adjusted because of LWOP. If the position the employee left is no longer available due to a budgetary reduction in staff, the employee will have no options and cannot be reinstated.



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2. The employee's Increase Eligibility Date will not change. However, the award of the next merit salary increase will be delayed beyond the anniversary date for the same number of work days as the employee was on leave without pay (LWOP).
3. Employees may be dismissed if they fail to report to work promptly at the expiration of the period of leave without pay (LWOP). However, the agency may accept satisfactory reasons provided by the employee in advance of the date to return to work and extend the LWOP period accordingly.

F. Unauthorized Leave Time

1. Unauthorized leave time will occur when an employee fails to follow prescribed leave use procedures outlined in this policy. Unauthorized leave may result in a loss of pay by an employee. Disciplinary loss of pay (DLOP) for unauthorized use of leave must be approved by the Executive Director.

VII. WORKERS' COMPENSATION

- A. Whenever an employee is injured on the job, it is necessary for the employee to immediately file a claim with the Workers' Compensation Commission. The forms to file the claim should be obtained from the Agency Fiscal Officer.
- B. Employees who are absent from work due to a temporary occupational injury or illness and who are entitled to Workers' Compensation benefits may utilize their accrued sick leave as a supplement to such benefits, or they may utilize leave without pay. This is not to exceed the leave period authorized under Section VI.C. of this policy. **Note:** When the employee elects to utilize sick leave to supplement their Worker's Compensation benefits, this sick leave must be exhausted in accordance with Section VI.B. of this policy.
- C. The combination of Workers' Compensation benefits and sick leave pay shall not exceed the employee's normal pay period salary. Workers' Compensation is responsible for notifying the Payroll Office of the amount of employee benefits.
- D. The option will reduce the employee's accrued sick leave on a proportional basis. For example, an employee's normal salary is \$300 per week. The employee receives \$200 Workers' Compensation benefits and elects to receive an additional \$100 per week in sick leave payments. Thus, the employee uses sick leave at a



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rate of one-third, which is equivalent to 1 2/3 days (13 hours) of sick leave for each week of disability.

- E. Employees who receive benefits for a permanent work related disability may receive full sick leave payments.

VIII. MILITARY LEAVE

A. Annual Training Duty

1. Regular, full-time state employees who are members of the National Guard or any of the reserve branches of the US Armed Forces will be granted leave at the rate of fifteen (15) working days per calendar year, plus necessary travel time for annual training purposes. Up to fifteen (15) unused military leave days may be carried over to the succeeding year for a maximum of thirty (30) military leave days for military training purposes for that calendar year.
2. Military leave for annual training or other official training duties will be granted without loss of pay and shall be in addition to annual leave.
3. The employee must attach a copy of his/her military orders to each request for military leave.

B. Active Duty for Military Service

1. A regular, full-time employee who is drafted or called to active duty in the Armed Forces of the United States or who volunteers for military service, shall be placed on extended military leave without pay; all unused sick leave at the time of military leave will be reinstated at the time the employee returns. All accrued, unused annual leave at the time of military leave will be reinstated at the time the employee returns to state employment unless the employee requested and received a lump-sum payment for the accrued, unused annual leave when placed on the extended military leave.

C. Active Duty for the Purpose of Specialized Training

1. In cases where an employee volunteers or is ordered to active duty for the purpose of special training, the employee will be placed on leave without pay for the period of training unless the employee elects to use his accrued



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annual leave. This leave without pay is given in addition to the paid leave for annual military training in VIII.A. The employee retains eligibility rights including accumulated annual leave (unless the above option has been exercised) and any sick leave not used at the time the employee begins the training. The employee does not accumulate annual or sick leave during the leave without pay period, and the annual leave accrual rate will be calculated as though there had been no period of absence.

2. The employee retains eligibility rights including accumulated annual leave (unless the above option has been exercised) and any sick leave not used at the time the employee begins the training. The employee does not accumulate annual or sick leave during the leave without pay period, and the annual leave accrual rate will be calculated as though there had been no period of absence.

D. Reinstatement Rights

1. When the employee is released from active duty, he/she shall be reinstated to the position vacated or an equivalent position for which he/she is qualified in the same agency or its successor in interest.
2. Employees performing active military service for fewer than thirty-one (31) days must report for re-employment on the first regularly scheduled workday within eight (8) hours after discharge from military service. Those serving more than thirty (30) but less than one hundred and eighty-one (181) days must report within fourteen (14) days after discharge. Those serving more than one hundred and eighty (180) days must report for re-employment within ninety (90) days after discharge from military service.
3. The reinstated employee will not lose any seniority rights with respect to leave accrual rates, salary increases, Reduction in Force policies, or other benefits and privileges of employment. The period of military service shall, for purposes of computations to determine whether such persons may be entitled to retirement benefits, will be deemed continuous service and the employee shall not be required to make any contributions to any state supported retirement fund. To receive service credit for retirement purposes, a copy of the employee's DD214 must be submitted to the appropriate retirement system. The retirement system will notify the appropriate agency to remit the employer's contributions to update the employee's account.



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E. Extended Re-enlistments

1. Former employees returning to state service after military service, but who extended their enlistment or re-enlisted for additional military service beyond the initial period for more than a period of four (4) years (or five (5), when re-enlistment was at the request of the military) will lose all re-instatement rights and will be considered a rehire. Military service time may be extended beyond the five (5) year period for reasons stated in 38 US Code Section 4312(c).

F. Emergency Situations

1. Regular, full-time state employees who are called to active duty in emergency situations (and in situations covered by 10 United States Code § 12304) as declared by the Governor or President shall be granted leave with pay. (Arkansas Code Annotated §§ 21-4-102(d) and 21-4-212(d)). The period of leave with pay for emergency active duty will not exceed thirty (30) working days per calendar year. Periods beyond the thirty (30) day limit may be charged to annual leave at the employee's option and if necessary, to leave without pay. If an employee's active duty in emergency situations begins in one calendar year and ends in the next calendar year and the employee is subsequently redeployed due to an emergency situation, the employee is eligible for thirty (30) days paid leave in the new calendar year. To be eligible for emergency active military duty paid leave, the employee must be actively employed by the State and submit a copy of military orders for each emergency deployment.
2. Military leave for emergency active duty situations is granted in addition to annual military leave in VIII.A. for training purposes and annual leave.

G. Military Leave for Service Connected Disabilities

1. All employees of the State of Arkansas, as defined in § 21-4-203, who have been rated by the United States Department of Veterans Affairs or its predecessor to have incurred a military service-connected disability and have been scheduled by the United States Department of Veterans Affairs to be reexamined or treated for the disability shall be entitled to a leave of absence with pay for a period not to exceed six (6) days for that purpose during any one (1) calendar year.
2. If an employee receives a leave of absence under this section, the employee shall be entitled to his or her regular salary during the time the employee is away from his or her duties during the leave of absence. The



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leave of absence shall be in addition to the regular annual leave and sick leave allowed to the employee. During a leave of absence, the employee shall be entitled to preserve all seniority rights, efficiency or performance ratings, promotional status, retirement privileges, and life and disability insurance benefits and any other rights, privileges, and benefits to which he or she has become entitled.

3. For purposes of computations to determine whether the employee may be entitled to retirement benefits, the period of the leave of absence shall be deemed continuous service.
4. The state shall continue to contribute its portion of any life or disability insurance premiums during the leave of absence on behalf of the employee, if requested, so that continuous coverage may be maintained.

IX. EDUCATIONAL LEAVE

- A. A permanent employee who is given outservice training may be granted education leave by the Executive Director on the following conditions:
 1. The employee agrees to continue in the service of the agency or institution for a period of time as statutorily required or, in the absence of a specific law, at least twice the length of his/her course of training.
 2. Any employee who does not fulfill these obligations shall be required to pay the agency the total cost, or a proportionate share of the cost, of the outservice training and compensation paid during the training period.
 3. A written contract setting forth all terms of the agreement shall be signed by the employee and the ASCC Executive Director.
- B. The employee shall retain all rights in the position held at the time when leave was granted or in one of comparable security and pay.
- C. The amount of the salary paid during the training period will be as agreed on by the employee and the Executive Director. The salary may not exceed the regular salary paid to the employee.
- D. Payment of tuition, fees, books and transportation will not be paid by ASCC.



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X. FAMILY AND MEDICAL LEAVE

A. Entitlements under the Family and Medical Leave Act (FMLA)

1. The Family and Medical Leave Act entitles eligible employees to a total of 12 work weeks of leave during any 12-month period for one of the following reasons:
 - a. The birth of a son or daughter, and to care for the newborn child.
 - b. The placement with the employee of a son or daughter for adoption or foster care.
 - c. The care of the employee's spouse, son, daughter, or parent with a serious health condition; and
 - d. A serious health condition that makes the employee unable to perform the functions of the employee's job.
2. The 12-month period used by the state for determining eligibility is the calendar year. In the case of birth or adoption eligibility for FMLA, leave shall expire at the end of the 12-month period beginning on the date of a child's birth or placement. However, leave used for this purpose shall also be calculated on a calendar year basis.

B. Designation of Family and Medical Leave

1. Family and medical leave is leave without pay. However, an eligible employee may elect, or an agency may require the employee, to substitute paid leave for any part of the 12-week period. Paid leave for personal and family medical needs is currently available under existing sick, annual, and catastrophic leave policies.
 - a. If the agency has knowledge that an employee's requested leave period is covered by FMLA; it is the responsibility of the agency to notify the employee that they have been placed on FMLA leave.
 - b. The agency must determine whether leave will be counted within two business days of the time the employee gives notice of the need for leave, or if the employer does not initially have sufficient information to make a determination, at the point this information becomes available. If the employer learns that the leave is for



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FMLA purpose after leave has begun or within two days of the employee's return to work, the entire or some portion of the leave period may be retroactively counted as FMLA. An employee desiring to have a leave period designated as FMLA and obtain FMLA protection for the absence must so notify the employer within two business days of returning to work.

- c. Compensatory time off may not be counted as part of the 12-week FMLA requirement. However, an employee may request to use his/her compensatory time for an FMLA reason.
2. FMLA may be taken intermittently or on a reduced leave schedule under certain circumstances.
- a. Leave may be taken on an intermittent or a reduced leave (part time) schedule so long as this does not result in a reduction in the total amount of leave to which the employee is entitled.
 - i. only the amount of leave actually taken may be counted toward the 12 weeks of leave to which an employee is entitled. For example, if an employee who normally works five days a week takes off one day, the employee would use 1/5 of a week of FMLA leave.
 - b. Leave may be taken intermittently when medically necessary. If an employee requests intermittent leave that is foreseeable based on planned medical treatment, the employer may require such employee to transfer temporarily to an available alternative position with equivalent pay and benefits but which better accommodates recurring periods of leave.
 - c. When leave is taken after the birth or placement of a child for adoption or foster care, an employee may take leave intermittently or on a reduced leave schedule only if the employer agrees. Such a schedule reduction might occur where an employee, with the employer's agreement, works part time after the birth of a child, or takes leave in several segments.
 - i. The employer's agreement is not required for leave during which the mother has a serious health condition in connection with the birth of her child, or if the newborn child has a serious health condition.



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- d. An expectant mother may take FMLA leave before the birth of the child for prenatal care, or if her condition makes her unable to work.
- e. An employee may request leave before the actual placement or adoption of a child if an absence from work is required for the placement for adoption or foster care to proceed. For example, the employee may be required to attend counseling sessions, appear in court, consult with his or her attorney or doctor(s) representing the birth parent, or submit to a physical examination.
- f. An employee may request an intermittent or reduced leave schedule to care for a family member in situations where the family member's condition itself is intermittent, or where the employee may be needed to share care responsibilities with another party or to make arrangements for changes in care, such as transfer to a nursing home.
- g. Intermittent leave may be taken for a serious health condition that requires treatment by a health care provider periodically, rather than for one continuous period of time.
- h. Intermittent or reduced schedule leave may be taken for absences where the employee or family member is incapacitated or unable to perform the essential functions of the position because of a chronic serious health condition even if he/she does not receive treatment by a health care provider.

C. Eligibility

1. To be eligible for leave under this policy, an employee must have been employed by the state at least 12 months, and must have worked at least 1,250 hours during the 12-month period preceding the commencement of the leave.
2. Spouses who are both employed by the state are entitled to a total of 12 weeks of leave (rather than 12 weeks each) for the birth or adoption of a child or for the care of a sick parent. Each employee is entitled to FMLA for the care of his/her own parent only. Nevertheless, the husband and wife are limited to a combined total of 12 weeks for this purpose regardless of which parent or the number of parents involved.



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3. **Certification** - A request for leave for an employee's own serious health condition or to care for a seriously ill child, spouse, or parent must be supported by a certificate issued by a health care provider.
 - a. The certificate must contain the following information:
 - i. the date on which the serious health condition commenced.
 - ii. the probable duration of the condition.
 - iii. the appropriate medical facts within the knowledge of the health care provider regarding the condition.
 - iv. if the leave is to care for a family member, the certificate must contain a statement that the eligible employee is needed to care for the son, daughter, spouse, or parent and an estimate of the amount of time required.
 - v. if the leave is due to the employee's illness, a statement that the employee is unable to perform the functions of the position must be included.
 - b. If an employee submits a complete certification signed by a health care provider, the agency may not request additional information from the employee's health care provider. However, a health care provider representing the employer may contact the employee's health care provider, with the employee's permission, for purposes of clarification and authenticity of the medical certification.
 - c. If there is reason to doubt the validity of a medical certification, the agency may require a second opinion from a health care provider designated or approved by the agency so long as that provider is not employed by the state on a regular basis. If that opinion differs, the opinion of a third health care provider jointly approved by the agency and employee may be solicited. That opinion shall be final and binding. The opinions of both the second and third health care provider shall be obtained at the agency's expense.
 - d. The employer and the employee must each act in good faith to attempt to reach agreement on whom to select for the third health care provider. If the employer does not attempt in "good faith" to reach agreement, the employer will be bound by the first



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certification. If the employee does not attempt in “good faith” to reach agreement, the employee will be bound by the second certification.

4. The employee shall provide the agency with a completed Certification of Physician or Practitioner form 30 days prior to the date leave begins and make efforts to schedule leave so as not to disrupt agency operations when the necessity for leave is foreseeable, such as for the birth or adoption of a child, or planned medical treatment. If circumstances require that leave begin in less than 30 days, the employee shall provide such notice as is practical. In cases of illness, the employee will be required to report periodically on his or her leave status and intention to return to work.
5. The approving Executive Director may require that the employee obtain subsequent recertification on a reasonable basis, but not more often than every 30 days.
6. Medical information gathered as a result of the serious health condition is considered confidential.

D. Employment and Benefits Protection

1. Upon return from family and medical leave, an employee shall be entitled to be restored to (a) the position formerly occupied; or (b) an equivalent position with equivalent employment benefits, pay and other terms and conditions of employment.
2. Apart from the paid leave actually used during the family and medical leave period, the taking of leave shall not result in the loss of any employment benefit accrued prior to the date on which the leave commenced. However, no seniority or employment benefits shall be accrued during the period of leave. The employee is not entitled to 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 leave.
3. The agency shall maintain coverage for the employee under its insurance plan at the same level and under the conditions coverage would have been provided if the employee had continued in employment. The agency shall continue to pay the “employer matching” portion of the health insurance premium, and the employee will pay the employee’s portion if such was the arrangement prior to leave. If the agency paid the full premium, it must continue to do so.



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- a. An employee may choose not to retain health coverage during leave. However, when the employee returns from leave, the employee is entitled to be reinstated on the same terms as prior to taking the leave, without any qualifying period, physical examination, exclusion of pre-existing conditions, etc.
- b. The agency's obligation to maintain health insurance coverage ceases under FMLA if an employee's premium payment is more than 30 days late. Written notice to the employee that the payment has not been received must be mailed at least 15 days before coverage is to cease.
- c. The agency may recover any payments made by the agency to cover the employee's share of the premium once the employee returns to work. An employer may recover its share of health plan premiums paid during unpaid FMLA if the employee fails to return to work unless the failure to return to work is due to a serious health condition or other circumstances beyond an employee's control. If an employer has maintained other benefits such as life or disability insurance in order to meet its responsibilities to provide equivalent benefits to the employee upon return from FMLA leave, the employer is entitled to recover the costs incurred for paying the premium whether or not the employee returns to work.

