THE STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

EMPLOYEE HANDBOOK FOR STAFF





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Raul Pino, M.D., M.P.H. Commissioner

Welcome to the Department of Public Health

By accepting our employment offer, you have made an important decision to work with a team of individuals dedicated to providing the highest level of professional services to the residents of Connecticut and the customers of our Department.

This handbook is designed to acquaint you with our Department, its mission, its goals, and its expectations for you as an employee. It shall be used for informational purposes only and does not represent a contract for employment or an extension of benefits or legal protections beyond that which is already provided for in statute, regulation, policy, or collective bargaining agreement. It is intended as a guide to answer your questions about employment policies, practices, and career opportunities as well as those questions commonly asked by new staff members.

In any case where there is a conflict between the contents of this guide and the document that established the information (statutes, regulations, collective bargaining agreement or other documentation) the original document is considered the authoritative reference. The Department reserves the right to revise and/or supplement.

We encourage you to use this handbook as a general reference during your employment with the Department of Public Health and to refer to it any time you have questions regarding your employment. When more detail is required, your immediate supervisor or any member of the Human Resources staff will be happy to provide additional information or assistance.

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History

In January, 1878, the Connecticut Legislature established a State Board of Health. The six-member Connecticut State Board of Health was "to take cognizance of the interests and life among the people of the State . . . make investigations and inquiries respecting the causes of disease . . . and cooperate together to prevent the spread of disease, and for the protection of life and promotion of health."

The State Board of Health was reorganized in 1917 into the State Department of Health. This newly created Department of Health was headed by a Commissioner of Health and ten-member Public Health Council. John T. Black, M.D., was the first Commissioner of the Department of Health and served from 1917 to 1922. The primary function of the Public Health Council was to establish the public health code in accordance with the statutes and to ensure that the code had the force of law. In addition, the Council, together with the Commissioner of Health, determined Department policies, approved qualifications of key personnel and considered departmental actions proposed by the Commissioner. The Public Health Council was a rich source of guidance and support to the evolving Health Department.

Stanley H. Osborne, M.D., Dr. P.H., was appointed the Commissioner of Health in 1922. During Dr. Osborne's thirty-seven year tenure, the Department grew significantly in its scope of responsibilities, which include the establishment of a unit focusing on occupational disease, the opening of the Toxicological Laboratory, and the requirement that hospitals and nursing homes be licensed by the Department. Through the next several decades, the department experienced major re-organizations and changes in scope of responsibility, up to and including the present.

The Department evolved from an agency delivering direct institutional care and services, through entities such as tuberculosis sanitariums and training schools, to an agency promoting public health through collaboration, technical assistance, support, and oversight of community-based providers and programs. Regulatory programs were expanded to encompass a broad range of health professions, institutions, and health delivery systems, such as Emergency Medical Services. Programs were established to address evolving public health challenges including AIDS and other emerging infectious diseases, environmental and occupational health issues, as well as to incorporate new prevention strategies such as newborn screening, childhood immunization, and maternal and child nutrition.

Today's Department of Public Health pursues its mission by focusing on three core functions: Assessment, policy development and assurance; and by delivering the ten essential services of public health

Our Vision, Our Mission, Our Values

Our Vision

Healthy People in Healthy Connecticut Communities

Our Mission

To protect and improve the health and safety of the people of Connecticut by:

- Assuring the conditions in which people can be healthy;
- · Preventing disease, injury, and disability; and
- Promoting the equal enjoyment of the highest attainable standard of health, which is a human right and a priority of the state.

Our Values

Performance-based We learn from our past efforts and use measures and data

to focus our future efforts.

Equitable We foster policies and programs that promote fairness,

social justice, equity and cultural competence.

Professional We respect and uphold the high standards, skills,

competence, and integrity of our professions.

Collaborative We work together and with others who share a similar vision

for the mutual benefit of the community.

AccountableWe are responsive and transparent to the public in our

actions and communications.

Innovative We are creative and seek out new ways to solve problems.

Service-oriented We respect, listen, and respond to our customers.

Our Organizational Culture

Organizational culture is a system of shared beliefs which govern the way people behave in an organization. For the past several years and in response to significant changes at the federal and state level, DPH has undergone organizational change still in progress. New employees should know that DPH is working to create a culture, supported by its mission and values, that includes a commitment to continuous quality improvement, lifelong learning, and health equity. To support this, DPH staff developed an aspirational quality vision: **DPH: Striving for excellence daily in everything we do**

Staff also developed an expanded statement of how to realize this vision:

In support of the Department's mission, we are committed to providing high quality public health services to those we serve. Staff will be supported and empowered to strive for excellence every day and equipped with systems and tools to integrate quality into everything they do. We will use data to monitor, evaluate, communicate and make adjustments to continuously improve the quality of our work to the benefit of our employees and those we serve.

Public Health Accreditation

In March 2017, the DPH was awarded national accreditation by the Public Health Accreditation Board (PHAB). Earning this five-year accreditation status signifies that DPH has met or exceeded rigorous, nationally recognized, evidence-based public health standards, a distinction that only 20 other states have achieved at the time of the department's accreditation.

PHAB, jointly supported by the US Centers for Disease Control and Prevention and the Robert Wood Johnson Foundation, is dedicated to improving and protecting the health of the public by advancing and transforming the quality and performance of public health departments. Agencies seeking accreditation undergo a comprehensive, peer-reviewed assessment process and must meet the requirements of over 100 measures that evaluate the health department's ability to carry out the 10 Essential Public Health Services such as assessing the health of the public, responding to public health threats, investigating and preventing disease, and developing and implementing sound public health policies that assure the public's health. The accreditation standards also assure that health departments possess adequate administrative and management capacity, and strong relationships with its governing entity and local public health partners.

DPH must show through annual reports, continuous improvement in certain areas identified by PHAB, and undergo a reaccreditation process in 2022 or every 5 years.

Agency Strategic Plan

What is a strategic plan?

In general terms, a strategic plan is intended to provide guidance to an organization as it moves forward in order to carry out its mission, and ultimately achieve its vision.

The Connecticut Department of Public Health's Strategic Plan sets the direction for the organization for the next five years. In developing our strategic plan, we looked at what we were doing, figured out what we should be doing, and developed a plan for getting there.

Why is the plan important?

A strategic plan provides guidance for all employees and our partners to make decisions that further the goals of the organization. It can be likened to a road map to get from the organization's current position, to where the organization would like to be.

How will it be used?

By laying out our priorities for protecting and improving the health of the people of Connecticut, we seek to provide leadership, inform our residents, and align our efforts with those of our partners. The Plan is revisited each year through an agency strategic planning process, and the road map is adjusted to account for emerging issues, public health threats, and environmental changes.

For the public, this plan is meant to

- Communicate the agency's vision and show our intended direction and emphasis over the next five years.
- Share our values and priorities.
- Affirm our commitment to promoting health equity for all people.
- Serve as baseline to show progress and allow you to hold us accountable for our actions.

For our partners including municipalities, towns, local health agencies, community organizations, and businesses, this plan is additionally meant to:

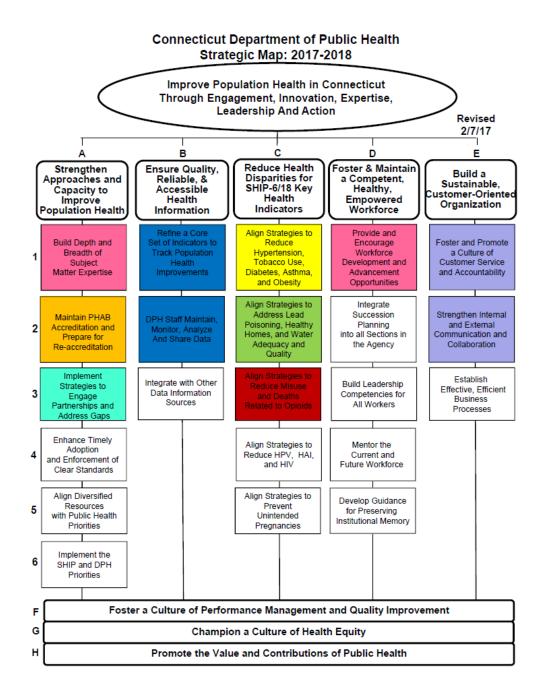
 Reflect our commitment to working with our partners in helping to achieve community goals.

For health department staff, the plan is additionally meant to:

- Align department employees, services and programs with high-level goals.
- Inform policy, operational, and budget decisions.

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 Provide a structure to ensure oversight and management of programs and services.



For more information about the Agency Strategic Plan, please review the plan at http://www.ct.gov/dph/lib/dph/admin/org/ctdph strategic plan.pdf.

Supportive Work Environment

DPH is working to promote a supportive work environment through policies, employee recognition programs, employee wellness initiatives and providing opportunities for development and lifelong learning.

Policies

Policies that support your work environment are listed on pages 50 in the back of the handbook. These may include Educational Leave, Nursing Mothers, Discrimination, procedures to retain and tap into institutional memory, internal communications procedures, and Employee Assistance programs.

Employee Recognition

Employees have opportunities to be recognized through several programs that encourage staff to support DPH's culture of quality and other organizational change initiatives. These include 1) the Commissioner's Award, provided annually by the Commissioner's Office to groups or programs that; 2) Excellence in Quality Improvement Award presented bi-annually to an individual or team of agency employees who demonstrate a commitment to quality improvement and incorporating quality improvement activity into their daily practice. Employees may nominate peers and selection is conducted by the agency's Quality Improvement Council; 3) Health Equity Award provided to groups and/or individuals that work to incorporate health equity into their daily practice. This award is given annually by the Office of Health Equity; and 4) Employee recognition awards provided to employees reaching their 10 year, 15 year, 20 year, 25 years, 30 year and 35 years in state service. This recognition is provided annually by the Human Resources Section.

Additionally, there are opportunities for employees and programs to be recognized by national organizations for outstanding programmatic achievements. In the past, DPH programs have received recognition from the Centers for Disease Control and Prevention and the Association of State and Territorial Health Officials for example.

