

Wood County Board of Developmental Disabilities

PROCEDURE

Procedure #: 02-ALL-ALL-0315 (HR) Subject: Assault and Battery Leave
Effective Date: 08-21-89 Last Revision: 09-01-09
Person Responsible: Human Resources Coordinator

Approvals/Date: [Signature] Superintendent, WCDDD [Signature] Date Department Director 10/15/09 Date

The following definitions will apply:
Assault - Assault is defined in the dictionary as a violent verbal or physical attack. Assault is defined by law and legal interpretation as an unlawful attempt or threat to do physical injury to another.
Battery - Battery is defined by law and legal interpretation as the unlawful beating of a person.
Assault & Battery - By legal terminology assault and battery involves a threat and physical act. An act of assault puts the victim in fear of bodily harm only.
Assault & Battery Leave - Per the definitions (as stated above) assault and battery leave shall be granted by the appointing authority to an employee who must absent himself/herself from work due to physical/mental disability resulting from assault and/or battery which occurred in the course of Board employment, and which occurred with no provocation on the part of the employee.
Assault & Battery Leave Benefits
1. Maintenance of wages as a result of disability from Assault and Battery when physical injury to employee actually occurs.
2. Maintenance of usual and customary sick leave and vacation accruals during assault disability days/scheduled hours.
Physical Disability - Temporary injury sufficient in magnitude to render employee powerless to perform duties in a fit manner.

- 1. An employee who is physically injured in an assault and battery by a person enrolled in a service program operated by the Board may apply for assault and battery leave in lieu of sick leave and may be granted such leave subject to the following conditions and limitations:
A. The injury must have resulted from an actual assault and battery by a consumer, on the agency premises and/or during an agency function off premises when the employee is working in an approved and proper manner.
B. The incident which resulted in the injury must be reported at the time of its occurrence and the incident report must be submitted within the established guidelines for incident reports.
C. The injury must be verified by a licensed physician within 24 hours of its occurrence.
D. The medical certificate along with Assault & Battery Leave Form 03-ALL-ALL-0111, UIR and addendums must be submitted to Superintendent for approval of restitution, compensation and accrual benefits.
E. The employee must cooperate fully with the administration and policy, if necessary, in any investigation and action arising therefrom unless otherwise advised by his/her own counsel.
F. The maximum duration for an assault and battery leave shall be six (6) weeks. (No accrual of benefits beyond six weeks).

- 2. If the conditions above are met in full and the Department Director and the appointing authority approve, the Board will:
A. Provide full payment for each full or partial day of such absence for which there is no payment by the Bureau of Workers' Compensation to a maximum of 40 hours and/or seven (7) calendar days per incident.
1. If the abuse/disability exceeds 40 hours/7 calendar days, the employee shall file a C-1 Industrial Commission Compensation Application form for payment of lost wages/income maintenance.
NOTE: Per Workers' Compensation Guidelines, a disability must exist for 14 days or longer in order for the employee to be compensated for the first 7 days of disability.
NOTE: An employee disabled from an Assault and Battery may make application on C-3 form for payment of all medical bills associated with the work injury/assault.
2. A C-1 and/or C-3 form (from Industrial Compensation) may need to be executed.

B. Consider the absence as Assault and Battery Leave which shall not be deducted from the employee's accumulated unused sick and/or vacation leave; AND during the Assault and Battery Leave time the employee shall continue to accrue such leaves for a maximum of six (6) weeks.
C. Provide all other benefits to which the employee is entitled during the term of absence for assault and battery leave.
3. The appointing authority shall have the right to require a physical examination by a licensed physician when any doubt arises as to an employee's fitness for duty as a result of assault and battery. The cost of any such examination shall be paid by the employee.
4. Certain incidents relevant to assault and battery may occur which have ramifications that may deserve special review or consideration for leave. Such incidents should be brought to the attention of the appointing authority for review.
5. Employee falsification of either a signed statement (or report) or a physician's certificate is grounds for employee corrective action.

References: 01-ALL-ALL-0048
Ohio Revised Code 3319.143; 5126.05 (A)

Attachment: Appendix A - Assault and Battery Flow Chart

Forms: 03-ALL-ALL-0082
03-ALL-ALL-0111
03-ALL-ALL-0131

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APPENDIX A

ASSAULT AND BATTERY FLOW CHART

INCIDENT
Consumer – behavioral outburst
Employee injured

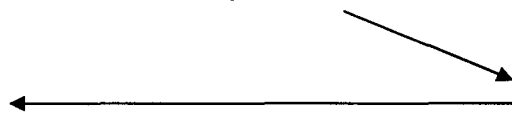


ASSAULT & BATTERY
Striking, hitting, biting
Throwing, contact made
Injury – employee disable



INJURY
Employee unable to work
UIR – Assault Leave Request

See Physician Medical Report Form
Extent of injury/probable
time off – restriction



DISABILITY



7 days (40 hours) paid per schedule of work Board Maximum	Earns sick leave/vacation during disability/assault and battery leave/maximum 6 weeks)	Files C-3 for medical expenses through Bureau of Worker's Compensation with first provider of service (medical care)	Files C-1 for medical expenses and income maintenance over and above 7 days (40 hours) Disability over 14 days employee repays if applicable	Employee may choose to be paid by SL & Vacation and not file for income maintenance through the Bureau
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RETURN TO WORK
Physician Statement
No Restrictions