E. Definitions

1. **Serious Health Condition** means an illness, injury impairment, or physical or mental condition that involves:
 - a. Inpatient care: Any period of incapacity or treatment in connection with or consequent to inpatient care in a hospital, hospice, or residential medical care facility;
 - b. Continuing treatment by a health care provider: Any period of incapacity of more than three consecutive calendar days, that also involves continuing treatment as follows:
 - i. treatment two or more times by a health care provider, by a nurse or physician's assistant under direct supervision of a health care provider, or by a provider of health care services (e.g., physical therapist) under orders of, or on referral by, a health care provider; or



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- ii. treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment under supervision of a health care provider. A regimen of continuing treatment includes, for example, a course of prescription medication or therapy requiring special equipment to resolve or alleviate the health condition. It does not include the taking of over-the-counter medications or other similar activities that can be initiated without a visit to a health care provider.
- c. Any period of incapacity due to pregnancy.
- d. Treatment for a chronic health condition that (1) requires periodic visits for treatment by a health care provider, or by a nurse or physician's assistant under direct supervision of a health care provider; (2) continues over an extended period of time (including recurring episodes of a single underlying condition); and (3) may cause episodic rather than a continuing period of incapacity (asthma, diabetes, epilepsy, etc.).
- e. A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective: The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider. Examples include Alzheimer's, severe stroke, or the terminal stages of a disease.
- f. Multiple treatments for non-chronic conditions.
 - i. any period of absence to receive multiple treatments (including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition such as cancer, severe arthritis, or kidney disease that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment.
- g. Continuing supervision of, but not necessarily active treatment by, a health care provider due to a serious long-term or chronic condition or disability that cannot be cured.



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Note: The FMLA only allows leave for substance abuse in order to undergo treatment by a health care provider and specifically excludes employee absence because of the use of the substance. Stress qualifies as a serious health condition only if it rises to the level of a mental illness or results in physical illness.

2. **Period of Incapacity** means a period of time when an employee or family member is unable to work, attend school, or perform other regular daily activities due to the serious health condition, treatment, therefore, or recovery therefrom.
3. **Treatment**, for purposes of FMLA, includes examinations to determine if a serious health condition exists and evaluations of the condition, but does not include routine physical examinations, eye examinations, or dental examinations.
4. **Health Care Provider** is defined as a doctor of medicine or osteopathy who is authorized to practice medicine or surgery by the state in which the doctor practices; or any other person determined by the United States Department of Labor to be capable of providing health care services. Included in the second part of that definition are podiatrists, dentists, clinical psychologists, clinical social workers, optometrists, and chiropractors (limited to treatment consisting of manual manipulation of the spine to correct a subluxation as demonstrated to exist by X-ray), nurse practitioners and nurse midwives, and Christian Science practitioners.
5. **Spouse** is defined in accordance with applicable state law. It is clear from the legislative history that unmarried domestic partners do not qualify for family/medical leave to care for their partner.
6. **Parent** means the biological parent of an employee, or an individual who stands or who stood *in loco parentis* to an employee, when the employee was a son or daughter. It does not include parents-in-law.
7. **Son or Daughter** means a biological, adopted, foster child, stepchild, legal ward, or a child of a person standing *in loco parentis*.
 - a. Under 18 years of age; or
 - b. Eighteen (18) years of age or older and incapable of self-care because of mental or physical disability.



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8. Group Health Plan

- a. Or purposes of FMLA, this term shall not include an insurance program providing health coverage under which employees purchase individual policies from insurers provided that:
 - i. no contributions are made by the employer.
 - ii. participation in the program is completely voluntary for employees.
 - iii. the sole functions of the employer with respect to the program are, without endorsing the program, to permit the insurer to publicize the program to employees, to collect premiums through payroll deductions, and to remit them to the insurer.
 - iv. the employer receives no consideration in the form of cash or otherwise in connection with the program, other than reasonable compensation, excluding any profit, for administrative services actually rendered in connection with payroll deduction.
 - v. the premium charged with respect to such coverage does not increase in the event the employment relationship terminates.
- b. The same group health plan benefits provided to an employee prior to taking FMLA leave must be maintained during the FMLA leave. For example, if family member coverage is provided to an employee, family member coverage must be maintained during FMLA leave. Similarly, benefit coverage during FMLA leave for medical care, surgical care, hospital care, dental care, eye care, mental health counseling, substance abuse treatment, etc., must be maintained during leave if provided in an employer's group health plan, including a supplement to a group health plan, whether or not provided through a flexible spending account or other component of a cafeteria plan.

F. Family and Medical Leave Act Recordkeeping Requirements

1. Employer must keep the following records for no less than three years and make them available for inspection, copying and transcription by



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Department of Labor (DOL) representatives upon request (29 CFR 825.500(c):

- a. Basic payroll and identifying employee data, including name, address, and occupation; rate or basis of pay in terms of compensation; daily and weekly hours worked per pay period (unless FLSA exempt); additions to or deductions from wages; and total compensation paid.
 - b. Dates FMLA leave is taken.
 - c. If FMLA leave is taken in increments of less than one full day, the hours of the leave.
 - d. Copies of employee notices of leave furnished to the agency, if in writing, and copies of all general and specific notices given to employees as required under the FMLA and its regulations.
 - e. Any documents describing employee benefits or employer policies and practices regarding the taking of paid and unpaid leave.
 - f. Premium payments of employee benefits.
 - g. Records of any dispute between the employer and an employee regarding designation of leave as FMLA leave including employer requests for second or third medical opinions.
 - h. Employer/employee agreement on work schedules during intermittent or reduced schedule leave.
2. Records and documents relating to medical certifications, recertifications or medical histories of employees or employees' family members, must be maintained in separate files and be treated as confidential medical records. The only persons who can obtain access to these confidential records are: (a) supervisors and managers who need to be informed of restrictions on the work or duties of an employee and necessary accommodations; (b) first aid and safety personnel if an employee's physical or medical condition might require emergency treatment; and (c) government officials investigating compliance with the FMLA (29 CFR 825.500(a)).
 3. The general rule established by the statute is that the DOL may only require an employer to submit its books or records for review once during any 12-month period. However, if the DOL has reasonable cause to believe an employer has violated the FMLA or its regulations, or if the



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DOL is investigating an employee complaint, it may request or subpoena an employer's books or records at any time.

G. The Effect of Other Laws and Employer Practices on FMLA Employee Rights

1. State Law

Nothing in FMLA supersedes any provision of state or local law that provides **greater** family or medical leave rights than those provided by FMLA. For example, in Arkansas employees who take maternity leave have the option to reserve annual and sick leave balances and go directly on leave without pay. Even if the agency normally requires employees to use their leave balances during FMLA leave, they must follow state law with regard to maternity leave.

2. Americans with Disabilities Act (ADA)

- a. Americans with Disabilities Act's "disability" and FMLA's "serious health condition" are different concepts and must be analyzed separately. The FMLA entitles eligible employees to 12 weeks of leave in any 12-month period, whereas the ADA allows an indeterminate amount of leave, barring undue hardship, as a reasonable accommodation. The FMLA requires employers to maintain employees' group health plan coverage during FMLA leave on the same conditions as coverage would have been provided if the employee had been continuously employed during the leave period, whereas ADA does not require maintenance of health insurance unless other employees receive health insurance during leave under the same circumstances.
- b. The FMLA requires reinstatement to the same or equivalent position. If the employee is unable to perform the essential functions of that equivalent position even with reasonable accommodation, because of a disability, the ADA may require the employer to make a reasonable accommodation at the time by allowing the employee to work part time or by reassigning the employee to a vacant position, barring undue hardship.

3. Workers' Compensation

- a. Workers' Compensation absence and FMLA leave may run concurrently (subject to proper notice and designation by the employer). Under Workers' Compensation, the agency may offer a



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medically certified employee a "light duty" position. Under FMLA, the employee is permitted, but not required, to accept the position. Thus, it is possible that the worker will no longer qualify for Workers' Compensation but is still entitled to FMLA.

4. Consolidated Omnibus Budget Reconciliation Act (COBRA) of 1986

- a. An employer's obligation under FMLA ceases and a COBRA qualifying event may occur when and if (a) the employment relationship would have terminated if the employee had not taken FMLA (i.e., his/her position eliminated due to reduction-in-force and no transfer is available); (b) an employee informs the employer of his/her intent not to return from leave (which may be before the leave starts); or (c) the employee fails to return from leave after exhausting his/her FMLA entitlement.

5. Employee Retirement Security Act (ERISA)

- a. There is no requirement that unpaid FMLA leave be counted as additional service for eligibility, vesting, or benefit accrual purposes. However, the final regulations clarify that if a plan requires an employee to be employed on a specific date in order to be credited with a year of service for participation, vesting, or contribution purposes, an employee on FMLA leave is deemed to have been employed on that date. Previously, employees were required to return to work in order to receive the year of service.

H. Family and Medical Leave Act Posting Requirements

1. All state agencies are required to post and keep posted on its premises, in conspicuous places where employees are employed, a notice explaining the Act's provisions and providing information concerning the procedures for filing complaints of violations of the Act with the Wage and Hour Division of the Department of Labor. The notice must be posted prominently where employees and applicants for employment can readily see it. Agencies may duplicate the text of the notice contained in Appendix A, or copies of the required notice may be obtained from local offices of the Wage and Hour Division (Telephone: 501-324-5292).

XI. CHILDREN'S EDUCATIONAL ACTIVITY LEAVE

- A. § ACA 21-4-216 establishes a program to allow state employees an opportunity to



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participate in their children's educational activities by granting eight (8) hours of children's educational activity leave (CEAL) per calendar year.

- B. For the purpose of this policy, "Child" means a person enrolled in pre-kindergarten through grade 12 (pre-K - 12) who is of the following relation to a state employee:
1. Natural child
 2. Adopted child
 3. Stepchild
 4. Foster child
 5. Grandchild
 6. Ward of the state employee by virtue of the state employee having been appointed the person's legal guardian or custodian.
 7. Any other legal capacity where the employee is acting as a parent for the child.
- C. "Educational activity" means any school sponsored activity. "Educational activity" includes without limitation:
1. A parent-teacher conference
 2. Participation in school-sponsored tutoring
 3. Participation in a school-sponsored volunteer program
 4. A field trip
 5. A classroom program
 6. A school committee meeting
 7. An academic competition
 8. Assisting with athletic, music, or theater programs
- D. For the purpose of this policy "state employee" means a full-time employee of the State of Arkansas.



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1. All state employees shall be entitled to eight (8) hours of leave during any one (1) calendar year for the purpose of attending or assisting with the educational activities (described in XI.C. above) of a child (described in XI.B. above).
 2. CEAL that is unused may not be carried over to the next calendar year.
 3. CEAL is not compensable to the state employee at the time of retirement, resignation, or termination.
- E. All CEAL must be approved in advance by the employee's supervisor.

XII. DISASTER SERVICE VOLUNTEER LEAVE

- A. An employee who is trained and certified as a disaster service volunteer by the American Red Cross, whose specialized disaster relief services are requested by the Red Cross in connection with a disaster, as defined in A.C.A. § 12-75-103(2), and who requests disaster service volunteer leave may be granted leave from work with pay.
- B. Volunteers are restricted to not more than 15 days of paid leave in any 12-month calendar year.
- C. Disaster Service Volunteer Leave must be approved by the Executive Director.
- D. An employee may be granted leave without loss of seniority, annual leave, sick leave, compensatory time, or offset time.
- E. An employee shall be granted leave at the employee's regular rate of pay for those regularly scheduled work hours during which the employee is absent from work.
- F. Leave shall be granted only for disaster relief services occurring within the State of Arkansas or for disaster relief services occurring within states contiguous to the State of Arkansas.
- G. An employee deemed to be on disaster service volunteer leave shall not be deemed to be an employee of the state for purposes of Workers' Compensation.
- H. A list of certified employees, not to exceed 100 participants at any one time shall be maintained by the American Red Cross with pertinent information provided to the state agency of each disaster service area volunteer.



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XIII. ORGAN DONOR AND BONE MARROW DONOR LEAVE

- A. All state employees are entitled to leave with pay for up to thirty (30) days per calendar year in order to serve as a human organ donor. In addition, all state employees are entitled to leave with pay for up to seven (7) days per calendar year to serve as a bone marrow donor.
- B. In order to qualify for organ donor or bone marrow donor leave, employees must provide a written request from both the employee and the medical physician that will perform the transplantation. Following the transplantation, written verification of the fact must be provided by the same physician.

XIV. RECORDKEEPING FOR ALL TYPES OF LEAVE

- A. Leave requests will reflect the use of annual, sick, court and jury, holiday, without pay, military, compensatory time, offset time, birthday, catastrophic, Workers' Compensation, family medical leave, and other types of leave available under this policy. Leave accrual and use covered under this policy will be recorded in increments of 15 minutes. Unauthorized leave and suspension will be submitted as leave without pay. The supervisor must notify the Personnel Office/Payroll immediately when an employee is in leave without pay status. All leave must be recorded on an Employee Leave Request form (ASCC-19).
 - 1. Maximum leave requested on one form is one (1) calendar week.
 - 2. Leave may not be submitted in increments of less than 15 minutes.
 - 3. Employee will submit one Employee Leave Request form (ASCC-19), and will receive a copy of the approved leave form when the leave has been approved.

XV. INSTRUCTIONS FOR EMPLOYEE LEAVE REQUEST FORM (ASCC-19)

- A. The Employee Leave Request form (ASCC-19) must be submitted and approved before leave can be taken. The request for sick leave or other emergency/unplanned leave must be filed within two (2) working days after the employee's return to work.



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B. The instructions below should be followed when completing the Employee Leave Request form (ASCC-19).

1. **Employee Name** – Enter your first and last name.
2. **Personnel Number** – Enter your four or five digit personnel number.
 - a. **Maximum leave per form: One calendar week** – you may enter different types of leave on the forms, as long as they are in the same calendar week (Monday through Friday).
 - b. **Leave may be requested in 15-minute increments.**
 - c. **An employee who takes sick leave for five (5) or more consecutive days must furnish a certificate of illness from an attending physician** – certificate must be presented upon return to work.
 - d. **If one of the following is applicable, please circle: Family Medical Leave, Military Leave or Workers' Compensation related** – if your leave has been approved as one of the above, circle the applicable program and then indicate Type of leave below.
3. **Type of Leave** – Use four-letter codes to indicate type of leave requested.

ANNL – Annual Leave	EMBD – Employee Birthday
SICK – Includes: Employee Illness Doctor's Appointment Funeral (Immediate Family) Immediate Family Illness	HLDY – Holiday LWOP – Leave Without Pay CNJL – Court/Jury Duty CATL – Catastrophic Leave OTHR – Other (Specify) i.e. Disaster, Military
COMP – Compensatory/Offset	
4. **From: Month, Day, Year, Hour** – Enter the month, day, year and hour of the beginning time of your request.
5. **To: Month, Day, Year, Hour** - Enter the month, day, year and hour of the ending time of your request.
6. **Hours** – Enter the number of hours for each line.
7. **Total Hours** – Enter the total number of hours requested for the week.



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8. **Employee Signature** – Manually sign your name. Employee must sign his or her own leave request.
9. **Date** – Enter date you sign request.
10. **Authorization** – Supervisor will approve or not approve, sign and date the request.



Policy Number: HR.9
Policy Name: Performance Evaluations
and Merit Increases

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Policy No: HR.9
Section: Human Resources
Effective: 1/1/09
Subject: PERFORMANCE EVALUATIONS and MERIT INCREASES

PURPOSE

To provide ongoing evaluation of the performance of all employees to improve performance and serve as a basis for determining eligibility for merit based pay increases in accordance with state law.

PROTOCOL

Performance evaluations are required under the Uniform Classification and Compensation Act (Act 410 of 1977, as amended). The Arkansas Spinal Cord Commission falls under this Act and utilizes a revision of the Office of Personnel Management (OPM) Performance Evaluation System, in accordance with Act 289 of 2007.

I. ADMINISTRATION OF THE PERFORMANCE EVALUATION PLAN

- A. The administrative procedures developed for the Arkansas Performance Evaluation Plan will comply with the requirements of OPM's *Guidelines for Performance Evaluation Systems* (1984).
1. Annual performance evaluations are conducted not more than 90 days and not less than 30 days prior to an employee's merit increase eligibility date.
 2. The rating supervisor, with input from his or her employee where possible, sets the standard for fully satisfactory (mid-level) performance at the beginning of an evaluation period, or not later than 30 days after the start of new duties.
 3. Criteria for the Performance Evaluation Plan are developed from the job description and stated in terms of observable behavior.
 4. Completed performance evaluation is reviewed and approved by the Executive Director.