Employee Wellness

Research has demonstrated that worksite wellness programs not only improve employees' health, but also increase productivity and decrease employee absenteeism and attrition. DPH supports several wellness initiatives and opportunities that encourage healthier lifestyle choices and help reduce risk factors for chronic disease and injury. These may include changes to the physical environment, counseling and assistance for personal issues and stress reduction; and policies that influence behavior as listed below:

 Accessible stairwells, lactation room, and standing desks (within available appropriations);

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- Employee assistance program and a "quiet room" on the third floor open to all employees for noise and stress reduction;
- A comprehensive tobacco and smoking policy for the complex, healthier vending options and cafeteria choices; allowable walking breaks;
- Onsite flu vaccination clinic each fall
- DPH Golf League (see description on the agency Intranet)
- Farmer's market

Additionally the Office of the State Comptroller provides a health enhancement program to state employees that opt for health insurance through the State of Connecticut. This program requires chronic disease screenings and wellness visits.

Learning and Professional Development Opportunities

Through policies and other opportunities, DPH provides its employees with opportunities to learn and grow professionally. Listed below are some of the opportunities for DPH employees:

- CT TRAIN, the agency's learning management system, is open to state and local
 public health employees and identifies available training in a range of topic areas
 that can be used by public health professionals to learn about emerging issues
 and basics of public health practice.
- Minimum training requirements for new employees as part of the new employee orientation monitored and tracked through CT TRAIN;
- Educational leave policy that allows employees flexibility or time off to complete their degree program;
- Volunteer opportunities to participate and serve on several agency wide committees such as Quality Council, Public Health Strategic Team, Workforce Development Committee, and the Policy Review Team.
- Volunteer opportunities to participate in or lead agency wide quality improvement projects or provide training to others in the agency based on your skills and expertise.
- Opportunities for collaborative learning through participation on boards, committees and task forces that address planning and program evaluations at the state and/or local level.
- Participation in public health association, regional and/or national conferences.
- Opportunity to create an individual development plan, with your supervisor or mentor of choice.
- Leadership development programs open to agency employees provided twice per year.
- Supervisor training.
- Continuing education programs offered by the Department of Administrative Services in the fall and spring.

Training programs are offered based on availability of funding which may vary from year to year.

The Organization

The Department of Public Health (DPH) is the state's leader in public health policy and oversight. The agency is the center of a comprehensive network of public health services, and in partnership with local health departments, provides coordination and access to federal initiatives, training and certification, technical assistance and oversight, and specialty public health services that are not available at the local level. The agency is a source of up-to-date health information and analytics for the governor, the General Assembly, the federal government and local communities. This information is used to monitor the health status of Connecticut's residents, set health priorities and evaluate the effectiveness of health initiatives. The agency is a regulator focused on positive health outcomes and assuring quality and safety, while also minimizing the administrative burden on the personnel, facilities and programs regulated. The agency is a leader on the national scene through direct input to federal agencies and the United States Congress.

Office of the Commissioner

The Office of the Commissioner is comprised of the Commissioner and Deputy Commissioners. The Office of the Commissioner also includes the following offices:

Affirmative Action/Equal Employment Opportunity

The Affirmative Action Office (AAO), also known as the Equal Employment Opportunity Office, is responsible for ensuring compliance with federal and state antidiscrimination laws and department policies to ensure equal opportunity for all individuals. This compliance applies to all programs and services, without regard to race, color, religious creed, age, sex, gender identity or expression, marital status, national origin, ancestry, present or past history of mental disability, intellectual disability, physical disability (including blindness) or learning disability, genetic information, sexual orientation, domestic violence, prior conviction of a crime, and/or previously opposing such discriminatory practices (regardless of substantiation).

Communications/Government Relations

The Communications Office provides a full range of communication activities that serve the department and its stakeholders. The office manages public information, social media, Freedom of Information responses, media and community relations, marketing communications, issues management and public affairs, the agency's website, internal communications, and crisis and emergency risk communications.

The Government Relations Office is responsible for legislative and regulatory information and referral activities, including the implementation of strategies to achieve the goals of DPH's legislative agenda. The office tracks and analyzes public health-related legislation, ensures the implementation of approved legislation, coordinates the development of the agency's regulations, and maintains the Public Health Code. The

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office also handles inquiries and requests from the public and other related constituent services.

Office of the General Counsel

The Office of General Counsel is the legal office for the Department of Public Health. The General Counsel is responsible for overseeing the legal and administrative activities of the office and provides legal support for the commissioner and the agency.

The Office provides legal and administrative support for 14 professional licensing boards, presides over hearings and renders decisions concerning appeals of public health orders as well as reporting to federally mandated and private professional databases. The Office also responds to ethics and HIPAA questions, provides ethics and HIPAA privacy trainings, conducts investigations, responds to requests for personally identifiable health information, and generally ensures HIPAA compliance.

The Office of the General Counsel includes the Public Health Hearing Office, the Ethics Officer, the HIPAA Privacy Officer, and the Attorney General Designee.

Public Health Systems Improvement

Public Health Systems Improvement (PHSI) is responsible for managing, coordinating and supporting organization-wide and multi-sector activities that result in measurable improvements of public health structures, systems and outcomes. After successfully managing the agency's national public health accreditation efforts, PHSI ensures that the agency maintains the standards required to keep its accreditation. PHSI also leads statewide assessment, planning and performance improvement activities through coordination and technical assistance to agency personnel and public health partners.

PHSI administers the Office of Health Equity established through Public Act 98-250, and works to monitor the health status of at risk populations, to ensure that health equity is a cross-cutting principle in all agency programs, data collection, and planning efforts, that DPH activities focus on the underlying social determinants of health, and the promotion and implementation of culturally and linguistically appropriate

Operational and Support Services

The Operational & Support Services Branch is essential to the delivery of public health services across the state, ensuring that department-wide administrative activities are coordinated and accomplished in an effective and efficient manner. In addition, Operational & Support Services coordinates the Office of Public Health Preparedness and Response and the Office of Local Health Administration. The branch provides the following services to all organizational sections of the agency: Contracts and Grants Management, Fiscal Services, Human Resources, and Information Technology.

758 active multi-year contracts, valued at \$725,975,274

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- \$43,271,584 total revenues collected
- \$78,670,355 in grants to local health departments across Connecticut

Office of Health Care Access*

The Office of Health Care Access (OHCA) is responsible for the administration of the certificate of need (CON) program; preparation of the Statewide Health Care Facilities and Services plan; health care data collection, analysis and reporting; and hospital financial review and reporting.

The CON program promotes appropriate health facility and service development that addresses a public need. The CON program strives to ensure accessibility for needed services while limiting duplication or excess capacity of facilities and services.

OHCA has statutory authority to gather and analyze hospital financial, billing and discharge data. Information collected, verified, analyzed and reported on includes hospital expenses and revenues, uncompensated care volumes, and other financial data as well as hospital utilization, demographic, clinical, charge, payer and provider statistics.

*Per Public Act 17-02, The Office of Health Care Access will transition in 2018 to the newly established Office of Health Strategy. The Office of Health Strategy will report for administrative purposes to the Department of Public Health.

Health Statistics and Surveillance

The Health Statistics and Surveillance section consists of the Vital Records Office, the Connecticut Tumor Registry, and the Surveillance Analysis and Reporting Unit. The State Vital Records Office carries out general supervision of the state-wide birth, marriage, death and fetal death registries. The Connecticut Tumor Registry is a population-based resource for examining cancer incidence and trends in Connecticut. The registry's electronic database of over one million cancers is used to estimate the cancer burden in Connecticut residents and to assist in planning cancer control interventions. The Surveillance Analysis and Reporting Unit is responsible for the collection of health morbidity and mortality data, and the enhancement of statewide registries for births, deaths and marriages in Connecticut. The section analyzes and interprets vital statistics, adult and youth health surveys, hospital discharge and hospital quality of care data, and chronic disease surveillance. These data are used to help track the health of Connecticut residents, provide guidance for health programs, and provide a better understanding of health risk behaviors that face our youth.

- 10,746 vital records certificates issued
- 715 adoptions processed
- 12,762 birth records processed for paternity issues

Public Health Laboratory

The Dr. Katherine A. Kelley Public Health Laboratory (PHL) serves all communities in the state through the analysis of clinical specimens and environmental samples submitted by federal and state agencies, local health departments, clinical laboratories, health care providers, and water utilities. The PHL provides well over 2 million test results on approximately 150,000 specimens and samples it receives each year. Although the PHL does not charge sister agencies or local health departments, the value of these testing services is over \$7 million per year. Analytical data are used to monitor for agents harmful to the public health, identify the cause of outbreaks, and assure that control measures (e.g., vaccines, antibiotics, environmental remediation) are effective. The PHL is comprised of the following testing and support sections: Administrative and Scientific Support Services; Environmental Chemistry; Infectious Diseases; and, Newborn Screening.

- 37,202 newborn screening tests conducted
- 255 Zika tests conducted
- 2,000+ drinking water samples from CT schools tested for lead at no cost to the schools

Community, Family, Health & Prevention Section

The Community, Family Health and Prevention (CFHP) Section works to improve the health of the overall population across the lifespan, especially mothers, infants, children, adolescents and other vulnerable groups, by establishing opportunities that support healthy living habits through education, early detection, access to care, chronic disease prevention and management, and injury prevention. The CFHP Section manages approximately 190 contracts and administers 44 accounts, including federal grants and state appropriations. Resources are dedicated to serve Connecticut's residents and affect the public health system, while maintaining a focus on the objectives of Healthy People 2020 and the CT State Health Improvement Plan.

The CFHP Section conducts comprehensive needs assessments to establish service priorities. Through significant contractual relationships, the CFHP Section provides health education and promotion, supports health screenings and referrals, leads care coordination initiatives, and provides technical assistance to promote quality improvement. Target populations and public health priorities are served by one or more of the CFHP Section's units, including: 1) Women, Infants and Children (WIC); 2) Maternal and Child Health Epidemiology; 3) Adolescent and Child Health; 4) Chronic Disease; 5) Office of Injury Prevention; and 6) Epidemiology.

