24901 County Road 95, Davis, CA 95616

(530) 756-0212

## AGENDA BOARD OF COMMISSIONERS – REGULAR MEETING June 25, 2024, at 7:00 PM

To be Held in Person at Lillard Hall 24905 County Road 95 Davis, CA 95616

To be Held by Zoom: <a href="https://us06web.zoom.us/j/98831083439">https://us06web.zoom.us/j/98831083439</a>
One tap mobile - +16699006833,98831083439#
Dial by your location - (669) 900-6833 US (San Jose)
Meeting ID: 988 3108 3439

- 1. Call the Meeting to Order and Establish Quorum (Vice President Roos)
- 2. Public Comment
- 3. Weed Abatement Report (Firefighter Lee)
- 4. Old Business
  - a. Discussion / Action QSEHRA Plan (Chief Rita)
    - i. Adopt Resolution 24-03 A Resolution Adopting Revised Plan Document – West Plainfield Fire Protection District Qualified Small Employer Health Reimbursement Arrangement Plan (QSEHRA)
    - ii. Approve QSEHRA Forms
      - 1. Summary Plan Description
      - Questions and Answers
    - iii. Withdraw from Take Command Services Agreement
  - b. Discussion / Action Adopt Procedure 1005 Leaves and Absences Career Staff (Chief Rita)
- 5. New Business
  - a. Solar for Station (Commissioner Roos)
  - b. Discussion / Action Authorize Individuals Regarding Approval of Various Financial Transactions with Yolo County Department of Financial Services For Fiscal Year 2024-2024 (Form Special Districts and Other Agencies Authorization Form – FY 2024-2025) (Chief Rita)
  - c. Discussion / Action Approve Policies (Chief Rita)
    - i. Policy 1030 Compensated Leave
    - ii. Policy 1040 Family and Medical Leave Unpaid

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- iii. Policy 1041 Military Leave
- iv. Policy 1042 Pregnancy Disability Leave
- d. Discussion / Action Standing Committee Reports
  - i. Lillard Hall Committee Amy, Roos
    - 1. Hall Manager Report
  - ii. Budget and Benefits Committee **Stiles**, Lindsey
    - 1. Discussion / Action Approval of June 6, 2024 Minutes
  - iii. Personnel Committee Amy, McMullen
    - 1. Discussion / Action Approval of June 5, 2024 Minutes
    - 2. Discussion / Action Approval of June 21, 2024 Minutes
- 6. Assistant Chief's Report (Assistant Chief Stiles)
- 7. Fire Fighter's Association Report (President Lee)
- 8. Clerk's Report
  - a. Discussion / Action West Plainfield Fire Protection District Bill Review / Ratification
  - Discussion / Action Approval of May 21, 2024, Regular Board Meeting Minutes
  - c. Discussion / Action Approval of June 5, 2024, Special Board Meeting Minutes
  - d. Discussion / Action Approval of June 12, 2024, Special Board Meeting Minutes
- 9. Open Forum
- 10. Next regular Board meeting on July 16, 2024, unless another date is agreed upon
- 11. Meeting Adjourned (Vice President Roos)

Posted June	, 2024 @	hours by	
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#### **RESOLUTION 24-03**

# A RESOLUTION ADOPTING REVISED PLAN DOCUMENT – WEST PLAINFIELD FIRE PROTECTION DISTRICT QUALIFIED SMALL EMPLOYER HEALTH REIMBURSEMENT ARRANGEMENT (QSEHRA)

WHEREAS, the Board of Fire Commissioners of the WEST PLAINFIELD FIRE PROTECTION DISTRICT, having determined that it would be in the best interests of the WEST PLAINFIELD FIRE PROTECTION DISTRICT and its employee(s) to adopt a "Qualified Small Health Reimbursement Arrangement" allowing certain WEST PLAINFIELD FIRE PROTECTION DISTRICT employees to receive reimbursement of qualified insurance premium and medical benefits, did adopt a plan effective September 1, 2023, by unanimous vote taken on August 15, 2023, to be developed and administered by Take Command.

WHEREAS, the Board of Fire Commissioners of the WEST PLAINFIELD FIRE PROTECTION DISTRICT, having determined that it would be in the best interests of the WEST PLAINFIELD FIRE PROTECTION DISTRICT and its employee(s) to revise and restate the "Qualified Small Health Reimbursement Arrangement" plan document did revise and restate the "Qualified Small Health Reimbursement Arrangement" plan document as attached.

**RESOLVED,** that the WEST PLAINFIELD FIRE PROTECTION DISTRICT adopt the attached revised and restated " Qualified Small Health Reimbursement Arrangement" plan document.

**RESOLVED FURTHER**, that the Board of Fire Commissioners of the WEST PLAINFIELD FIRE PROTECTION DISTRICT and, primarily, the Fire Chief of the WEST PLAINFIELD FIRE DEPARTMENT undertake all actions necessary to implement and administer said plan.

THE ABOVE WAS DASSED by the following years on June 24, 2024.

Yes: No: Absent:	owing vote on June 24, 2024.
ATTEST:	
West Plainfield Fire Protection District	Board Clerk
Bv WARREN ROOS. Vice-President	KYTIANA SAYER-PETERSON



24901 County Road 95, Davis, CA 95616

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# WEST PLAINFIELD FIRE PROTECTION DISTRICT QUALIFIED SMALL EMPLOYER HEALTH REIMBURSEMENT ARRANGEMENT (QSEHRA) PLAN

(Plan Effective Date - September 1, 2023 Revised and Restated Plan Effective Date - July 1, 2024)

24901 County Road 95, Davis, CA 95616

(530) 756-0212

# WEST PLAINFIELD FIRE PROTECTION DISTRICT QUALIFIED SMALL EMPLOYER HEALTH REIMBURSEMENT ARRANGEMENT (QSEHRA) PLAN

(Plan Effective Date - September 1, 2023; Revised and Restated Plan Effective Date - July 1, 2024)

#### **PURPOSE**

This revised and restated West Plainfield Fire Protection District Qualified Small Employer Health Reimbursement Arrangement Plan (the "Plan") is adopted by West Plainfield Fire Protection District effective July 1, 2024.

The purpose of the Plan is to replace the prior Plan and to allow Employees of West Plainfield Fire Protection District to obtain reimbursement of Medical Care Expenses on a nontaxable basis from the HRA account. West Plainfield Fire Protection District intends that the Plan qualify as an employer-provided medical reimbursement plan under Code Sections 105 and 106, the Qualified Small Employer HRA as defined in the 2016 Small Business Healthcare Relief Act (formerly H.R. 5447) in Title 18 of the 21st Century Cures Act, and regulations issued thereunder, and as a health reimbursement arrangement as defined under IRS Notice 2002-45, and shall be interpreted to accomplish that objective. The Medical Care Expenses reimbursed under the Plan are intended to be eligible for exclusion from the Participant's income for Federal Income Tax purposes under Section 105(b) of the Internal Revenue Code.

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#### ARTICLE I. DEFINITIONS

The words and phrases as used herein shall have the following meanings, unless a different meaning is plainly required by the context, and the singular shall include the plural.

"Administrator" means the Fire Chief, who has been appointed by the Employer with full authority, discretion, and responsibility to manage and direct the operation and administration of the Plan.

"Beneficiary" means the person, persons, or trust designated by written revocable designation filed with the Plan Administrator by the Participant to receive payments under this Plan, including the Participant and any dependents of a Participant.

"Benefits" means the reimbursement benefits for Medical Care Expenses described under Section 4.

"Change in Status" means any of the events described in the SPD, as well as any other events that the Plan Administrator in its sole discretion decides to recognize on a uniform and consistent basis as a reason to change the enrollment mid-year.

"Code" means the Internal Revenue Code of 1986 as amended.

"Committee" means the Benefits Committee appointed by the Plan Sponsor.

"Compensation" means earned income, salaries, wages, fees, commissions, and all other earnings paid to the Employee by the Employer.

"Dependent" means any individual who is a tax dependent of the Participant as defined in Code § 152, with the following exceptions: (1) a dependent is defined as in Code § 152, determined without regard to subsections (b)(1), (b)(2), and (d)(1)(B) thereof; and (2) any child (as defined in Code § 152(f)(1)) of the Participant who as of the end of the taxable year has not attained age 27, and (3) any child to whom IRS Rev. Proc. 2008-48 applies (regarding a child of divorced parents, etc., where one or both parents have custody of the child for more than half of the calendar year and where the parents together provide more than half of the child's support for the calendar year), is treated as a dependent of both parents. Notwithstanding the foregoing, the HRA Account will provide benefits in accordance with the applicable requirements of a QMCSO, even if the child does not meet the definition of "Dependent."

"Effective Date" is defined in the Purpose of the Plan as July 1, 2024.

"Eligible Employee" means any full-time Employee who regularly works 40 or more hours per week for the Company and has successfully completed the required Company training.

"Eligible Medical Expense" means those expenses incurred by the Participant, or the Participant's Spouse or Dependents, after the effective date of the Participant's participation in the HRA and during the Plan Year. Medical Care Expenses generally means expenses incurred by a Participants or their Spouse or Dependents for medical care, as defined in Code section 213, or as described as Eligible Reimbursable Expenses under Schedule A to this Plan, but shall not include expenses that are described as "excluded expenses" under Schedule B to this Plan. For purposes of this Plan, an expense is "incurred" when the Participant or beneficiary is furnished the medical care or services giving rise to the claimed expense.

"Employee" means any individual who is considered to be in a legal employer-employee relationship with the Employer for federal tax-withholding purposes, excluding independent contractors, temporary or casual employees, any self-employed individual, any partner in a partnership, and any more-than 2% shareholder by virtue of the Code Section 318 ownership attribution rules. The term "Employee" does include "former Employees" for the limited purpose of allowing continued eligibility for benefits in accordance with Section 4.8.

"Employer" means West Plainfield Fire Protection District and any other Related Employer that adopts this Plan with the approval of the Company. Related Employers, if any, which have adopted this Plan are listed in Schedule C of this Plan.

"Employment Commencement Date" means the first regularly-scheduled working day on which the employee first performs an hour of service for the Employer for compensation.

"Enrollment Form" means the form provided by the Administrator for the purpose of allowing an eligible Employee to participate in this Plan.

"Enrollment Period" means the calendar month preceding the beginning of any Plan Year.

"ERISA" means the Employee Retirement Income Security Act of 1974, as amended.

"Health FSA" means a Health Flexible Spending Arrangement.

"Highly Compensated Employee" (HCE) for purposes of Section 2.05 an HCE means any Employee who is among the highest paid 25% of all employees, one of the highest paid officers, or a shareholder who owns more than 10% of the value of the employer's stock.

"HIPAA" means the Health Insurance Portability and Accountability Act of 1996, as amended.

"HRA" means a health reimbursement arrangement as defined in IRS Notice 2002-45.

"HRA Account" means the HRA Account described in Section 4.04.

"Key Employee" means any Employee defined as such in Section 416(I) of the Code.

"Participant" means an Eligible Employee and any eligible family member who have met the conditions for participation set forth herein.

"Participating Employer" means West Plainfield Fire Protection District and any Related Employer that adopts this Plan.

"Plan" means the West Plainfield Fire Protection District Health Reimbursement Arrangement as described herein, and in any applicable Adoption Agreement, and which is intended for the exclusive benefit of Eligible Employees, as has been and may be further amended from time to time.

"Plan Number" or "PN" assigned by the Plan Sponsor is #502.

"Plan Sponsor" means West Plainfield Fire Protection District (Employer).

"Plan Year" means the twelve-month period commencing each January 1 and ending on the subsequent December 31, except in the case of a short plan year representing the initial Plan Year or where the Plan Year is being changed, in which case the Plan Year shall be the entire short plan year.

"QMCSO" means a qualified medical child support order, as defined in ERISA Section 609(a).

"Related Employer" means any employer affiliated with West Plainfield Fire Protection District that, under Code Section 414(B)(c), or (m), is treated as a single employer with West Plainfield Fire Protection District for purposes of Code Section 105.

"Spouse" means an individual who is legally married to a Participant as determined under applicable state law (and who is treated as a spouse under the Code).

"SPD" means the separate Summary Plan Description describing the terms of this Plan.

"USERRA" means the Uniformed Services Employment and Reemployment Rights Act of 1994, as amended.

#### ARTICLE II. PARTICIPATION IN THE PLAN

#### **Section 2.01 Commencement of Participation**

An individual is eligible to participate in the Plan if the individual is an Employee of a Participating Employer; is regularly scheduled to work 40 or more hours per week; has been employed by the Employer for one day, including the employment commencement date; and has successfully completed the required Company training. The Employee's coverage will commence on the first day of the full month the Employee has met the Plan's eligibility requirements and an enrollment form has been submitted to the Administrator.

#### **Section 2.02 Cessation of Participation**

A Participant will cease to be a Participant as of the earliest of:

- A. the date on which the Plan terminates; or
- B. the date on which the Employee ceases to be an Eligible Employee.

Notwithstanding the foregoing, a former Eligible Employee who is absent by reason of sickness, disability, or other authorized leave of absence may continue as a Participant for so long as such authorized absence continues in accordance with such rules and regulations as the Participating Employer may direct.

#### Section 2.03 Recommencement of Participation

A former active Participant who is rehired within 30 days or less of the date of termination of employment will be reinstated with the same HRA Account balance that such individual had before termination. If an Employee terminates employment and is not rehired within 30 days, or ceases to be an Eligible Employee for any other reason and then becomes an Eligible Employee again, the Employee must complete the waiting period described in Section 2.01, if applicable, before again becoming eligible to participate in the Plan. However, any former active Participant shall be prohibited from making any enrollment change from their prior enrollment in the Plan Year except as provided in Section 2.04. Such family status changes must occur while the Employee is a Participant.

#### **Section 2.04 Modification to Benefit Enrollees**

Any Participant may make a change to their enrollment form after the Plan Year has commenced, to be effective for the remainder of such Plan Year if under the facts and circumstances the changes are necessitated by and are consistent with a change in status which is acceptable under rules and regulations adopted by the Department of the Treasury, the provisions of which are incorporated by reference. Notwithstanding anything herein to the contrary, if the rules and regulations conflict, then such rules and regulations shall control.

In general, a change in enrollment is considered if there is a change in status for the Participant's dependents. Any new enrollment form shall be effective at such time as the Administrator shall prescribe, but not earlier than the first pay period beginning after the enrollment form is completed and returned to the Administrator. For the purposes of this subsection, a change in status shall only include the following events or other events permitted by Treasury regulations:

- A. Legal Marital Status: events that change a Participant's legal marital status, including marriage, divorce, death of a spouse, legal separation or annulment;
- B. Number of Dependents: Events that change a Participant's number of dependents, including birth, adoption, placement for adoption, or death of a dependent;
- C. Dependent satisfies or ceases to satisfy the eligibility requirements due to attainment of age, change in student status, or any similar circumstance\*;
- D. In the event of a judgment, decree, or order resulting from a divorce, legal separation, annulment, or change in legal custody (including a qualified medical child support order defined in ERISA Section 609) which requires accident or health coverage for a Participant's child.

\*IRS Notice 2010-38 states that the applicable Treasury Regulations have been amended as of March 30, 2010, to include Change in Status events covering children under age 27 who do not otherwise qualify as dependent children, including becoming newly eligible for coverage or eligible for coverage beyond the date on which the child otherwise would have lost coverage. Under health care reform, for plan years starting after September 23, 2010, group health plans that provide coverage for dependent children must continue to do so for unmarried and married children until age 26, regardless of student status. For plans already in existence on March 23, 2010, the age 26 limit only applies if the child is not eligible for other group coverage. This exception ends in 2014. Thereafter, children that are eligible for other coverage could remain on their parent's plan until age 26.