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5. Annual performance evaluations for the Executive Director will be completed by the Chairperson of the Commission in accordance with these procedures.
6. The performance evaluation will be reviewed with and signed by the employee and the supervisor within 30 days of hire or of revision of the performance evaluation. Signed performance evaluations will be reviewed and signed by the Executive Director.
7. The signed performance evaluation will be placed in the employee's personnel file. A copy will be provided to the employee.
8. If a rating supervisor is transferred to another agency or terminates employment, performance evaluations must be completed by the Executive Director for those employees whose most recent evaluation was completed more than 90 days prior to the supervisor's termination date.
9. If at any time during the evaluation period, the supervisor determines that an employee's performance has fallen below an acceptable standard, the supervisor must document the below-acceptable performance and counsel the employee.
10. If an employee's overall performance is determined to be below acceptable, the employee will be placed on probation and counseled by the supervisor. This will be documented by the supervisor and placed in the employee's personnel file.
11. Any employee may make a formal request for reconsideration of their performance evaluation. A request is to be made of the rating supervisor, then of the Executive Director.
12. When an employee is promoted, demoted, or transferred during the evaluation period, the following will apply:
 - a. If the employee is promoted, demoted, or transferred within the first 90 days of the rating period, the new supervisor will evaluate the employee on the established performance standards for the new position, and the former supervisor need not complete an evaluation.



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- b. If the employee is promoted, demoted, or transferred after the first 90 days of the rating period, a formal evaluation will be completed by the former supervisor. This evaluation should assist the new supervisor in assessing the overall performance level but will not obligate the new supervisor to average or prorate the scores, or to take into consideration elements of the former position. The new supervisor has the final authority to establish the performance evaluation plan and determine the overall score.
13. When a supervisor is promoted, demoted, or transferred during an employee's evaluation period, the following will apply:
 - a. If the supervisor is promoted, demoted, or transferred within the first 90 days of an employee's rating period, it is not necessary to complete an evaluation. The new supervisor will be responsible for evaluating the employee's performance at the end of the rating period.
 - b. If the supervisor is promoted, demoted, or transferred after the first 90 days of an employee's rating period, the supervisor will complete a formal evaluation. This evaluation should assist the new supervisor in assessing the employee's level of performance prior to separation.
 - c. Employees remaining in the same position, but having several different supervisors during the rating period, should be evaluated by the Executive Director or designee when no one supervisor has adequate documentation to complete the performance evaluation.
14. Employees who receive approval to take leave without pay will be evaluated at the end of the rating period. Although employees taking leave without pay will have their performance evaluated, employees with an abbreviated period of time worked (six (6) months or less), will not receive a merit increase on their anniversary date. Merit increases will be delayed beyond the anniversary date for a like period of time served while on leave without pay.
15. **Performance Evaluation Forms**
 - a. The position description and responsibilities of each employee will be evaluated and one of the three evaluation forms developed by



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Office of Personnel Management will be selected by the supervisor and approved by the Executive Director (Commission Chair in case of Executive Director position) to complete the performance evaluation. The addendum form will be utilized to reflect additional performance criteria. (All forms follow this policy):

Form Selection:

- i. **Executive/Director/Deputy Director** - this form consists of five (5) core performance expectations and is for use by executive level top management, including agency/board/commission directors and deputy directors. The rating official is either the Governor of the State of Arkansas or the agency/board/commission chairman when evaluating the performance of an agency/board/commission director. When evaluating the performance of a deputy director the rating official is the agency/board/commission director.
- ii. **Senior Management** - this form consists of eight (8) core performance expectations and is for use by those classified and unclassified employees who manage a staff of four (4) or more professional level employees and who have complete responsibility for large programs/divisions that have statewide impact. The rating official is generally the agency/board/commission/institution director/head or deputy director.
- iii. **Employee** - this form is for use by classified employees and unclassified employees and will be the form used most frequently.
- iv. **Addendum** - this form is optional but can be used to describe any additional core performance expectations/standards and should be attached to the appropriate performance evaluation.

16. Performance Criteria/Form Components

- a. Each of these forms generally consist of the following fields:



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- i. Part 1 – Rated Employee identification:
 - (1) employee name
 - (2) personnel number
 - (3) agency
 - (4) position title
 - (5) class code
 - (6) position number
- ii. Part II – Rater Employee Identification:
 - (1) rater name
 - (2) rater position title
 - (3) telephone number
- iii. Part III – Reviewing Official Identification (employee form)
 - (1) Reviewing official name
 - (2) Reviewing official position title
 - (3) Telephone number
- iv. Part - IV (III for Director and Senior Management forms) - Performance Standards:
 - (1) **Duty Area** - a collection of tasks that together form an essential element of the job.
 - (2) **Standard** - a statement used to measure employee performance. It may be a quantity or quality of output produced, a model of operation, or a degree of progress toward a goal.



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- (3) **Result** - the outcome of the performance of the core performance expectation/standard of the job.
 - (4) **Comments** - comments by the employee, rater and/or reviewing official concerning the result of a specific core performance expectation/standard.
- v. Part V - Overall rating
- (1) the overall rating category is determined at the discretion of the rating official based on the relative importance of each core performance expectation/standard as determined by the rater.
 - (2) for supervisory personnel to be eligible for a merit increase, they must certify that all subordinate performance evaluations have been completed and forwarded to the reviewing official.
 - (3) any written disciplinary reprimand will preclude the award of a merit increase or a job series promotion for the current rating period.
 - (4) an unsatisfactory rating in any core performance expectation/standard precludes awarding an Exceeds Standard or Above Average overall rating.
- b. Addendum form may be used for additional duty areas.

17. Rating Scale and Score Ranges

- a. In accordance with the Department of Finance and Administration Office of Personnel Management, the following rating scale will be utilized to score each criteria and the over all performance:
 - i. **Exceeds Standards** - performance consistently exceeds position requirements and management expectations. Resourcefulness and depth of knowledge are of the highest quality. Assignments are accomplished in an exceptional manner with minimal direction and are characterized by



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outstanding achievements seldom accomplished within the agency.

- ii. **Above Average** - on a regular basis, performance is characterized by high quality and quantity of work that exceeds most position requirements, key objectives, and management expectations. Employee demonstrates outstanding skills and abilities, and assignments are accomplished in a highly effective manner with limited guidance and direction.
- iii. **Satisfactory** - performance meets all or most and may occasionally exceed work objectives and management expectations. Employee demonstrates good knowledge of job duties, and assignments are accomplished effectively with normal supervisory guidance.
- iv. **Unsatisfactory** - performance does not consistently meet management expectations. Requires more than normal guidance and direction. Improvement and/or development are necessary if the rater elects to continue employment with the incumbent.

II. RESPONSIBILITIES

- A. Executive Director is responsible for ensuring that proper performance plans are developed and approved in advance of the rating period, that approved ratings are assigned, that the program is effectively carried out, and that employees are informed of the appraisal process and the manner in which it operates.
- B. Supervisors are responsible for the day-to-day operation of the performance evaluation system in their work areas. They will ensure that all employees are given a full explanation of the importance of performance evaluation to employees and management, the evaluation system and the principal items in the employee's performance rating plan, the rating levels used, the significance of their use, and the appeal rights of employees.
- C. Agency Fiscal Officer is responsible for monitoring the progress of the performance evaluation program and evaluating its effectiveness. The Agency Fiscal Officer will ensure that training is provided to supervisors so that they can



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effectively use the program in managing their work force. The Agency Fiscal Officer will also ensure that the original copy of each annual performance evaluation is appropriately filed in the employee's personnel file.

III. ARKANSAS PERFORMANCE EVALUATION PLAN PROCEDURES

A. Arkansas Performance Evaluation Plan and Review.

1. Prior to the beginning of each rating period, a performance evaluation plan will be developed consistent with the duties and responsibilities assigned to the position.
2. This performance evaluation plan will be discussed with each employee by the immediate supervisor. The communication of the plan will be documented by employee and supervisor signatures. The reviewing/designated official will also review the plan and sign. A copy of the plan will be given to the employee. The original will be filed in the employee's personnel file during the evaluation period.
3. During the rating period, it may become necessary to change part of the employee's performance evaluation plan. Additions, revisions, or deletions will be made to the existing performance evaluation plan, marked with the effective date, and if needed, cross-referenced. The employee, rating supervisor, and reviewing/designated official will initial any change.
4. Continuous measurement of employee performance will occur during the evaluation period. The supervisor will document observed employee performance that meets, exceeds, or falls short of the fully satisfactory performance. By observing employee work behavior and reviewing documentation during the rating period, the supervisor can assess the performance of the employee and provide employee counseling.
5. Prior to the employee's anniversary date, the supervisor will review all documentation and complete the employee's performance evaluation form. The supervisor will compare the observed performance (results) to the expected performance (criteria) in each duty area and apply the rating scale. The supervisor will then review the ratings in each duty area to determine the overall rating. The most frequently occurring rating among the duty areas or an average of the duty area ratings will determine the



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overall rating. However an unsatisfactory rating in any duty area precludes awarding an Exceeds Standard or Above Average overall rating.

6. The supervisor will discuss the performance evaluation plan with the employee, allowing the employee time for written comment concerning the evaluation. Agency appeal procedures will be explained by the supervisor.
7. The employee, rating supervisor, and reviewing/designated official will again sign the performance evaluation form. These signatures indicate that the performance evaluation results have been reviewed, but not necessarily agreed to or accepted by the employee. A copy of the completed performance evaluation will be given to the employee and the rating supervisor. The original will be maintained in the personnel file.

IV. MERIT INCREASES

- A. In accordance with Act 289 of 2007, a merit increase pay system based on performance allows for merit salary raises.
- B. **Merit increases**
 1. Exceeds Standards – 4.5 % increase
 2. Above Average – 3.0% increase
 3. Satisfactory – 1.5% increase
 4. Unsatisfactory – no increase
- C. Merit increases will be added to classified employee's salary, increasing it for future salary and retirement calculations.
- D. Merit increases for unclassified employees will be provided as a lump sum payment not a salary increase, which will be included in calculations for retirement.
- E. Employees may not receive a merit increase until they have completed one year of state employment (2,080 hours).



Policy Number: HR.9
Policy Name: Performance Evaluations
and Merit Increases

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- F. Part time employees will receive a merit increase at the completion of 2,080 hours of work.
- G. The award of merit increases will take place at a time scheduled by and in accordance with Department of Finance and Administration. The award of merit increases will NOT automatically be given at the completion of the performance evaluation, but will be based on the most recent performance evaluation.



Policy Number:

HR.10

Policy Name:

Political Activity by
State Employees

Policy and Procedures

Policy No: HR.10
Section: Human Resources
Effective: 01/01/09
Subject: POLITICAL ACTIVITY BY STATE EMPLOYEES

PURPOSE

To establish guidelines for participation of state employees in political activities during work hours and utilizing state property.

PROTOCOL

- A. State employees can, should, and are encouraged to participate in the election process so long as assistance to candidates is rendered on the employee's own time and state property is not involved. Employees are not to endorse candidates, including the Governor, in their official capacity as state employees. A person's status as an employee of the state is public knowledge. Public endorsements of a candidate can easily be interpreted as endorsements of an official capacity.
- B. The legal provisions can be briefly summarized as follows
1. State employees are prohibited from engaging in partisan political activity during the hours they are performing work for and being paid by an agency of state government.
 2. Political banners, posters, or literature are never allowed to be displayed on or in any state office.
 3. Political bumper stickers or decals will never be displayed on or in state cars. State vehicles will not be used during or after working hours to promote or assist the candidacy of any person, in any way. State employees may not display political advertising on personal vehicles when using these vehicles in the performance of official duties *for which they shall be reimbursed by the state*.
 4. No state official (whether elected or appointed) shall assess employees for any political purpose or use threats of coercion to require or persuade an employee to contribute to a particular candidate or cause.



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- C. Requests for leave of absence to work in campaigns should be submitted to the Executive Director.
- D. In addition to these prohibitions established by Arkansas law and by administrative policy, there are other specific limitations which apply to employees whose salaries are either partially or totally paid from federal funds. These rules are established by the Federal Hatch Act.
- E. For specific questions about Arkansas Election Law, contact the Secretary of State's Election Division at 501-682-3470. Questions regarding the Federal Hatch Act as it relates to federally funded state employees may be answered by the Office of Special Counsel in Washington, D.C. The phone number for that office is 800-854-2824.



Policy Number: HR.11
Policy Name: Probationary Employment

Policy and Procedures

Policy No: HR.11
Section: Human Resources
Effective: 01/01/09
Subject: PROBATIONARY EMPLOYMENT

PURPOSE

To define the period during which an employee is under evaluation and determination of continued employment.

PROTOCOL

New agency employees serve a probationary period of six (6) months. The probationary period is established as a time for the employee to receive orientation, training and evaluation, as well as to adjust to the position and responsibilities. During this period, the supervisor evaluates the employee's performance and makes a determination regarding the employee's continued employment. It is critical during this period that the employee communicates with the supervisor concerning any problems he/she is having which could affect their employment. Supervisors should also counsel with employees concerning any problems that they identify and work to resolve them. Current agency or state employees transferring or advancing to a new position in the agency are also subject to a six (6) month probationary period.

The probationary period may be extended or initiated at any time at the discretion of the employee's supervisor. If satisfactory progress has not been made at the end of the extended period, the employee can be terminated or reassigned.



Policy Number:
Policy Name:

HR.12
Sexual Harassment

Policy and Procedures

Policy No: HR.12
Section: Human Resources
Effective: 01/01/09
Subject: SEXUAL HARASSMENT

PURPOSE

To encourage employees to discuss problems of sexual harassment with appropriate supervisors, to explain, to reach resolution, to make adjustments, if necessary, and to foster better understanding between employees and supervisors.

PROTOCOL

- A. It is the policy of this agency that sexual harassment, as defined in the Federal Guidelines (29 CFR CH XIV subsection 1604.11), Section 703 of Title VII of the Civil Rights Act of 1964, as amended, and in the Arkansas Code Annotated § 5-71-208, is intolerable and unconscionable.
- B. It also is the policy of this agency that all employees be given the opportunity through established steps and processes as specified in the agency's Employee Grievance Procedure (see HR.6), to resolve sexual harassment complaints. This policy does not reflect any change in the agency's grievance procedure.
- C. Employees should submit complaints made in good faith, expressed in reasonable terms, containing cause for the complaint, corrective action desired, and sufficient information upon which to base decisions.
- D. **The criteria for sexual harassment, as specified by the federal guidelines, is:**
 - 1. Submission to the conduct is either an explicit or implicit term or condition of employment and/or;
 - 2. Submission to or rejection of the conduct is used as a basis for employment decisions affecting the person who did the submitting or rejecting and/or;
 - 3. The conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.



Policy Number:

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Policy Name:

Sexual Harassment

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- E. Actions that may be defined as sexual harassment are not limited to supervisory roles, but may include actions of co-workers, actions of the same or opposite sex, and actions of individuals external to the agency but who have contact with employees in the work environment.
- F. Such unwelcome behavior may be either physical or verbal in nature. Examples include, but are not limited to the following:
1. **Overt Actions** Actual rape or sexual assault, though it is a one time occurrence;
 2. **Continuing Action** A pattern of behavior or practice conducted on a continuing basis, i.e., including, but not limited to: abusive language, demeaning language, derogatory remarks, questions regarding sexual preferences or activities, and/or explicit/implicit materials;
 3. **Covert Actions** May include any or all of the actions listed under continuing actions.
 4. **Sexual Contact** Any act of sexual gratification involving the touching directly or through clothing the sex organs, or buttocks, or anus of a person or the breast(s) of a female (A.C.A. § 5-71-208).

NOTIFICATION

- A. This agency's grievance procedure authorizes the Grievance Officer to modify, waive, or otherwise change the Employee Grievance Procedure in order to fulfill the intent of the procedure, provided the Executive Director and employee agree to the waiver, modification, or change. To this effect, no employee, in order to effect resolution, shall be required to solely or independently confront the person allegedly conducting or causing the action believed to be sexual harassment.
- B. Employees believing themselves to be victims of sexual harassment are encouraged to come forward in order to resolve the complaint. Employees are encouraged to contact the appropriate level supervisor(s) or the appropriate grievance officer to begin the process of resolution.



Policy Number: HR.13
Policy Name: Training and Conference Attendance

Policy and Procedures

Policy No: HR.13
Section: Human Resources
Effective: 01/01/09
Subject: TRAINING AND CONFERENCE ATTENDANCE

PURPOSE

To provide opportunities for ASCC employees to receive training and attend workshops and conferences to increase knowledge and job skills.

PROTOCOL

Continuing education is essential to keep employees abreast of new skills, techniques, and information in their field of work as well as to promote opportunities for networking and sharing of information with other professionals. Arkansas Spinal Cord Commission supports both internal in-service education and educational opportunities outside the agency to the extent that it is programmatically and fiscally feasible.

In order to monitor training and conference attendance, the following procedures have been instituted. All travel noted will be administered per the ASCC travel regulations (F.2).

I. INTERNAL ASCC TRAINING SESSIONS/CONFERENCES

- A. No formal request is needed to attend these sessions. Attendance will be based on supervisor's direction/request for employee to attend. Cost of travel and other costs approved by the supervisor (i.e., overnight lodging) will be paid by ASCC.