The CFHP Section works to affect systems of care by supporting policies, systems and environmental change strategies, and developing and maintaining a strong and sustainable infrastructure to support essential public health activities. This is possible through: collaborations with providers, patients and families; coordination of resources; support, development and implementation of statewide plans; translation of current and

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emerging information into health benefits; and efficient and quality programming by evaluating performance and promoting quality improvement.

- 47,770 WIC clients enrolled and served through 187,032 WIC clinic visits
- 107,784 students enrolled in School Based Health Centers
- 7,200 children and youth with special health care needs received care coordination and services

Infectious Diseases Section

The Infectious Diseases Section encompasses surveillance programs for emerging infections and more than 50 acute communicable diseases including conditions potentially associated with bioterrorism; outbreak detection and investigation; planning for the public health response to infectious disease emergencies, and programs for the prevention of perinatal infectious diseases, vaccine-preventable diseases, healthcareassociated infections, human immunodeficiency virus (HIV), hepatitis, sexually transmitted diseases and tuberculosis. A critical part of the section's mission is to provide health education to the public, medical professionals and public health providers on prevention and management of disease transmission and emerging infections. The Immunization Program prevents disease, disability and death from vaccinepreventable diseases in infants, children, and adolescents by actively engaging in surveillance, case investigation and control, monitoring of immunization levels, provision of vaccine, and professional and public education on the benefits of vaccination. The HIV Program administers prevention, care and surveillance services through various interventions such as: HIV screenings, referring high risk populations to medical providers for Pre Exposure Prophylaxis (PrEP), referring individuals in need of care to medical providers as well as providing assistance with transportation, housing and drug rehabilitation services with the ultimate goal of reducing new infections and keeping infected residents living healthy.

- 170 outbreaks reported per year, on average
- 24,775 electronic laboratory reports processed
- 2,602 Narcan (overdose prevention) dosages distributed by the Syringe Services Program

Environmental Health Section

The Environmental Health Section (EHS) is responsible for assessing and controlling the impact of the environment on people and the impact of people on the environment. It is both protective and proactive. Its responsibility to protect the health and safety of Connecticut's citizens is accomplished through technical assistance, enforcement of the public health code and relevant statutes, as well as the implementation of public health policy.

The section is comprised of twelve programs which are diverse in their scope and oversight of both regulated and unregulated professions/entities: Asbestos;

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Environmental and Occupational Health Assessment; Environmental Engineering; Environmental Laboratory Certification; Environmental Practitioner Licensing; Food Protection; Healthy Homes; Lead Poisoning Prevention and Control; Private Wells; Radon; and, Recreation.

- 75,423 children under age six tested for lead poisoning
- 1,230 radon test kits distributed to local health departments
- 512 water sampling kits distributed by the Private Well Program

Drinking Water Section

The *Drinking Water Section* (DWS) is responsible for the administration and implementation of state and federal public health-focused drinking water laws and regulations, and is dedicated to assuring the purity and adequacy of the state's public drinking water systems and sources. The DWS has primacy over the U.S. Environmental Protection Agency's Safe Drinking Water Act (SDWA) of 1974, as well as state public drinking water laws.

DWS provides technical assistance, education and regulatory enforcement to Connecticut's 2,550 public drinking water systems, which provide public drinking water to approximately 2.8 million people on a daily basis. The DWS is committed to protecting and promoting healthy people in healthy Connecticut communities by assuring the use and distribution of high quality public drinking water for human consumption.

The DWS is organized into seven programmatic areas: Capacity Unit; Drinking Water State Revolving Fund (DWSRF) Unit; Enforcement Unit; Grant and Administration Unit; Safe Drinking Water Rule Implementation Unit; Source Assessment and Protection Unit; and, Technical Review and Field Assessment Unit.

- 585 inspections of Public Water Systems (PWS) conducted and completed
- 118 water infrastructure improvement projects reviewed
- 430,045 PWS water sample results processed

Health Care Quality & Safety

The Healthcare Quality and Safety Branch regulates access to health care professions and provides regulatory oversight of health care facilities and services. The branch consists of four major program components: Facility Licensing and Investigations; Practitioner Licensing and Investigations; Office of Emergency Medical Services; and, Office of Legal Compliance.

The Practitioner Licensing and Investigations Section (PLIS) ensures that a practitioner in a field has the required training, knowledge and experience to perform as a qualified professional in that field. PLIS receives and investigates complaints about specific providers that fall under its authority. The Section responds to Scope of Practice Review requests to ensure that proposed changes to the scope of practice of health care practitioners contribute to the improvement of overall health of people in this state. The Facility Licensing and Investigations Section (FLIS) licenses, monitors, inspects and investigates complaints involving a variety of facilities and services. It a performs federal certification inspections in health care facilities participating in the Medicare and/or Medicaid programs and identifies deficiencies that may affect state licensure or eligibility for federal reimbursement.

The Public Health Office of Legal Compliance (OLC) prepares evidence and witnesses for public administrative hearings, represents DPH in administrative hearings before professional healthcare licensing boards and commissions, and settles legal cases involving over 60 different professions licensed and regulated by DPH. This office is also responsible for providing information for reporting adverse actions to national databases and processing long-term care criminal history and patient abuse background searches.

The Office of Emergency Medical Services (OEMS) functions include strategic planning, education, licensing, regulatory and statutory oversight of EMS provider training, and identification and follow-up on medical issues that affect patient care. This Section is also involved in investigation of complaints about EMS organizations, patient care concerns, and provider activities. OEMS conducts provider site visits and vehicle inspections.

- 300,00 individuals licensed in 65 different professions throughout CT
- 24,200 Emergency Medical Services providers licensed
- 1,756 health care facilities licensed

State Employment

As you join the ranks of DPH employees, the following will provide information on the state employment process as well as explain terms, concepts, and systems, which may be helpful to you in the future.

Job Classifications

The State, as an employer of many thousands of people, must systematically describe and group jobs to ensure consistent and fair treatment when assigning, compensating and promoting its employees. Consequently, the State has established a classification system for all jobs in the Executive Branch of State service.

All job classifications in the classified service have minimum experience and training requirements. Appointment to any such position requires a review and certification of an applicant's credentials.

Certain classes require that candidates possess licenses or specific certifications.

Job Descriptions

Each job classification has a job description. Jobs in State service are assigned a classification title encompassing specific qualifications, responsibilities and duties. Job descriptions are intended to describe general job duties and responsibilities but may not necessarily include all specific aspects of the job to be performed. Job descriptions are available online at https://www.jobapscloud.com/CT/auditor/ClassSpecs.asp

Some work areas may have additional written descriptions, containing more specific and detailed information about the work to be performed within the parameters of the official job description. Ask your supervisor if such information is available for your job.

Appointment

Application Process

The Department of Administrative Services (DAS) utilizes an online applicant tracking system whereby applicants may search and apply for current job openings on-line and receive e-mail notices about the status of each application.

You may also fill out "Interest Cards" so that you can receive e-mails and/or text messages about future job openings. Using your State e-mail is not permitted under the Acceptable Use of State Systems Policy.

You may visit the On-Line Employment Center (OEC) to search and apply for current job openings outside your work hours.

Appointment Types (most frequently used)

- **Permanent** Appointment to a position following successful completion of an initial working test period.
- Durational Appointment to a position for a specific term and not to exceed one

 (1) year. Durational employees become permanent after six months or length of working test period, whichever is longer.
- This may be modified by the specific conditions of the applicable collective bargaining agreement.
- **Seasonal Employment** Seasonal employment is that for which a position is established for a specific period, usually during summer months. Not to exceed six (6) months. Seasonal employees become durational after six (6) months unless extended to one (1) year.
- **Temporary** Appointment to a temporary position for a short term, seasonal or emergency situation. Not to exceed six (6) months. Temporary employees become durational after six (6) months unless extended to one (1) year.

Working Test Period

The working test period, or probationary period, is an extension of the State examination process. When newly hired to the State of Connecticut, employees are placed on an initial working test period of at least six (6) months. If the employee's work performance does not meet the required standards, the Department may terminate the employee or may request an extension of this working test period to give the employee a chance to improve. The initial working test period is a time for the employee to become familiar with Department policies and procedures, receive training, and learn the job requirements. It is a time for the supervisor to monitor the new employee's progress closely and provide direction where needed. Successful completion of the initial working test period gains the employee permanent State status.

Upward Mobility

Job Announcements

The Human Resources Section posts notices for all of its current job openings and promotional opportunities.

Notices are posted on the On-Line Employment Center (OEC) https://jobapscloud.com/ct

Promotion by Reclassification

Employees may be promoted without an examination by the reclassification process. This process will allow a qualified employee the opportunity to be promoted without an examination when the growth in duties is practical and does not cause significant change in organizational structure; the effect of the reclassification is limited to within the career series and does not result in a reclassification to a lower level in the career series and the reclassified position is in the same labor unit.

Employees must meet the minimum qualifications for the reclassified position; maintain an adequate performance record and received a satisfactory appraisal on the two most recent consecutive performance evaluations; and worked at the existing level in the current position for a minimum of six (6) months. All promotions by reclassification must be approved by DAS.

Collective Bargaining

Assignment to a collective bargaining unit within the State of Connecticut employment is based on an employee's classification. Most Department of Public Health employees fall under the jurisdiction of the following bargaining units.

- Maintenance and Service Bargaining Unit (NP-2)
- AFSCME Administrative Clerical Bargaining Unit (NP-3)
- Paraprofessional Health Care Bargaining Unit (NP-6)
- Health Care Professional Bargaining Unit (P-1)
- Engineering, Scientific and Technical Bargaining Unit (P-4)
- Administrative and Residual Bargaining Unit (P-5)

Collective bargaining units (unions) and State management negotiate agreements on contracts, which cover such areas as salary, benefits, hours of work, and terms and, conditions of employment for union members. The language in the contracts differs from one bargaining unit to another.

Managerial and certain confidential job classifications are exempt from the collective bargaining process. Terms of employment for exempt employees are based upon state statutes and DAS rules and regulations.