#### Section 2.05 USERRA Leaves of Absence

A Participant who takes an unpaid leave of absence under the Uniformed Services Employment and Reemployment Rights Act of 1994 ("USERRA Leave" and applicable to any size group), may revoke their election to participate for the remainder of the Plan Year in which such leave of absence commences. Such revocation shall take effect in accordance with such procedures as prescribed by the Plan Administrator. Upon such Participant's return from their USERRA Leave, the Participant may be reinstated in the Plan, on the same terms that applied to the Participant prior to taking the USERRA Leave, and with such other rights to make enrollment changes as are provided to other Participants under the Plan. Notwithstanding the foregoing, a Participant on USERRA Leave shall have no greater rights to benefits for the remainder of the Plan Year in which the USERRA leave commences than other Plan Participants.

#### Section 2.06 Non-FMLA and Non-USERRA Leaves of Absence

A Participant who goes on a leave of absence that is not subject to FMLA or USERRA will be treated as having terminated participation, as described in Section 2.02.

#### ARTICLE III. BENEFITS AND FUNDING OF THE PLAN

#### Section 3.01 Provision of Benefits

When the Eligible Employee becomes a Plan Participant, an HRA Account will be established for the Participant to receive Benefits in the form of reimbursements for Medical Care Expenses as described in Schedule A. Under no circumstances shall benefits be provided in the form of cash or any other taxable or nontaxable benefit other than reimbursement for eligible Medical Care Expenses. The benefits provided thereunder shall be subject further to the provisions of any plan, contract, or other arrangement setting forth the further terms and conditions of the Benefit Program, and the terms of each Participating Employer's Plan, contract or other arrangement, under which benefits provided are incorporated by reference in this Plan.

#### Section 3.02 Plan Enrollment

An Employee who becomes eligible to participate in the Plan will begin participation on the first day the eligibility requirements have been satisfied, provided that an Enrollment Form is submitted to the Plan Administrator before the first-day participation will commence. Once enrolled, the Employee's participation will continue from month-to-month and year-to-year until the Employee's participation terminates pursuant to Section 2.02. The Spouse and any Dependents whose medical expenses may be submitted to the HRA must be identified on the Enrollment Form.

#### **Section 3.03 Employee Contributions**

There are no Employee contributions for benefits under the Plan.

#### Section 3.04 Employer Contributions

The Employer funds the full amount of the HRA Accounts.

#### Section 3.05 No Funding Under a Cafeteria Plan

The benefits cannot be funded with salary reduction contributions, employer contributions (e.g. flex credits), or otherwise under a cafeteria plan.

#### Section 3.06 Funding of the Plan

All of the amounts payable under the Plan shall be paid from the general assets of the Employer. Nothing herein will be construed to require the Employer or the Administrator to maintain any fund or to segregate any amount for the benefit of any participant and no Participant or other person shall have any claim against, right to, or security or other interest in any fund, account or asset of the Employer from which any payment under this Plan may be made. There is no trust or other fund from which Benefits are paid.

#### Section 3.07 Nondiscrimination

The Plan shall not discriminate in favor of highly compensated employees, if any, as to eligibility and benefits as defined under Code Section 105(h).

#### ARTICLE IV. HEALTH REIMBURSEMENT BENEFITS

#### Section 4.01 Benefits

The Plan will reimburse Participants for Medical Care Expenses up to the unused amount in the Participant's HRA Account, as set forth and adjusted under Section 4.03.

#### **Section 4.02 Eligible Medical Care Expenses**

Under the HRA Account, a Participant may receive reimbursement for eligible Medical Care Expenses incurred during a Period of Coverage. It is specifically the Participant's responsibility regarding insurance premium reimbursement not to request anything that could violate the terms of their insurance policy.

An eligible Medical Care Expense is incurred at the time the medical care or service giving rise to the expense is furnished, and not when the individual incurring the expense is formally billed for, is charged for, or pays for the medical care. Medical Care Expenses incurred before a Participant first becomes covered by the Plan are not eligible. However, a Medical Care Expense incurred during one Period of Coverage may be paid during a later Period of Coverage provided that the Participant was a Participant in the Plan during both Periods of Coverage.

Medical Care Expenses generally means expenses incurred by a Participant or their Spouse or Dependents for medical care, as defined in Code section 213, but shall not include expenses that are described as "excluded expenses" under Schedule B to this Plan. Reimbursements due for Medical Care Expenses incurred by the Participant or the Participant's Spouse or Dependents shall be charged against the Participant's HRA Account.

Medical Care Expenses can only be reimbursed to the extent that the Participant or other person incurring the expense is not reimbursed for the expense (nor is the expense reimbursable) through other insurance or any other accident or health plan (see Section 4.11 if the other health plan is a Health FSA, or Section 4.12 if the Employee has established a Health Savings Account). If only a portion of a Medical Care Expense has been reimbursed elsewhere (due to health insurance plan co-payment or deductible limitations), the HRA account can reimburse the remaining portion of such Expense if it otherwise meets the requirements of this Plan.

#### Section 4.03 Maximum Benefits

The maximum allowed benefit each year is \$4,800 whether choosing the individual or family benefit, plus unused amounts from prior Coverage Periods, if any. The maximum amount that can be carried forward to a later Coverage Period is 100% of the prior year's unused balance subject to the annual IRS limit. The QSEHRA Account balance can never exceed the maximum allowed benefit.

For subsequent Plan Years, the maximum dollar limit may be changed by the Administrator and shall be communicated to Employees through the Enrollment Form, the SPD or another document. Reimbursements to highly compensated employees may be limited or treated as taxable compensation to comply with Code Section 105(h), as may be determined by the Administrator in its sole discretion.

#### Section 4.04 Establishment of the HRA Account

The Administrator will establish and maintain an HRA Account with respect to each Participant but will not create a separate fund or otherwise segregate assets for this purpose. The HRA Account so established will merely be a records-keeping account with the purpose of keeping track of contributions and available reimbursement amounts.

A Participant's HRA Account will be credited at the beginning of each month with an amount equal to the applicable maximum dollar limit for the Period of Coverage. A Participant's HRA Account will be debited during each Period of Coverage for any reimbursement of Medical Care

Expenses incurred during the Period of Coverage. The amount available for reimbursement of Medical Care Expenses is the amount credited to the Participant's HRA Account reduced by prior reimbursements debited.

#### Section 4.05 Carryover of Unused HRA Account Balances

If any balance remains in the Participant's HRA Account for a Period of Coverage after all reimbursements have been made for the Period of Coverage, 100% of such balance may be used to reimburse the Participant for Medical Care Expenses incurred during a subsequent Period of Coverage. The Employee's HRA Account balance cannot exceed the maximum identified in Section 4.03 above.

#### Section 4.06 Substantiation of Expenses

Each Participant must submit a written Claim Form to the Plan Administrator accompanied by a written statement or bill from an independent third party stating that the expense has been incurred and the amount thereof. The forms shall contain such evidence as the Plan Administrator shall deem necessary as to substantiate the nature, the amount, and timeliness of any expenses that may be reimbursed.

#### Section 4.07 Reimbursement Procedure

Within 30 days after receipt by the Administrator of a reimbursement claim from a Participant, the Employer will reimburse the Participant for the Participant's Medical Care Expenses, if the Administrator approves the claim, or the Administrator will notify the Participant that their claim has been denied. This time period may be extended for an additional 15 days for matters beyond the control of the Administrator, including cases where a reimbursement claim is incomplete. The Administrator will provide written notice of any extension, including the reasons for the extension and will allow the Participant 45 days in which to complete an incomplete reimbursement claim.

A Participant who seeks benefits may apply for reimbursement by submitting an application in writing to the Administrator in such form as the Administrator may prescribe, within 90 days, following the close of the Plan Year in which the Medical Care Expense was incurred. The application must include the person or persons on whose behalf the Medical Care Expense was incurred, the nature and date of the Expense incurred, the amount of the requested reimbursement, and a statement that such Expenses have not otherwise been reimbursed and are not reimbursable through any other source and that Health FSA coverage, if any, for such expense has been exhausted.

The application shall be accompanied by a Substantiation of Expense along with any additional documentation that the Administrator may request. Except for the final reimbursement claim for a Period of Coverage, no claim for reimbursement may be made unless and until the aggregate claims for reimbursement is at least \$10.00.

It is specifically the Participant's responsibility regarding insurance premium reimbursement not to request anything that could violate the terms of their insurance policy.

#### **Section 4.08 Reimbursements After Termination**

When a Participant ceases to be a Participant under Section 2.02, the Participant will not be able to receive reimbursements for Medical Care Expenses incurred after their participation terminates. The Participant, or the Participant's estate, may claim reimbursement for any Medical Care Expenses incurred during the Period of Coverage prior to termination of

participation provided that the Participant or the Participant's estate files a claim within 90 days following the date of termination.

#### **Section 4.09 Named Fiduciary**

West Plainfield Fire Protection District is the named fiduciary for the Plan for purposes of ERISA section 402(a).

#### Section 4.10 Compliance with ERISA, HIPAA, etc.

Benefits shall be provided in compliance with ERISA, HIPAA, USERRA, and other group health plan laws to the extent required by such laws.

#### Section 4.11 Coordination of Benefits; Health FSA to Reimburse First

Benefits under this Plan are intended to pay benefits solely for Medical Care Expenses not previously reimbursed or reimbursable elsewhere. To the extent that an otherwise eligible Medical Care Expense is payable or reimbursable from another source, that other source shall pay or reimburse prior to payment or reimbursement from this Plan. Without limiting the foregoing, if the Participant's Medical Care Expenses are covered by both this Plan and by a Health FSA, then this Plan is not available for reimbursement of such Medical Care Expense until after amounts available for reimbursement under the Health FSA have been exhausted.

#### Section 4.12 Coordination of Benefits; HSA Plan

Certain benefits of this HRA Plan may prohibit HSA bank account eligibility. Employees with contributions made during the year to a Health Savings Account (HSA) can only elect a Limited Purpose HRA or Post Deductible HRA. The Limited Purpose HRA Option defines "Medical Care Expenses" as those expenses incurred by a Participant or their Spouse or Dependents for medical care, as defined in Code § 213(d)—provided, however, that such expenses are limited to vision care; dental care; preventive care; permitted insurance; and permitted coverage. Once the HSA Plan deductible has been met "Medical Care Expenses" shall mean post deductible expenses incurred by a Participant and their Spouse or Dependents for medical care as defined in Code § 213(d). It is specifically the Employee's responsibility regarding Health Reimbursement Arrangement (HRA) reimbursements not to request anything that could violate the terms of the Employee's Health Savings Account (HSA).

#### ARTICLE V. APPEALS PROCEDURE

#### Section 5.01 Procedure If Benefits Are Denied Under This Plan

Claims shall be administered in accordance with the claims procedure set forth in the Summary Plan Description (SPD) for this Plan. If a claim for a benefit under the Plan is denied in whole or in part, the claimant must receive a written explanation of the reason for the denial. The claimant has the right to appeal the denial. The rules regarding denied claims for benefits under the HRA are set forth, according to ERISA guidelines, in the document entitled West Plainfield Fire Protection District Qualified Small Employer Health Reimbursement Account – Questions and Answers.

#### ARTICLE VI. PLAN ADMINISTRATION

#### Section 6.01 Administrator

The administration of this Plan shall be under the supervision of the Administrator. It is the principal duty of the Administrator to see that the Plan is carried out, in accordance with its terms, for the exclusive benefit of persons entitled to participate in this Plan without discrimination among them.

#### Section 6.02 Powers of the Administrator.

The Administrator shall have the duties and powers it considers necessary or appropriate to discharge its duties. It shall have the exclusive right to interpret the Plan and to decide all matters thereunder, and all determinations of the Administrator with respect to any matter hereunder shall be conclusive and binding on all persons. Without limiting the generality of the foregoing, the Administrator shall have the following discretionary authority to:

- A. Construe and interpret this Plan, including all possible ambiguities, inconsistencies and omissions in the Plan, and related documents, and to decide all questions of fact, questions relating to eligibility and participation, and questions of benefits under this Plan.
- B. Prescribe procedures to be followed and the forms to be used by Employees and Participants to enroll in and submit claims pursuant to this Plan;
- C. Prepare and distribute information explaining this Plan and the benefits under this Plan in such manner as the Administrator determines to be appropriate;
- D. Request and receive from all Employees and Participants such information as the Administrator shall from time to time determine to be necessary for the proper administration of this Plan;
- E. Furnish each Employee and Participant with reports with respect to the administration of this Plan as the Administrator determines to be reasonable and appropriate;
- F. Receive, review and keep on file such reports and information concerning the benefits covered by this Plan as the Administrator determines from time to time to be necessary and proper:
- G. Appoint and employ such individuals or entities to assist in the administration of this Plan as it determines to be necessary or advisable, including legal counsel and benefit consultants:
- H. Sign documents for the purposes of administering this Plan, or to designate an individual or individuals to sign documents for the purposes of administering this Plan;
- I. Secure independent medical or other advice and require such evidence as it deems necessary to decide any claim or appeal; and
- J. Maintain the books of accounts, records, and other data in the manner necessary for proper administration of this Plan and to meet any applicable disclosure and reporting requirements.

The Plan Administrator shall adopt such rules for administration of the Plan as it considers desirable, provided they do not conflict with the Plan; and may construe the Plan, correct defects, supply omissions and reconcile inconsistencies to the extent necessary to effectuate the Plan, and such action shall be conclusive. Records of administration of the Plan shall be

kept by the Plan Administrator, and Participants and their Beneficiaries may examine records pertaining directly to themselves.

#### Section 6.03 Provision for Third-Party Plan Service Providers

The Administrator, subject to approval of the Employer, may employ the services of such persons as it may deem necessary or desirable in connection with the operation of the Plan. Unless otherwise provided in the service agreement, obligations under this Plan shall remain the obligation of the Employer.

#### **Section 6.04 Fiduciary Liability**

To the extent permitted by law, the Administrator shall not incur any liability for any acts or for failure to act except for their own willful misconduct or willful breach of this Plan.

#### Section 6.05 Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Standards

In order that the Plan Administrator may receive and use Protected Health Information (PHI) for Plan Administration purposes, the Plan Administrator agrees to:

- A. Not use or further disclose PHI other than is permitted or required by the Plan Documents or as required by law (as defined in the Privacy Standards);
- B. Ensure that any agent, including a subcontractor, to whom the Plan Administrator provides PHI, agrees to the same restrictions and conditions that apply to the Plan Administrator with respect to PHI;
- C. Not use or disclose PHI for employment-related actions and decisions or in connection with any other benefit or employee benefit plan of the Plan Sponsor, except pursuant to an authorization which meets the requirements of the Privacy Standards;
- D. Report to the Plan any PHI use or disclosure that is inconsistent with the uses or disclosures provided for of which the Plan Administrator becomes aware:
- E. Make available PHI in accordance with Section 164.524 of the Privacy Standards;
- F. Make available PHI for amendment and incorporate any amendments to PHI in accordance with Section 164.526 of the Privacy Standards.
- G. Make available the information required to provide an accounting of disclosures in accordance with Section 164.528 of the Privacy Standards.
- H. Make its internal practices, books and records relating to the use and disclosure of PHI received from the Plan available to any officer or employee of the U.S. Department of Health and Human Services to whom the authority involved has been delegated, for purposes of determining compliance by the Plan with Part 164, Subpart E, of the Privacy Standards;
- I. If feasible, return or destroy all PHI received from the Plan that the Plan Administrator or employer still maintains in any form, and retain no copies of such PHI when no longer needed for the purpose for which disclosure was made, except that, if such return or destruction is not feasible, limit further uses and disclosure to those purposes that make the return or destruction of the PHI infeasible; and
- J. Ensure that adequate separation between the Plan and the Plan Administrator or employer, as required in Section 164.505(f)(2)(iii) of the Privacy Standards is established as follows:

- The following Employees, or classes of Employees, or other person under control of the Plan Administrator, shall be given access to the PHI to be disclosed: (i) Human Resources Manager, (ii), Staff designated by Human Resources Manager, (iii) Chief Financial Officer, and/or (iv) Plan Auditor.
- The access to and use of PHI by individuals described above shall be restricted to the Plan Administration functions that the Plan Administrator or employer performs for the Plan.
- In the event any of the individuals described above do not comply with the
  provisions of the Plan Documents relating to use and disclosure of PHI, the
  Plan Administrator or employer shall impose reasonable sanctions as
  necessary, in its discretion, to ensure that no further non-compliance occurs.
  Such sanctions shall be imposed progressively (for example, an oral warning,
  a written warning, time off without pay and termination), if appropriate, and
  shall be imposed so that they are commensurate with the severity of the
  violation.