II. INTERAGENCY TRAINING PROGRAM (STATE OF ARKANSAS)

- A. The State of Arkansas, Office of Personnel Management sponsors the InterAgency Training Program (IATP) to provide continuing education for state employees at a reasonable cost. Quarterly training schedules are distributed to all staff. To attend an IATP session, the employee will submit **both** an ASCC Training/Conference request form and an IATP enrollment form. It is not necessary to submit a brochure for an IATP training session. Both completed forms should be submitted to the supervisor for approval at least two weeks



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before the registration deadline. Upon approval, the supervisor will submit to the Executive Director for approval. Upon approval, the Executive Director will submit to the Agency Fiscal Officer for processing. The Agency Fiscal Officer will register the employee, if approved, and return a copy of the approved request form to the employee. Requests not approved will also be returned to the employee.

III. REQUESTS TO ATTEND OUTSIDE TRAINING SESSIONS/ CONFERENCES

- A. ASCC will support employee attendance at training sessions/conferences administered by professional organizations, associations, and other providers to the extent that it is fiscally and programmatically feasible. Fiscal support (reimbursement) will only be provided for attendance at training sessions/conferences that are directly related to the employee's job.
- B. To request attendance for a training session/conference, the employee will submit an ASCC Training/Conference Request form. The form should be completed fully to include:
 - 1. A sound written justification;
 - 2. Estimate of cost (use ASCC travel regulations for guidance);
 - 3. A copy of the training/conference brochure or schedule (if no brochure is available a detailed description must be included);
 - 4. A completed registration form.
- C. The request should be submitted to the supervisor for approval at least two weeks before the registration deadline for the session. Upon approval, the supervisor will submit the request to the Executive Director. Upon approval, the Executive Director will submit to the Agency Fiscal Officer for processing. The Agency Fiscal Officer will return a copy of the approved request to the employee. Also, a letter stating the out-of-state maximum per diem for lodging/meals will go to the employee (if appropriate). Requests not approved will be returned to the employee. No training costs or time will be approved without submission of a training/conference request form. No training/conference requests will be approved in retrospect.



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- D. Short (less than 1/2 day) workshops, seminars, demonstrations that require no registration cost, or travel may be approved verbally by the supervisor (i.e., rehab hospital in-service).

IV. REQUESTS TO MAKE PRESENTATION FOR OUTSIDE TRAINING/CONFERENCES

- A. ASCC supports and encourages staff to make presentations at professional conferences and workshops. However, in order to assure adequate resources and staffing are available and the Commission is appropriately represented, prior approval is required. All presentations must be approved by the Executive Director before submission. Generally, only presentations related to the mission of the Commission will be approved.
- B. To request approval, the staff member will submit the following to the Executive Director:
1. Copy of the Call for Papers/Request for Proposals or other presentation solicitation in response to which the proposal is being submitted.
 2. Copy of the complete session proposal/abstract to be submitted, including all attachments, i.e., presenter form, curriculum vita.
 3. A memo outlining the following time and cost estimates:
 - a. Number of work hours required to prepare presentation.
 - b. Materials and supplies (including estimated cost) to be purchased by ASCC to make presentation/poster.
 - c. Conference/travel related expenses requested to be paid by ASCC (transportation, registration, meals and lodging).
 - d. Number of travel hours/days of attendance.
- C. This request should be submitted no later than one week (5 working days) in advance of the date of planned mailing/submission of the proposal. The Executive Director will notify the employee of approval within 3 working days of receipt.



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Policy Name: Training and Conference Attendance

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1. **Note:** Approval is not required for local inservice education or training sessions conducted as a part of the staff member's day-to-day work responsibilities.



Policy Number:
Policy Name:

HR.14
Work Standards

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Policy No: HR.14
Section: Human Resources
Effective: 01/01/09
Subject: WORK STANDARDS

PURPOSE

To provide an effective efficient work environment to promote employee satisfaction and customer services.

PROTOCOL

The Arkansas Spinal Cord Commission (ASCC) strives to provide the highest quality of services to our clients and the public. Employees work within established state guidelines to provide these services. The following protocols outline the basic work standards of the ASCC.

I. POSITION DESCRIPTIONS

- A. The Department of Finance Office of Personnel Management has developed position descriptions for each classified state position, including those at ASCC. These descriptions provide a basis for performance evaluations and define knowledge skills and abilities required to perform the job. These descriptions include:
1. Class Code
 2. Job Title
 3. Title Type
 4. Fair Labor Standards Act (FLSA) Exemption Status
 5. Federal Government Status Code
 6. Grade
 7. Pay Scale
 8. Position specifications and minimum qualifications



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- B. Position descriptions are available from the ASCC Agency Fiscal Officer or on the State of Arkansas Department of Finance and Administration Office of Personnel Management website at: http://www.state.ar.us/dfa/personnel_mgmt/opm_classcodes.html.
- C. Position descriptions do not define or describe job assignments, work hours, responsibilities or specific tasks to be performed. Those are specific to the individual and are assigned by the designated supervisor.

II. WORK HOURS

A. In accordance with Governors Policy Directive #5

All state offices shall be open for business between 8:00 a.m. and 4:30 p.m. However, department directors shall have flexibility to establish other working hours for their departmental personnel so long as all employees work an 8-hour day. Deviations from the 5 day, 40-hour work week shall be approved by the Governor.

1. **Regular Work Hours**

The normal official working hours for ASCC employees are 8:00 a.m. to 4:30 p.m., Monday through Friday. Lunch breaks are 30 minutes, and breaks not to exceed 15 minutes in the morning and in the afternoon are scheduled with the supervisor. It may be necessary on occasion for the supervisor to change working hours or breaks to accommodate the various needs of the agency. This will be done in cooperation with the affected employee(s). Any changes in regularly scheduled work hours must be approved by the Executive Director.

2. **Flexible 5 Day Work Week Hours**

It is the intention of the Commission to make flexible scheduling or “flextime” available to ASCC employees to the extent possible, while providing adequate staffing to cover agency business hours. Flextime is the opportunity for an employee to work alternate hours to those established by the agency as work hours. Flextime is not the ability to come and go on your own schedule. Employees may request the opportunity to work hours other than 8:00 a.m. to 4:30 p.m. in order to meet family responsibilities and personal needs.



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- a. In order to ensure optimal coverage of business hours, flextime five day options will be limited to the following:
 - i. 7:30 a.m. to 4:00 p.m.
 - ii. 8:30 a.m. to 5:00 p.m.
 - iii. In addition, flextime will be considered permanent. Employees may not switch back and forth between schedules, and the same schedule must be used every day of the week.
 - iv. Each work group (i.e., field office, administration, research) must have coverage from 8:00 a.m. to 4:30 p.m. This will preclude all staff members in a work group from having the same flextime schedule.
- b. Requests for flextime schedules should be submitted in memo form to the ASCC Executive Director. In order to ensure adequate staffing coverage is available, the employee should work with his/her supervisor and co-workers to arrange coverage. These arrangements should be described in the memo.
- c. Upon receipt of the request, the Executive Director will review the request with the employee's supervisor to assure that the request will not disrupt office activities and adequate staffing is available. The Executive Director will respond in writing within 10 working days of receipt of the request. The starting date for the flextime schedule will be included in the response (this will typically be the Monday following the approval letter).

3. Flexible 4 Day Work Week Hours

- a. In some cases, it is in the interest of the employee and the agency for an employee to work four (4) ten-hour workdays each week. This option is available to all ASCC employees. However, based on the requirements and responsibilities of an employee's position, certain days may not be available as a scheduled day off.
- b. In order to assure continuity of services, employees who select a 4 day work week must identify a 'buddy' who has a similar position description. 'Buddies' may not be scheduled for the same day off.



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The 'buddies' will agree to provide coverage for one another on their scheduled days off. 'Buddies' will keep one another aware of work assignments and issues so that the 'buddies' can provide appropriate coverage on scheduled days off. Support staff and supervisor will refer client calls or other responsibilities to the established 'buddy'. The 'buddy' may work in a different field office. Coverage on days when one 'buddy' is scheduled off and the other applies for leave will be coordinated with the supervisor. No staff member may be a 'buddy' to more than 2 other employees.

- c. Employees scheduled for a 4 day week will work 7:30 a.m. to 6:00 p.m. with one scheduled meal break.
- d. Employees will select a scheduled day off when they apply for the 4 day work week and will stick to that 4 day schedule. Scheduled day off may not be changed without approval of the Executive Director. Employees may select any day, Monday through Friday as their assigned day off.
- e. Employees scheduled off on a state holiday will receive 10 hours of equivalent time off (see HR.10 – Leave Policy, holiday leave).
- f. Case Managers who choose and are approved for a 4 day work week will inform all of their clients by mail and/or email of their new work schedule.
- g. Employees who work a 4 day schedule will be responsible for answering their phones from 7:30 a.m. to 6:00 p.m., when they are in the office, in order to assure quality client service.
- h. Employees will use 10 hours of annual or sick leave on days they request off. This will decrease the number of sick days and annual days available by 20%.
- i. When agency training or other required events are scheduled on the employee's day off, the employee will be credited with compensatory or offset time for the hours scheduled. These events will be scheduled as far in advance as possible to provide adequate notice.



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- j. Employees who choose a 4 day schedule will maintain that schedule. Should an employee determine that it is not personally feasible to maintain the requested schedule, he or she may return to the regular 5 day work week. Schedule changes should not be seasonal or frequently changed in order to provide continuity of services and adequately inform clients. Employees who make frequent requests to modify their schedule may lose the opportunity to use alternate schedules.

4. Application for 4 day work week schedule

- a. The employee's direct Supervisor and the Executive Director must approve all 4 day work week assignments. This approval will assure that adequate client coverage is provided at all times.
- b. Employees who request a 4 day work week schedule will submit a memo of request to his or her supervisor. The memo should include:
 - i. request to participate in 4 day work week.
 - ii. request for proposed day off.
 - iii. identification of your work 'buddy'.
 - iv. request date to begin new schedule (must be start of a pay period).
- c. Upon receipt of the memo, the employee's Supervisor will:
 - i. review the request.
 - ii. make a recommendation to approve or deny the alternate schedule by writing approve or deny, signing and dating the memo.
 - iii. forward the memo to the Executive Director.
- d. Upon receipt of the memo, the Executive Director will:
 - i. review the request and recommendation.
 - ii. approve or deny the alternate schedule by writing approve or deny, signing and dating the memo.



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- iii. forward a copy of the memo to the employee with a start date included.
- iv. forward the original to the Agency Fiscal Officer.
- e. Upon receipt of the memo, the Agency Fiscal Officer will:
 - i. inform all staff of the employee's schedule change, assigned 'buddy' and start date.
 - ii. Assure that employee completes OPM employee planned work schedule change form.
 - iii. File the memo in the employee's personnel file.

III. PROFESSIONAL STANDARDS

- A. All state employees shall perform their duties with courtesy, competence and the highest standards of honesty and integrity.

1. Personal Appearance

It is the policy of Arkansas state government to encourage all employees to use good judgment and discretion in their dress and appearance. Personal appearance shall be appropriate to the job assignment and location. While at work, state employees are expected to dress in a manner that will reflect the image of a professional public servant. They are expected to utilize good personal hygiene and grooming. Generally, professional attire will not include jeans, shorts, tee shirts with emblems or advertisements, or thong sandals in the office. Fridays will be considered casual days, when jeans may be worn, but attire should remain professional for the activities of the day. Due to the diverse functions on some ASCC positions, the choice of appropriate apparel for activities outside the office is left to the discretion of the employee.

2. State-Owned Equipment and Supplies

Use of any and all state-owned equipment and supplies shall be restricted to official state use only. Unauthorized or personal use of equipment or supplies may be grounds for dismissal.



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3. **Alcoholic Beverages and Controlled Substances**

Use or possession of alcoholic beverages or any unlawful use or possession of controlled substances is strictly prohibited during office hours or on office property and shall be grounds for immediate dismissal.

4. **Smoking**

In keeping with the Arkansas Clean Air Act, smoking is prohibited in all vehicles and enclosed areas owned, leased, or operated by the state, its agencies and authorities, and any political subdivision of the state, municipal corporation, or local board or authority created by general, local, or special act of the General Assembly or by ordinance or resolution of the governing body of a county or municipal corporation individually or jointly with other political subdivisions or municipalities of the state. Therefore, smoking is prohibited in all ASCC offices, vehicle and meeting spaces utilized by ASCC. Employees will abide by established and or posted outdoor smoking areas in and around ASCC offices and any other office, hospital or other location visited during work hours.

5. **Visitors/Use of Telephones**

Except in cases of extreme emergency, friends, relatives and children should not accompany the employee to work. Visitors to the work site should be kept to a minimum to prevent interference with daily work activities and client confidentiality.

Personal phone calls should be kept to a minimum and made only during scheduled breaks. Personal long distance phone calls may not be made using state telephones.

IV. **OTHER EMPLOYMENT ISSUES**

A. **Anti Nepotism**

1. Within each state agency, no relatives of employees shall be placed within the same line of supervision whereby one relative is in a supervisory position over the other. A temporary change in supervision resulting in the supervision of a relative will not be considered a violation of ACA § 25-16-1001, provided the supervision does not exceed 30 days. No hiring, firing, pay adjustments or other personnel actions may occur during this temporary period of supervision.



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2. If employees of the same state agency plan to marry, they must complete and sign OPM Form 050, Marriage Disclosure of State Employees, listing both employees' names, job titles and division in which employed and submit the form to the employees' human resources department for review and approval. Failure to complete this form may subject employees to termination for non-compliance. If the marriage will result in a violation of ACA § 25-16-1002, the public official of the state agency or his designee shall provide written notice of each of the alternatives to resolve the violation as listed below:
 - a. Transferring one of the employees to another position within the agency.
 - b. Transferring one of the employees to another agency.
 - c. The resignation of one of the employees.
3. The employees shall be given the opportunity to select among the available alternatives.
4. If any employee of an agency suspects a violation of ACA § 25-16-1001 has occurred, they may complete OPM Form 051, Violation of Hiring Practices/Supervision of a Relative, and submit the form to the Office of Personnel Management. OPM will determine if a violation has occurred and report such violations to the Attorney General's Office for resolution.

B. Concurrent Employment by Two State Agencies or Institutions

1. An employee may work for ASCC and another agency or institution concurrently, provided that a request is made to the Chief Fiscal Officer of the state on the employee's behalf by completing and submitting the OPM25 concurrent employment form and provided that the combined salary payments from the agencies or institutions do not exceed the larger maximum annual salary of the line item position authorized for either agency or institution from which the employee is being paid. Subject to approval of the Chief Fiscal Officer of the State, an employee may be concurrently employed by the same agency or institution.
2. ASCC employees may engage concurrent employment with another state agency/institution under the following conditions:



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- a. It does not occur during scheduled ASCC work hours and does not utilize ASCC office space, equipment or supplies.
 - b. It does not constitute a conflict of interest, perception of a conflict of interest or interfere with performance of an employee's job duties.
3. ASCC employees meeting the above criteria and wishing to work for another state agency or institution concurrently should complete OPM 25 and submit it to the ASCC Executive Director for approval before forwarding the form to the Chief Fiscal Officer of the State. Approval from the Chief Fiscal Officer is required before concurrent employment may be initiated.
 4. ASCC employees may teach temporarily at state supported institutions of higher education even though their combined salaries will exceed the line item maximum (Arkansas Code § 19-4-1604), again, subject to the approval of the Chief Fiscal Officer of the State.
 5. Annual, sick and holiday leave may be accrued in a secondary employment position proportionate to the hours worked in both primary and secondary employment. However, no person concurrently employed by two state agencies, who is eligible for secondary employment leave accrual, shall be allowed to accrue annual, sick and/or holiday leave, or any other fringe benefit, which would exceed that allowable by state law for work performed during a regular forty (40) hour work week.
 6. *No employee concurrently employed by more than one state agency is allowed to be on paid sick leave with one agency and be paid or compensated by another state agency.*

C. Other Concurrent Employment

1. ASCC employees may engage in outside employment or extra employment under the following conditions:
 - a. It does not occur during scheduled state work hours and does not utilize ASCC office space, equipment or supplies.
 - b. It does not constitute a conflict of interest, perception of a conflict of interest or interfere with performance of an employee's job duties.



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2. Any employee who undertakes outside employment will submit a memo to her/his supervisor before beginning the second employment stating:
 - a. Name of employer.
 - b. Statement stating the above criteria are met.
3. Upon review, the supervisor will place the memo in the employee's personnel file.
4. Failure to report additional employment may result in disciplinary action.