Union Dues/Fees

The unions establish a rate, which will be deducted from each member's paycheck for union dues. This amount periodically increases. Each union will notify its members of an increase in union dues.

An employee may elect not to become a union member. In this case, agency service fees, equal to the amount of union dues, will be deducted from the employee's paycheck. Union dues/fees will be deducted beginning 30 days after initial employment. The amounts are subject to change.

Union Stewards/Delegates

The names of the Union Stewards/Delegates will be posted on the Union bulletin boards which are located throughout the Capitol Avenue complex and the Laboratory. A current listing of DPH union stewards is provided in the appendix section of this handbook.

Political Activities

As a State of Connecticut employee, you may be subject to certain restrictions in the area of political activity. These restrictions are derived from both Federal Law and Connecticut State Law, commonly referred to as the "Hatch Act" and the "Little Hatch" respectively.

You are strongly encouraged to familiarize yourself with these laws to gain a clear understanding of your rights and responsibilities regarding political activities. For further information, please review <u>GL-214 D</u> or contact the Human Resources Section.

Ethical Practices

All State of Connecticut employees and public officials must comply with state law and with rulings issued by the Office of State Ethics concerning ethical conduct. In general, the code of ethics for public employees covers such subjects as the acceptance of employment upon leaving state service, the acceptance of gifts, fees and gratuities, the employment of relatives, entering into contracts, the disclosure of financial interests, and other activities which may have the potential for conflict of interest.

It is strongly recommended that employees review ethics rules and regulations published by the Office of State Ethics. For additional information please contact the agency Ethics Officer at 860-509-7962 or visit the Office of State Ethics web site at www.ct.gov/ethics.

Working a Second Job

A second job is acceptable as long as it does not interfere with your work at our Department, does not require the use of the Department's phones, supplies, personnel,

or business information, and does not limit your availability for necessary overtime, travel, special training courses, or work on special projects.

When considering a second job, make sure that the work will be unrelated to the work you do for our Department in order to avoid a possible conflict of interest or any compromise of confidentiality issues or professional standards.

If you ever have a question about conflict of time or interest with your second job, you should discuss it with the staff in the Human Resources Section or the Department's Ethics Officer at 860-509-7962.

If you are interested in a second job with another State agency, a Dual Employment form will need to be completed with a sign-off by both the second agency and this Department. A dual employment assignment may be considered only when both the Primary job and the proposed Secondary job are both determined to be 'Exempt' from overtime under the federal Fair Labor Standards Act (FLSA) and there will not be any conflict in hours of work or conflict of interest in the dual employment. Please review GL-204 on the DAS website.

Separation

Retirement

The State and collective bargaining units negotiate the State pension agreement. The date you were hired determines the specific pension plan in which you may participate. For more detailed information, refer to your retirement plan booklet or download the information by visiting the Office of State Comptroller's (OSC) website at www.osc.ct.gov/rbsd/index.html.

Please click on the appropriate retirement tier summary plan description link. There are currently six plans - Tier I, Tier II, Tier IIA, Tier III, Tier IV and, for teachers and certain eligible employees in higher education only, the Hybrid Plan and the Alternate Retirement Program. This handbook focuses on the retirement tiers generally applicable to our employees.

Employees first hired on or after July 1, 2017, will become members of Tier IV of the State Employees Retirement System (SERS), unless you are eligible for and elect to participate in another State of Connecticut retirement plan or system. Tier IV is a contributory defined benefit plan.

Employees *rehired* on or after July 1, 2014 will also become members of Tier IV unless the application of SERS service bridging provisions mandates their placement in either the Tier I, Tier II, Tier III, Tier III or retirement plan OR they are eligible for and choose membership in the another State of Connecticut retirement plan.

- Employees first hired on or after July 1, 2011 will become members of Tier III.
- Employees first hired on or after July 1, 1997 will become members of Tier IIA.
- Employees hired after July 1, 1984, are enrolled in the Tier II retirement plan.
- Employees hired prior to July 1, 1984, and contributing to retirement by way of payroll deductions are enrolled in the Tier I retirement plan.

Employees have the option to apply for normal, early, hazardous duty or disability retirement where the circumstances warrant. When considering retirement, employees should contact the Retirement Division at the Office of the State Comptroller at least <u>six months</u> prior to the expected retirement date. The Retirement Services Division may be reached at 860-702-3480.

Vesting Rights

Your state employment may end before you retire. Vested rights eligibility requirements are determined by the retirement plan you belong to. Creditable service earned for a permanent vested right to a retirement benefit is also defined by your retirement plan.

For *Tier IV members*, vesting service includes your actual state service. You also earn vesting service for a period(s) of severance of less than 12 months. In addition, you may receive vesting service through a purchase for various types of leaves and service including the following:

- eligible military service
- eligible full-time service to other states
- leaves of absence without pay for military service or personal and family leaves pursuant to Section 5-248a or 31-51kk, et seq of the Connecticut General Statutes
- eligible prior Connecticut state service not succeeded by a permanent break for which contributions in Tier III were paid and later refunded

After you have ten years of vesting service, you have earned a vested right to a benefit. Tier I, Tier IIA, Tier III members should review their plan summary for their vested rights requirements.

Retiree Health Insurance

- a. Eligibility for individuals who are employed as of 7/1/09
 - Employees who directly transition into Normal, Early or Hazardous Duty Retirement must have 10 or more years of actual state service as well as those who receive a normal retirement benefit at 62 or older with five or more years of service
 - ii. Employees with fewer than ten years of actual state service as of July 1, 2009, shall not be eligible for retiree health insurance unless and until the combination of their age and actual state service totals 75 or more, and shall also require 15 years of actual state service, except that no current employee

who would have otherwise been eligible for retiree healthcare under the provisions of SEBAC 2009 shall be denied eligibility for retiree healthcare due to the 15 year requirement.

- b. Eligibility for individuals who are not employed as of 7/1/09
 - i. Employees shall not be eligible for retiree health insurance unless and until the combination of their age and actual state service totals 75 or more and to have 15 years of actual state service unless they transition directly from employment to normal or early retirement.
 - ii. Such employees who transition directly to normal or early retirement shall not be required to possess the combined age and actual state service total of 75 or more but shall be required to have 15 years of actual state service.

Resignation

Employees in the classified service who wish to voluntarily separate from State service in good standing should give the appointing authority at least two working weeks written notice of resignation. Specific bargaining agreements may have exceptions to this. The appointing authority may require as much as four weeks' notice if the employee occupies a professional or supervisory position.

Rescinding of Resignation

An employee who resigns from State service in good standing may request to rescind his/her resignation within one year of separation. The request to withdraw the resignation must be submitted to DAS Statewide Human Resources Management (DAS). DAS will then contact the last employing agency to ensure the employee's termination was, indeed, a resignation in good standing and that there were no stipulated agreements on file that would preclude DAS approval of the request.

There are no reemployment rights associated with the approved rescind of resignation; rather, rehire is solely at the discretion of the hiring agency. An employee who has received approval to rescind his/her resignation may return to State service without examination in any class(es) in which he/she had previously attained permanent status as long as the employee is rehired into one of the job classes identified in the DAS approval letter within two years from the effective date of the resignation and provided the employee meets the current minimum qualifications required of the classification at the time of his/her rehire.

There are certain other privileges associated with the rescission of resignation procedure. For this information, review DAS General Letter

177: http://portal.ct.gov/DAS/Search-Results?SearchKeyword=general letter 177

Layoff

A layoff is an involuntary, non-disciplinary separation from State service resulting from a lack of work, reduction in funding or reorganization. The bargaining unit agreements and state statutes contain language regarding order of layoff and reemployment.

Reemployment

The names of laid off employees are placed on reemployment lists. These reemployment lists are sent to State agencies at the time that they are filling approved vacancies. Although some rules regarding reemployment rights may differ among the bargaining units, no outside hire may generally be made to a classification for which a reemployment list exists.

Absence from Work

Leave of Absence without Pay

Union contracts as well as State and Federal laws have provisions for leaves of absence without pay, provided certain conditions are met. Employees who are absent without pay for more than five consecutive (5) working days during any calendar month are responsible for maintaining health, dental, and/or group life insurance during the period of absence. The Payroll Office will advise employees via mail the date payments are due. For more information concerning a leave of absence, contact Human Resources.

Sick Leave

Each permanent, full-time State employee accrues sick leave at the rate of 1 and 1/4 days for every completed calendar month of service (15 days per year). Sick leave does not accrue if an employee is absent without pay for more than five (5) working days during any calendar month. Sick leave accrual for part-time employees is prorated, based on the number of hours worked per week.

Sick leave may be used as it is accrued. Sick leave not used in a calendar year is carried over to the next year. There is no limit on the accumulation of sick leave. In the event of a prolonged absence from work due to an illness or injury where the employee has exhausted all sick leave, he/she may use other accrued leave time.

Certain collective bargaining agreements also have provisions for the advance of sick leave, sick leave bank and/or donation of leave time. Consult your union contract or Human Resources for further information on these options.

Medical Documentation

For most employees, a medical certificate is required for any absence from work in excess of five (5) consecutive working days as a result of an illness or injury. In the case of employees in District 1199 bargaining units, a certificate is required for absences in excess of thirty-five (35) or more consecutive work hours. District 1199 P-1 members must submit a signed statement of the reasons for the absence and NP-6 members must submit a medical certificate or a letter from the doctor stating the date on which he/she saw the employee, the reasons for the absence, the date from which the employee was incapacitated, and the date on which the employee can return to work.

Vacation Leave

Each full-time employee in a permanent position accrues vacation leave from the commencement of employment with the State of Connecticut. Vacation time cannot be used until the employee has completed six months of continuous service. Vacation leave for part-time employees is prorated, based on the number of hours worked per week. Vacation leave accrues at the end of each full calendar month of service. Vacation leave does not accrue if an employee is absent without pay for more than five (5) working days during any calendar month.

Vacation requests require prior approval by the supervisor. The supervisor will make his/her decision based on Department operational needs. Vacation leave not used in a calendar year may be carried over to the following year, subject to limitations in applicable contracts and statutes. It is the employee's responsibility to be aware of his/her leave balances to avoid usage that exceeds balances.

