

Blood Donor Paid Time Office Policy

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City Council Meeting
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Summary

- Question
 - City Council asked to consider a Paid Time Off Policy for Eligible Employees to Donate Blood.
- Options
 1. Approve as written
 2. Approve with amendments
 3. Disapprove proposed policy
- Declaration
 - The approval of this policy would reflect your appreciation for their contributions by providing employees paid time off to donate blood.

Purpose

- Having an adequate blood supply is vital to public health.
- The donation of blood is lifesaving, and an essential part of caring for our community, nationally.
- This Policy would provide eligible employees an allowable amount of paid time off for the purpose of donating blood.
- This item has been on the pipeline for 9 months

Purpose / Background

- The need for donated blood is constant, and the extraordinary demand for blood and blood products is yet another consequence of the COVID-19 pandemic.
- CDC continues to encourage people who are well and able to donate blood, and this policy would support their efforts.
- Donations help patients of all ages – accident and burn victims, heart surgery and organ transplant patients and those battling cancer and other life-threatening conditions.

Policy

- Authority is hereby delegated to the department head or designee to review and approve eligible employee's requests for leave under this policy.
- An employee must obtain prior approval from their department head before taking paid time off to donate under this policy.
- An employee will receive sufficient time off, not to exceed three (3) hours, without a deduction in salary or accrued leave, to donate, but no more than once in a fiscal year.
- Upon returning to work after taking time off under this policy, an employee shall provide documented proof that the employee donated during the time granted.
- If the employee fails to provide documented proof that the employee donated during the time granted, the employee's accrued personal leave will be deducted for the amount of time the employee was absent from work for such a purpose.
- Any time taken exceeding the allowed three (3) hours will be deducted for accrued personal leave on the next available pay cycle.
- Police and Fire/EMS would not be eligible employees

Fiscal Impact

- The city employs, on average, 110 Full-time Employees; Police & Fire represent more than 60%.
- Under this policy, three (3) hours maximum of paid leave will be authorized per fiscal year, per eligible employee (or approximately 330 hours total).
- The number of hours authorized does not reduce or increase an employee's salary or accrued leave.
- The monetary value of employee's time away from their duty's averages to \$90 per employee; or approximately \$9,900 annually for all Full-time employees, or \$3,600 if excluding Police & Fire.

Policy Concerns

- Does not apply to Emergency Personnel (more than 60%), as it creates a liability risk of injury in case of an emergency call.
- Respective to promoting safe operations, the policy is contrary to limiting liability of risk, and not recommended by TMLIRP.
- Creating a liability of risk to any city operation by incident or injury after donation could impact staff and use of property availability.
 - Increase in Worker’s Comp Claims
 - Increase in Property & Liability Claims
- PTO to donate blood is an unfair incentive to employees whose religious beliefs or health issues prevent them from donating, including those in “high risk” positions.

S.E.E. Statement

Social Equity – Maintaining a diverse type of blood supply is life saving and is essential to support specific City services.

Economic Development – Having an adequate blood supply is vital to public health in situations where treatment of blood products may be necessary to our residents and guests.

Environmental - As a result of globalization and travel, the risk of new and emerging infections is likely to increase in the years to come, which also impacts the blood supply.

L. Cegolon, W.C. Heymann, J.H. Lange, Climate change, emerging infections and blood donations, *Journal of Travel Medicine*, Volume 24, Issue 3, May-June 2017, taw098, <https://doi.org/10.1093/jtm/taw098>