V. DIRECT DEPOSIT AS REQUIREMENT OF EMPLOYMENT

- A. As a condition of employment, a person hired or appointed to a position in any agency in state government on or after August 12, 2005 is required to accept payment of salary or wages by electronic warrants transfer. The electronic warrants transfer will be made in the form of a direct deposit of funds to the account of the beneficiary of such payment in any financial institution equipped for electronic fund transfers, provided that such financial institution is designated in writing by such beneficiary and has lawful authority to accept such deposits. New hires or rehires must complete the Mandatory Direct Deposit Notification form (OPM 236-A) at the time of the job offer. The form should be completed and submitted to the Agency Fiscal Officer for review and filing.
- B. Any employee affected by the direct deposit requirement may request an exemption from the requirement. The Chief Fiscal Officer of the State shall have the authority to grant exemptions from the direct deposit requirement upon a showing of hardship to the person requesting the exemption or upon any other reasonable basis. To request exemption from direct deposit due to hardship, the employee must complete in the Direct Deposit Hardship Exemption Request form (OPM 236-B). The form should be completed and submitted to the Agency Fiscal Officer for review, signature and submission to the Chief Fiscal Officer of the State. Upon approval, the Agency Fiscal Officer will notify the employee and the Agency Payroll Officer.



Policy Number:

HR.15

Policy Name:

Age Discrimination

Policy and Procedures

Policy No: HR.15
Section: Human Resources
Effective: 01/01/09
Subject: Age Discrimination

PURPOSE

To proclaim that this agency is in compliance with all state and federal laws and regulations regarding age discrimination, to promote employee awareness and to encourage age equity.

PROTOCOL

In accordance with Arkansas Code Annotated § 23-30-201 *et seq.* the Arkansas Spinal Cord Commission will discourage and prohibit discrimination against individuals because of age.

Age discrimination in employment means setting arbitrary age limits for hiring, promotion, discharge, compensation, working conditions and benefits, regardless of an individual's actual or potential for job performance. It also means establishing and implementing practices and policies that work to the disadvantage of older employees or potential employees. It is the policy of this agency to prohibit such acts.

- A. It is the policy of this agency that employees be given the opportunity through established steps and processes as specified in the Employee Grievance Policy (HR.6), to resolve age discrimination complaints. This policy does not reflect any change in the agency's grievance procedures.
- B. Employees should submit complaints made in good faith, expressed in reasonable terms, containing cause for the complaint, corrective action desired, and sufficient information upon which to base decisions.
- C. It is unlawful for this agency:
 - 1. To fail or refuse to hire, to discharge any individual, or discriminate against an individual with respect to his/her compensation terms, conditions or privileges of employment because of age.



Policy Number:

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Policy Name:

Age Discrimination

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2. To limit, segregate, or classify employees in any way, which would deprive or tend to deprive any individual of employment opportunities, or otherwise adversely affect his/her status as an employee because of age.
 3. To reduce the wage rate of any employee in order to comply with the provisions of this section.
- D. It shall not be unlawful for this agency:
1. To take any action otherwise prohibited by this section where age is a bona fide occupational qualification, reasonably necessary to the normal operation of the particular business or where the differentiation is based on reasonable factors other than age.
 2. To discharge or otherwise discipline an individual for good cause.



Policy Number: CS.1
Policy Name: Client Services Appeals Process

Policy and Procedures

Policy No: CS.1
Section: Client Services
Effective: 01/01/09
Subject: CLIENT SERVICES APPEALS PROCESS

PURPOSE

The Arkansas Spinal Cord Commission strives to administer services for quality care, treatment, rehabilitation, and facilitation of independent living for individuals with spinal cord disabilities. It is the agency's commitment to provide needed/requested services in a consistent and timely manner without discrimination on the basis of race, color, national origin, sex, religion, age, or disability.

The Appeals Process policy provides a mechanism by which individuals (or, if applicable, the individual's parent or guardian) who are applicants for or are eligible for services from the Arkansas Spinal Cord Commission may request a review of any action taken or decision made (i.e., denial of a particular service). Services covered by this policy include purchased services, personal visits, advocacy efforts, timely responses, etc., which are provided by the Arkansas Spinal Cord Commission. The Arkansas Spinal Cord Commission may advocate/assist for remedies from other agencies, but this process cannot be accessed to appeal the decisions of other agencies.

PROTOCOL

- A. An individual/parent/guardian who wishes to appeal a decision may do so by requesting in writing within 60 days from the date the unfavorable action or decision was made.
- B. The written request should be submitted to the Arkansas Spinal Cord Commission Client Services Administrator for supervisory review. Address appeal requests to:

Client Services Administrator
Arkansas Spinal Cord Commission
5800 W 10th St, Suite 108
Little Rock, AR 72204

- C. The written request must include a brief description of the problem including specific reasons why the individual/parent/guardian feels the outcome did not meet their needs and request for a specific action to be taken in order to resolve the appeal.



Policy Number: CS.1
Policy Name: Client Services Appeals Process

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- D. Within five (5) working days from receipt of the appeal request, the Client Services Administrator will investigate the appeal. The appeal investigation will include discussion with the appropriate Case Manager and contact with the individual/parent/guardian for input.
- E. Based on this investigation, the Client Services Administrator will render a decision that will be documented in writing to all parties involved by certified mail within five (5) working days. In the event the Client Services Administrator's decision has not resolved the issue to the individual's/parent's/guardian's satisfaction, the individual/parent/guardian will be informed that he/she may appeal in writing to the Arkansas Spinal Cord Commission Executive Director requesting an administrative review. Appeal Requests should be addressed to:

Executive Director
Arkansas Spinal Cord Commission
5800 W 10th St, Suite 108
Little Rock, AR 72204

Such appeal must be submitted within ten (10) working days of receipt of the Client Services Administrator decision.

- F. Upon receipt of an appeal from the individual/parent/guardian, the Executive Director shall have ten (10) working days in which to render a decision. Results of the decision will be disseminated to all parties involved by certified mail and will clearly outline the reasons for the decision. Notification of the next appeal level will be provided along with the time frame allowed to submit the appeal.
- G. If the individual/parent/guardian still disagrees with the decision, a final appeal may be made to the members of the Arkansas Spinal Cord Commission. A written appeal notice must be submitted to the Commission Chairperson within ten (10) working days of receiving the Executive Director's decision. Appeal requests should be addressed to:

Chairperson
Arkansas Spinal Cord Commission
5800 W 10th St, Suite 108
Little Rock, AR 72204

- H. A review by the Commission will be scheduled for the next scheduled Commission meeting upon receipt of the appeal request. The individual/parent/guardian or representative may attend the Commission meeting to discuss their concerns. Written verification of the date and time of the Commission meeting will be sent to the



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individual/family. Upon hearing the individual's/parent's/guardian's appeal and reviewing the previous appeal documentation, the Commission will render a decision at the meeting or request additional specific information for a decision at the next scheduled meeting.

- I. The Commission Chairperson will submit a decision letter by certified mail to all parties involved within ten (10) working days after the Commission meeting.
- J. Under these procedures, the decision of the Commission is final. Should the individual/parent/guardian choose to pursue the appeal further, it would be done through the appropriate judiciary system.

DISPOSITION

Client Appeal documentation will be maintained in the Central Office under separate file. No documentation concerning a client appeal will be placed in any staff personnel records. However, pertinent and appropriate documentation will be placed in the client's file.



Policy Number: CS.2
Policy Name: Client Confidentiality/
HIPAA Privacy Practices

Policy and Procedures

Policy No: CS.2
Section: Client Services
Effective: 01/01/09
Subject: CLIENT CONFIDENTIALITY/HIPAA PRIVACY PRACTICES

PURPOSE

To provide appropriate safeguards for the use of client records and information in order to maintain the confidentiality of individuals who receive or have received services from the Arkansas Spinal Cord Commission (ASCC) and to meet the requirements of the privacy rules of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 (Public Law 104-191).

PROTOCOL

I. BACKGROUND

- A. The Health Insurance Portability and Accountability Act of 1996 has created national standards that protect individuals' medical records and other protected health information (PHI). The act gives individuals more control over their health information, sets boundaries for the use and release of health records and establishes safeguards to protect the privacy of health information. In addition, it invokes civil and criminal penalties for violations of individuals' privacy rights.
- B. The Arkansas Spinal Cord Commission is a covered entity under HIPAA and, as such, will comply with all applicable requirements. Client case files have been deemed medical records under the Arkansas Freedom of Information Act and are considered protected health information under HIPAA. The Arkansas Spinal Cord Commission and staff will make every effort to maintain client privacy, provide individuals access to their health information and to follow HIPAA privacy rules in the maintenance, storage and disclosure of information.

II. DEFINITIONS

- A. Protected Health Information (PHI), is health information which:
 - 1. Identifies an individual or offers a reasonable basis for identification.



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Policy Name: Client Confidentiality/
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2. Is created or received by a covered entity.
3. Relates to past, present or future physical or mental health condition, provision of healthcare or payment for healthcare and is transmitted or maintained in any medium, written, oral, or electronic.

B Examples of PHI include - First and last name, geographic subdivision smaller than a state, treatment or hospitalization dates, birth dates, date of death, telephone numbers, fax numbers, e-mail address, social security number, medical record number, health plan beneficiary number, vehicle identification and license number, account number, driver's license number, biometric identifiers, photographic images or any other unique characteristic or identifier.

C. Covered Entity – A health plan that provides or pays the cost of medical care, a healthcare clearinghouse or healthcare provider.

D. Treatment, Payment and Operations (TPO) –

1. **Treatment** – the provision, coordination or management of healthcare and related services, consultation between providers relating to an individual or referral of an individual to another provider for healthcare.
2. **Payment** – Activities undertaken to obtain or provide reimbursement for healthcare including determinations of eligibility or coverage, billing, collections, medical necessity determinations and utilization review.
3. **Operations** – Functions such as quality assessment, and improvement activities, reviewing competence or qualifications of healthcare professionals, conducting or arranging for medical review, legal services and auditing functions business and administrative activities.

III. PRIVACY NOTICE

A. Policy

All clients and applicants for services have a right to adequate notice of the uses and disclosure of his or her protected health information (PHI).



Policy and Procedures

B. Procedures

1. ASCC will make available a copy of the ASCC Notice of Privacy Practices for Individuals Served (ASCC-21) to all individuals applying for or receiving services.
 - a. The notice will contain all information required under HIPAA regulations.
2. ASCC will attempt to obtain a signed acknowledgement of receipt from each client.
 - a. Clients will be provided with a copy of the notice and asked to sign the Notice of Privacy Practices Acknowledgement (ASCC-7) to acknowledge receipt of notice upon initial assessment.
 - b. Failure or refusal to sign the acknowledgement will not impact the individual's ability to receive ASCC services.
 - c. Specific procedures for completion of the acknowledgement will be found in the ASCC Case Management Services Procedures Manual, Client Confidentiality and Release of Information (Chapter 15).
3. ASCC will post the Notice of Privacy Practices for Individuals Served in all ASCC offices and will make copies of the notice available upon request.
4. ASCC Notice of Privacy Practices for Individuals Served will be posted on the ASCC website in a format to be reviewed or downloaded and printed.
5. Revisions to privacy notice will be distributed and notice provided whenever there is a material change in the uses or disclosures, individuals or covered entities' rights and duties or other practices.
5. Documentation – ASCC will retain copies of notices issued for a period of six (6) years from the later of the date of creation or last effective date.
 - a. Individual acknowledgement or refusal of acknowledgement of receipt of notice will be maintained in the client's case file per



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Case Management Services Procedures Manual, Client Confidentiality and Release of Information (Chapter 15), for a minimum of six (6) years.

IV. PHI SAFEGUARDS AND DISCLOSURE

A. Policy

ASCC will protect client's guaranteed rights to privacy of PHI in accordance with HIPAA rules and regulations.

B. Procedures

1. ASCC will make every effort to protect rights of clients and/or their legal representatives as they relate to the PHI created and maintained by ASCC.
2. Use and disclosure of client PHI by ASCC will be limited to a need to know basis, and the amount of PHI disclosed will be the minimum necessary to accomplish the purpose of the communication.
3. Clients have a right to restrict the use and disclosure of their PHI during TPO activities.
4. Clients may request that ASCC provide their PHI in reasonable alternate media and to alternate address.
5. Clients have the right to inspect and receive copies of their PHI.
6. Clients have a right to request and receive an accounting of disclosures of their PHI.
7. Clients have a right to request that ASCC not disclose their PHI to certain parties.
8. Clients have the right to request modification or revision of their PHI, and revisions will be made if determined accurate and reasonable.
9. Clients have a right to file a complaint regarding ASCC violations of their privacy rights assured under HIPAA.



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Policy Name: Client Confidentiality/
HIPAA Privacy Practices

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10. Clients have a right to require that ASCC refrain from any activity to intimidate, threaten, coerce, or discriminate against them for exercising their rights under HIPAA.
11. ASCC will designate a Privacy Officer who will be responsible for coordinating compliance with HIPAA regulations and will provide technical assistance to clients and staff on HIPAA privacy related issues.

V. COMPLAINTS

A. Policy

ASCC clients or applicants for services or their legal representatives may complain to ASCC or the U.S. Department of Health and Human Services if they believe their privacy rights under HIPAA have been violated.

B. Procedures

1. All complaints must meet the following requirements:
 - a. Complaint must be filed in writing, either on paper or electronically.
 - b. Complaint must name the covered entity that is subject of the complaint and describe the acts or omissions believed to be in violation of HIPAA privacy regulations.
 - c. Complaint must be filed within 180 days of when complainant knew or should have known that the act or omission occurred. This time limit may be waived by ASCC Privacy Officer if good cause can be shown.
2. Complaints made in accordance with above requirements may be made to the following persons:
 - a. **ASCC Privacy Officer**
Arkansas Spinal Cord Commission
5800 W 10th St, Suite 108
Little Rock, AR 72204



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- ii. any e-mail message containing PHI should be sent on a 'need to know' basis and should never be sent in a broadcast or mail group.
- iii. e-mail containing PHI should contain only the minimum necessary information to accomplish the purpose of the e-mail.
- iv. a privacy warning should be included at the bottom of all e-mail containing PHI. The following warning will be used:

***Confidential Notice:** The information contained in this e-mail message is the property of the State of Arkansas and may be protected by state and federal laws governing disclosure of private information. It is intended solely for the use of the entity to whom this e-mail is addressed. If you are not the intended recipient, you are hereby notified that reading, copying or distribution of this transmission is strictly prohibited. The sender has not waived any applicable privileges sending this transmission. If you have received this transmission in error, please notify the sender by return and delete the message and any attachments from your system.*

2. Fax

- a. All faxed messages containing PHI and sent within ASCC or out of the agency to other covered entities for TPO purposes must be safeguarded for confidentiality and privacy in accordance with federal and state laws.
 - i. faxes may be sent only to a specific person to whom such release has been determined to be authorized.
 - ii. it should be established, by prior phone contact, that the specific person is present to receive the fax.



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- iii. received faxes containing PHI should be handled as client records and maintained and stored confidentially. Faxes should never be left in common areas or in open on desks or counters.
- iv. fax messages containing PHI shall utilize a cover sheet with the word 'CONFIDENTIAL' appearing near the top of the form.
- v. all fax messages shall include a statement regarding prohibition of disclosure of identifying PHI. The statement shall read as follows:

***Prohibition of Redisclosure:** This information has been disclosed to you from records that are confidential. You are prohibited from using information for other than the stated purpose, from disclosing it to other parties without specific written consent of the person to whom it pertains and are required to destroy the information after the stated need has been fulfilled or as otherwise permitted by law. A general authorization for release of medical or other information is not sufficient for this purpose.*

VII. USE FOR OTHER PURPOSES

A. Policy

When it is necessary for client data that may include PHI to be utilized for other purposes, the information will be identified to assure that confidentiality and safeguarding of PHI is maintained.

B. Procedures

1. **Freedom of Information Act** – Though client records are determined medical records and are protected from the Freedom of Information Act



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(A.4), on occasion other covered records (i.e., fiscal records) may include PHI. In these cases, all records will be de-identified to assure that the individual is no longer identifiable.

2. **Marketing and Public Relations** – ASCC will not use or disclose identifiable PHI for marketing or public relations without the express authorization of the individual(s) to whom the information relates. ASCC will allow clients to choose not to have their PHI used for such purposes without fear or recrimination or loss of services.
3. **Public Health** – HIPAA privacy rule permits covered entities to disclose PHI, without authorization, to public health authorities who are legally authorized to receive such information for the purpose of preventing or controlling disease, injury or disability. By legislative mandate, the Arkansas Spinal Cord Disability Registry would meet this criteria. However, for all records in the registry and in any other public health records maintained or disclosed by ASCC, any disclosure required will be limited to the minimum necessary to achieve the purpose of the inquiry.
4. **Research** – ASCC will follow HIPAA Privacy Rule in the conduct of all research which includes the creation, use or disclosure of protected health information. PHI used for research purposes will comply with the Privacy Rule, using PHI only with the individual's authorization. Under covered circumstances (i.e., with approval of Institutional Review Board) unauthorized disclosures may be made. In every circumstance, client privacy confidentiality will be safeguarded and the minimum data necessary will be disclosed.