Monthly Vacation & Sick leave Accrual Rates for Full Time Employees (hours)

	35 Hour	37.5 Hour	40 Hour
	Workweek	Workweek	Workweek
Sick Leave (All Employees)	8.75	9.375	10
Vacation Time: Employees	s in Collective	Bargaining (h	ours)
0 - 5 Years	7	7.5	8
5 - 20 Years	8.75	9.375	10
20+ Years	11.67	12.5	13.3333

Vacation Time: Managerial Employees 10

Managers are granted one additional vacation day on January 1st of the <u>calendar</u> year in which he/she will attain eleven (11) or more years of State service (including War Service) to a maximum of five (5) additional days as follows:

11 years of Service:	1 Day
12 years of Service:	2 Days
13 years of Service:	3 Days
14 years of Service:	4 Days
15 years of Service:	5 Days

Maximum Vacation Accrual (in hours):

	35 Hour Workweek	37.5 Hour Workweek	40 Hour Workweek
Hired Before 7/1/77 & Managers	840	900	960
Hired on or After 7/1/77	420	450	480

Personal Leave

After the successful completion of the initial working test period, each permanent employee is granted three (3) days of personal leave of absence with pay in each calendar year. Personal leave requests require prior approval by the supervisor. Personal leave days not taken in a calendar year do not carry over to the following year.

Family and Medical Leave

The Family and Medical Leave Act of Connecticut CGS Sec. 31-51kk - CGS Sec. 31-51qq (effective 7/1/17 applicable to all state employees) and the federal Family Medical Leave Act of 1993 (amended in 2008 and 2009 to extend additional leave rights to families of members of the Armed Forces) provide employees of the State with leave related to the birth or adoption of a child or to care for a seriously ill child, spouse, or parent. These laws also provide medical leave for the serious illness of the employee.

To be eligible for federal FMLA leave (including military family leave), you must have at least 12 months of total service and have worked at least 1,250 hours in the 12 months immediately preceding the beginning of your leave. ("Hours worked" does not include time spent on paid leave, such as sick, vacation, PL, administrative leave, or unpaid leave. Overtime hours and military leave do count towards the 1,250-hour requirement.) To qualify for State family/medical leave you must worked at least 1,000 hours in the 12 months preceding the beginning of your leave.

Under state family/medical or federal FMLA leave, the reasons for leave are as follows:

- The birth of your child or adoption of a child by you (both state and federal);
- The placement of a foster child with you;
- The "serious health condition" of your "child," "spouse", or "parent";
- Your own "serious health condition";
- To serve as an organ or bone marrow donor (state only); or

Under military family leave, the reasons for leave are as follows:

- Military Caregiver Leave for a current service member: For a spouse, son, daughter, parent or "next of kin" to care for a "covered service member" who has a "serious injury or illness" while on covered active duty";; or
- Military Caregiver Leave <u>for a veteran</u>: For a spouse, son, daughter, parent or "next of kin" to care for a "covered veteran" who incurred a "serious injury or illness" while on "covered active duty"; (federal only)
- Qualifying Exigency Leave: Because of any qualifying exigency arising out of the fact that a spouse, son, daughter or parent of the employee is on "covered active duty".

Federal FMLA

Standard leave and/or **qualifying exigency** leave: An eligible employee is entitled to a maximum of 12 weeks of leave in a *twelve-month period*.

Military caregiver leave: An eligible employee is entitled to a maximum of 26 weeks of leave during a *single 12-month* period to care for a covered service member (including a covered veteran) who was injured while on active duty in the U.S. Armed Forces. An employee can take this leave only one time per service member, per injury. During any single 12-month period, the employee's total leave entitlement is limited to a combined total of 26 weeks for all qualifying reasons under standard FMLA and military family leave.

State Family/Medical Leave CGS Sec. 31-51kk - CGS Sec. 31-51qq

Standard leave: An eligible employee is entitled to a maximum of sixteen (16) weeks of leave *within a two-year period*.

Qualifying exigency leave: Sixteen (16) weeks of leave within a two-year period.

Military caregiver leave: An eligible employee is entitled to a maximum of 26 weeks of leave in a *single 12-month*. An employee can take this leave only one time per service member, per injury. During any single 12-month period, the employee's total leave entitlement is limited to a combined total of 26 weeks for all qualifying reasons under standard state family/medical leave and military family leave.

Please contact the Human Resources Section for specific information and for the required forms to be completed for State and/or Federal Family and Medical Leave in advance of anticipated leave or immediately upon any circumstance that may require a request for Family and Medical Leave of absence

2017 SEBAC Agreement (Supplemental Leave)

Permanent employees can use no more than 24 weeks of SEBAC supplemental leave in a two-year period. Of those 24 weeks, a maximum of 4 months may be used for bonding purposes. In general, SEBAC supplemental leave is available only on **a block basis**.

The employee's eligibility status and leave reason determine the date the employee's SEBAC supplemental leave begins.

SEBAC Supplemental Leave can be used for the following reasons:

- To treat or recover from a serious health condition, including organ or bone marrow donation;
- To care for a child, spouse or parent suffering from a serious health condition ("caregiver leave");

- To bond with a newborn child or newly adopted child (up to 4 months only).
- · Does not apply to newly placed foster child.

In general, SEBAC supplemental is available after the exhaustion or eligibility for federal and/or state family medical leave. There is no SEBAC supplemental leave for Military Family Leave reasons.

Maternity Leave

The length of time allowed for a maternity leave is based on individual union contracts and State statutes. In general this is the period of disability plus 24 weeks. A leave of absence prior to and following delivery which is charged to sick leave must be supported by a medical certificate which certifies that the employee is unable to work. The remainder of the maternity leave must be charged to either vacation, personal leave time, leave with or without pay.

Military Leave

Permanent employees who are members of the National Guard or a reserve component of the U.S. Armed Forces may apply for leave to attend required training. A copy of the military orders must be submitted to the supervisor with the leave request. The State allows a maximum of three (3) weeks of paid leave in a calendar year for field training. Paid leave for military call-ups other than annual training is limited to unscheduled emergencies and subject to the provisions of union contracts.

The employee should notify the supervisor of his/her military leave schedule as soon as it is available.

Educational Leave

Educational leave from regular duties and responsibilities may be authorized to enable an employee to study or receive technical training that will increase proficiency in his/her position. DPH will consider applications for educational leave from full-time employees who have completed a minimum of three years of service with DPH before the start date of the educational leave. The employee must complete the Educational Leave Request Form to apply for leave.

Jury Duty

Employees summoned for jury duty will continue to receive their normal salary. The employee should notify his/her supervisor as soon as a jury notice is received. A copy of the notice must be forwarded with the time and attendance information. If the employee is selected for a trial, he/she must submit verification of court attendance, which is supplied by the court. On the days that the trial is not in progress, the employee must report to work. Fees paid to the employee for jury duty less any parking fee must be forwarded to the Payroll Office, since the employee is receiving regular pay for this time period.

Leave for State Employees Providing Disaster Relief Services

A state employee who is a certified Red Cross disaster relief service volunteer may be granted up to 15 working days a year to participate in specialized disaster relief services for the American Red Cross without loss of pay or accrued leave time, if s/he (1) has supervisory approval, and (2) has been requested to participate by the Red Cross.

An employee who wishes to volunteer must submit a written request to his/her supervisor. The request must include information validating current American Red Cross First Aid and CPR certification(s), if any, and should also include the anticipated date(s) of training. Upon receipt, the supervisor will consider operational needs and staff coverage and recommend approval or denial of the request. The request is then forwarded to Human Resources and the employee is notified of the final decision.

Family Violence Leave

Employees who are victims of family violence are allowed to take paid or unpaid leave for specified reasons if such leave is reasonably necessary. If an employee is a victim of family violence, an employer shall permit the employee to take paid or unpaid leave during any calendar year in which such leave is reasonably necessary for the following reasons:

- To seek medical care or psychological or other counseling for physical or psychological injury or disability for the victim,
- (2) To obtain services from a victim services organization on behalf of the victim,
- (3) To relocate due to such family violence, or
- (4) To participate in any civil or criminal proceeding related to or resulting from such family violence.

An employee who wishes to exercise his or her right to family violence leave – paid or unpaid – under this policy, must provide the Human Resources Section a signed written statement certifying that the leave is for one of the four reasons listed above at the time he or she requests the leave.

Voluntary Leave and Schedule Reduction Program

The voluntary leave and schedule reduction program allows eligible employees to reduce the number of hours they work by taking unpaid prescheduled individual full or partial days off on an occasional basis or by reducing the number of hours worked per week on a regular basis. Request for schedule reductions must be authorized in advance through the supervisory chain of command and approved by Human Resources.

Worker's Compensation

Workers' Compensation provides coverage for hospital and doctor's bills and replacement of wages if you are injured through the course of work.

Injured on the job?

- Immediately report injury or illness to your supervisor.
- Provide thorough information regarding the incident so the claim packet can be completed.
- If medical treatment is required, utilize a physician within the approved Provider Directory.
- Contact the Department's workers' compensation liaison with any questions you
 may have on completing the claim packet with your supervisor.

The supervisor will report the injury to the Third Party Administrator (Gallagher Bassett **800-828-2717**), complete an accident report (form WC-207) and notify Human Resources. Information relating to the claims process and any required forms are available online at http://portal.ct.gov/DAS/Services/For-State-Employees/Workers-Compensation.

Medical Emergency

- Call 9-911
- Call security at extension 860-418-6075 or 860-920-6733 (Lab employees)
- Notify your Supervisor of the incident.

Compensation

Salary

Each job classification is assigned to a specific salary group. Salary groups are assigned by job series and bargaining units. Each salary group, with the exception of managerial, is made up of a number of steps. New hires to the State usually start at Step 1.