Plan Administration activities are limited to activities that would meet the definition of claims processing, payment, quality assurance, auditing, monitoring and management of the plan.

#### Section 6.06 HIPPAA Security Rule

The Employer, as the Plan sponsor, shall comply with the plan document requirements of the HIPAA security regulations found at 45 CFR § 164.314(b).

- A. *Electronic Protected Health Information*. "Electronic Protected Health Information" shall mean individually identifiable health information that is transmitted by electronic media or maintained in electronic media by the Plan.
- B. *Employer Agreement*. The Employer agrees to:
  - Implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of Electronic Protected Health Information that it creates, receives, maintains, or transits on behalf of the Plan.
  - Ensure that the adequate separation between the Plan and the Employer as required by the Privacy Rule is supported by reasonable and appropriate security measures.
  - Ensure that any agent, including a subcontractor, to whom it provides
     Electronic Protected Heath Information agrees to implement reasonable and
     appropriate security measures to protect such Electronic Protected Health
     Information; and
  - Report to the Plan Administrator any security incident of which it becomes aware.

#### Section 6.07 Compensation of the Plan Administrator

Unless otherwise determined by the Employer and permitted by law, any Administrator who is also an Employee of the Employer shall serve without compensation for services rendered in such capacity, but all reasonable expenses incurred in the performance of their duties shall be paid by the Employer.

#### Section 6.08 Inability to Locate Payee

If the Administrator is unable to make payment to any Participant or other person to whom a payment is due under the Plan because it cannot ascertain the identity or whereabouts of such Participant or other person after reasonable efforts have been made to identify or locate such person, then such payment and all subsequent payments otherwise due to such Participant or other person shall be forfeited following a reasonable time after the date that any such payment first became due.

#### Section 6.09 Effect of Mistake

In the event of a mistake as to the eligibility or participation of an Employee, or the allocations made to the account of any Participant, or the amount of benefits paid or to be paid to a Participant or other person, the Administrator shall, to the extent that it deems administratively possible and otherwise permissible under code Section 105, the regulations issued thereunder or other applicable law, cause to be allocated or cause to be withheld or accelerate, or otherwise make adjustment of, such amounts as it will in its judgment accord to such Participant or other person the credits to the HRA Account or distributions to which they are properly entitled under the Plan.

#### **ARTICLE VII. MISCELLANEOUS PROVISIONS**

#### Section 7.01 Expenses

All reasonable expenses incurred in administering the Plan are currently paid by the Employer.

#### **Section 7.02 Not an Employment Contract**

Neither this Plan nor any action taken with respect to it shall confer upon any person the right to continue employment with any Employer.

#### Section 7.03 Amendment and Termination

The Employer reserves the right to amend or terminate all or any part of this Plan at any time for any reason, and any such amendment or termination will automatically apply to the Related Employers that are participating in this Plan. Any such amendment or termination shall be effective as of such date as the Employer shall determine.

#### Section 7.04 Headings and Captions

The headings and captions set forth in the Plan are provided for convenience only, shall not be considered part of the Plan, and shall not be employed in construction of the Plan.

#### Section 7.05 Applicable Laws

This Plan shall be construed, administered and enforced according to the applicable federal law and the laws of the state of the principal place of business of the Employer to the extent not preempted.

#### Section 7.06 Code and ERISA Compliance

It is intended that this Plan meet all applicable requirements of the IRS Code and ERISA, and of all regulations issued thereunder. This Plan shall be construed, operated and administered accordingly, and in the event of any conflict between any part, clause or provision of this Plan and the Code and/or ERISA, the provisions of the Code and ERISA shall be deemed controlling,

and any conflicting part, clause or provision of this Plan shall be deemed superseded to the extent of the conflict.

#### **Section 7.07 Tax Consequences**

Neither the Employer nor the Plan Administrator makes any warranty or guarantee that any amounts paid to or for the benefit of any Participant under this Plan will be treated as excludable from the Participant's gross income for federal, state or local income tax purposes. It shall be the responsibility of each Participant to determine whether each payment under this Plan is excludable from the Participant's gross income for federal, state and local income tax purposes, and to notify the Administrator if the Participant has any reason to believe that such payment is not so excludable. Under no circumstances shall the recipient have any recourse against the Plan Administrator or the Employer with respect to any increased taxes or other losses or damages suffered by the Employee as a result thereof.

#### Section 7.08 Indemnification of the Employer

If any Participant receives one or more payments or reimbursements under this Plan on a taxfree basis, and such payments do not qualify for such treatment under the Code, such Participant shall indemnify and reimburse the Employer for any liability it may incur for failure to withhold federal income taxes, Social Security taxes, or other taxes from such payments or reimbursements.

#### Section 7.09 Non-Assignability of Rights

The right of any Participant to receive any reimbursement under this Plan shall not be alienable by the Participant by assignment or any other method and shall not be subject to claims by the Participant's creditors by any process whatsoever. Any attempt to cause such right to be so subjected will not be recognized, except to such extent as may be required by law.

#### Section 7.10 Plan Provision Controlling

In the event that the terms or provisions of any summary or description of this Plan, or of any other instrument are in any construction interpreted as being in conflict with the provisions of the Plans as set forth in this document, the provisions of this Plan shall be controlling.

#### Section 7.11 Severability

Should any part of this Plan subsequently be invalidated by a court of competent jurisdiction, the remainder thereof shall be given effect to the maximum extent possible.

Executed June 25, 2024

WEST	PLAINFIELD FIRE PROTECTION DISTRICT
Ву:	WARREN ROOS, Vice President / Commissioner
Attest:	KYTIANA SAYER-PETERSON, Board Clerk

#### Schedule A SCHEDULE OF BENEFITS AND ELIGIBLE EXPENSES

**Medical Expenses That Are Reimbursable** 

West Plainfield Fire Protection District will reimburse each Eligible Employee up to \$400.00 monthly\*, and for Employee and Eligible Dependents up to \$400.00 monthly\* for any IRC 213(d) out-of-pocket medically necessary expense including, but not limited to, the following types of expenses:

abdominal supports abortion (legal) alcoholism treatment ambulance anesthetist artificial limbs back supports birth control pills and other contraceptive devices (by prescription) blood pressure monitor blood tests and transfusions braces Braille Books & Magazines (extra cost only) breathing strips cardiographs chiropractor composite (white) fillings contact lenses/eyeglasses corrective eye surgery (Lasik, RK. etc.) cosmetic surgery (only if related to accident, birth defect or disease) cost / maintenance of healthrelated home improvements crutches dental treatments diagnostic fees diathermy exercise equipment (by prescription) fees paid to health institute prescribed by doctor FICA and FUTA tax paid for medical care service first aid kit, gauze, bandages

guide dog (or other service animal) gynecologist health plan coinsurance, copays, and deductibles hearing aids and batteries heating devices (if therapeutic) hospital bills and meals hydrotherapy infertility treatment insulin treatments invalid chair lab tests and fees over the counter medication over the counter items obstetrician, pediatrician oculist/ophthalmologist operating room costs optician/optometrist oral surgery organ transplant (including donor's expenses) orthopedic shoes orthopedist osteopath oxygen and oxygen equipment physician physiotherapist podiatrist practical nurse for medical services premiums for eligible free-choice medical plan, subject to PPACA\*\* premiums for dental or vision insurance

premiums for hospital and other fixed indemnity insurance plans\*\*\* premiums for voluntary federal Medicare insurance\*\*\* prenatal care, postnatal treatments prescription drugs & medicines prosthesis psychiatrist psychoanalyst psychologist psychotherapy radium therapy registered nurses sickroom supplies smoking cessation programs/products special auto equipment for the handicapped special school or home costs for the physically and mentally impaired spinal fluid tests splints sterilization surgeon and surgery telephone/TV for impaired therapy equipment transplants transportation expenses (relative to health care) tuition for child with learning disability ultra-violet ray treatment vaccines vasectomy

wheelchair

X-ray, MRI, CT and PET scans

premiums for long-term care

insurance \*\*\*

The Participant funding a Health Savings Account (HSA) will not request any item that would disqualify the Participant's HSA.

The West Plainfield Fire Protection District QSEHRA Plan document contains the general rules governing what expenses are reimbursable. This Schedule A, as referenced in the Plan document, specifies certain expenses that are reimbursable, if they meet the definition of "medical care" under Code Section 213 and may otherwise be reimbursable under IRS guidance pertaining to QSEHRAs.

<sup>\*</sup> In addition to unused account balances carried forward from prior Plan Years. The QSEHRA Account balance can never exceed the maximum allowed benefit.

<sup>\*\*\*</sup> It is specifically the Participants' responsibility regarding insurance premium reimbursement not to request anything that could violate the terms of their insurance policy or PPACA.

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#### Schedule B SCHEDULE OF INELIGIBLE EXPENSES

#### Medical Expenses That Are Not Reimbursable

advance payment for services rendered next year

athletic club membership

car insurance premium (medical portion)

boarding school fees and childcare

bottled water

commuting expenses of a disabled person

cosmetic surgery and procedures (unless related to accident, birth defect or disease)

cosmetics, hygiene products and similar items

diaper service

domestic help

employment related physical exam

funeral, cremation or burial expense

health programs offered by resort hotels, health clubs, and gyms

illegal operations and treatments

illegally procured drugs

infant formula

insurance premiums paid, pre-taxed or reimbursed through any other source, or any subsidized premiums

maternity clothes

premiums for life insurance, income protection, disability, loss of limbs, sight or similar benefits

Scientology counseling

social activities

special foods or beverages

specially designed car for the handicapped other than an autoette or special equipment

swimming pool

travel for general health improvement

tuition and travel expenses to send a problem child to a particular school

Dual Purpose Items / Items Not Typically Medically Necessary. Dual purpose products, items for general well-being, or items not typically medically necessary (such as Acupuncture, Supplements, Vitamins, Massage Therapy, Dermatology Products, and Weight Loss Programs) are excluded from reimbursement unless accompanied by a letter of medical necessity. The letter of medical necessity must be from a Physician and must include a diagnosis, duration of treatment, and description of treatment plan.

Monthly Limits on Reimbursing OTC Medical Care Items. Only reasonable quantities of over-the-counter (OTC) medical care items of the same kind may be reimbursed from a Participant's QSEHRA Account in a single calendar month; stockpiling is not permitted.

The West Plainfield Fire Protection District QSEHRA Plan document contains the general rules governing what expenses are reimbursable. This Schedule B, as referenced in the Plan document, specifies certain expenses that are not reimbursable, even if they meet the definition of "medical care" under Code Section 213 and may otherwise be reimbursable under IRS guidance pertaining to QSEHRAs.

#### Schedule C AFFILIATED COMPANIES

None





24901 County Road 95, Davis, CA 95616

(530) 756-0212

#### QUALIFIED SMALL EMPLOYER HEALTH REIMBURSEMENT ARRANGEMENT (QSEHRA)

Plan Effective Date - September 1, 2023; Revised and Restated Plan Effective Date - July 1, 2024

#### SUMMARY PLAN DESCRIPTION

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#### PLAN PURPOSE AND SPECIAL ACA NOTICE REQUIREMENTS

The purpose of the West Plainfield Fire Protection District Qualified Small Employer Health Reimbursement Arrangement Plan ("QSEHRA Plan") is to provide you with additional health coverage benefits. The benefits available under this Plan and other important information concerning the Plan, such as rules that must be satisfied before you become eligible and laws that protect your rights are outlined in this summary plan description.

This QSEHRA allows you to be reimbursed for allowable medical expenses up to the plan limits listed in Schedule A of the document entitled *Qualified Small Employer Health Reimbursement Arrangement (QSEHRA) Plan Questions and Answers*.

Allowable medical expenses (per IRS Publication 502) include, but are not limited to, qualifying health insurance premiums, co-pays, and deductibles and most dental and vision expenses.

The QSEHRA falls under the Affordable Care Act (ACA). This means that to participate, you must maintain "minimum essential" health insurance coverage" through the entire plan year. Failure to do so may result in tax implications and an ACA penalty.

Qualified reimbursements from a QSEHRA are not subject to income tax so long as "minimum essential" health insurance coverage is maintained and you meet certain other requirements. However, should you fail to maintain said coverage; reimbursements received under the QSEHRA may become taxable income to you and also result in a penalty under the ACA. Before your employer can release any funds to reimburse your qualifying medical expenses through the QSEHRA, you must provide proof of health insurance coverage.

Each year, you will be provided with a *QSEHRA Notice to Eligible Employees and Attestation for Initial/Annual Proof of MEC (IRS Notice 2017-67)*; you should read it each year. You will be required to submit a copy of the notice each year to qualify for coverage on the ACA exchange should you seek insurance through the exchange. If applying for an insurance policy on the ACA exchange, you must inform the exchange of your QSEHRA eligibility. If you are eligible for a premium subsidy through the exchange, the amount of that subsidy will be reduced by the amount available in your QSEHRA.

#### WHO IS ELIGIBLE

With respect to the HRA, if you are a full-time employee, regularly work 40 or more hours per week for the Company, and you have successfully completed the required Company training, you are eligible to participate in the QSEHRA Plan.

#### WHEN YOU MAY PARTICIPATE

You are eligible to participate in the Plan on the first day of the full month following completion of one day of active employment as an Eligible Employee.

#### **SCHEDULE OF BENEFITS**

The QSEHRA benefits allow you to be reimbursed for certain out-of-pocket medical expenses which are incurred by you and/or your dependents.

The maximum allowed benefit each year is \$4,800.00, plus unused amounts from prior Coverage Periods, if any. The maximum amount that can be carried forward to a later Coverage Period is 100% of your prior year's unused balance subject to the annual IRS limit. The QSEHRA Account balance can never exceed the maximum allowed benefit. Expenses are considered "incurred" when the service is performed, not necessarily when the expense is formally billed, charged, or paid for. Any amounts reimbursed to you under the Plan may not be claimed as a deduction on your personal income tax return nor reimbursed by other health plan coverage.

#### **HOW QSEHRA PLANS WORK**

Your Employer has set aside a specific amount of funds each Plan Year from which you may be reimbursed for eligible medical expenses that you have incurred during your Period of Coverage. Normally, you would pay for these expenses out of pocket, with your own after-tax income. The QSEHRA Account will only be a records-keeping account with the purpose of keeping track of contributions and available reimbursement amounts. Your Employer is funding the account, and as such, there should be no tax liability to you for qualified reimbursements received under the Plan.

To receive reimbursement, you must complete a claim form and submit it along with your paid bills or other substantiation of expenses to the Plan Administrator. The Plan Administrator will provide you with acceptable forms for submitting these requests for reimbursement. In addition, you must submit to the Plan Administrator proof of the expenses you have incurred and that they have not been paid by any other health plan coverage.

If the QSEHRA is accessible by an electronic payment card (e.g., debit card, credit card, or similar arrangement), you will be required to comply with substantiation procedures established by your Plan Administrator in accordance with IRS guidance. You must acquire and retain sufficient documentation to substantiate any expense paid with such electronic payment card.