VIII. CLIENT REQUESTS

A. Policy

ASCC will conform with the HIPAA Privacy Rule in meeting the rights of individuals related to maintenance and use of their PHI.

B. Procedures

1. **Amendments** – ASCC clients and applicants for services have a right to review records and to request that PHI in their ASCC case files be amended, added to or deleted if they believe that the information is



Policy Number: CS.2
Policy Name: Client Confidentiality/
HIPAA Privacy Practices

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incorrect. Procedures for request and modification of records is covered in Case Management Services Procedures Manual, Client Confidentiality and Release of Information (Chapter 15).

2. **Confidential Communication** – ASCC clients and applicants for services have a right to request that PHI be provided to them by alternate means or to alternate locations, when the requests are made directly to ASCC and are deemed reasonable. Procedures for request for PHI to be provided to by alternate means or to alternate location is covered in Case Management Services Procedures Manual, Client Confidentiality and Release of Information (Chapter 15).
 - a. Documentation or requests for materials to be sent by alternate means or to alternate locations will be maintained for a period of six (6) years.
3. **Accounting for Disclosure of PHI** – In accordance with HIPAA Privacy Rule, clients have a right to request an accounting of PHI disclosures made by ASCC for a period of up to six (6) years previous to the date of the request (but after April 14, 2003), these do not include disclosures made for TPO purposes, disclosures made to the client or disclosures made with client authorization or in other stated circumstances. Procedures for the tracking of PHI disclosures and requests for disclosure records are covered in Case Management Services Procedures Manual, Client Confidentiality and Release of Information (Chapter 15).



Policy Number: CS.3
Policy Name: Medical Eligibility Criteria

Policy and Procedures

Policy No: CS.3
Section: Client Services
Effective: 01/01/13
Subject: MEDICAL ELIGIBILITY CRITERIA

PURPOSE

To define the medical criteria for eligibility for Arkansas Spinal Cord Commission services.

BACKGROUND

Prior to 1987, the only requirement for eligibility for Arkansas Spinal Cord Commission (ASCC) services was the presence of a lesion in the spinal cord. In 1986 the Medical Eligibility Criteria for ASCC services were modified to limit services to individuals who have functional impairments severe enough to cause significant disability and to be subject to the severe and expensive complications that are commonly associated with spinal cord disability, such as recurrent pressure sores and urinary infections. The revised criteria apply only to those individuals applying for services after January 1, 1987. Clients accepted under the original criteria are considered 'grandfathered' into eligibility, and these cases are maintained on the ASCC registry whether or not the medical eligibility criteria below are met.

I. MEDICAL ELIGIBILITY

- A. The spinal cord may be damaged by trauma, infection, tumor, disease, developmental defect, or degenerative disorder. The damage to the spinal cord may be complete (i.e., no transmission of nerve impulses past the damaged area, no function below level of injury) or incomplete (i.e., some messages below the damaged area are still able to get to or from the brain, some function below level of injury). In order to be medically eligible for ASCC services, the damage to the spinal cord must be of a severity to impair basic functions, resulting in a limitation in the individual's ability to accomplish basic activities of daily living. While these limitations may also result from other causes, only those directly related to spinal cord function will be considered for eligibility.
- B. In order to assess the severity of limitations, four major criteria are considered. Lack of what would generally be considered normal function in three (3) of the



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four (4) following areas would qualify an individual as medically eligible for ASCC services.

For the purpose of this policy, normal will describe the individual's level of function previous to injury or onset.

1. **Paralysis** - A lack of normal voluntary motor function. There should be enough weakness and/or spasticity to significantly interfere with normal self-care activities and/or mobility. In most cases this will require the use of a wheelchair, scooter, walker, braces (including AFOs, KAFOs), crutches or cane for mobility. In some cases, particularly those with a diagnosis of central cord syndrome, the paralysis may be more severe in the arms and hands than in the legs to the point that adaptive devices or assistance is required for completing activities of daily living such as feeding, dressing, and hygiene.

The following are indicators of paralysis:

- a. If an individual is classified as an AIS (Asia Impairment Scale) A, B or C, the paralysis is significant enough to prevent normal mobility.
 - b. Those with Central Cord Syndrome, who may have upper extremity paralysis only will also meet the paralysis definition of their upper extremity paralysis prevents normal activities of daily living without equipment or assistance.
 - c. In reviewing manual muscle test scores, if muscles in the upper and or lower extremities are graded below 4 (of 5), lack of normal motor function is indicated. Note: Spinal shock may impair motor function initially after injury and may resolve or improve with time. **The most recent Manual Muscle Tests scores, completed closest to discharge, should be used to determine eligibility.**
 - d. The individual is unable to walk 25 feet without assistive device or hands on assistance (holding on wall or rail or another person).
2. **Sensation** - A lack of normal sensation at or below the level of lesion that results in absent or impaired ability to discern touch, pressure, pain (the ability to tell sharp from dull), or temperature (the ability to tell hot from cold). The individual should have enough loss of sensation to have more than normal risk to skin and musculoskeletal structures.



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The following are indicators of lack of normal sensation, at or below the level of lesion:

a. If an individual is classified as an AIS (Asia Impairment Scale) A or B the loss is significant enough to prevent normal sensation. ASIA C will require additional investigation but may meet eligibility.

b. In reviewing AIS sensory testing:

Scores of 0 – absent or 1 - altered reflect lack of normal sensation.

1. The inability to determine the difference between sharp and dull sensation. This typically means if the sensation upon pinprick at distal (arms, legs, hands, feet) areas of the body are not recognized as the same as those on the cheek.
 2. Cannot determine pressure (thumb pressure) in distal areas of the body (arms, legs, hands, feet).
 3. Cannot determine hot or cold sensations in distal areas of the body (arms, legs, hands, feet). This would mean he or she cannot accurately tell the temperature of bath or shower water by hand or foot.
 4. Lack of proprioception, inability to determine the position or movement in a part of the body without visual contact.
3. **Loss of NORMAL Bladder Control** - The lack of ability to voluntarily empty the bladder in a timely manner without accidents or use of equipment or medication. Frequently, individuals with spinal cord injury will present with a neurogenic bladder. When this condition is present, it is usually obvious with symptoms of either urinary incontinence (involuntary voiding) or urinary retention (inability to void). However, with minimal spinal cord damage, the symptoms may be subtler. In addition to a patient's history, a neurogenic bladder may be identified by urodynamics testing by an urologist.

The following are indicators of a neurogenic bladder, or lack of normal bladder function:



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- a. If an individual is classified as an AIS (Asia Impairment Scale) A, B or C, the loss is significant enough to prevent normal bladder function
- b. Use of any type of bladder emptying device, including:
 1. Indwelling or external catheter (will have a leg bag for collection),
 2. Intermittent ('in and out') catheterization,
 3. External collection device (diapers or padding),
 4. Urinary diversion/urostomy/ileostomy (surgical procedures to allow urine to be diverted through an abdominal stoma directly to an external collection device).
- c. Occasional involuntary urination including:
 1. Bladder accidents,
 2. Urgency (urge to urinate comes on quickly and intensely, often not allowing time to make it to the toilet)
 3. Inadvertent urination upon lifting, bending, transferring, coughing, or laughing.
These may be exacerbated by use of caffeine or alcohol or a full bladder.
- d. Frequent urinary tract infections (two or more in one year)

The individual's assessment of changes in their ability to urinate post injury as compared with pre-injury may provide additional insight into his or her bladder function.

4. **Loss of NORMAL Bowel Control** - The lack of ability to voluntarily empty the bowel in a timely manner without accidents or use of equipment or medication. Frequently, individuals with damage to the spinal cord will present with a neurogenic bowel. This is often difficult to define or to confirm because the individual with spinal cord damage may have a well



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regulated *bowel program* that is not much different from normal function and prevents accidents and impactions.

The following are indicators of a neurogenic bowel:

- a. If an individual is classified as an AIS (Asia Impairment Scale) A, B or C, the loss is significant enough to prevent normal mobility.
- b. Inability to prevent a bowel accident when diarrhea occurs.
- c. Frequent bouts of diarrhea.
- d. Digital stimulation, manual evacuation, regular use of suppositories, enemas, and/or oral medications is required to empty the bowel.
- e. Chronic constipation or bowel impaction. This symptom alone is not enough to make a diagnosis because many otherwise normal individuals have constipation, which can be caused by diet, some medications, poor bowel habits, etc.
- f. Bowel diversion to an external stoma (i.e. colostomy, cecostomy).

The individual's assessment of changes in their ability to defecate post-injury as compared with pre-injury may provide additional insight into his or her bowel function.

A history of bowel problems is usually sufficient to make a determination; however, in questionable cases, a physical examination by a physician will determine whether the patient has voluntary control over the anal sphincter and normal sensation in the rectal area.

EVEN IF ALL OF THE ABOVE SYMPTOMS ARE PRESENT, THERE MUST BE A CLEAR INDICATION THAT THEY ARE DUE TO ABNORMAL FUNCTION IN THE SPINAL CORD AND NOT DUE TO BRAIN OR PERIPHERAL NERVE PATHOLOGY.

II. SPECIAL CONSIDERATIONS IN DETERMINING MEDICAL ELIGIBILITY



Policy and Procedures

- A. In some cases, the presence of the above criteria is not discernible or there is question related to the etiology of the symptoms. Therefore, the following procedures have been established to assure that all prospective clients receive needed services as well as to prevent the possibility of further injury or disability.
1. **Brainstem Lesions** - The anatomical dividing line between the brain and the spinal cord is not easily discernible, and damage in this area may affect both. An examination and review of results of neurological testing such as an MRI or CAT scan by a physician may be required to discern the level of the lesion. A cervical level of injury must be documented in the medical report or record. If the damage is clearly documented to be in the brainstem and not the cervical spinal cord, the patient is not medically eligible. If the medical records are inconclusive related to the presence of a spinal cord injury, the case will be referred to the ASCC Medical Director for review and determination.
 2. **Cauda Equina Lesions** - Although the cauda equina is not technically part of the spinal cord, damage to these nerves can cause a paraplegia identical to that caused by a lumbar or sacral spinal cord injury. For the purpose of determining medical eligibility, a cauda equina injury will be treated as a spinal cord injury. Therefore, anyone with a cauda equina injury who meets the three (3) of four (4) criteria will be considered medically eligible.
 3. **Combined Brain and Spinal Cord Trauma** – An individual who has sustained severe trauma to the neck and may have injuries to both the brain and the spinal cord. When the patient has a severe head injury or is comatose, it may not be possible to assess the spinal cord damage. In this infrequent situation, the case will be sent to the ASCC Medical Director for review and determination. Medical records will be obtained and forwarded to the Medical Director with a cover memo requesting a determination and describing the Case Manager’s best assessment of the status of the three (3) of the four (4) medical eligibility criteria.
 4. **Multiple Sclerosis** - Individuals with this diagnosis frequently present a difficult challenge to determine their eligibility because of the nature of the disease. The clinical findings regarding medical criteria (paralysis, sensory loss, etc.) may be present, but it may not be clear whether they are due to lesions on the spinal cord or on the brain, since both are often involved. In many cases it is virtually impossible to determine which



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lesions impact which losses. **If the individual meets three (3) of four (4) criteria, he/she will be determined medically eligible.**

For the purposes of determining medical eligibility, once a client is determined medical eligible and added to the registry, the case will remain active regardless of any improvement in symptoms. The progression of multiple sclerosis is unpredictable. Some individuals experience temporary exacerbations (relapses) followed by complete or partial (remitting) recovery. Typically, the improvements are temporary. Utilizing the initial medical eligibility determination will prevent unneeded case closure and reopening based on temporary improvements.

5. **Spina Bifida** – It is very difficult to determine medical eligibility on newborn infants with spina bifida, who are unable to respond to testing, especially for bowel and bladder control. Therefore, all babies with a diagnosis of spina bifida are determined medically eligible for ASCC services until they are 3 years of age.

Within 90 days of the child's third birthday, medical eligibility should be assessed and the four (4) criteria applied. Clients who do not meet the medical criteria at that time will be closed as "No Longer Medically Eligible (73)". A Certificate of Medical Eligibility (ASCC-13) with accompanying medical records for verification will be completed on those clients who do meet medical eligibility criteria.



Policy Number: CS.4
Policy Name: National Voter Registration Act Implementation

Policy and Procedures

Policy No: CS.4
Section: Client Services
Effective: 01/01/09
Subject: NATIONAL VOTER REGISTRATION ACT IMPLEMENTATION

PURPOSE

To serve as an agency-based voter registration site in accordance with State and federal legislation

PROTOCOL

- A. The National Voter Registration Act (NVRA) also known as the "Motor Voter Law" was mandated by Congress in 1993. Implementation on procedures was passed by the Arkansas Legislature in 1995. The NVRA became effective in Arkansas on January 1, 1996.
- B. The Arkansas Spinal Cord Commission has been designated by the Arkansas Legislature and the Secretary of State as an agency-based voter registration site. This requires that ASCC staff provide the opportunity to register to vote or make a name or address change to voter registration to a client or applicant for services when that individual: 1) applies for services; or 2) recertifies for services.
- C. This process may take place at an ASCC office, in the client's home, or in any location where the client and ASCC staff member complete application or recertification procedures.
- D. ASCC staff will complete voter registration procedures as per the National Voter Registration Act Agency Training Manual, produced by the Arkansas Secretary of State. Procedures for implementation are included in the ASCC Case Management Procedures Manual, Special Programs and Services (Chapter 14).
- E. Any ASCC staff member may offer and provide the NVRA application to a client or interested individual; however, it will be the responsibility of the ASCC Case Manager to assure and document that each of his/her eligible clients has been offered the opportunity to register to vote or change registration information upon every application or recertification for services. Failure to do so may result in disciplinary actions for the staff member.



Policy Number: CS.4
Policy Name: National Voter Registration
Act Implementation

Policy and Procedures

- F. However, the first priority of ASCC is the well-being of our clients. The needs of our clients should not be compromised by administration of this policy. Since ASCC Case Managers frequently accept applications for services from clients who have recently sustained their spinal cord injury and are not in a physical, mental, or emotional condition to discuss voter registration, and for whom a discussion of the topic may be considered inappropriate, NVRA procedures may be delayed at the discretion of the ASCC Case Manager. The procedures will then be implemented at the first opportunity deemed appropriate by the Case Manager, as long as it is within six (6) months of initial application.

- G. The Client Services Administrator will monitor ASCC compliance with NVRA.



Policy Number:
Policy Name:

F.1
Purchasing

Policy and Procedures

Policy No: F.1
Section: Fiscal
Effective: 05/16/14
Subject: PURCHASING

PURPOSE

To comply with the regulation of the Arkansas State Purchasing Law.

PROTOCOL

A. General

All purchases made by and for the Arkansas Spinal Cord Commission fall under the Arkansas State Purchasing Law. This law is monitored and administered by the Office of State Procurement, Department of Finance and Administration. A copy of the State Purchasing Law and Regulations is on file in the Central Office. Questions related to state purchasing regulations should be referred to the Agency Fiscal Officer.

Purchases of \$10,000 - \$49,999 must be secured through the Competitive Bid process (requiring at least three (3) bids). The lowest bidder is awarded the purchase. The bidders must receive the same Request for Bid letter and be given the same amount of time to submit a bid. The three bids must be listed on a bid sheet with the price of each bid and the winning bid identified. If a vendor does not submit a bid, the bid sheet must be marked as "NO BID" for that vendor. **THERE ARE NO EXCEPTIONS TO THIS RULE.**

Purchases for \$50,000 or more must be done with sealed bidding. This process must follow the Office of State Purchasing rules and regulations. This is a process that takes at least two (2) months so planning ahead is a requirement. Case Managers must contact the Agency Fiscal Manager to begin this process. Two bids for under \$50,000, for the same item, cannot be submitted days or weeks apart to circumvent the bid process. **THERE ARE NO EXCEPTIONS TO THIS RULE.**



Policy Number:
Policy Name:

F.1
Purchasing

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B. Agency - Non-Client Purchases

Purchases for non-client items require approval of the supervisor and the Executive Director. Requests for purchase should be made on the ASCC Internal Purchase Requisition form (copy follows policy). Submit requisition to the supervisor for approval. Upon approval, the supervisor will submit to the Executive Director. Upon approval, the Executive Director will submit to the Agency Fiscal Officer for purchase. Requisitions not approved will be returned to the requester.