A pay period consists of two weeks, beginning on alternate Fridays. Employees who receive direct deposit may access paycheck information from CORE-CT. Paychecks are distributed every other Thursday after 3:00 p.m. Since paychecks are dated for the following day (Friday), checks cannot be cashed prior to 3:00 p.m. on payday (Thursday). Employees are paid for work performed during the pay period ending two weeks prior to the date of the check. New employees starting on the first day of a pay period will receive their first paycheck four weeks from the start date.

Direct Deposit - Employees may elect to have their entire paycheck directly deposited to their personal checking and/or savings account. Funds will be electronically transmitted to the financial institution and available at 9:00 a.m. on payday.

Time Sheets

The Department of Public Health utilizes self-service time and labor (electronic timesheet). Employees are responsible for accurately entering time and submitting it electronically by the end of the business day on payday. Inaccurate or misrepresented

Information could have serious consequences, so please be conscientious when submitting your time sheet.

Longevity Pay

Permanent State employees in a collective bargaining unit who have completed at least ten full years of State service are eligible to receive a semi-annual lump sum longevity payment. The amount of each payment is based on your length of service and salary group as of April 1 or October 1 of the current year. It is important to note that your length of service does not include periods of leave without pay.

New Employees - Employee first hired on or after July 1, 2011 shall not be entitled to a longevity payment; provided, however, any individual hired on or after said date who shall have military service which would count toward longevity under current rules shall be entitled to longevity if they obtain the requisite service in the future.

Current Employees - No service shall count toward longevity for the two (2) year period beginning July 1, 2011 through June 30, 2013. Effective July 1, 2013, any service accrued during that period shall be added to their service for the purpose of determining their eligibility.

You must be on the active payroll as of October 1 or April 1 in order to receive a longevity payment. If you are otherwise qualified but are on a leave of absence without pay on those dates, you will receive your longevity payment when you return to work. If you are terminated or resign prior to those dates, you will not receive a longevity payment. However, retiring employees are allowed a pro-rated longevity payment based on service from the preceding payment date to their retirement date.

Military war service as defined by Conn. Gen. Statutes Section 27-103 is creditable for longevity purposes. In order to be credited for this time you must submit a non-returnable copy of your discharge papers (DD-214) to the Human Resources Section.

Payroll Deductions

Your paycheck will have mandated deductions such as federal income tax, social security and state income taxes, union dues or fees, and retirement deductions. Additional deductions may include optional deductions you elected such as: supplemental benefits, credit union contributions, group life insurance and deferred compensation.

Employee Contribution to Retiree Health Care Trust Fund (OPEB)

• Employees hired after 7/1/17 must pay a three percent (3%) contribution for a period of fifteen (15) years or until retirement, whichever is sooner even if they had periods of prior state service.

• Employees hire prior to 7/17/17 shall pay the three percent (3%) for a period of ten (10) years or until retirement, whichever is sooner.

Medical and Dental Insurance

Medical and dental coverage is available to permanent full-time and part-time employees who work at least half time (0.5 FTE – Full Time Equivalent), consistent with the applicable collective bargaining agreement. Costs for medical and dental coverage vary depending on the insurance carrier and whether an individual or family plan is selected.

It's important to understand who you can cover under the plan. It's critical that the State is providing coverage only for those who are eligible under the rules of the plan. Eligible dependents generally include:

- Your legally married spouse or civil union partner;
- Your children, including stepchildren and adopted children, up to age 26 for medical and age 19 for dental;
- Children residing with you for whom you are legal guardian (to age 18) unless proof of continued dependency is provided. Disabled children may be covered beyond age 26 for medical or age 19 for dental, with proper documentation from the medical insurance carrier.

Documentation of an eligible relationship is required when you enroll a family member. It is your responsibility to notify your agency Payroll/Human Resources office when any dependent is no longer eligible for coverage.

If you enroll as a newly hired employee, your coverage begins the first day of the month immediately following your date of hire or eligibility. For example, if you're hired on October 15th, your coverage begins November 1. This would also apply to any change in coverage, such as adding or canceling family members. It is critically important that you add any new family members to your coverage, as they become eligible, by completing the proper health insurance forms. If you forget, the family member will not be covered by your health insurance and you may have to wait until the next open enrollment period to add the new member. It is equally critical that you remove family members when they are no longer eligible within 30 days of the event, such as in the event of divorce. See Appendix IV for additional information.

Current medical and dental plans may be accessed at http://www.osc.ct.gov/benefits.htm.

Open Enrollment – During the open enrollment period, generally May 1 to May 31, employees may make non-life changes to their medical and/or dental plans. The employee may add or delete dependents or switch to other plans. The effective date of change is generally July 1.

Consolidated Omnibus Budget Reconciliation Act (COBRA)

Under federal law, the State of Connecticut is required to offer covered employees and covered family members the opportunity to elect a temporary continuation of health coverage at group rates, when coverage under the plan would otherwise end due to certain qualifying events. The insured will be billed directly by the Insurance Carrier on a monthly basis. Examples of qualifying events are: termination, lay off, leave of absence without pay; death of employee or retiree, divorce or legal separation and dependent child no longer qualifying as dependent. Please contact the Human Resources Section if you have any questions.

Tuition Reimbursement

Employees may apply for tuition reimbursement for the purpose of improving performance on the job or keeping up with changing concepts or upward mobility. Bargaining unit agreements and the State Managers Handbook specify eligibility requirements, appropriation of funding, reimbursement for undergraduate, graduate and other courses, and fees. Funds are on a "first come –first served" basis.

For more information please review the <u>tuition reimbursement manual</u>, or the Tuition Reimbursement Officer 860-509-7233.

Employee Assistance Program

The Employee Assistance Program (EAP) is a confidential assessment, brief counseling, and referral service available to all employees and their family members. It is designed to assist in the identification and resolution of any personal problem that may be affecting you, your family, or your job. These problems include:

- Marital/family conflicts
- Stress or emotional problems
- Drug/alcohol abuse or dependency
- Financial and legal difficulties
- Occupational dissatisfaction
- Health concerns

To make a confidential appointment, simply call the Lexington Group at 800-676-4357 or log on to their website at www.the-lexington-group.com.

User name: CT Dept of Public Health and password: DeptPH

Holidays

The State grants time off with pay to each permanent employee for the following legal holidays:

New Year's Day
Martin Luther King Day
Lincoln's Birthday
Washington's Birthday
Good Friday
Memorial Day

Independence Day
Labor Day
Columbus Day
Veteran's Day
Thanksgiving Day
Christmas Day

Employees who are on a leave of absence without pay are not paid for a holiday that falls during their leave. In order to be paid for a holiday, an employee must be on the payroll either the working day immediately before or after the holiday.

Attendance

Maintaining a satisfactory attendance record is each employee's responsibility. Frequent absence reduces the level of services provided to our internal and external customers, increases operational costs, and places an added burden on co-workers. The supervisor will conduct quarterly reviews of each employee's attendance, and employees will be expected to address concerns regarding absenteeism.

Call-In Procedure for Unexpected Absences

When an employee is unable to report to work as scheduled, he/she must notify the immediate supervisor or designee within one-half (1/2) hour after the start of the scheduled work day. Except in emergencies, third parties, (i.e., relatives, friends) may not leave messages. Voice mail messages are not acceptable. If any absence will exceed its expected duration, the employee must notify the immediate supervisor or designee prior to the extension of the absence.

A report of an absence must include the nature of the absence (i.e., illness), the expected day or time of return, and any other information, which may impact the work environment during the employee's absence. When sick leave use is unexpected or of an emergency nature, a Leave Request Form must be completed immediately upon return to work.

Procedure for Expected Absences

An expected absence must be reported as far in advance as practical to ensure adequate work coverage. Employees must complete a Leave Request Form and submit to their immediate supervisor for approval.

Inclement Weather

From time to time, extreme weather conditions make it necessary to adjust work schedules. In such situations, the Governor may direct a late opening or early closing.

In the event the Governor determines that conditions warrant excusing staff early from work, the Governor's directive will be communicated to our Department. Our Human Resources Section will communicate information regarding such closures to all programs.

Closures or delayed openings will be broadcast over local radio and television stations, and announced on the Department of Emergency Services and Public Protection website. Here is the protocol that DPH will follow for notifying staff of closures or delayed openings:

- 1. The DEMHS website. This is the best (and quickest) source of information. http://www.ct.gov/demhs/cwp/view.asp?a=1934&Q=287788
- 2. Email to all DPH staff. An email will be sent to all DPH employees, using the list serve in Outlook. Employees can sign into their State email address using the following link: https://ctmail.ct.gov. Please enter the same user name and password as at the office.
- Building Access Information Line. Updated information will be recorded on our DPH Building Access Line. In the event of an emergency dismissal or closure for any reason (including weather) please call 860-509-8199 for a recorded message with updated information.

Picnics and Holiday Parties

The Department or your union may sponsor a summer picnic and/or holiday party. Employees may be released for up to one-half day to attend <u>either</u> the agency or union outing. Employees may only be released for the half-day for <u>one</u> summer outing and <u>one</u> holiday party – either the agency or union sponsored outing/party – not both.

Attendance at more than one outing or more than one holiday party will require the employee to request use of available vacation or personal leave time.

Employees who have chosen not to take part in the outing or holiday event forfeit the benefit of the half-day off.

The Role of your Supervisor

Whenever you have questions or concerns about your job, your supervisor is your first source of information. He/she knows what is expected of you and can give you guidance and direction.

Your supervisor will also provide you with any needed on-the-job training, to make sure that you learn the basic responsibilities of your position. In addition, your supervisor will explain performance goals and expectations and will work with you to resolve any problems or concerns that you may have about your work.

Performance Appraisal

The performance appraisal evaluates an employee's work performance. It serves and facilitates an exchange between the employee and supervisor concerning work performance.

Employees in an initial working test period have their performance evaluated at midpoint (approximately 3 months) and prior to the completion of the initial working test period (approximately 6 months). Employees in a promotional working test period have their performance evaluated prior to the completion of this working test period.

All employees receive performance appraisals annually at least three months prior to their annual increment date (January 1 or July 1). Appraisals may be performed at other times during the year, in accordance with union contracts and State personnel regulations, if warranted. Changes in work assignments; significant changes in job performance or employee conduct are some reasons for evaluating performance outside of the usual schedule.