Please review the list of eligible medical expenses provided on Schedule A, as well as the list of any ineligible expenses listed on Schedule B, of the document entitled *Qualified Small Employer Health Reimbursement Arrangement (QSEHRA) Plan Questions and Answers.* If your request qualifies as a benefit or expense that the Plan has agreed to pay, you will receive a reimbursement check soon thereafter up to the amount available in your QSEHRA account. It is specifically your responsibility regarding insurance premium reimbursement not to request anything that could violate the terms of your insurance policy.

You may submit expenses that you incur each "Coverage Period." A new "Coverage Period" begins each Plan Year.

IRS Notice 2010-38 states that the applicable Treasury Regulations have been amended as of March 30, 2010, to include Change in Status events covering children under age 27 who do not otherwise qualify as dependent children, including becoming newly eligible for coverage or eligible for coverage beyond the date on which the child otherwise would have lost coverage. Under health care reform, for Plan Years starting after September 23, 2010, group health plans that provide coverage for dependent children must continue to do so for unmarried and married children until age 26, regardless of student status. For plans already in existence on March 23, 2010, the age 26 limit only applies if the child is not eligible for other group coverage. This exception ends in 2014. Thereafter, children that are eligible for other coverage could remain on their parent's plan until age 26.

#### **COORDINATION WITH HEALTH SAVINGS ACCOUNT (HSA) PLANS**

Certain benefits of this QSEHRA Plan may prohibit HSA bank account eligibility. Employees contributing during the year to a Health Savings Account (HSA) can only elect a Limited Purpose QSEHRA or Post Deductible QSEHRA. The Limited Purpose QSEHRA option defines "Medical Care Expenses" as those expenses incurred by a Participant or his or her Spouse or Dependents for medical care, as defined in Code § 213(d)—provided, however, that such expenses are limited to vision care; dental care; preventive care; permitted insurance; and permitted coverage. Once the HSA Plan deductible has been met, "Medical Care Expenses" shall mean post deductible expenses incurred by a Participant and his or her Spouse or Dependents for medical care as defined in Code § 213(d). It is specifically the Employee's responsibility regarding QSEHRA reimbursements not to request anything that could violate the terms of the Employee's Health Savings Account (HSA).

#### COVERAGE FOR OVER-THE-COUNTER DRUGS AND OTHER PRODUCTS

The Coronavirus Aid, Relief and Economic Security (CARES) Act eliminated provisions that exclude the use of funds from HRAs to purchase over-the-counter drugs without a prescription. The CARES Act also allows tax-free funds from these accounts to pay for menstrual care

products. These changes apply to expenses that the Employee has incurred retroactive to January 1, 2020. This amendment will continue after December 31, 2020 for as long as allowed by law.

With the new law, eligible Employees are now able to purchase, or be reimbursed for, over-the-counter medications (examples: Tylenol, Motrin, cough suppressants; items that used to require a prescription) using your HRA without a prescription. In addition, any menstrual hygiene products (tampons, sanitary napkins, liners, etc.) may also be purchased or reimbursed using HRA funds with this new law. The law is retroactive to January 1, 2020, meaning any over-the-counter medications or menstrual products purchased since January 1, 2020 can be reimbursed from a Participant's HRA, if the expense has not already been reimbursed previously using a prescription benefit. An eligible Employee may begin to use their HRA funds for over-the-counter medications and menstrual hygiene products as of January 1, 2020. This new law also has no expiration date, meaning you may continue to purchase these items with HRA funds for the entire Plan Year and beyond. Employees with qualifying purchases on or after January 1, 2020 can submit a claim to be reimbursed from their HRA for over-the-counter medications not previously reimbursed with a prescription benefit, as well as menstrual hygiene products. You will need to provide a copy of your receipt that shows proof of purchase date and item purchased.

#### **FUTURE OF THE QSEHRA**

The Plan is based on the Employer's understanding of the current provisions of the Internal Revenue Code. The Employer reserves the right to amend or discontinue the Plan if regulations or changes in the tax law make it advisable to do so. If the Plan is amended or terminated, it will not affect any benefit to which you were entitled before the date of the amendment or termination.

### UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT (Applicable to Any Size Group)

A Participant who takes an unpaid leave of absence under the Uniformed Services Employment and Reemployment Rights Act of 1994 ("USERRA Leave") may revoke their election to participate under any group health insurance benefit offered under this Plan for the remainder of the Plan Year in which such leave of absence commences. Such revocation shall take effect in accordance with such procedures as prescribed by the Plan Administrator. Upon such Participant's return from their USERRA Leave, the Participant may be reinstated in the Plan on the same terms that applied to the Participant prior to their taking the USERRA Leave, and with such other rights to make enrollment changes as are provided to other Participants under the Plan.

Notwithstanding the foregoing, a Participant on USERRA Leave shall have no greater rights to benefits for the remainder of the Plan Year in which the USERRA leave commences than other Plan Participants.

#### NON-FMLA AND NON-USERRA LEAVES OF ABSENCE

A Participant who goes on a leave of absence that is not subject to FMLA or USERRA will be treated as having terminated participation.

#### **QUALIFIED MEDICAL CHILD SUPPORT ORDERS**

Generally, your Plan benefits may not be assigned or alienated; however, an exception applies in the case of a "qualified medical child support order." Basically, a qualified medical child support order is a court—ordered judgment, decree, order or property settlement agreement in connection

with state domestic relations law which either creates or extends the rights of an "alternate recipient" to participate in a group health plan, including this Plan or enforces certain laws relating to medical child support. An "alternate recipient" is any child of a Participant who is recognized by a medical child support order as having a right to enrollment under a Participant's group health plan. A medical child support order satisfies certain specific conditions to be qualified. The Plan Administrator will notify you if it receives a medical child support order that applies to you and the Plan's procedures for determining whether the medical child support order is qualified.

#### **ADMINISTRATIVE FACTS**

#### **Plan Sponsor and Administrator**

The Plan is sponsored by West Plainfield Fire Protection District, 24901 County Road 95, Davis, CA 95616 - Phone: (530) 756-0212. The West Plainfield Fire Protection District Federal Tax ID Number is 47-230326. The West Plainfield Fire Protection District, through the Fire Chief, also acts as Plan Administrator. The Plan Administrator manages the overall operations of the Plan and decides all questions that come to it on a fair and equitable basis for participants and their Beneficiaries. If an Employee covered under the Plan has any questions about the Plan, the Employee should contact the Plan Administrator.

#### **General Information**

West Plainfield Fire Protection District Qualified Small Employer Health Reimbursement Arrangement is the name of the Plan. The Plan was revised and restated on June 25, 2024, with an effective date of July 1, 2024.

Your Employer has assigned Plan Number 502 to this Plan. The Plan Year is January 1 to December 31.

#### **Service of Legal Process**

The Employer is the Plan's agent for service of legal process.

#### **Classification and Funding**

This Employee benefit is a Health Reimbursement Arrangement as defined by Section 105 of the Internal Revenue Code. This Health Reimbursement Arrangement is funded solely by the Employer.

#### Not a Contract of Employment

No provision of the Plan is to be considered a contract of employment between you and the Employer. West Plainfield Fire Protection District's rights with regard to disciplinary action and termination of any Employee, if necessary, are in no manner changed by any provision of the Plan.

#### **Your Privacy Rights**

The Health Insurance Portability and Accountability Act of 1996 (HIPAA), defines *Protected Health Information (PHI)* as information that is created or received by the Plan and relates to the past, present or future physical or mental health or condition of a participant; the provision of health care to a participant; or the past, present or future payment of the provision of health care to a participant; and that identifies the participant or for which there is a reasonable basis to believe the information can be used to identify the participant. Protected health information includes information of persons living or deceased.

The HIPAA definition of PHI applies to this plan and it restricts a Plan Administrator's use and disclosure of PHI. The Plan Administrator shall have access to PHI from the Plan only as permitted under this plan or as otherwise required or permitted by HIPAA, subject to the conditions of permitted disclosure and after obtaining written certification. The Plan may disclose PHI to the Plan Administrator, provided that the Plan Administrator uses or discloses the PHI for Plan administration purposes only. Plan Administration Purposes include administrative functions performed by the Plan Administrator on behalf of the Plan, such as, claims processing, auditing, and monitoring. The Plan may disclose to the Plan Administrator information on whether the individual is participating in the plan or is enrolled in, or has disenrolled from, the Plan.

With respect to PHI disclosed by the Plan to the Plan Administrator, the Plan Administrator shall:

- Not use or disclose the PHI other than is permitted or required by the Plan or by law.
- Not use or disclose the PHI for employment-related actions and decisions.
- Ensure that any agents, or subcontractors to whom PHI is provided, agrees to the same privacy restrictions and conditions that apply to the employer and the Plan Administrator.
- Report to The Plan any use or disclosure of PHI that is any violation of the HIPAA Privacy Rule.
- Make available PHI to comply with the HIPAA right to access in accordance with the law.
- Make its internal practices, books and records relating to the use and disclosure of PHI
  received from the Plan available to the Secretary of Health and Human Services for
  purposes of determining compliance by the Plan with HIPAA's privacy requirements.
- Return or destroy all PHI received from the Plan that the Employer or Plan Administrator still maintains in any form and retain no copies of such information when no longer needed for the purpose for which disclosure was made, if feasible.
- Satisfy the requirement of adequate separation between the Plan and the Employer.
- The Employer shall allow the Fire Chief, and no other persons, access to PHI. The Fire Chief shall only have access to and use PHI to the extent necessary to perform the Health Reimbursement Arrangement Plan administration functions that the Plan Administrator performs for the Plan. If the Fire Chief does not comply with the provisions of this Section, they shall be subject to disciplinary action by the Employer for non-compliance pursuant to the Employer's Employee discipline and termination procedures.

#### **ERISA Rights Statement**

The Employee Retirement Income Security Act of 1974 (ERISA) was enacted to help assure that all employer-sponsored group benefit programs conform to standards set by Congress. An Employee who is a Participant in the Plan is entitled to certain rights and protections under ERISA which provides that all Participants will be entitled to: (1) examine, without charge, at the Plan Administrator's office and at other appropriate locations, all Plan documents and copies of documents filed with the U.S. Department of Labor, such as detailed annual reports and Plan descriptions; (2) obtain copies of all Plan documents and other Plan information upon written request to the Plan Administrator, subject to a reasonable charge for the copies; and (3) receive a summary of the Plan's annual financial report. The Plan Administrator is required by law to furnish each Participant with a copy of this summary annual report. Plan records are kept on a Plan Year basis.

In addition to creating rights for Plan Participants, ERISA imposes duties upon those responsible for the operation of the Plan who are called "fiduciaries" and who have a duty to operate the Plan prudently and in the interest of Participants and Beneficiaries. If a claim for a benefit is denied in

whole or in part, the claimant must receive a written explanation of the reason for the denial. The claimant has the right to have the claim reviewed and reconsidered.

Under ERISA, there are steps the Employee covered under the Plan can take to enforce the above rights. For instance, if the person requests materials and does not receive them within 30 days, the person may file suit in a federal court. In such a case, the court may require the Company to provide the materials and pay the person up to \$110 a day until the person receives the materials, unless the materials were not sent because of reasons beyond the Employer's control.

If a person has a claim for benefits which is denied or ignored, in whole or in part, the person may file suit in a state or federal court. If the Plan fiduciaries misuse the Plan's money, or if the Employee covered under the Plan is discriminated against for asserting his or her rights, the person may seek assistance from the U.S. Department of Labor, or may file suit in federal court. The court will decide who should pay court costs and legal fees. If the claimant loses, the court may order the claimant to pay these costs and fees, for example, if it finds the claims to be frivolous.

If you have any questions about the Plan, you should contact the Plan Sponsor. If you have any questions about this statement or about your rights under ERISA, you should contact the nearest office of the Pension and Welfare Benefits Administration (PWBA), U.S. Department of Labor, listed in your telephone directory, or the Division of Technical Assistance and Inquiries, Pension and Welfare benefits Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

The rights reserved in the Plan for the Plan Sponsor to terminate, suspend, withdraw, amend or modify the Plan in whole or in part at any time, are subject to the applicable provisions of the Plan.

Special Note: This is a Summary Plan Description only. Your specific rights to benefits under the Plan are governed solely, and in every respect by the West Plainfield Fire Protection District Health Reimbursement Arrangement Plan document, a copy of which is available from the company upon your request (see Statement of ERISA Rights). If there is any discrepancy between the description of the Plan as contained in this material and the official Plan document, the language of the Plan document shall govern.



24901 County Road 95, Davis, CA 95616

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#### QUALIFIED SMALL EMPLOYER HEALTH REIMBURSEMENT ARRANGEMENT (QSEHRA) PLAN QUESTIONS AND ANSWERS

#### INTRODUCTION

As a part of our efforts to keep your medical benefit costs as affordable as possible, West Plainfield Fire Protection District (referred to in these questions and answers as the "Company"), is pleased to sponsor the West Plainfield Fire Protection District Qualified Small Employer Health Reimbursement Arrangement (QSEHRA).

The Plan provides each Eligible Employee with the opportunity to receive from the Company reimbursement for specific medical expenses.

Following are commonly asked questions and answers describing the basic features of the Plan and how it operates. Please review these questions and answers carefully, and do not hesitate to ask questions. This is your benefit and it is important that you understand how it works and how it can help you. However, you should note that the questions and answers address only the key parts of the Plan. Consult the Plan document or summary plan description for more details.

#### **QUESTIONS AND ANSWERS**

#### 1. What is the purpose of the Plan?

The QSEHRA allows you to be reimbursed for allowable medical expenses up to the plan limits listed in Schedule A.

The QSEHRA falls under the Affordable Care Act (ACA). This means that to participate, you must maintain "minimum essential" health insurance coverage" through the entire plan year. Failure to do so may result in tax implications and an ACA penalty.

Reimbursements from a QSEHRA are not subject to income tax so long as "minimum essential" health insurance coverage is maintained. However, should you fail to maintain said coverage, reimbursements received under the QSEHRA may become taxable income to you and also result in a penalty under the ACA. Before your employer can release any funds to reimburse your qualifying medical expenses through the QSEHRA, you must provide proof of health insurance coverage.

Each year, you will be provided with a *QSEHRA Notice to Eligible Employees and Attestation for Initial/Annual Proof of MEC (IRS Notice 2017-67);* you should read it each year. You will be required to submit a copy of the notice each year to qualify for coverage on the ACA exchange should you seek insurance through the exchange. If applying for an insurance policy on the ACA exchange, you must inform the exchange of your QSEHRA eligibility. If you are eligible for a premium subsidy through the exchange, the amount of that subsidy will be reduced by the amount available in your QSEHRA.

Qualified Small Employer Health Reimbursement Arrangement (QSEHRA) Plan Questions and Answers Page 2

#### 2. What benefits are offered through the Plan?

A QSEHRA, which is explained in more detail below.

#### 3. Who may participate in the Plan?

With respect to the QSEHRA, if you are a full-time employee, regularly work 40 or more hours per week for the Company, and you have successfully completed the required Company training, you are eligible to participate in the QSEHRA Plan.

#### 4. How does the QSEHRA benefit help me?

It is likely that you will have some medical expenses that you will have to pay for in the coming year. For example, you or your dependents may have insurance premiums or medical expenses that are subject to deductible or co-payment limits under a health plan. You may incur expenses that are not reimbursed at all. Normally, you would pay for these expenses with out of pocket, after-tax income. And, because taxes reduce the value of a dollar, you would have to earn more than \$100 to pay for \$100 of expenses.

The QSEHRA under the Plan permits your Employer to contribute to a health reimbursement arrangement account on your behalf. The QSEHRA will reimburse you for specific medical expenses from funds contributed by your Employer.

#### 5. How much will my employer contribute to my QSEHRA account?

Your Employer will contribute a maximum amount outlined in Schedule A of the Summary Plan Description, plus unused amounts from prior Coverage Periods, if any. The maximum amount that can be carried forward to a later Coverage Period is 100% of your prior year's unused balance subject to the annual IRS limit. The QSEHRA Account balance can never exceed the maximum allowed benefit.