C. Agency - Client Purchase

Procedures for purchases for clients are defined in the Case Management Services Procedure Manual, Purchasing Services for Your Client (Chapter 10).



Policy Number: F.2
Policy Name: Travel Regulations

Policy and Procedures

Policy No: F.2
Section: Fiscal
Effective: 3/3/15
Subject: TRAVEL REGULATIONS

PURPOSE

To comply with state travel regulations and to streamline processing of travel vouchers and expedite travel reimbursements

PROTOCOL

I. GENERAL

A. Eligibility for State Drivers

1. **Insurance** - Every driver of a personal vehicle or state vehicle on state business will maintain liability insurance on their vehicle. A current copy of proof of insurance for each driver will be kept on file at the Central Office. The proof of insurance will take the form of certificate of insurance or an insurance card. Failure to provide proof of insurance will constitute a waiver of personal vehicle mileage reimbursement.
2. **Arkansas Driver's License** - Each employee is required to provide proof of a current Arkansas driver's license in order to operate personal or state vehicles on state business. New employees will have 30 days from date of hire to obtain an Arkansas driver's license.

B. **Traveler's Responsibility** - The traveler is responsible for obtaining itemized, original receipts for meals, lodging, parking, taxi, etc., to support the items listed on the TR-1.

C. **Official Station** - The official station on the TR-1 is the city where your office is located.

D. **Reimbursement Rate** - When personal motor vehicles are used for authorized travel on state business, the driver can claim reimbursement at the current rate as



Policy and Procedures

determined by the Department of Finance and Administration. The Executive Director will send a memo notifying of changes as they occur.

- E. Map Mileage** - The maximum mileage allowed will be determined by the shortest major highway route by using the ASCC/ARS Mileage Data Base, rev2011Mar31. For locations not listed on the Data Base, use MapQuest.
1. Vicinity travel must be listed as actual miles driven in addition to shortest distance mileage to that town.
 2. Map mileage will be reimbursed between the travel site destination and the employee's official station or residence, whichever is less.
- F. Reimbursement to the Driver** - If more than one traveler is transported in the same vehicle, only the owner can claim mileage reimbursement. The state will reimburse for official miles driven only.
- G. Reimbursement to the Traveler** - All claims for travel by state employees must be made out by the traveler and payment will be made only to the traveler. One state employee may not include in his travel expense statement the expenses of another state employee traveling in his company.
1. Reimbursement will be made to the traveler only; not to any other payee or establishment (i.e., hotel).
- H. Owner (Personal Vehicle) Responsibility** - The state assumes no responsibility for any maintenance, insurance, operational costs, accidents, or fines incurred by the owner of the vehicle while on official business for the state.
- I. Credit Card Use** - Major oil company credit cards issued to a state agency are not to be used to pay for meals and lodging, fuel for personal vehicles, or any other personal expenditures.
- J. Petty Cash** - Petty cash funds will not be used to make travel advances or reimbursements.
- K. Fiscal Year Submission** - Travel reimbursement requests must be submitted and reimbursed in the fiscal year in which the travel was completed.



Policy and Procedures

L. **Separate TR-1s** - Travel reimbursement that requires prior administrative approval, i.e., conferences, workshops, special meetings, case manager meetings, must be submitted on a separate TR-1.

M. **Submission of Reimbursement Requests**

1. The traveler will submit the completed TR-1 with signature for reimbursement.
2. TR-1s will be processed twice per month - on the 6th and 20th.
3. TR-1s received by the 5th of the month will be processed on the 6th, and reimbursement can be expected within 7-9 working days.
4. TR-1s received after the 5th but by the 19th will be processed on the 20th, and reimbursement can be expected within 7-9 working days.
5. TR-1s may be submitted at any time during the month for approval by the supervisor but will be processed on the dates above. Please allow time for approval.
6. When the 5th or 19th falls on Saturday or Sunday, TR-1s are due on the preceding Friday and will be processed on the succeeding Monday.
7. Errors (i.e., lack of signature, inaccurate addition, etc.) may prevent immediate approval and delay processing; please review carefully before submitting TR-1.

N. **Expenses for Non-State Employees and Official Guests**

An agency director may be reimbursed for his/her expenses for the purchase of meals for official guests. The expense(s) must be claimed as an incidental expense, and a letter of explanation must be attached to the TR-1 in the files stating how the person(s) for whom the expenditure was made benefitted the agency in his/her visit.

II. OVERNIGHT TRAVEL

A. **Meals** - Reimbursement for meals without overnight travel is **NOT ALLOWED**.

B. **Maximum Reimbursement** - Reimbursement for meals and lodging shall be limited to actual expenditures. The State of Arkansas uses the guidelines



Policy and Procedures

published in the *Federal Travel Directory*, which all meal reimbursements will follow. *Federal Travel Directory* guidelines are available from the Agency Fiscal Officer or check the Federal-per-Diem website at: <http://www.gsa.gov> to identify the daily limits for your destination. These rates are the Meal & Incidental Expense or M&IE Rate on the GSA website. The first and last day of travel are reimbursed at 75% of the authorized meal rate. The M&IE rate **INCLUDES** taxes and tips in the rate.

1. **Exceeding maximum reimbursement** - The Executive Director must approve, in advance, requests to exceed maximum reimbursement for lodging. Requests will not be considered to exceed maximum reimbursement for meals.
 2. Tip reimbursement shall not exceed fifteen percent (15%) of the meal amount expended. Tips are included in the M&IE meal rate. The total reimbursement for meals, tax and tips shall not exceed maximum rates described in the Federal Travel Directory.
 3. The following items are NEVER reimbursable: personal entertainment, personal phone calls, alcoholic beverages, valet service, laundry and cleaning or other personal expenses.
 4. ALL incidental costs must be pre-approved by the travel supervisor.
- C. **Receipts** - The traveler is responsible for obtaining itemized, original receipts for meals, lodging, parking, taxi, etc., to support the items listed on the TR-1. When an itemized receipt is not available, the traveler will itemize purchase on the receipt or separate sheet.
- D. **Receipts For Direct Billing** - When travel includes direct billed expenses, such as a hotel room, airfare, or registration fee, documentation must be saved and submitted with the traveler's TR-1. This would include such items as a receipt from the hotel upon checkout, an airline boarding pass, confirmation letter/email for registration.



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III. OUT-OF-STATE TRAVEL

- A. **Prior Approval** - All out-of-state travel must be approved in advance by the Executive Director.
- B. **Airfare** - Airfare should be prepaid by the agency. If, due to unusual circumstances, an employee pays for airfare, the employee will not be reimbursed for such expense until after the travel has been completed.
- C. **Car Rental** - In cases where a traveler travels to a destination where the intended activities require extensive travel, a car may be rented. Trips involving the need for transportation to and from the airport, and to and from place of lodging, do not justify car rental. Car rental must be approved in advance of travel by the Executive Director.
- D. **Receipts** - The traveler is responsible for obtaining itemized, original receipts for meals, lodging, parking, taxi, etc., to support the items listed on the TR-1. When an itemized receipt is not available, the traveler will itemize purchase on the receipt or separate sheet.
- E. **Receipts For Direct Billing** - When travel includes direct billed expenses, such as a hotel room, airfare, or registration fee, documentation must be saved and submitted with the traveler's TR-1. This would include such items as a receipt from the hotel upon checkout, an airline boarding pass, confirmation letter/email for registration.

IV. INSTRUCTIONS FOR COMPLETING TR-1 EMPLOYEE INPUT DATA SHEET (SEE ATTACHMENT 1) ARE:

- A. **Name of Payee** - Enter the name of the traveler.
- B. **Vendor No.** - Enter traveler's vendor number.
- C. **Title** - Indicate the traveler's position title.
- D. **Address** - Enter the home address of the traveler.
- E. **Official Station** - Enter your assigned official station (city where your office is located). For non-state employees, list city of residence.



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- F. **License Number** - Enter the license number of the private vehicle used if the traveler is the owner and mileage is being claimed.

INSTRUCTIONS FOR COMPLETING TR-1 FORM (SEE ATTACHMENT 2) ARE:

- G. **Date** - Enter the dates of the travel.
- H. **Town** - Enter the towns where expenses were incurred. This must be listed for each date of travel/expenditure.
- I. **Description** – Provide a description for each travel line item.

One of the following terms should be entered in description section of TR-1 – if unsure of description of meeting, select closest option.

1. **Ancillary Visit** – all trips about client services or to accomplish daily tasks that are not meetings, training or client visits. This would include equipment pick up, return, visits to regional loan closets, visits to vendors, DHS and other agency offices, hospital visits (not to clients), any non client visit.
2. **Client Visit** – visits to clients and family at any site (home, hospital, school, classroom, workplace), deliveries to clients, ramp building or other mods at client home, delivering or picking up equipment from client.
3. **Field Office Visit** – trip to and from field office by Central Office staff or other staff for any purpose.
4. **Meeting** – all meetings attended for any purpose including IEP, case conference, staff meeting, professional meeting, meetings with other agencies such as Department of Corrections. Includes internal agency meeting (i.e., committees, task force).
5. **Presentation** – making a presentation to any group, such as a conference, inservice, split second decision, or other presentation. Any session you conduct, present or assist in presenting.



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6. **Training** – to attend any type of training – agency sponsored (i.e., regional and case manager meetings), professional conference and workshops, covers both instate and out-of-state training.
- J. Expenses** - Enter the amount to be reimbursed for each item shown. All amounts shown in the “incidentals” column should include the number designation that describes the expenditure (i.e., (2) for parking fee). If (8) 'other' is used, explain expenditure fully.
- K. Total Claim** - This amount will be totaled automatically.
- L. From and To** - Enter the points travel began and concluded.
- M. Miles Driven** - Enter the map mileage between the points listed.
- N. Rate** - This amount is stationary and will be updated by Central Office as needed.
- O. Amount Claimed** - This amount will be totaled automatically.

IF CONTINUOUS MULTIPLE TR-1s ARE SUBMITTED AT ONE TIME, COMPLETE ITEMS P-Q ONLY ON THE LAST TR-1.

- P. Travel Supervisor** - This must be signed and dated by the designated Travel Supervisor on the last copy for payment to be approved.
- Q. Signature of Traveler** - The traveler must sign and date the last copy to be reimbursed.

V. TRAVEL EXPENSE RECONCILIATION FORM

- A. Travel Expense Reconciliation Form** – Must be attached to each “Travel Reimbursement Request” (TR-1) when presented for payment in those cases where all travel expenses were not paid by the employee. The original will be retained in the agency’s permanent files as proof that the allowable daily maximum(s) for travel has not been exceeded.
- B. Traveler's Responsibility** - The traveler is responsible for obtaining itemized, original receipts for meals, lodging, parking, taxi, boarding pass, etc., to support



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the items listed on the TR-1. The traveler will also verify and sign the Travel Expense Reconciliation form.

- C. **Agency Fiscal Manager's Responsibilities** – The Agency Fiscal Manager is responsible for obtaining receipts from the facility (with a zero balance) if the traveler does not obtain the receipt upon checkout. The Agency Fiscal Manager is responsible for all travel related questions and payment of all direct billed expenses.
- D. **Administrative Specialist III's Responsibilities** – The Administrative Specialist III will complete all Travel Expense Reconciliation Forms, making sure all supporting documentation is included such as receipts, letter of exception, registration forms. The Administrative Specialist III will obtain required signatures on all Travel Reconciliation forms and will maintain all travel documents.
- E. **Retention of Documents** – Documents will be maintained “Until authorized by Legislative Auditor, (as required by Arkansas Code Annotated: § 19-4-1108).

VI. INSTRUCTIONS FOR COMPLETING TRAVEL RECONCILIATION FORM (SEE ATTACHMENT 3)

- A. **Name of Traveler** - Enter the name of the traveler.
- B. **Official Station** – Enter traveler’s official station (city where their office is located).
- C. **Date** – Enter the year.
- D. **Travel Details** – This information will come from the employee’s TR-1 form. Enter the month and the day(s) of travel, the name of the town visited, and any amount reimbursed for that day under the appropriate column (meal, lodging, other). Complete one line for each day of travel.
- E. **Sponsored Business Travel Card Number** – The Administrative Specialist III will obtain the applicable card number used for the charges from the Agency Fiscal Manager.
- F. **Total Credit Card Receipts Enclosed** – This amount is the *total* amount charged to the agency’s business card (usually hotel rooms, but can also be for airfare).



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- G. **Expense Item** – Enter a description of the charge, i.e., Lodging at The Wyndham, Delta Airfare to Las Vegas, NV, etc.
- H. **Type of Payment, ‘D’ or ‘C’** – ‘D’ stands for Direct Pay, ‘C’ stands for Credit Card Charge.
- I. **Amount** – Enter amount of charge.
- J. **Signature of Traveler and Title** – The traveler will complete this section.
- K. **Department/Agency** – Arkansas Spinal Cord Commission.
- L. **Approved by Travel Administrator** – Appropriate travel supervisor will review and approve the Travel Reconciliation Form.

Attachment 1

TR-1 Employee Input Data Sheet

Name	(A)	John O. Smith
Vendor Number	(B)	20000000
Title	(C)	Case Manager
Address, City ZIP Code	(D)	111 Boulevard, Little Rock, AR 72203
Official Station	(E)	Little Rock
License Plate (Mileage Claim)	(F)	COR 888

***** You must use this input sheet to enter employee data onto the TR-1 claim forms. You cannot enter employee data directly on the claim forms *****



Policy Number:
Policy Name:

F.3
Inventory

Policy and Procedures

Policy No: F.3
Section: Fiscal
Effective: 01/01/09
Subject: INVENTORY

PURPOSE

To maintain and secure agency property in good working order and to comply with the policies of the Arkansas State Inventory Control & Management.

POLICY

In order to carryout the mission of the ASCC, it is essential to maintain and secure all agency equipment and property in working order and in its appropriate location. Employees are responsible for the equipment assigned to them.

To assure proper maintenance and security of agency property and equipment, these items are catalogued on an agency inventory. This inventory includes all items purchased by the ASCC for agency use.

All employees are required to adhere to ASCC procedures. Failure to do so may result in disciplinary action.

I. PROCEDURES

A. Regional Loan Closet Inventory

Procedures for Regional Loan Closet Inventory are described in the ASCC Case Management Services Procedures Manual Equipment Loan/Regional Loan Closet (Chapter 12).

B. Agency

1. ASCC property is items purchased by the ASCC for agency use. These include but are not limited to office furniture, computers, cameras, audio visual equipment, filing cabinets, phone systems, vehicles, and other equipment needed to carry out the agency mission. Inventory property



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does not include consumable or disposable items such as office supplies, books, periodicals, files, records, tapes, and the like. Items in this category remain as property of the State of Arkansas. They are subject to state policies and procedures for acquisition, inventory, and disposal. Inventory property must be accounted for at all times. Each ASCC employee has a responsibility to be sure that the property that has been assigned to him/her remains accounted for, and in good working condition. At least once a year, an inventory of assessed property will be conducted by all employees. Each employee will be given a list of their assigned property. Items missing, malfunctioning, or no longer needed should be brought, immediately upon identification, to the attention of the employee's supervisor for proper action.

2. Periodically during the year, at times specified by the Executive Director, inventory items no longer being used will be sent to the state's Marketing and Redistribution Center (M&R), and removed from inventory.

C. New Employees

At New Employee Orientation, a property list will be given to the new employee listing the property that is being assigned to him/her. The employee and his/her supervisor will conduct an inventory of the property as well as Regional Loan Closet property (if applicable) assigned to him/her and report any discrepancies to the Agency Fiscal Officer within 10 days after completing orientation. Otherwise, it will be assumed that no discrepancy exists, and the employee will be responsible for their assigned property.

D. Transfer of Assets

1. Should a property item need to be transferred to another employee, another location, or be removed from inventory because it no longer works, the employee should fill out the Inventory Status Change/Transfer Form (ASCC-42).
2. When the form is completely filled out and properly approved it must be sent to the Agency Fiscal Officer for processing. Any time a property transfer is made this form must be used and sent to the Agency Fiscal Officer, no matter how small the transfer is and even if it is between rooms in the same location. Each employee is assigned a location and property on agency inventory. Therefore, it is important to adhere to this



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policy. Employees should maintain copies of all Status Change/Transfer Forms to use to reconcile annual inventory.