Managers at DPH participate in the Performance Assessment and Recognition System (PARS) and are evaluated based on goals and objectives established at the beginning of the fiscal year. The manager's immediate supervisor performs quarterly reviews of progress.

Resolving Differences

Despite the best intentions, there may be occasions when there are differences between co-workers or between staff and their supervisors. In such instances, it is best to attempt to resolve these differences in a cordial, straightforward, and professional manner.

If differences cannot be resolved, you may consider contacting the Human Resources Section, which will work with everyone concerned on an appropriate remedy.

Effective communication forms the foundation for a healthy and productive organization. Effective communication means constructive dialogue and information sharing between management and employees and between individual staff members.

Leadership Profile

This Leadership Profile is intended to outline the agency's expectations for leadership, by describing behaviors and attitudes attributable to the effective leader.

The Department of Public Health is committed to protect and improve the health and safety of the people of Connecticut by assuring the conditions in which people can be healthy; promoting physical and mental health; and preventing disease, injury, and disability. The DPH fosters a progressive organizational culture that values effective leadership. While leadership transcends title, job classification, education and occupation, the Commissioner and those at the highest levels of the organization are responsible for ensuring quality leadership at all levels. They do so by: 1) embodying and practicing the leadership qualities outlined herein; 2) holding senior leaders, managers, and supervisors accountable for demonstrating those same qualities; and 3) encouraging all employees to take opportunities that will support the development and practice of leadership. The effective DPH leader:

UNDERSTANDS his/her role in support of the agency's mission. The leader can state with clarity the purpose of the agency and a division/program and can articulate a vision for how the Division/Program will support the agency in achieving its goals.

RESPECTS all with whom s/he comes in contact. An effective leader understands that the respect of peers and colleagues must be earned, not mandated by rank or title. The leader demonstrates respect by listening, encouraging new ideas and robust discussion, appreciating diversity and practicing common courtesy.

COMMUNICATES regularly and intelligently within the division/program, the agency, and other entities. The leader provides information to staff, explains decisions and changes as appropriate, and creates opportunities for dialogue. The leader also maintains a level of communication with other agency operations that facilitates timely, effective and efficient use of agency and external resources. Informational exchanges and updates allow for accurate planning and support proficiency in response to current and changing events.

PROVIDES clear direction. The leader values clear direction. Therefore, the leader provides informed direction that is appropriately detailed, placed in context, and enables staff to understand and carry out assignments/roles effectively and with accountability.

EARNS trust. An effective leader values trust and works to ensure mutually trusting relationships. The leader values the roles and contributions of staff at all levels and in all areas of the organization. Trust enables the leader to break down barriers and create a stronger, more confident organization.

SUPPORTS staff development. The leader provides constructive feedback, and is also receptive to receiving the same from staff. The leader is a willing mentor and models the behaviors s/he expects from others. An effective leader balances agency priorities with community responsibilities. An effective leader also supports activities that allow employees to pursue education, professional enrichment, and/or the opportunity to become more engaged in the organization.

SETS the tone for the work environment. The leader conducts business with integrity, and in keeping with laws and policies. The leader understands that workplace morale begins with his/her own, and strives to foster a positive and supporting environment.

ENCOURAGES the concept of teambuilding and supports interdivisional sharing of resources and information to accomplish any and all tasks.

Employee Records/Files

The Human Resources Section maintains an official personnel file for each employee. Your personnel file consists primarily of documents necessary to facilitate changes in your work status, such as transfers, promotions, pay increases, copies of training certificates, certain types of leaves of absence, and performance appraisals. Please note that all medical files are maintained separately from other personnel records.

Your employment records are sensitive documents and as such are afforded the highest level of confidentiality by the staff of the Human Resources Section. You may review your personnel file by contacting the Human Resources Section.

When you have a change of name, address or a new phone number, please report this change to our Human Resources Section promptly so that you receive the appropriate forms.

Work Schedules and Overtime Work

There are a number of different work schedules for staff at the Department of Public Health. From time to time, it may be necessary for our Department to adjust your hours of work or to modify your work schedule, to account for changing business conditions. We will attempt to provide you with as much advance notice as possible. Most union contracts provide minimum notice requirements. Please consult your union contract for these circumstances.

Full time employees are granted two (2) fifteen minute rest breaks and an unpaid meal break. Breaks may not be "saved up" to leave work early.

The demands of your job may require overtime work or compensatory time. The Department's overtime practices are designed to:

- ...comply with collective bargaining agreements and
- ...distribute overtime hours or compensatory time among staff as fairly as possible All overtime work or compensatory time, except in emergency situations, must receive prior management approval.

Personal Mail, Phone Calls, and Use of Office Computers

The proper use of our telecommunications systems and computer has a direct bearing on our ability to provide efficient services to our customers. Agency telephones, fax

machines, computers, and printers are to be used for official agency business. The delivery and/or receipt of personal mail through the agency's mailroom or through agency computers are inappropriate use of State resources.

Please review the policies regarding telephone and telephone credit card use, utilization of DPH computers and information technology resources, and State of Connecticut software management in the polices section of this handbook.

Rules for Use of State Vehicles

In accordance with the State Travel Regulations, State vehicles are to be utilized to conduct official State business. Personal use of a vehicle for social, recreational, religious, educational or any other such purpose, whether on duty or off, IS NOT PERMITTED.

Vehicles may not be utilized to transport passengers, whether or not they are state employees, except when such transportation is necessary for the performance of official State business. Vehicles may not be driven by anyone other than an employee of the State or by a volunteer worker approved by the agency head.

Individuals under contract with the State may not drive state vehicles unless permission is first obtained from the Director of State Fleet Operations.

Drivers are expected to set a good example for other drivers by driving courteously and obeying all motor vehicle laws; ensure that state vehicles are serviced at proper intervals and that the Office of Fleet Operations is notified of needed repairs; and ensure that fluid levels are checked and serviced when low. These fluids include: engine oil, transmission fluid, radiator, coolant and window washer fluid.

Affirmative Action/Equal Employment Opportunity

The Affirmative Action/Equal Employment Opportunity (AA/EEO) Office ensures compliance which applies to all programs and services, without regard to race, color, religious creed, age, sex, gender identity or expression, marital status, national origin, ancestry, past or present history of mental disability, intellectual disability, physical disability (including blindness) or learning disability, genetic information, sexual orientation, family violence, prior conviction of a crime, and/or previously opposing any such discriminatory practices (regardless of substantiation).

THE DEPARTMENT OF PUBLIC HEALTH AIMS TO PROVIDE EQUAL OPPORTUNITY IN ALL ASPECTS OF EMPLOYMENT AND ADVANCEMENT, FOSTERING AN ENVIRONMENT COMMITTED TO SUPPORTING INDIVIDUALS IN ALL PROTECTED CLASSES.

- Serves as the first line of review for equal opportunity under the law, encouraging and building compliance through policies, training and the resolution of discrimination complaints.
- Monitors personnel and contractor compliance for equal protection under the law fiscally and programmatically.
- Facilitates Training, Education and AA Policies through state-mandated Diversity Training, state-mandated Sexual Harassment Awareness Prevention Training, Americans with Disabilities Act (ADA) Training and Technical Assistance.
- Compiles the AA Plan's extensive data and workforce statistics which follows the steps in the employment process from the time a position is established to the time it is vacated to identify Goals that guide equal employment initiatives and affirmative steps.
- Composes statistical achievements in narrative reporting of each employment selection's good faith efforts toward achieving program, upward mobility, and selection Goals.
- Investigates, plans, interviews, collects statements/evidence, formulates findings and drafts written investigation findings report to the Commissioner for discrimination inquiries and complaints including; in-house, ADA failure to accommodate, Commission on Human Rights & Opportunities and Equal Employment Opportunity Commission (EEOC).

American with Disabilities Act

The Americans with Disabilities Act of 1990 (ADA) protects all qualified individuals. The ADA covers a person who has a physical or mental impairment that substantially limits one or more major life activities, a record of impairment, or is regarded as impaired. The

SECTION 5: AFFIRMATIVE ACTION/EQUAL OPPORTUNITY

"ADA Amendments Act of 2008" clarifies and reiterates who is covered by the law's civil rights protections by revising the definition of "disability" to more broadly encompass impairments that substantially limit a major life activity.

The Department of Public Health Americans with Disabilities Act Policy designates the Human Resources (HR) Section as coordinating intake and the Equal Employment Opportunity (EEO) Section as coordinating compliance.

Affirmative Action Employee Advisory & Diversity Committee (EA&DC)

The purpose of this committee required by Regulation to encourage face-to-face discussions between members of the workforce and Affirmative Action on developments and implementation of the Department's Affirmative Action Plan, Program and AA/EEO laws. The EA&DC shares cultural history and diversity through collaboration and serves as referral vehicle for staff with Affirmative Action/Equal Employment Opportunity concerns, questions or complaints.

All AA Policies and the DPH Internal Discrimination Complaint Procedure are available to employees on the AA and HR 'Intranet' pages under Policies and are also in the Equal Employment Opportunity/Affirmative Action library on the DPH shared drive: U:\Equal Employment Opportunity Affirmative Action,

The Equal Employment Opportunity Manager, Amanda Anduaga-Roberson can be contacted in the Affirmative Action/Equal Employment Office at 410 Capitol Avenue, 3FL Hartford or via phone at: 860-509-7220.

Appendix I - Security

Security

All DPH employees must have an official state issued photo ID badge visibly displayed at all times when entering and moving throughout the 410-470 complex and Public Health Laboratory. No exceptions.

If for any reason an employee does not have their photo ID badge available upon entering the complex, the employee must see a member of the security staff and produce a valid photo ID and sign in as a visitor. The employee's name will be referenced using a master employee list provided to security and updated by DPH to reflect current employment status.

If an employee cannot produce a valid photo ID, an agency representative must come to the security post to identify the employee prior to the issuance of a visitor pass.