#### 6. How much will I be able to contribute to my QSEHRA account?

Employees are not permitted to contribute to their QSEHRA accounts. The accounts must be completely Employer funded.

#### 7. What is an "eligible expense" under the QSEHRA?

An "eligible expense" means any item covered under Code Section 213 of the IRS for which you have not otherwise been reimbursed from insurance or some other source, or any items that have been excluded from reimbursement by the Employer. Participants who are enrolled in HSA Plans will have three QSEHRA options with limited "eligible expenses" as explained in this Summary Plan Description. It is specifically the Employee's responsibility regarding insurance premium reimbursement not to request anything that could violate the terms of the Employee's insurance policy. It is specifically the Employee's responsibility regarding QSEHRA reimbursements not to request anything that could violate the terms of the Employee's Health Savings Account (HSA).

Schedules A and B of your Summary Plan Description list the types of expenses that are included and excluded as eligible expenses for your plan.

#### 8. How do I receive medical expense reimbursements under the Plan?

To receive a reimbursement for an eligible expense, you must complete a claim form and attach any other information or substantiation that the Plan Administrator requires. The Plan Administrator will instruct you as to how to file the form. When the claim is approved, you will be

Qualified Small Employer Health Reimbursement Arrangement (QSEHRA) Plan Questions and Answers Page 3

reimbursed for your eligible medical expense, up to the amount of funds available in your QSEHRA account.

**9.** What happens to the money in my QSEHRA account if I terminate my employment? You may submit claims for expenses incurred before the date of your termination, up until three months after you leave, unless your employer provides otherwise.

#### 10. What happens to the unused funds in my QSEHRA account at the end of the Plan Year?

Your employer will allow 100% of the unused funds in your account to roll over to the next Plan Year. However, the QSEHRA Account balance can never exceed the maximum allowed benefit.

#### 11. How long do I have after the Plan Year ends to submit my claims?

You will have three months after the Plan Year ends to submit claims on expenses incurred in that Plan Year, unless you terminate your employment. A terminated Employee has three months from their date of termination to submit claims incurred in that Plan Year.

#### 12. Are my Plan benefits taxable?

Under current law and provided all applicable requirements are met, the qualified benefits you receive under the Plan are not currently taxable to you, nor are the benefits subject to federal income tax withholding and Social Security withholding taxes.

#### 13. Can I change my covered dependents during the Plan Year?

Yes, you may make changes under your QSEHRA account during the Coverage Period.

#### 14. Who holds the funds that are set aside under the Plan?

Amounts your Employer contributes to your QSEHRA will be retained by the Company. Separate bookkeeping entries will be maintained to keep track of your QSEHRA benefits and such benefits shall be fully funded.

#### 15. When will my participation in the Plan cease?

Your participation will continue until you separate from service with the Company; no longer meet the definition of Eligible Employee; or if the Plan is terminated by your Employer.

#### 16. Will I have any administrative costs under the Plan?

No, the Company will pay the entire cost of administering the Plan.

#### 17. How long will the Plan remain in effect?

The Company has the right to modify or terminate the program at any time, or to elect not to continue sponsorship of the Plan.

# **18.** Will the claims information I submit to my plan administrator be kept private? Yes, the HIPAA Privacy Rules require that all Protected Health Information (PHI) given to the Plan Administrator be kept completely confidential.

#### 19. Will I be able to file claims for over-the-counter drugs from the HRA?

Effective January 1, 2020 the Coronavirus Aid, Relief and Economic Security (CARES) Act law allows eligible Employees to purchase, or be reimbursed for, over-the-counter medications (examples: Tylenol, Motrin, cough suppressants; items that used to require a prescription) using

Qualified Small Employer Health Reimbursement Arrangement (QSEHRA) Plan Questions and Answers Page 4

your HRA without a prescription. In addition, any menstrual hygiene products (tampons, sanitary napkins, liners, etc.) may also be purchased or reimbursed using HRA funds with this new law.

The law is retroactive to January 1, 2020, meaning any over-the-counter medications or menstrual products purchased since January 1, 2020 can be reimbursed from a Participant's HRA, if the expense has not already been reimbursed previously using a prescription benefit.

#### 20. What happens if my claim for benefits is denied?

If your claim for benefits is denied, then you have the right to be notified of the denial and to appeal the denial, both within certain time limits. The rules regarding denied claims for benefits under the QSEHRA Plan are discussed below.

#### A. When must I receive a decision on my claim?

You are entitled to notification of the decision on your claim within 30 days after the Plan Administrator's receipt of the claim. This 30-day period may be extended by an additional period of up to 15 days if the extension is necessary due to conditions beyond the control of the Administrator. The Administrator is required to notify you of the need for the extension and the time by which you will receive a determination on your claim.

If the extension is necessary because of your failure to submit the information necessary to decide the claim, then the Administrator will notify you regarding what additional information you are required to submit, and you will be given at least 45 days after such notice to submit the additional information. If you do not submit the additional information, the Administrator will make the decision based on the information that it has.

#### B. What information will a notice of denial of a claim contain?

If your claim is denied, the notice that you receive from the Administrator will include the following information:

- The specific reason for the denial;
- A reference to the specific QSEHRA Plan provision(s) on which the denial is based;
- A description of any additional material or information necessary for you to perfect your claim and an explanation of why such material or information is necessary;
- A description of the QSEHRA Plan's review procedures and the time limits applicable to such procedures, including a statement of your right to bring a civil action under ERISA § 502(a) following a denial on review; and
- If the Administrator relied on an internal rule, guideline, protocol, or similar criteria in making its determination, either a copy of the specific rule, guideline, or protocol, or a statement that such a rule, guideline, protocol, or similar criterion was relied upon in making the determination and that a copy of such rule, guideline, protocol, or similar criterion will be provided to you free of charge upon request.

#### C. Do I have the right to appeal a denied claim?

Yes, you have the right to appeal the Plan Administrator's denial of your claim.

#### D. What are the requirements of my appeal?

Your appeal must be in writing, must be provided to the Plan Administrator, and must include the following information:

- Your name and address;
- The fact that you are disputing a denial of a claim or the Administrator's act or omission;
- The date of the notice that the Administrator informed you of the denied claim;
   and
- The reason(s), in clear and concise terms, for disputing the denial of the claim or the Administrator's act or omission.

You should also include any documentation that you have not already provided.

#### E. Is there a deadline for filing my appeal?

Yes. Your appeal must be delivered to the Administrator within 180 days after receiving the denial notice or the Administrator's act or omission.

If you do not file your appeal within this 180-day period, you lose your right to appeal.

Your appeal will be heard and decided by the Committee.

#### F. How will my appeal be reviewed?

Any time before the appeal deadline, you may submit copies of all relevant documents, records, written comments, and other information to the Committee. The QSEHRA Plan is required to provide you with reasonable access to and copies of all documents, records, and other information related to the claim. When reviewing your appeal, the Administrator will take into account all relevant documents, records, comments, and other information that you have provided with regard to the claim, regardless of whether or not such information was submitted in the initial determination.

The appeal determination will not afford deference to the initial determination and will be conducted by a fiduciary of the QSEHRA Plan who is neither the individual who made the original determination nor an individual who is a subordinate of the individual who made the initial determination.

#### G. When will I be notified of the decision on my appeal?

The Committee must notify you of the decision on your appeal within 60 days after receipt of your request for review.

#### H. What information is included in the notice of the denial of my appeal?

If your appeal is denied, the notice that you receive from the Committee will include the following information:

- The specific reason for the denial upon review;
- A reference to the specific QSEHRA Plan provision(s) on which the denial is based:
- A statement providing that you are required to receive, upon request and free of charge, reasonable access to and copies of all documents, records, and other information relevant to your claim for benefits;
- If an internal rule, guideline, protocol, or similar criterion was relied upon in making the review determination, either the specific rule, guideline, or protocol, or a

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statement that such a rule, guideline, protocol, or similar criterion was relied upon in making the review determination and that a copy of such rule, guideline, protocol, or similar criterion will be provided to you free of charge upon request; and

• A statement of your right to bring a civil action under ERISA § 502(a).

No action may be brought against the Plan, the Employer, the Plan Administrator, or any other entity to whom administrative or claims processing functions have been delegated until you first follow the above claim procedures and receive a final determination from the Plan Administrator.

#### I. Can I request an external review of the denial of my claim?

If the denial of your claim is not related to your (or your beneficiary's) failure to meet the requirements for eligibility under the terms of your employer's QSEHRA, you may be eligible to request an external review. View current procedures and timeline relevant to the external review request at <a href="http://www.dol.gov/ebsa">http://www.dol.gov/ebsa</a> or call the Employee Benefits Security Administration, 866-444 EBSA (3272).



Exhibit A – Schedule of Benefits and Eligible Expenses

#### Schedule A SCHEDULE OF BENEFITS AND ELIGIBLE EXPENSES

#### **Medical Expenses That Are Reimbursable**

West Plainfield Fire Protection District will reimburse each Eligible Employee up to \$400.00 monthly\*, and for Employee and Eligible Dependents up to \$400.00 monthly\* for any IRC 213(d) out-of-pocket medically necessary expense including, but not limited to, the following types of expenses:

guide dog (or other service animal) premiums for hospital and other fixed abdominal supports abortion (legal) gynecologist indemnity insurance plans\*\* alcoholism treatment health plan coinsurance, co-pays, and premiums for voluntary federal deductibles Medicare insurance\*\*\* ambulance anesthetist hearing aids and batteries prenatal care, postnatal treatments artificial limbs heating devices (if therapeutic) prescription drugs & medicines back supports hospital bills and meals prosthesis birth control pills and other hydrotherapy psychiatrist psychoanalyst contraceptive devices (by infertility treatment prescription) insulin treatments psychologist blood pressure monitor invalid chair psychotherapy blood tests and transfusions braces lab tests and fees radium therapy Braille Books & Magazines (extra cost over the counter medication registered nurses only) over the counter items sickroom supplies breathing strips obstetrician, pediatrician smoking cessation programs/products cardiographs oculist/ophthalmologist chiropractor operating room costs special auto equipment for the composite (white) fillings optician/optometrist handicapped contact lenses/eyeglasses oral surgery special school or home costs for the organ transplant (including donor's corrective eye surgery (Lasik, RK, physically and mentally impaired expenses) spinal fluid tests cosmetic surgery (only if related to orthopedic shoes splints accident, birth defect or disease) orthopedist sterilization cost / maintenance of health-related osteopath surgeon and surgery oxygen and oxygen equipment telephone/TV for impaired home improvements physician therapy equipment crutches dental treatments physiotherapist transplants transportation expenses (relative to diagnostic fees podiatrist practical nurse for medical services diathermy health care) exercise equipment (by prescription) premiums for eligible free-choice tuition for child with learning disability medical plan, subject to PPACA\*\*\* fees paid to health institute prescribed ultra-violet ray treatment by doctor premiums for dental or vision vaccines FICA and FUTA tax paid for medical insurance vasectomy premiums for long-term care care service. wheelchair first aid kit, gauze, bandages X-ray, MRI, CT and PET scans insurance \*\*\*

The Participant funding a Health Savings Account (HSA) will not request any item that would disqualify the Participant's HSA.

The West Plainfield Fire Protection District QSEHRA Plan document contains the general rules governing what expenses are reimbursable. This Schedule A, as referenced in the Plan document, specifies certain expenses that are reimbursable, if they meet the definition of "medical care" under Code Section 213 and may otherwise be reimbursable under IRS guidance pertaining to QSEHRAs.

<sup>\*</sup> In addition to unused account balances carried forward from prior Plan Years. The QSEHRA Account balance can never exceed the maximum allowed benefit.

<sup>\*\*\*</sup> It is specifically the Participants' responsibility regarding insurance premium reimbursement not to request anything that could violate the terms of their insurance policy or PPACA.

# Schedule B SCHEDULE OF INELIGIBLE EXPENSES

#### Medical Expenses That Are Not Reimbursable

advance payment for services rendered next year athletic club membership car insurance premium (medical portion) boarding school fees and childcare bottled water

commuting expenses of a disabled person

cosmetic surgery and procedures (unless related to accident, birth defect or disease)

cosmetics, hygiene products and similar items

diaper service

domestic help

employment related physical exam

funeral, cremation or burial expense

health programs offered by resort hotels, health clubs, and gyms

illegal operations and treatments

illegally procured drugs

infant formula

insurance premiums paid, pre-taxed or reimbursed through any other source, or any subsidized premiums

maternity clothes

premiums for life insurance, income protection, disability, loss of limbs, sight or similar benefits Scientology counseling

social activities

special foods or beverages

specially designed car for the handicapped other than an autoette or special equipment swimming pool

travel for general health improvement.

tuition and travel expenses to send a problem child to a particular school

Dual Purpose Items / Items Not Typically Medically Necessary. Dual purpose products, items for general well-being, or items not typically medically necessary (such as Acupuncture, Supplements, Vitamins, Massage Therapy, Dermatology Products, and Weight Loss Programs) are excluded from reimbursement unless accompanied by a letter of medical necessity. The letter of medical necessity must be from a Physician and must include a diagnosis, duration of treatment, and description of treatment plan.

Monthly Limits on Reimbursing OTC Medical Care Items. Only reasonable quantities of over-the-counter (OTC) medical care items of the same kind may be reimbursed from a Participant's QSEHRA Account in a single calendar month; stockpiling is not permitted.

The West Plainfield Fire Protection District QSEHRA Plan document contains the general rules governing what expenses are reimbursable. This Schedule B, as referenced in the Plan document, specifies certain expenses that are not reimbursable, even if they meet the definition of "medical care" under Code Section 213 and may otherwise be reimbursable under IRS guidance pertaining to QSEHRAs.

Procedure Manual

## **Leaves and Absences - Career Staff**

#### 1005.1 SCOPE

This section shall cover the procedures utilized to request, and provide coverage, for career staff (hereinafter also referred to as "employee") leave requests. The Fire Chief reserves the right to manage staffing in the best interest of the West Plainfield Fire Protection District.

#### 1005.2 VACATION AND HOLIDAY LEAVE

Vacation requests shall be submitted every six (6) months, utilizing the following procedures and guidelines.

#### 1005.2.1 SOLICITATION FOR VACATION AND HOLIDAY LEAVE REQUESTS

The Fire Chief, or designee, shall send out to the career Fire Captains ("class") a first-round solicitation for vacation / holiday requests at or around four (4) months prior to the upcoming period, with the first round being sent:

- (a) September 1 for leave during the period January through June
- (b) April 1 for leave during the period July through December

A total of three rounds of solicitation for vacation / holiday requests shall be sent out.

The same procedure shall be followed for soliciting career Firefighter ("class") vacation / holiday requests.

In each round, the solicitation shall be sent to the most senior employee first, then to the next most senior employee. NOTE: seniority shall be determined by length of service or, in the event multiple employees share the same service length, then by interview ranking in that group. For example only: Employee 1 has been with the Department for 2 years and 1 month and Employees 2-3 have been with the Department for 1 year. Employee 3 ranked higher than Employee 2 in the interview process; therefore, the solicitation shall be sent in the following order: Employee 1, Employee 3, Employee 2.

Each employee shall print the provided calendar pages, indicate their desired leave dates, and scan and return the form to the Fire Chief, or designee. The solicitation and calendar shall then be sent to the next most senior employee as determined above until all employees have had a chance to request vacation / holiday leave dates in a particular round and until three (3) rounds of solicitation have occurred for any given upcoming period. Each employee shall return their requested dates no later than the end of the employee's second set following distribution of the solicitation to the employee. If an employee chooses not to request any dates, the employee shall return the calendar to the Supervisor with a note in the email that they are not requesting any/ further dates.