E. Lost/Stolen Property

1. Property that is lost or stolen is reported the same way as a transfer/status change. Whenever an article of property is deemed missing, be it lost or stolen, an investigation into the events leading up to the disappearance should ensue and be documented. It must be determined if the property was transferred to another employee or to another location. If that was the case, then the Inventory Status Change/Transfer Form (ASCC-42) should be filled out and returned to the Agency Fiscal Officer. If a theft is suspected, the police will be contacted and a police report will be obtained. A memo documenting the events that have occurred plus a copy of the police report (if applicable) should be sent to the appropriate supervisor immediately. Use of form ASCC-42 will aid in this documentation.
2. Marketing and Redistribution Surplus Disposal Forms (M&R SDF) should be reviewed to be sure that the property was not already removed from inventory or transferred to another state agency.
3. If after careful review and search for the property it is still not found, and proper documentation supporting its disappearance is produced, the Executive Director will complete a Credit for State Property Form (P3-19-4-1503) along with copies of the investigation report and the police report, in the case of stolen property, and submit it to the Department of Finance and Administration-Office of Accounting, Administrator, as the DFA Director's designee for approval. Upon receipt of notice from DFA of approval to remove the assets from ASCC inventory, the property will be properly removed from the State Accounting System, and the documentation will be filed with the Credit for State Property Form and kept for use upon audit by the Division of Legislative Audit. The Executive Director shall take any action he/she considers appropriate to prevent recurrence (A.C.A. § 19-4-1501).

F. Destroyed Property

Property that is destroyed is reported the same way as a transfer/status change. Whenever an article of property is destroyed, the events surrounding the destruction should be documented. Inventory Status Change/Transfer Form



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(ASCC-42) should be filled out and returned to the Agency Fiscal Officer. A memo documenting the events leading to the destruction should accompany the form and be sent to the appropriate supervisor immediately. The Department of Finance Office of Accounting CAFR section will be notified in writing to adjust the financial records to account for the removal of the inventory item. Once approval is secured, the property will be removed from the inventory listing. The Executive Director shall take any action he/she considers appropriate to prevent recurrence.

G. Capital Assets

1. Capital assets include: land, land improvements, buildings, building improvements, construction in progress, equipment, infrastructure, easements, works of art, historical treasures, and any other tangible or intangible assets used in operations with an initial useful life in excess of one year. These may include leased assets. These generally must have a value over the tracking threshold currently at \$2,500.
2. Capital assets purchased should be recorded and reported at their historical costs, which include the vendor's invoice, sales tax, initial installation cost, modification cost, attachments, accessories or apparatus necessary to make the property usable and render it in service. Historical costs also include ancillary charges such as freight and transportation charges, site preparation costs, and professional fees.

H. Low Value Assets

1. Although capital assets costing less than the capitalization/tracking threshold currently at \$2,500 are not considered capital assets for financial statement reporting purposes, ASCC is still required to account for all state property under its control regardless of the dollar value. Items particularly susceptible to pilferage such as tools, computers, electronic equipment, etc, shall continue to be maintained on capital asset records as Low Value Assets in order to prevent losses and to maintain proper accountability.
2. The assets shall be subject to all other property procedures of the agency including, but not limited to, inventory and lost/stolen/destroyed procedures.



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I. Removal of Property

Periodically during the year, unused property that is no longer usable in its original state or no longer needed will be turned over to the state's Marketing and Redistribution Section (M&R). M&R will be contacted for proper removal, be it disposal, cannibalization, or sale using the Surplus & Disposition Form (SDF). Upon notification from M&R that the items delivered or picked up have been approved, each asset will be removed from inventory, and the SDF forms will be filed for use with the annual inventory and the annual audit with the Division of Legislative Audit.

J. Completion of Status Change/Transfer Form (ASCC-42)

This form is to be used whenever an inventoried piece of ASCC property is transferred, stolen, lost, or destroyed. These fields will need to be filled out:

1. **Item:** Item being transferred (i.e., printer, computer, wheelchair).
2. **ASCC tag #:** (i.e., 1043).
3. **Serial # (if applicable):** List serial number if applicable, if not, enter none.
4. **Description:** Describe the item to be transferred (i.e., Hewlett Packard LaserJet 1200 series printer, blue fabric armchair, Sony microcassette recorder).
5. **From Location:** Location transferring the property (i.e., Joe Smith's office, Russellville, Central Office Lobby).
6. **From Responsible Person:** Person transferring the property (Joe Smith).
7. **To Location:** Location receiving the property (i.e., Jane Doe's Office, Hot Springs, Batesville Regional Loan Closet).
8. **To Responsible Person:** Person who is receiving the property (Jane Doe).
9. **Reason/Purpose/Condition:** Reason, purpose and/or condition the property is being transferred such as:
 - a. Desk chair replaced on 2/11/06, no longer need old desk chair.



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- b. Phone system no longer requires answering machine.
 - c. Dictaphone does not work-forward button sticks.
These are examples only. Please use specific reason that applies to the situation.
10. **Submitted by and Date:** Name of person preparing form and date form is submitted to Supervisor.
 11. **Approved by Supervisor and Date:** Supervisor approval by person transferring equipment's immediate supervisor is required before any inventory is transferred between any employees, and date of approval.
 12. **Entered by/Processed and Date:** Name of person entering transfer data onto agency inventory and actual date transferred.



Policy and Procedures

Policy No: F.4
Section: Fiscal
Effective: 03/22/16
Subject: USE OF STATE PURCHASING CARDS

PURPOSE

To expedite agency purchases by using state issued purchasing and travel cards in compliance with the Department of Finance and Administration Office of State Procurement policies and procedures.

PROCEDURES

I. GENERAL

- A. Definition of Purchasing Card - VISA card issued by the Department of Finance & Administration (DFA) – Office of State Procurement (OSP) to State employees for non-travel purchases relating solely to State business-related expenditures.
- B. Definition of Travel Card –VISA card issued by OSP to State employees for travel purchases relating solely to State travel-related expenditures.
- C. Arkansas Spinal Cord Commission employees who have purchasing roles will be provided with a State Purchasing card (P-Card) or Travel card (T-Card). Assignment of cards will be approved by the employee’s supervisor and the Executive Director.
- D. No employee with fiscal roles will be assigned a purchasing or travel card.
- E. Upon approval, the employee will complete an application and submit to the Agency Fiscal Manager, who will then forward the application to the OSP. Upon approval of the application, the employee will attend a required training course presented by OSP to learn state policies and procedures for use of the State-issued cards.
- F. Upon receipt of the card, the employee will provide the Agency Fiscal Manager with the number and expiration date of the card. The Agency Fiscal Manager will maintain a log of all agency purchasing and travel cards.



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- G. State purchasing and travel card users will adhere to all DFA-OSP policies and procedures regarding card usage. Any questions concerning those policies should be directed to the Agency Fiscal Manager.
- H. State purchasing and travel card purchases will be made only for approved purchases on State business. Use of the purchasing or travel card for personal use is prohibited, and may result in termination and criminal/civil penalties.
- I. It is the employee's responsibility to maintain and protect the card in his or her possession. If the employee's card is lost, stolen, damaged or destroyed, the employee should contact the Agency Fiscal Manager immediately. The Agency Fiscal Manager will notify Credit Card liaisons at the Office of State Procurement and card provider.
- J. Employees must never allow another person to use their purchasing or travel card. The employee must personally make all transactions with the card. **No Exceptions.**

II. Use

- A. All transactions using the purchasing card will be made in accordance with State and Agency fiscal policies (F.1), travel regulations (F.2) and Case Management procedures (Chapter 10).
- B. All purchases with the travel card will be approved in advance by the travel supervisor.
- C. Each purchasing and travel card will have a daily and monthly purchase limit. These limits will be established by the Agency Fiscal Manager and Executive Director. Should an employee require an increased limit for a specific purchase or trip, a written request shall be made in advance to his or her supervisor. If approved, the Agency Fiscal Manager will work with the OSP to temporarily increase the purchasing limit. This process may require up to five (5) working days, so the request should be made as far in advance as possible.
- D. Non-Client purchases will be pre-approved by the appropriate supervisor and the Executive Director in the same manner as non-P-Card purchases. An Internal Purchase Request will be submitted denoting the use of the P-Card. This step applies to purchases made either in person or online. Receipts or (if online) order



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confirmations must be submitted to Agency Fiscal Manager via fax or scanned copy immediately upon completion of purchase to facilitate proper documentation of the purchase.

- E. Travel purchases will require prior approval by the appropriate supervisor.

III. FISCAL ACCOUNTING PROCEDURES

Agency Fiscal Manager and Fiscal Administrative Specialist will code each purchase on card provider's website in a timely manner. This will be completed prior to the end of the billing cycle 15th of each month. It is imperative that receipts and other documentation be forwarded to the Central Office in a timely manner, as these updates cannot be made after the 15th without DFA involvement. The Agency Fiscal Manager and Fiscal Administrative Specialist will monitor and update card provider website on a daily basis.

Card provider will send one statement to Central Office. Documentation for transactions using these cards will be placed in a holding file in the Central Office until the monthly statement is received. Transaction documents will be compared to the monthly statement to verify purchase amount. Fiscal Administrative Specialist will reconcile all Client Service Purchases and Agency Fiscal Manager will reconcile all non-Client Service Purchases on a monthly basis.

IV. CLIENT SERVICES PURCHASES

- A. In accordance with Case Management Procedures, General Fund purchases exceeding \$500 require prior approval by Client Services Administrator (see Chapter 10, page 10-19 of Case Management Procedures manual). P-Card purchases are not to be used to circumvent the bid process, and due diligence should be exercised in finding the best possible price for all purchases.
- B. Case Managers' P-Cards will have single transaction limits of \$1000 (any purchase above this monthly limit must have Client Services Administrator's prior approval) and monthly limits of \$5000.
- C. Case Managers will complete an Authorization/Statement of Account (ASCC-10) for P-Card transactions. The P-Card box in the top left hand corner of the Authorization/Statement of Account form should be checked, as well as the other appropriate description box denoting type of funds being used (General or Reserve).



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- D. **P-Cards will not be used for any purchases requiring purchase orders (PO).**
- E. When making an in-person purchase at a vendor, a signature from the vendor is required. The clerk or manager should sign and date the Authorization/Statement of Account and enter tax identification number.
 - 1. The Authorization/Statement of Account should be prepared in advance. The purchase price and tax will be handwritten by the Case Manager at the time of purchase.
 - 2. Since there will not be a Purchase Order number, if prompted by the vendor for a PO number, all purchases will denote the date of the purchase in numeric form (Example – July 1, 2016 will be noted as “07012016”).
 - 3. An itemized receipt must be obtained for the purchase. The itemized receipt should be attached to the Authorization/Statement of Account and forwarded to the Central Office upon completion of the purchase.

V. ONLINE PURCHASES

- A. If the purchase is made online, Case Managers will complete the Statement of Account following Case Management purchasing procedures (Chapter 10, page 10-25 through 10-29).
- B. Since there is not a vendor available to sign the Authorization/Statement of Account, the Case Manager will write “ONLINE PURCHASE” on the vendor ID line, and will sign and date on the vendor signature line.
 - 1. Examples of acceptable online receipts would be an actual receipt, an online order confirmation, or an email confirmation from the vendor. This document must show the total purchase price, date of purchase, all items being purchased and credit card number being used.

The signed Authorization/Statement of Account and receipts will be submitted to the Central Office for payment immediately after delivery and inspection by the Case Manager to facilitate proper documentation on the card provider’s website.

ARKANSAS SPINAL CORD COMMISSION
INVENTORY STATUS CHANGE/TRANSFER FORM

The purpose of this form is to account for all inventory items that have been transferred to another employee, another office, another location, lost or stolen. This should be used every time one of the above events has occurred.

Item: _____

ASCC tag # _____

Serial # _____

Description: _____

From: _____ **To:** _____

Location: _____ **Location:** _____

Responsible Person: _____ **Responsible Person:** _____

Reason/Purpose/Condition

Submitted By: _____ **Date:** _____

Approved by Supervisor: _____ **Date:** _____

Entered by/Processed: _____ **Date:** _____

Please return form to Central Office when completed. Keep a copy for your records for the annual inventory count.



Department of Finance & Administration
Office of Accounting
CREDIT FOR STATE PROPERTY

 Agency Title

 Date

From:

To: Director,
 Department of Finance and Administration

Subject: Credit for State Property

1. In Accordance with provisions of ACA 19-4-1501 et. Seq., request approval to drop the following listed property from the records of this agency which has been lost stolen.

Tag No.	Description of Property	Acquisition Date	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. An investigation was made of the circumstances surrounding the missing property and a copy is attached.
3. Other remarks are:

 AGENCY EXECUTIVE HEAD

Remit form to:

Office of Accounting, P.O. Box 3278, 1509 W. 7th, Room 403, Little Rock, AR 72203

Revised November 2005



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Policy Number:
Policy Name:
Revised:

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Form Finder

All ASCC forms are filed in a Form Section at the back of the chapter that describes/relates to the form. The instructions are in the chapter (see contents of chapter). This Finder will assist in locating the form in the manual.

Form Title

Location

Appeal to Grievance Review Committee (Step 3)	HR.6 Employee Grievance Procedure
Appeal to State Employee Grievance Appeal Panel (Step 3)	HR.6 Employee Grievance Procedure
Application for Benefits - Catastrophic Leave Bank (OPM 012)	HR.1 Catastrophic Leave Bank Program
Authorization to Operate State Vehicles and Private Vehicles on State Business (VSP.1)	A.8 Vehicle Safety Program
Center for Workplace Learning and Performance Class Enrollment form	HR.13 Training and Conference Attendance
Certificate of Health Care Provider (FMLA)	HR.8 Leave Request
Code of Ethics (Attachment A)	A.3 Anti-Fraud and Code of Ethics Policy
Code of Ethics Annual Acknowledgement Statement (Attachment B)	A.3 Anti-Fraud and Code of Ethics Policy
Complaint Form DFA-Office of Accounting (Attachment C)	A.3 Anti-Fraud and Code of Ethics Policy
Credit for State Property (P3-19-4-1503)	F.3 Inventory
Dependent Child Certification – Catastrophic Leave Bank (OPM 008)	HR.1 Catastrophic Leave Bank Program
Director’s Decision (Step 2)	HR.6 Employee Grievance Procedure
Donation of Sick and Annual Leave – Catastrophic Leave Bank (OPM 015)	HR.1 Catastrophic Leave Bank Program
Employee Conduct/Corrective Action Statement	HR.5 Employee Conduct Standards
Employee Leave Request (ASCC-19)	HR.8 Leave Policy
Employee Leave Request example	HR.8 Leave Policy
Employee Performance Evaluation Form	HR.9 Performance Evaluations and Merit Increases
Executive/Director/Deputy Director Performance Evaluation Form	HR.9 Performance Evaluations and Merit Increases



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FLSA Compensatory Time/Offset Time Request (ASCC-15)	HR.7 Fair Labor Standards Act/ Compensatory Time
Grievance Form (Step 1)	HR.6 Employee Grievance Procedure
Internal Purchase Requisition	F.1 Purchasing
Internet Use and Electronic Mail Policy Consent Form	A.9 Appropriate Use of the Internet and Electronic Mail
Inventory Status Change/Transfer Form (ASCC-42)	F.3 Inventory
Liability Agreement – Catastrophic Leave Bank (OPM 014)	HR.1 Catastrophic Leave Bank Program
Memorandum to SGRC/SEGAP Hearing Coordinator OPM	HR.6 Employee Grievance Procedure
Notice of Privacy Practices Acknowledgement (ASCC-7)	CS.2 Client Confidentiality/HIPAA Privacy Practices
Notice of Privacy Practices for Individuals Served (ASCC-21)	CS.2 Client Confidentiality/HIPAA Privacy Practices
Performance Evaluation Addendum	HR.9 Performance Evaluations
Physician’s Certification – Catastrophic Leave Bank (OPM 013)	HR.1 Catastrophic Leave Bank Program
Records Retention Office Map (Storage Locations)	A.6 Record Retention
Reply to Employee Grievance (Step 1)	HR.6 Employee Grievance Procedure
Request for Family and Medical Leave (OPM 110)	HR.8 Leave Policy
Response to Employee Request for Family or Medical Leave (OPM 005)	HR.8 Leave Policy
Returned or Accrued Leave Transmittal Form – Catastrophic Leave Bank	HR.1 Catastrophic Leave Bank Program
Rules of Procedure (State Employee Grievance Appeal Panel)	HR.6 Employee Grievance Procedure
Rules of Procedure (State Grievance Review Committee)	HR.6 Employee Grievance Procedure
Senior Management Performance Evaluation Form	HR.9 Performance Evaluations and Merit Increases
Surplus Disposal Form (SDF) Turn-In Request	F.3 Inventory
TR-1 Employee Input Data Sheet example	F.2 Travel Regulations



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TR-1 example
Training/Conference Request
Transmittal for Grievance Determination
Your Rights Under the Family and Medical Leave Act of 1993

Location

F.2 Travel Regulations
HR.13 Training and Conference Attendance
HR.6 Employee Grievance Procedure
HR.8 Leave Policy