Security is everyone's responsibility:

- Do not prop open any interior or exterior security doors.
- Do not allow anyone to follow you through a security door unless you are certain they belong in the building.
- Be sure that security doors close completely behind you. It only takes a few seconds to pause when leaving or entering to ensure that the door has closed.
- When expecting visitors, email <u>capavesecurity@rmbradley.com</u> with the date, time, and location of the meeting as well as the first and last names of visitors in advance of the scheduled meeting.
- Notify security staff immediately of any suspicious activity in the building.

Lost ID, Access Cards and Parking Tags

Any employee that does not have or has lost their photo ID badge must contact Human Resources to arrange for a replacement ID to be issued.

The fee for a lost or broken access card <u>or</u> ID cards is \$10.00 each, payable to the State of CT, State Treasurer's Office. Please note only checks are an acceptable means of payment.

The fee for Replacement fee for parking tags will remain \$5.00.

Appendix II - DPH Union Delegates/Stewards

P-1

410 Capitol Avenue

Kathy Rymut Ext. 7477 Olive Tronchin Ext. 7644 Donna Maselli Ext 7505 Douglas Yeager Ext. 7704 Robin Tousey-Ayers Ext. 7391

Lab

Alla Hale (860) 920-6542 Linda Bailey (860) 920-6626 Veronica Robinson (860) 920-6528

NP-6

Please contact a P-1 representative.

<u>NP-2</u>	Derrick Robinson CEIU Office	860-920-6534 860-334-0351
<u>NP-3</u>	Joseph Mitchell Taffy Womack (Sec. of the State)	860-509-7296 860-368-1254
<u>P-4</u>	Leslie Giovanelli Christine Applewhite	860-509-7376 860-509-7302
<u>P-5</u>	Kristin Campenelli (Dept of Insurance) A&R Office	860-297-3947 860-953-1316

Appendix III - Benefit Eligibility Chart

Health, Dental and Group Life

Tieatti, Dentai and Group Life			
Benefit Plan	At least .50 FTE (17.5 - 34 Hrs/Wk)	Full-time(35+ Hrs/Wk)	Waiting Period
Dental ¹	Yes	Yes	First day of the month following your hire date.
Group Life Insurance	Yes	Yes	6 months or equivalent hours of work
Medical/Prescription Drug ⁴	Yes	Yes	First day of the month following your hire date.

Voluntary Define Contribution Plans

457 (Deferred	Yes	Yes	First day of hire
Compensation) ²			

Flexible Spending Accounts

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Dependent Care Assistant (DCAP)	Yes	Yes	Immediately following hire date
Qualified Transportation Benefit Program (QTA)	Yes	Yes	Immediately following hire date
Medical Flexible Spending Account (MEDFLEX)	Yes	Yes	Within first 31 days of employment

Supplemental Benefits

Home and Auto	Yes	Yes	Immediately following hire date
Short-Term Disability ³	Yes	Yes	Immediately following hire date
Long-Term Disability	Yes	Yes	Within first 31 days of employment
Long-Term Care Insurance ⁴	Yes	Yes	6 months or equivalent hours of work
Universal Life Insurance	Yes	Yes	Immediately following hire date
Term Life Insurance	Yes	Yes	Within first 31 days of employment
Retirement Benefits	Yes	Yes	5 years of actual state service
Tuition Reimbursement	Yes	Yes	6 months or equivalent hours worked
Personal Leave ⁵	Yes	Yes	6 months or equivalent hours worked
Vacation	Yes	Yes	6 months or equivalent hours worked

¹ Available to eligible dependents whom generally include:

- Your legally married spouse or civil union partner;
- Your children, including stepchildren and adopted children, up to age 26 for medical and age 19 for dental;
- Children residing with you for whom you are legal guardian (to age 18) unless proof of continued dependency is provided. Disabled children may be covered beyond age 26 for medical or age 19 for dental, with proper documentation from the medical insurance carrier.

⁵Permanent employees or if Temporary after 6 months retroactive to date of hire (see CBA)



²Prudential requires individuals to be over 18 years of age for eligibility.

³Colonial Life requires individuals to be between17-69 years of age for eligibility. Lincoln Nation does not have this requirement.

⁴Requires individuals to be between 18-79 years of age for eligibility.

Appendix IV - Life Changes Affecting Medical/Dental Insurance

Once you choose your medical and dental plans, you cannot make changes during the plan year (July 1 – June 30) unless you experience a qualifying status change. <u>If you do have a qualifying status change, you must notify Human Resources within 30 days of the event.</u> The change you make must be consistent with your change in status – for example, if you get divorced, you must drop your spouse from coverage.

Contact Human Resources if you experience a qualifying status change, such as:

- **Legal marital/civil union status** Any event that changes your legal marital/civil union status, including marriage, civil union, divorce, death of a spouse and legal separation.
- **Number of dependents** Any event that changes your number of dependents, including birth, death, adoption and legal guardianship.
- **Employment status** Any event that changes your or your dependent's employment status, resulting in gaining or losing eligibility for coverage such as: beginning or ending employment; starting or returning from an unpaid leave of absence; or changing from part time to full time or vice versa.
- **Dependent status** Any event that causes your dependent to become eligible or ineligible for coverage.
- Residence A significant change in your place of residence that affects your ability to access network providers. If you experience a change in your life that affects your benefits, contact Human Resources. They'll explain which changes you can make and let you know if you need to send in any paperwork.

Type of Event	Date Changes take Effect:
Birth or Adoption	Dependent added the first day of the month following the date of birth or date of adoption.
Divorce or Legal Separation	Dropped the last day of the month the event occurred (COBRA offered up to 36 months).
Employee Death (covering dependents)	Dependent dropped the last day of the month the death occurred (offered COBRA for up to 36 months).
Family Entering USA	Added on the first day of the month following the date of entry.
Loss of Coverage	Added on the first day of the month following the date of loss of coverage.
Marriage	Spouse added the first day of the month following the event.
Civil Union	Partner added the first day of the month following the event.
Termination	Dropped the last day of the month the date of termination occurred (offered COBRA for up to 18 months).
Overage Dependent - Dental	Dropped the last day of the month of the 19th birthday (offered COBRA for 36 months).

Human Resources Directory

Human Resources Section

Affirmative Action/EEO Carey, Michael 509-7178 509-7220 Ciccaglione, Sue 509-7183 1199 Career Mobility 509-7180 Davis, Penny 509-7129 Employee Assistance 509-7177 Heppner, Ewa Confidential Fax 509-7957 509-7184 Lyons, Deb 509-7180 Travel Reimbursement 509-7788 Beaupre, Steve **Tuition Reimbursement** 509-7233 509-7174 Seabrook, Theresa 509-7173 Parking 509-8002 Solivan, Merelin

Help Directory

Payroll Office

Cotto, Jose	509-7264	(A-L)
MacDonald, Gail	509-7262	(M-Z)

509-8002

Human Resources Service Coordinators

Ewa Heppner

- Health Statistics & Surveillance
- Operational and Support Services

Deb Lyons

- Public Health Laboratory
- Office of Health Strategy

Theresa Seabrook

- · Community, Family, Health & Prevention
- Infectious Diseases
- Family Health

Penny Davis

Healthcare Quality and Safety

Sue Ciccaglione

- Drinking Water Section
- Environmental Health Section

Steve Beaupre

Office of the Commissioner

Policies

All agency policies and protocols are found on the agency's Intranet at http://www.ct.gov/insidedph, by clicking on the link at the top of the left hand navigation bar. The list below is a subset that is applicable and relevant to new employees to guide understanding of the work environment, professional conduct, and basic administrative requirements, supports, and benefits.

Policies that Create a Supportive Work Environment

- Educational Leave Policy
- Nursing Mothers Policy
- Drug-Free Workplace Policy (state)
- Tobacco-Free Work Place Policy
- Employee Assistance Program Policy Statement
- Internal Communications Protocol
- Employee Separation and Institutional Memory

Policies that Support Professional Conduct of Employees

- Workplace Conduct Policy
- Professional Image Policy
- Political Activity (state)
- Public Officials and State Employees Guide to the Code of Ethics (state)
- Retention and Disposition Policy (state)
- Management and Retention of E-mail and other Electronic Messages (state)
- Ethics Policy
- <u>Department of Public Health Policy and Procedures for the Protection of</u> Confidential Data
- Confidentiality Pledge
- Violence in the Workplace Policy

Policies that Support Equity and Fairness

- Health Equity Policy Statement
- Policy and Procedures for Communicating with Persons of Limited English Proficiency
- Protocol for Provision of Telephonic and Interpretation Services for Persons who are Deaf, Hard of Hearing, Deaf-Blind, and/or Speech Disabled
- Affirmative Action Contract Compliance Policy Statement
- Affirmative Action/Equal Employment Opportunity Policy Statement
- Americans with Disabilities Act Policy Statement
- Internal Discrimination Complaint Procedure



- Non-Discrimination in the Provision of the Department of Public Health Programs and Services
- Sexual Harassment Prevention Policy Statement
- Equal Employment Opportunity (federal)
- HIV/AIDS Policy
- Pregnant Women in the Workplace (state)
- <u>USERRA</u> (federal)

Policies that Protect Information Technology and Resources

- Acceptable Use Policy (state)
- Policy on Security for Mobile Computing and Storage Devices (state)
- Information Security Policy
- Password Reset Policy
- Purchasing IT Hardware and Software
- Personal Wireless Device Policy (state)
- Wireless Network Use Policy and Procedures

Policies that Guide Administrative Requirements and Employee Benefits

- Absence During the Initial Working Test Period
- Attendance Policy
- Background Checks
- Early Closing and Late Opening
- False Claims Act Policy and Procedure
- Housekeeping
- Parking Policy
- <u>Electronic Monitoring by Employers</u> (state)
- Management Personnel Policy 05-03 Vacation Leave for Managers, Confidential, and Executives (state)
- Management Personnel Policy 06-02 Compensatory Time for Employees <u>Exempt from Collective Bargaining (state)</u>
- Policy for Motor Vehicles Used or State Business (state)
- Federal and Medical Leave Act (federal)
- Statewide Family and Medical Leave Policy (state)
- Paid Sick Leave (state)
- Family Violence Policy (state)