1005.2.2 GUIDELINES FOR CHOICE OF DATES FOR VACATION AND HOLIDAY LEAVE DURING SOLICITATION ROUNDS

When requesting dates:

Procedure Manual

#### Leaves and Absences - Career Staff

- No one employee may request more than one holiday off in a round and holidays are defined as:
- New Year's Day
- President's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Day After Thanksgiving Day
- Christmas
- Each employee is limited to 4 contiguous shifts (or 2 sets).
- 3. Single-shift leave requests are prohibited in the first and second rounds.
- 4. The third round of solicitations for vacation or holiday leave requests has no additional limitations.

#### 1005.2.3 VACATION AND HOLIDAY LEAVE APPROVAL GUIDELINES

Whether scheduled during the solicitation rounds or otherwise, when approving leave the following shall be considered:

- 1. Overlap of leave requests
- 2. Any other known scheduling issues (i.e., extended sick or military leave).

Generally, only one employee in each class shall be awarded vacation or holiday leave in a shift schedule (A1, A2, B1, B2, C1, C2).

#### 1005.3 SICK LEAVE

The Fire Chief, or designee, shall be responsible for scheduling and approving sick leave.

If the need for paid sick leave is foreseeable, the employee shall provide reasonable advance notification. If the need for paid sick leave is unforeseeable, the employee shall provide notice of the need for the leave as soon as practicable.

An employee not reporting to work pursuant to this section shall advise the Fire Chief. Whenever possible, the employee is encouraged to make such notification the night before the employee's shift to ensure the shift is covered. Such notification shall be made by a telephone call during which the employee and the Fire Chief speak to one another. If the employee is unable to speak to the Fire Chief by telephone, and after trying all available telephone numbers for such individual, then the employee shall telephone the Assistant Chief of Operations to report their illness and absence. Due to the unreliable nature of electronic forms of communication, in all cases the employee shall have a telephone conversation with the Fire Chief or the Assistant Chief of Operations regarding

Procedure Manual

#### Leaves and Absences - Career Staff

their absence. Leaving a phone message or voicemail, or sending an email or text, is not an adequate method of reporting an illness and intended absence from work.

The Fire Chief shall indicate a sick leave day or hours on the shift calendar. The employee shall note such hours on their timesheet.

#### 1005.4 BEREAVEMENT LEAVE

The Fire Chief, or designee, shall be responsible for scheduling and approving <u>bereavement</u> <u>compassionate</u> leave.

The employee shall provide as much notice as possible to the Fire Chief. The Fire Chief shall indicate a <u>bereavement</u> leave day or hours on the shift calendar. The employee shall note such hours on their timesheet as "sick leave".

# 1005.5 APPEARANCE FOR SUBPOENA REGARDING DISTRICT OR DEPARTMENT MATTERS

The employee shall notify the individual responsible for scheduling and approving sick leave. Such individual shall indicate leave for appearances on the shift calendar. The employee shall note such hours on their timesheet, including travel time and mileage.

The employee shall report by telephone daily regarding their anticipated completion date/return to work.

#### 1005.6 FILING STAFFING VACANCIES; MANDATORY OVERTIME

In the event of an identified staffing vacancy the Fire Chief, or designee, will fill the vacancy utilizing the following guidelines:

#### 1005.6.1 NOTIFIED MORE THAN 48 HOURS BEFORE SCHEDULED SHIFT

If receipt of notice of the vacancy occurs more than 48 hours before the start of the scheduled shift, then the Fire Chief will send out a notification to all on-call staff, full-time career staff, and part-time staff advising of the need for coverage, including the date and hours to be covered. A second request shall be sent out not more than 24 hours, nor sooner than 4 hours, following the first notification, indicating that it is the second notification. One hour after the second notification the open position may be filled. Notwithstanding the preceding, additional notifications, as necessary and as time permits, may be sent out.

#### 1005.6.2 NOTIFIED LESS THAN 48 HOURS BEFORE SCHEDULED SHIFT

If receipt of notice of the vacancy occurs less than 48 hours before the start of the scheduled shift, then the Fire Chief will send out a notification to on-call staff, full-time career staff, and part-time career staff advising of the need for coverage, including the date and hours to be covered. A second request will be sent no sooner than an hour later, indicating that it is the second notification. One-half hour after the second notice the open position may be filled.

Procedure Manual

#### Leaves and Absences - Career Staff

1005.6.3 DETERMINING PRIORITY OF MEMBERS FOR OVERTIME AWARD The Fire Chief, or designee, shall maintain four (4) overtime opportunity lists:

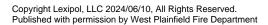
- (a) On-Call Staff (on-call driver/operator, on-call firefighter)
- (b) Full-time Career Staff
- (c) Part-time Career Staff
- (d) Full-time Career Staff Mandatory

Shifts will be filled from the On-Call Staff list first. If no member of the On-Call Staff list has offered to work the vacant shift, then an available member from the Full-time Career Staff list shall be awarded the shift; etc.

In the event multiple members from the same list offer to work a vacant shift, the member at the top of that list shall be awarded the shift.

Except in the case of mandatory overtime, once a member is awarded and has worked more than 8 hours to fill a vacant shift, such member's name shall be moved to the bottom of the appropriate list; forced overtime of 4 hours or greater shall move the member to the bottom of the Full-time Career Staff – Mandatory list. A Part-time Career Staff member may be forced to fill a shift in the event no other option is available.

NOTE: A member will not be subject to mandatory hire if such member has previously scheduled time off already approved by the Fire Chief.



### Special Districts and Other Agencies Authorization Form - FY 2024-2025

COUNTY OF Y	OLO .								Fund:	8061
DEPARTMENT OF FINANCIAL SERVICES							District Name:	West Plainfield Fire Protection District		
P.O. BOX 1268	В								Address:	24901 CR 95, Davis, CA 95616
WOODLAND,	CA 95776								Phone numbe	r: (530) 756-0212
(530) 666-8190								Contact:	Board Clerk	
(****, *****										
1	3	5	7	8	9			1		
PICK UP GENERAL	GENERAL CLAIMS	DEPOSIT APPRVL.	JE/TSF DOC.	BUDGET MOD.						AUTHORIZED SIGNATURE OF EMPLOYEE
CHECKS	APPRVL	AFFIXVE.	APPRVL	APPRVL						OI LIVIFEOTEL
									Signature:	
х	×	X		×					Dist	Lawrence M. Mallana Communication on
									Print: Signature:	James McMullen, Commissioner
x	х	×		x					Oignaturo.	
									Print:	Warren Roos, Commissioner
x	X	x	x	х					Signature:	
^	^	^	^	^					Print:	Beth Stiles, Commissioner
									Signature:	
х		X		х						
									Print: Signature:	Emily Amy, Commissioner
×	×	×		×					Signature.	
									Print:	John Lindsey, Commissioner
									Signature:	
×	×	×	Х						Print:	Kytiana Sayer-Peterson, Board Clerk
									Signature:	Nytiana Sayer-r eterson, board Clerk
x	×	x	×							
									Print:	Cherie Rita, Fire Chief
×		×							Signature:	
									Print:	Dave Stiles, Assistant Chief
	The nersons li	sted above are	authorized to	nerform the abo	ve duties on h	ehalf of our go	verning			
	board as appre	oved in our Min	utes recorded	at a regular dis	trict meeting.	enan or our go	verning			
	• • • • • • • • • • • • • • • • • • • •			ū	J					
		6/25/2024	-					6/25/2024	_	
Board Vice Presi	dent Signature	Date		Board Member S	ignature			Date		
Warren Roos				Emily Amy						
Print Name:		_		Print Name:				<del></del>		
		0/05/0004						0.05.005		
Board Member S	signature:	6/25/2024 Date		Board Member S	ignature			6/25/2024 Date	<u>—</u> ,	
	· ·				•					
Beth Stiles		=		John Lindsey						
Print Name:				Print Name:						

Policy Manual

## **Compensated Leave**

#### 1039.1 PURPOSE AND SCOPE

Best Practice MODIFIED

This policy provides general guidance regarding the accrual and use of compensated leave. Additional terms for the use of compensated leave for eligible employees may be covered elsewhere in this Policy Manual, in the District employee handbook, or in any applicable collective bargaining agreement. See also Procedure 1005 - Leaves and Absences - Career Staff.

This policy is not intended to cover all types of sick or other leaves. For example, employees may be entitled to additional paid or unpaid leave for certain family and medical reasons as addressed in the Family and Medical Leave Policy.

#### 1039.2 DEFINITIONS FOR PURPOSES OF THIS POLICY

#### Agency Content

- Full-time career staff this is a member who is regularly scheduled to work shifts (also known as a 56-hour employee)
- Part-time staff this is a member who typically works less than 30 hours per week on a set schedule
- On-Call staff (formerly Relief Staff) this is a member who covers shifts or portions of a shift and who is not ordinarily scheduled to work shifts; this member is not required to accept shift assignments and is not required to remain available for possible assignment
- Reserve firefighter this is a member who may work a shift or partial shift as required by other provisions in this Manual; this member is not entitled to compensation, but rather a set reimbursement amount for each shift or partial shift worked
- Volunteer firefighter this is a member who receives pay-per-call reimbursement
- Employee this is a member who is entitled to certain leave and other benefits as required by law or regulation
- Member also identified as "employee"
- Shift is a 24-hour period beginning at 0700 hours
- Set is two consecutive shifts
- Week / Pay period a week or pay period begins at 0700 hours on a Sunday

#### 1039.3 POLICY

Best Practice MODIFIED

It is the policy of the West Plainfield Fire Department to provide eligible employees with the following compensated-leave benefits and as may be provided in the California Healthy Workplaces, Healthy Families Act of 2014 (Labor Code §§ 245 - 249):

Policy Manual

#### Compensated Leave

- (a) Sick Leave
- (b) Vacation Leave
- (c) Holiday Leave
- (d) Bereavement Leave

#### **1039.4 SICK LEAVE**

#### Best Practice MODIFIED

Sick leave is intended to be used for qualified absences. Sick leave is not considered vacation. Abuse of sick leave may result in discipline, denial of sick-leave benefits, or both.

Employees on sick leave shall not engage in other employment or self-employment or participate in any sport, hobby, recreational activity, or other activity that may impede recovery from the injury or illness.

Qualified appointments should be scheduled during a member's non-working hours when it is reasonable to do so.

#### 1039.4.1 SICK LEAVE ACCRUAL

#### Agency Content

Employees shall at a minimum accrue sick leave as described in Labor Code § 246. Employees should contact the Fire Chief with questions regarding accrual of time (Labor Code § 246).

Sick leave accrues as follows:

- Full-time career staff members accrue 11.2 hours of sick leave per month (134.4 hours per year), with a 1,344-hour cap [Labor Code § 246(b)(4)]
- Part-time staff members accrue 3 hours of sick leave per pay period up to 48 hours per year, with a 480-hour cap [Labor Code § 246(b)(3)]
- On-call staff, reserve firefighters, volunteer firefighters, and the Board Clerk shall earn 40 hours of sick leave per year, all 40 of which shall be earned and credited at the member's start date and annually on each July 1 thereafter, the start of the District's fiscal year; unused sick leave for these members shall not roll over to the next fiscal year [Labor Code § 246(d)]

Sick leave begins to accrue at the member's start date, unless otherwise noted above. Unused sick leave shall NOT be paid out at separation.

**NOTE**: Sick leave with pay shall not be granted for illness or injury for which Worker's Compensation benefits are available.

#### 1039.4.2 SICK LEAVE USE

#### Agency Content

As provided in Labor Code § 246.5, paid sick days shall be provided for the following purposes:

 Diagnosis, care, or treatment of an existing health condition of, or preventive care for, an employee or an employee's family member [Labor Code § 245.5(c)]

Policy Manual

#### Compensated Leave

 For an employee who is a victim of domestic violence, sexual assault, or stalking, the purposes described in subdivision (c) of Section 230 and subdivision (a) of Section 230.1 of the Labor Code

An employee may identify one "designated person" per 12-month period (July 1 through June 30) for paid sick leave use [Labor Code § 245.5(c)(8)].

An employee who becomes ill while on vacation leave as provided herein may request that their vacation leave hours be converted to sick leave hours; the employee shall provide evidence in the form of a physician's certificate.

#### 1039.4.3 EXTENDED SICK LEAVE ABSENCE

#### Agency Content

Members absent from duty for more than three consecutive days may be required to furnish a statement from a health care provider supporting the need to be absent and/or the ability to return to work. Members on an extended absence shall, if possible, contact the Fire Chief at specified intervals to provide an update on their absence and expected date of return.

Nothing in this section precludes the Fire Chief from requiring, with cause, a health care provider's statement for an absence of three or fewer days after the first three days of paid sick leave are used in a 12-month period.

#### 1039.5 VACATION LEAVE

#### Agency Content

Vacation leave accrues as follows:

- Full-time career staff accrue vacation as follows:
  - Years 0-3 @ 5.5 hours per pay period (144 hours per year or 6 shifts)
  - Years 4-8 @ 7.4 hours per pay period (192 hours per year or 8 shifts)
  - Years 9 and above @ 9.2 hours per pay period (240 hours per year or 10 shifts)
  - Caps as follows:
    - Years 0-3 @ 244 hours
    - Years 4-8 @ 384 hours
    - Years 9 and above @ 480 hours
- Part-time staff members accrue 4 hours per month, with a 96-hour cap
- On-call staff, reserve firefighters, volunteer firefighters, and the Board Clerk do not earn vacation leave

Vacation leave begins to accrue at the <u>qualified</u> employee's start date. An employee may not use their vacation leave until month 7 of employment <u>unless authorized by the Fire Chief</u>.

Unused vacation leave shall be paid out at the end of employment.

Policy Manual

#### Compensated Leave

#### 1039.6 HOLIDAY LEAVE

#### Agency Content

- Full-time career staff accrue holiday leave @ 6 hours per month (72 hours per year), with a 144-hour cap; accrual begins at start date
- If otherwise scheduled to work, part-time staff members receive the following holidays off with 5 hours pay
  - New Year's Day
  - President's Day
  - Memorial Day
  - Independence Day
  - Labor Day
  - Thanksgiving Day
  - Day After Thanksgiving Day
  - Christmas
- On -call staff, reserve firefighters, volunteer firefighters, and the Board Clerk do not earn holiday leave and are not entitled to holiday pay

Unused holiday leave shall be paid out at end of employment.

#### 1039.7 BEREAVEMENT LEAVE

#### Agency Content

Under Government Code § 12945.7, an employee may take up to 5 days of bereavement leave upon the death of an employee's family member (Government Code § 12945.2). Such leave need not be taken consecutively and must be taken within 3 months of the family member's death. The employee may use accrued sick leave for such purposes.

In addition to those individuals identified as a "family member" in Government Code § 12945.2, the District recognizes the following individuals as an employee's family member:

- Sibling-in-law
- Step-grandchild

If requested and within 30 days of the first day of leave, the employee shall provide documentation of the death of the family member. As used in this section, "documentation" includes, but is not limited to, a death certificate, a published obituary, or written verification of death, burial, or memorial services from a mortuary, funeral home, burial society, crematorium, religious institution, or governmental agency [Government Code § 12945.7(f)].

#### 1039.8 APPEARANCE FOR SUBPOENA

Agency Content

Policy Manual

#### Compensated Leave

The District will compensate any member who is subpoenaed to appear in court, or for a deposition, for incidents involving the West Plainfield Fire Protection District or the West Plainfield Fire Department. Any fees paid to the member shall be returned to the District.

#### 1039.9 APPEARANCE FOR JURY DUTY

Agency Content

The District will compensate a full-time career staff member who is subpoenaed to appear for jury duty during a regularly-scheduled shift for the hours spent appearing for jury duty for up to 3 shifts per annum. The member shall return to work once court is adjourned for the day.

