



MONTANA STATE HOSPITAL POLICY AND PROCEDURE

SICK LEAVE ABUSE

Effective Date: July 21, 2014

Policy #: HR-16

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- I. PURPOSE:** This policy provides uniform guidelines throughout Montana State Hospital for the prevention of sick leave abuse.
- II. POLICY:** All supervisors will administer and deal with sick leave according to the policy and any applicable MOM or Department of Public Health and Human Services policies.
- III. DEFINITIONS:**
 - A. Sick Leave Abuse means misrepresentation of the actual reasons for charging an absence to sick leave, and may include chronic, persistent, or patterned use of sick leave. Indications of sick leave abuse may include but are not limited to the following:
 1. Persistent use of sick days the day before, or the day after, regularly scheduled days off.
 2. Persistent use of sick leave the day before, or the day after, a Holiday.
 3. Persistent call-offs for illness on Holidays for which the employee is scheduled to work.
 4. Persistent use of sick leave on the same day of the week, or month.
 5. Patterned use of sick leave on, or the day after, payday.
 6. An employee's use of most or all of his/her earned sick leave, unless obvious mitigating circumstances are present.
 7. Visual observation of an employee's activities while on sick leave which indicates that he/she is not using sick leave properly; such as recreating or attending social functions.
 - B. Provider as used in this policy means a person licensed to practice medicine by the Board of Medical Examiners.
 - C. Licensed Practitioner as used in this policy means persons practicing the following professions who have been licensed by the appropriate state board:
 1. Dentists
 2. Chiropractors
 3. Physical Therapists
 4. Optometrists
 5. Psychologists

- 6. Certified Mental Health Professional Persons
- 7. Certified Substance Abuse Counselors

D. Medical Documentation means a statement provided by a physician or appropriate licensed practitioner indicating the time and date that the employee was examined or treated, verification of the need for the use of sick leave and, if possible, the approximate period of time the employee will be unable to work. Additional information may be voluntarily provided by the physician or practitioner.

E. Corrective Action means a process of applying corrective discipline from less serious action to more serious action based upon the initial severity, on the repeated nature or on a pattern of employee misconduct or poor performance.

IV. RESPONSIBILITIES:

A. Supervisors will monitor and approve sick leave following guidelines established in this policy.

B. Employees will request and use sick leave as appropriate and outlined in this policy.

V. PROCEDURE:

A. Employee absences shall not be compensated unless approved. In the event sick leave abuse is suspected, absences will not be approved unless an employee obtains a provider authorization to return to work status. Unless verified such absences will be considered leave without pay status if attributed to sick leave abuse.

B. If the supervisor suspects that an employee is abusing sick leave he/she may require, in writing, that each request for sick leave be accompanied by medical documentation before the leave is approved. This stipulation may be imposed up to 90 days and may be re-imposed for additional 90-day increments, if necessary.

C. Abuse of such leave is cause for formal disciplinary action up to and including termination.

D. Any employee who fraudulently obtains medical documentation, or in any way presents a medical documentation which is not authentic, is subject to disciplinary action, up to and including termination.

E. Time lost because of sick leave abuse shall be charged as unexcused leave without pay.

F. Conflict with Collective Bargaining Agreements