#### 1039.10 SUPERVISOR RESPONSIBILITIES

Best Practice MODIFIED

The responsibilities of supervisors include but are not limited to:

- (a) Monitoring and regularly reviewing the attendance of those under their command to ensure that absences and the use of leave are consistent with this policy.
- (b) Attempting to determine whether an absence of four or more days may qualify as family medical leave and consulting with legal counsel or the Administration as appropriate.
- (c) Addressing absences and sick leave use in the member's performance evaluation when excessive or unusual use has:
  - 1. Negatively affected the member's performance or ability to complete assigned duties.
  - 2. Negatively affected department operations.
- (d) When appropriate, counseling members regarding excessive absences and/or inappropriate use of sick leave.
- (e) Referring eligible members to an available employee assistance program when appropriate.

#### 1039.11 REQUIRED NOTICES

State MODIFIED

The Fire Chief shall ensure:

- (a) Written notice of the amount of paid sick leave available is provided to employees as provided in Labor Code § 246.
- (b) A poster containing information on paid sick leave as provided in Labor Code § 247 is displayed in a conspicuous place for employees to review.

Policy Manual

## Family and Medical Leave - Unpaid

#### 1040.1 PURPOSE AND SCOPE

Federal MODIFIED

The purpose of this policy is to provide general guidance for managing unpaid leave for eligible employees for qualified medical and family reasons, including (29 USC § 2612; Government Code § 12945.1; Government Code § 12945.2):

- The birth, adoption, or foster care placement of a child.
- To care for an immediate family member with a serious health condition.
- When an employee is unable to work because of his/her own serious health condition.
- To care for a spouse, son, daughter, parent, or next of kin service member of the United States Armed Forces who has a serious injury or illness incurred in the line of duty. Under the California Family Rights Act (CFRA), this includes care for a domestic partner.
- Under CFRA, leave due to a qualifying exigency (as defined in Unemployment Insurance Code § 3302.2) related to the covered active duty or call to active duty of an employee's spouse, domestic partner, child, or parent in the Armed Forces of the United States.

This policy does not address all possible situations and circumstances that may arise when an employee requests leave for family or medical reasons. As these leave situations arise, supervisors should consult with the Administration or legal counsel to obtain specific guidance regarding leave rights and obligations.

Nothing in this policy supersedes any provision of any collective bargaining agreement, civil service or other local rule, or any law that provides greater family or medical leave rights.

#### 1040.1.1 DEFINITIONS

Federal MODIFIED

Definitions related to this policy include:

CFRA - California Family Rights Act (Government Code § 12945.1; Government Code § 12945.2).

**Child** - A child under the age of 18 years of age, or 18 years of age or older who is incapable of self-care because of a mental or physical disability (29 USC § 2611; 29 CFR 825.102; 29 CFR 825.122). An employee's child is one for whom the employee has actual day-to-day responsibility for care and includes a biological, adopted, or foster child; stepchild; or a child for whom the employee is standing in loco parentis (in place of a parent). Under CFRA, a child includes a legal ward and child of a domestic partner (Government Code § 12945.2).

FMLA - The federal Family and Medical Leave Act (29 USC § 2601 et seq.).

**Qualified health care professional** - A physician, surgeon, doctor of osteopathy, podiatrist, dentist, psychologist, optometrist, nurse practitioner, nurse midwife, clinical social worker, or

Policy Manual

#### Family and Medical Leave - Unpaid

physician assistant duly licensed and authorized to practice medicine; chiropractors for some purposes; any health care provider from whom the department benefits plan will accept certification of the existence of a serious health condition to substantiate a claim for benefits (29 CFR 825.125).

**Spouse** - The person with whom an employee has entered into a marriage as defined or recognized by the location in which the marriage was entered into (29 USC § 2611; 29 CFR 825.102; 29 CFR 825.122).

**Family member** (under CFRA) - A child, parent, grandparent, grandchild, sibling, spouse, or domestic partner as defined in Family Code § 297, or a designated person as defined by Government Code § 12945.2.

Family member (under FMLA) - A spouse, child, or parent as defined by 29 CFR 825.122.

#### 1040.2 POLICY

Best Practice MODIFIED

It is the policy of the West Plainfield Fire Department to manage unpaid leave for eligible employees for qualified medical and family reasons in compliance with federal and state law and any applicable collective bargaining agreement.

#### 1040.3 ELIGIBLE EMPLOYEES

Federal MODIFIED

Employees are eligible for FMLA/CFRA after working for the West Plainfield Fire Department for at least one year and completing 1,250 hours over the 12 months prior to the commencement of the leave (29 USC § 2611; 29 CFR 825.110; Government Code § 12945.2).

For leave under FMLA, employees may not be eligible for leave if there are less than 50 other employees within 75 miles of the employee's work site (29 USC § 2611; 29 CFR 825.110).

#### 1040.4 TYPE AND DURATION OF LEAVE

Federal MODIFIED

Generally, eligible employees are entitled under FMLA/CFRA to 12 work weeks of unpaid leave during a 12-month period (29 USC § 2612; 29 CFR 825.100). Up to 26 weeks of unpaid leave during a single 12-month period may be available to care for certain injured military service members. The 12-month period is measured backward from the date leave is taken and continuously with each additional leave day taken.

#### 1040.4.1 SERIOUS HEALTH CONDITIONS

Federal MODIFIED

Eligible employees may take up to 12 weeks of leave to care for a family member with a serious health condition or when the employee is unable to work because of his/her own serious health condition (29 USC § 2612(a)(1); 29 CFR 825.200; Government Code § 12945.2).

Policy Manual

#### Family and Medical Leave - Unpaid

Under FMLA, if both spouses are employed by the West Plainfield Fire Department, the combined number of work weeks to care for a sick parent is limited to 12 work weeks during any 12-month period (29 USC § 2612(f); 29 CFR 825.201).

Generally, a serious health condition is an illness, injury, impairment, or physical or mental condition that involves (29 USC § 2611; 29 CFR 825.113):

- An overnight stay in a hospital, hospice, or residential medical care facility (29 CFR 825.114).
- Continuing treatment by a qualified health care professional due to a serious health condition of more than three full consecutive calendar days (29 CFR 825.115(a)).
- Any period of incapacity due to pregnancy complications or prenatal care (29 CFR 825.115(b)).
- A chronic condition which requires treatment (29 CFR 825.115(c)).
- A permanent condition for which treatment may not be effective (such as Alzheimer's or the terminal stages of a disease) (29 CFR 825.115(d)).
- Any period of absence to receive multiple treatments, including any recovery period, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days without medical intervention or treatment (such as cancer chemotherapy or physical therapy for arthritis) (29 CFR 825.115(e)).

#### 1040.4.2 BIRTH OR PLACEMENT OF A CHILD

Federal MODIFIED

Eligible employees may take up to 12 weeks of leave for the birth, adoption, or foster care placement of a child of the employee (29 USC § 2612; 29 CFR 825.200; Government Code § 12945.2). The leave must be concluded within one year of the birth or placement of the child (29 CFR 825.120; 29 CFR 825.121).

Under FMLA, if both parents are employed by the West Plainfield Fire Department, the combined number of work weeks of leave is limited to 12 work weeks during any 12-month period (29 USC § 2612(f); 29 CFR 825.120; 29 CFR 825.121).

#### 1040.4.3 MILITARY EXIGENCY LEAVE

Federal MODIFIED

Eligible employees may take service member leave of up to 12 weeks for qualifying exigencies occurring because a spouse, child, or parent is on covered active duty or has been notified of an impending order to active duty (29 USC § 2612(a)(1)(E); 29 CFR 825.200). This type of leave is available to a family member of a person in the National Guard, Reserves, or members of the regular Armed Forces deployed to a foreign country. Qualifying exigencies include (29 CFR 825.126):

- Addressing issues that arise from a short notice (seven or less days) deployment.
- Attending military events related to the active duty or call to duty.

Policy Manual

#### Family and Medical Leave - Unpaid

- Attending family support or assistance programs.
- Making child care or educational arrangements or attending school activities arising from active duty or a call to active duty.
- Making financial and legal arrangements.
- Spending time with a military member who is on short-term rest-and-recuperation leave during a period of deployment.
- Attending post-deployment activities.
- Addressing issues that arise from the death of a military member, such as making funeral arrangements.
- Caring for a military employee's parent who is incapable of self-care, such as providing care on an immediate need basis or arranging for alternative care.

#### 1040.4.4 MILITARY CAREGIVER LEAVE

Federal MODIFIED

Eligible employees may take up to 26 weeks of leave in a single 12-month period to care for a spouse, son, daughter, parent, or next of kin who has incurred an injury or illness in the line of duty while on active duty in the Armed Forces, provided that such injury or illness may render the family member medically unfit to perform work (29 USC § 2612; 29 CFR 825.200).

Military caregiver leave is also available to family members of covered veterans who were members of the Armed Forces, including the National Guard or Reserves, at any point in the five years preceding the date on which the covered veteran undergoes medical treatment, recuperation, or therapy (29 USC § 2612; 29 CFR 825.127).

During the single 12-month period, employees are entitled to no more than a combined total of 26 weeks of FMLA leave. In any case in which both spouses are employed by the West Plainfield Fire Department, the combined number of work weeks of leave is limited to 26 during any 12-month period (29 USC § 2612(f); 29 CFR 825.127).

Service member FMLA leave runs concurrent with other leave entitlements provided under federal, state, and local law. Where FMLA leave qualifies as both military caregiver leave and care for a family member with a serious health condition, the leave will be designated as military caregiver leave first.

#### 1040.4.5 FAMILY MILITARY LEAVE

State

An employee who is a spouse or registered domestic partner of a member of the military who is deployed to designated combat zones is entitled to take up to 10 days unpaid leave (Military and Veterans Code § 395.10).

#### 1040.4.6 INTERMITTENT LEAVE

Federal

Policy Manual

#### Family and Medical Leave - Unpaid

An employee may take leave for the employee's own serious health condition, for the serious health condition of the employee's spouse, child, or parent, or to care for a covered service member with a serious injury or illness, intermittently or on a reduced schedule if medically necessary, and if that medical need can best be accommodated by an intermittent schedule as defined in federal law (29 USC § 2612(b); 29 CFR 825.202; 29 CFR 825.124).

Leave due to a military exigency may be taken on an intermittent or reduced-leave schedule (29 CFR 825.202).

Intermittent leave for the birth, adoption, or foster care placement of a child is only available if granted at the discretion of the Fire Chief, unless the employee has a serious health condition in connection with the birth or if the newborn child has a serious health condition (29 CFR 825.120; 29 CFR 825.121).

Intermittent leave for any employee shall be tracked and calculated.

#### 1040.4.7 PREGNANCY DISABILITY LEAVE

State

FMLA is separate and distinct from disability leave for pregnant employees. Pregnant employees may be entitled to a disability leave as provided in the Pregnancy Disability Leave Policy in addition to any FMLA/CFRA leave.

#### 1040.4.8 LEAVE FOR VICTIMS OF CRIME OR ABUSE

State

Eligible employees may take leave if the employee is the victim of a crime, abuse, or sexual assault and needs leave for any of the purposes specified in Labor Code § 230.1. Reasonable advance notice of leave is required except in cases where notice is not feasible. Information relating to this leave shall be kept confidential to the extent permitted by law (Labor Code § 230.1).

The Department shall provide written notice of the rights specified in this section to newly hired employees and upon request (Labor Code § 230.1).

#### 1040.5 EMPLOYEE BENEFITS WHILE ON LEAVE

Federal

While on leave, employees will continue to be covered by any group health insurance to the same extent that coverage is provided while the employee is on the job (29 USC § 2614(c); 29 CFR 825.209). However, employees will not continue to be covered under non-health benefit plans.

Employees are responsible for any health plan employee contributions while on leave (29 CFR 825.210). Employee contribution rates are subject to any change in rates that occurs while the employee is on leave. If an employee fails to return to work after his/her leave entitlement has been exhausted or expires, the Department may recover its share of health plan premiums for the entire leave period unless the employee does not return because of the continuation, recurrence, or onset of a serious health condition of the employee or his/her family member that would entitle the employee to leave, or because of circumstances beyond the employee's control (29 CFR

Policy Manual

#### Family and Medical Leave - Unpaid

825.213). The Department may recover premiums through deduction from any sums (e.g., unpaid wages, vacation pay).

Employees may not earn additional time off while on unpaid leave.

#### 1040.6 SUBSTITUTION OF PAID ACCRUED LEAVES

Best Practice MODIFIED

Subject to applicable collective bargaining agreements, if any, employees are required to exhaust all applicable paid leave before taking unpaid leave. Paid accrued leave includes vacation leave, sick leave, personal leave, and compensatory time earned in lieu of overtime, pursuant to the Fair Labor Standards Act, during FMLA and/or CFRA leave. Employees may not use paid accrued leave to extend FMLA/CFRA leave beyond 12 work weeks per year.

#### 1040.6.1 USE OF SICK LEAVE

**Best Practice** 

Employees are required to first exhaust paid sick leave concurrently with FMLA/CFRA leave if the leave is for the employee's own serious health condition.

Employees may choose to use paid sick leave concurrently with leave under this policy (Labor Code § 233):

• To care for a family member (as defined by Labor Code § 245.5) with a serious health condition.

#### 1040.7 USE OF FMLA/CFRA LEAVE

Best Practice

If an employee takes a leave of absence for any reason that is FMLA/CFRA-qualifying, the Department may designate that non-FMLA/CFRA leave as running concurrently with the employee's 12-week FMLA/CFRA leave entitlement. The only exception is for Firefighters who are on workers' compensation leave pursuant to Labor Code § 4850.

#### 1040.8 PROCEDURES FOR USE OF FMLA/CFRA LEAVE

Federal MODIFIED

The following procedures will apply for all employees requesting leave under FMLA/CFRA:

- (a) When a leave is requested for a medical or other FMLA/CFRA-related treatment appointment, the employee must make a reasonable effort to schedule the appointment at a time that minimizes disruption to the department's operations (29 USC § 2612; 29 CFR 825.302).
- (b) An employee who wishes to take FMLA/CFRA must provide his/her supervisor with 30 days' advance notice when the leave is foreseeable or as soon as practicable if the need for leave is not foreseeable (29 USC § 2612; 29 CFR 825.302; 29 CFR 825.303).
- (c) At the time of the request, the employee must complete a FMLA/CFRA request form.

Policy Manual

#### Family and Medical Leave - Unpaid

Requests for medical leave shall be accompanied by a qualified health care professional statement, including the date on which the serious health condition began and the estimated date of return to work (29 USC § 2613; 29 CFR 825.302).

Once the leave is requested or designated by the Department, the supervisor should forward the request and any medical certifications to the Assistant Chief of Administration (or designee) and ensure the employee is provided the necessary forms and FMLA/CFRA information within five days (29 CFR 825.300).

Employees are required to provide medical certification of a qualified health care professional or military documentation, if requested (29 CFR 825.305; 29 CFR 825.308; 29 CFR 825.309; 29 CFR 825.310).

Employees shall be required to periodically report on their status and intent to return to work (29 USC § 2614; 29 CFR 825.311). This may assist in avoiding a delay in reinstatement when the employee is ready to return to work.

Employees returning from a medical leave from the employee's own serious health condition will be required to present medical verification from a qualified health care professional of the employee's ability to return to work and a list of any restrictions that need to be accommodated (29 USC § 2614; 29 CFR 825.100; 29 CFR 825.312).

#### 1040.9 REINSTATEMENT FOLLOWING LEAVE

Federal MODIFIED

Generally, employees returning from FMLA/CFRA within the qualified period will be restored to their original job or to an equivalent job with equivalent pay and benefits (but not seniority), unless the employee would not otherwise have been employed at the time reinstatement is requested (e.g., in the case of a layoff) (29 USC § 2614; 29 CFR 825.214; 29 CFR 825.216).

If the same position is no longer available, such as in a layoff, the employee will be entitled to a position that is comparable in pay, job content, and promotional opportunities and geographic location, if such a comparable position exists.

If upon return from leave an employee is unable to perform the essential functions of the job because of a physical or mental disability, the supervisor should work with the Assistant Chief of Administration (or designee) or legal counsel to engage in an interactive process with the employee to identify a potential reasonable accommodation.

After exhausting paid FMLA/CFRA leave, non-paid leave will continue until the conclusion of the protected 12- or 26-week time limit. Following the protected leave, the Fire Chief, in consultation with the legal counsel or the Assistant Chief of Administration, will determine whether non-FMLA/CFRA leave should apply.

#### 1040.10 RESPONSIBILITY

Best Practice MODIFIED

Policy Manual

#### Family and Medical Leave - Unpaid

Supervisors should work with the Assistant Chief of Administration (or designee) or legal counsel regarding questions relating to leave or reinstatement from leave under this policy. The Assistant Chief of Administration should advise the supervisor and inform members of their rights and responsibilities.

#### 1040.11 RECORDS

Federal

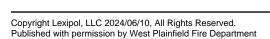
The Department will maintain leave-related records as required by 29 CFR 825.500 for at least three years and in compliance with the department's established records retention schedule.

Records and documents related to doctor certifications and other medical information created for purposes of complying with FMLA/CFRA and this policy shall be maintained as confidential medical records in separate files from employee personnel files.

#### 1040.12 NOTICE TO EMPLOYEES

Federal

The Fire Chief should ensure that a notice explaining the FMLA's provisions and procedures is prominently posted in conspicuous places in the Department where it can be readily seen by all employees and applicants for employment. Electronic posting is sufficient as long as the other posting requirements have been met as provided by 29 CFR 825.300 (29 CFR 825.300).





Policy Manual

## **Military Leave**

#### 1041.1 PURPOSE AND SCOPE

Federal MODIFIED

This policy provides general guidance regarding leave to perform military service as a member of the Reserves or National Guard or active duty in the U.S. Armed Forces in accordance with the Uniformed Services Employment and Reemployment Rights Act (USERRA) (38 USC § 4301, et seq.; California Military and Veteran's Code § 389, et seq.).

This policy does not address every situation or circumstance that may arise when an employee is performing military service or ordered to active duty. As military leave situations arise, supervisors should consult with the Administration or legal counsel to obtain specific guidance regarding military leave rights.

#### 1041.2 POLICY

Federal MODIFIED

The West Plainfield Fire Department supports employees who may be called or who volunteer to serve in the military. The Department will comply with USERRA and state laws relating to military leave.

#### 1041.3 MILITARY LEAVE

Federal

Generally, employees on military leave are entitled to the same rights and benefits not determined by seniority, that are provided to employees having similar seniority, status and pay who are on furlough or leave of absence (38 USC § 4316(b)(1)).

#### 1041.3.1 LENGTH OF LEAVE

Federal

Employees are entitled to military leave of absence for up to a maximum of five years (38 USC § 4312(a)(2)). Military leave is available for both voluntary and mandatory service (38 USC § 4303(13) and 38 USC § 4312(a)).

There are exceptions to the five-year cumulative total, including inactive duty training (drills), annual training, involuntary recall or retention in support of war, national emergency, certain operational missions, or training or retraining requirements (38 USC § 4312(c)).

#### 1041.3.2 TEMPORARY MILITARY DUTY LEAVE OF ABSENCE

State

Employees are entitled to temporary military leave for a period not to exceed 180 days per period of ordered duty. This includes travel time, active military training, encampment, naval cruises, special exercises, or similar activities (Military and Veterans Code § 389).

Policy Manual

#### Military Leave

An employee who is a member of the California State Military Reserve is entitled to temporary military leave not to exceed 15 days per year for training, drills, unit training assemblies, or similar inactive duties (Military and Veterans Code § 395.9).

#### 1041.4 PROCEDURES AND RESPONSIBILITIES

Federal

Employees who require military leave shall provide as much advance written or verbal notice of the pending service as reasonably possible (38 USC § 4312).

Additionally, the employee should:

- (a) Provide copies of official orders or other official documentation, if available.
- (b) Select the benefit options desired during absence, if applicable
- (c) Retain copies of all submitted documents.

#### 1041.5 COORDINATION WITH CONTRACTS, PRACTICES, AND OTHER RULES

Federal MODIFIED

Wherever USERRA has more generous protections and benefits than state or local law, any applicable collective bargaining agreement, or local policy or practice, the <u>Department</u> will apply the more beneficial right or benefit (38 USC § 4302).

#### 1041.6 LEAVE ACCRUALS

Federal

Employees on military leave are not required to use accrued leave while on military leave. However, employees may choose to use accrued annual leave or earned compensatory time at their discretion (38 USC § 4316).

Employees will not accrue sick days or and paid time-off days during any period of military leave without pay. However, upon return, military leave time will be included in determining leave accruals. For example, if vacation accrual increases from two weeks to three weeks upon completion of five years of service, then a person who works for two years, serves two years on active duty, and then returns, would be entitled to three weeks of vacation one year after reemployment.

#### 1041.7 COMPENSATION

State

During approved military leave, employees are entitled to compensation as follows:

- (a) An employee whose combined West Plainfield Fire Department employment and military service is less than one year is eligible for unpaid temporary military leave.
- (b) An employee with one or more years of combined military service and West Plainfield Fire Department employment is entitled to receive their regular salary and compensation as an employee for the first 30 calendar days in any fiscal year while on temporary military leave (Military and Veterans Code § 395.01).

- (c) An employee of the West Plainfield Fire Department with one or more years of West Plainfield Fire Department employment is entitled to receive their regular salary and compensation as an employee for the first 30 days in any fiscal year (Military and Veterans Code § 395.02).
- (d) An employee called to active military duty as a member of the National Guard during a state of extreme emergency, as declared by the Governor, is entitled to receive their regular salary and compensation as an employee for 30 days, regardless of the length of prior employment with the West Plainfield Fire Department (Military and Veterans Code § 395.04).

#### 1041.7.1 HEALTH CARE BENEFITS

#### Federal MODIFIED

Employees on military leave may elect to purchase continuing health care coverage for a period of time that is the lesser of:

- (a) The 24-month period beginning on the first day of the employee's absence for military leave.
- (b) The period beginning on the first day of the employee's absence for military leave and ending on the date that they fail to return from service or apply for reemployment.

If the duration of an employee's approved military service is less than 31 days, the employee may purchase continuing health care coverage under the <u>Department</u>'s health plan for no more than the regular employee share. If the approved military service is 31 days or more, the Department will charge the employee for no more than 102 percent of the full premium of the health care plan (38 USC § 4317).

#### 1041.8 RETURN FROM DUTY

#### Federal MODIFIED

Employees returning from approved military leave of absence must report to work as follows (38 USC § 4312; 20 CFR 1002.118):

- (a) Employees returning from an approved military duty leave during time of war or national emergency must report to work no later than six months following the separation from military service or no later than six months after the end of the war or emergency, absent unusual circumstances. The right to reemployment does not extend to an employee who fails to return within 12 months after the first date they could terminate active military service (Military and Veterans Code § 395.1).
- (b) For periods of service less than 31 days, employees must report back to work no later than the beginning of the first shift that begins on the first full day that follows the end of the employee's service period, plus a reasonable time to travel to the employee's residence, plus eight hours. If reporting within this period is impossible or unreasonable through no fault of the employee, the employee must return as soon as possible after expiration of the eight-hour period.
- (c) For periods of service of more than 30 days but less than 181 days, employees must apply for reemployment verbally or in writing no later than 14 days after completing

Policy Manual

#### Military Leave

service, or, if impossible or unreasonable to do so through no fault of the employee, no later than the next first full calendar day when it is possible to do so.

For periods of service of more than 180 days, employees must apply for reemployment verbally or in writing no later than 90 days after completion of service.

Employees who are recovering from an illness or injury incurred in or aggravated during military service, must report to the Department or apply for reemployment as provided in this policy at the end of the period necessary to recover from such illness or injury. The recovery period may not exceed two years, except when circumstances beyond the employee's control exist (38 USC § 4312(e)(2)(A)).

An employee who fails to report or apply for reemployment in a timely manner will be subject to the Department's rules of conduct and established policies covering absence from scheduled work.

#### 1041.9 REEMPLOYMENT RIGHTS

Federal

An employee returning from an approved temporary military duty leave of absence is generally entitled to reinstatement to the position and benefits they would have attained if not absent for military duty or, in some cases, a comparable job (38 USC § 4312).

#### 1041.9.1 FORMER POSITION

Federal MODIFIED

If such position no longer exists, the employee is entitled to reinstatement to a position in the same class with like seniority, status, and pay or a comparable vacant position for which the employee is qualified (Military and Veterans Code § 395).

An employee returning from approved regular active military leave is entitled to reinstatement in the position that they would have attained had the employee not taken leave. If the leave exceeded 90 days, the employee is also entitled to a position of like seniority, status, and pay (38 USC § 4313(a)(1) and (2)).

If an employee returning from approved military leave is not able to perform the essential duties of the position the employee would have attained, the Department will make reasonable efforts to help the employee become qualified (20 CFR 1002.198). If the employee remains unable to perform the essential duties of the position after the <u>Department's</u> reasonable efforts, the employee is entitled to their previously held position at the time of departure or, in the case the leave exceeded 90 days, a position of like seniority, status, and pay (38 USC § 4313(a)(2)). Where an employee remains unqualified for both of these positions after reasonable efforts by the Department, the employee is entitled to the nearest approximation to these positions (38 USC § 4313(a)(4)).

When a returning employee cannot become qualified because of a disability incurred in or aggravated during uniformed service, the Department, after making reasonable accommodations, must find a position of equivalent seniority, status and pay for which the employee is qualified, or the nearest equivalent (38 USC § 4313; 20 CFR 1002.198).

#### 1041.9.2 COMPENSATION AND BENEFITS

#### Federal MODIFIED

Upon return from regular active military duty, an employee is entitled to seniority and seniority-based rights and benefits, including but not limited to:

- (a) Receiving credit for the time spent in uniformed service under honorable conditions for purposes of seniority, retirement, promotion, and merit salary increases (20 CFR 1002.210).
- (b) Receiving credit for time spent on approved military leave for purposes of calculating eligibility for leave under the Family and Medical Leave Act and the California Family Rights Act (20 CFR 1002.210).
- (c) Returning to the level in the salary range that the employee would have attained had they not left on approved military leave (20 CFR 1002.236).
- (d) Receiving the same contribution to retirement benefits upon reemployment that the Department would have contributed had they not taken leave (20 CFR 1002.261).
- (e) Being treated as not having a break in service for purposes of participation, vesting and accrual of pension benefits (38 USC § 4316; 38 USC § 4318).
- (f) Reenrolling in Department health benefits without any waiting period.
- (g) Restoring benefits that were elected by the employee and his/her dependents at the time military service began, as well as to any other benefits that began during the leave for which the employee would reasonably have become eligible.

#### 1041.9.3 EMPLOYEE REEMPLOYMENT RESPONSIBILITIES

#### Federal

An employee returning from approved regular active military leave is entitled to reinstatement rights only if the employee (38 USC § 4312):

- (a) Has given advance written or verbal notice of such service, unless precluded by military necessity.
- (b) Has served in the uniformed service for no more than five years cumulatively while employed at the West Plainfield Fire Department, except as provided in 38 USC § 4312(c).
- (c) Has been issued a discharge under honorable conditions.
- (d) Reports to the West Plainfield Fire Department or applies for reemployment in a timely manner as provided in this policy.
  - 1. In the case that the military leave exceeds 30 days, submits documentation showing (20 CFR 1002.121; 20 CFR 1002.123):
    - (a) The application for reemployment is timely.
    - (b) The employee has not exceeded the cumulative five-year limit of service in the uniformed services, except as provided in 38 USC § 4312(c).
    - (c) The employee's separation or dismissal from service was not disqualifying.

Policy Manual

#### 1041.9.4 DEPARTMENT REEMPLOYMENT RESPONSIBILITIES

Federal MODIFIED

The Department shall promptly reinstate employees entitled to reinstatement but no later than 14 days after a request for reinstatement. In the case of unusual circumstances, the Department shall reinstate employees as soon as practicable (20 CFR 1002.181).

The Department is not required to reemploy a person after approved military leave if any of the following conditions exist (38 USC § 4312(d)):

- (a) The <u>Department</u>'s circumstances have so changed as to make such reemployment impossible or unreasonable.
- (b) Such reemployment would impose an undue hardship upon the Department.
- (c) The person held a non-recurrent job for a brief period of time and had no reasonable expectation that such employment would continue.

Supervisors should consult with the Administration or legal counsel before determining whether any of these conditions exist.

#### **1041.10 RETENTION**

Federal

An employee who is reinstated after returning from approved military leave may not be discharged, except for cause (38 USC § 4316(c); 20 CFR 1002.247):

- (a) For 180 days after the date of reemployment if the most recent period of military service was more than 30 days and less than 181 days.
- (b) For one year after the date of reemployment if the most recent period of military service was more than 180 days.

#### 1041.11 DISCRIMINATION AND RETALIATION PROHIBITED

Federal

Discrimination or retaliation against any employee for participation in military service is prohibited, whether the employee volunteers or is ordered to active military service (38 USC § 4311; Military and Veterans Code § 394).

Policy Manual

## **Pregnancy Disability Leave**

#### 1042.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the West Plainfield Fire Department to manage pregnancy disability leave in accordance with the California Fair Employment and Housing Act (FEHA) (Government Code § 12945; 2 CCR 11040) and the Pregnancy Discrimination Act of 1978 (42 USC § 2000e(k)).

#### 1042.1.1 DEFINITIONS

Definitions related to this policy include:

**Interactive process** - An informal meeting between employer and employee, designed to identify the precise limitations resulting from a disability and any potential reasonable accommodations that could overcome those limitations and allow the employee to return to work, either in their usual and customary position or some other type of work.

#### 1042.2 POLICY

The West Plainfield Fire Department recognizes pregnancy as a disability and shall treat pregnant members in a manner consistent with other members with disabilities. The Department shall defer to a pregnant member's qualified health care provider in assessing the member's ability to work.

#### 1042.3 ELIGIBLE MEMBERS

Members who are disabled by pregnancy, childbirth or related medical conditions are eligible for pregnancy disability leave. There is no required minimum amount of service time or number of hours worked in order to be eligible (2 CCR 11037).

#### 1042.4 TIME AND DURATION OF LEAVE

Under certain circumstances, an eligible member may be entitled to take pregnancy disability leave of up to four months and leave allowed under the Family and Medical Leave Act (FMLA) of up to 12 weeks, for a combined total of approximately seven months.

Members may take up to four months of pregnancy disability leave per pregnancy for any actual disability caused by pregnancy, childbirth or related medical conditions (Government Code § 12945).

Pregnancy disability leave need not be taken in one continuous period of time and may be taken intermittently, on an as-needed basis (2 CCR 11042).

Time off needed for prenatal care, severe morning sickness, doctor-ordered bed rest, childbirth and recovery from childbirth is allowed by pregnancy disability leave.

If affected by pregnancy, childbirth or related medical conditions, a member may be permitted to transfer to a less strenuous or hazardous position or to less strenuous or hazardous duties, if such a transfer is recommended by the member's physician after reviewing the member's job description and required duties (2 CCR 11041).

Policy Manual

#### Pregnancy Disability Leave

A member may also receive reasonable accommodation for conditions related to pregnancy, childbirth or related medical conditions, if recommended by a qualified health care professional (Government Code § 12945(3)).

#### 1042.5 BENEFITS DURING LEAVE

A member on pregnancy disability leave may receive any group health insurance coverage that was provided before the leave (2 CCR 11044; Government Code § 12945) if:

- (a) The member is eligible for concurrent family medical leave.
- (b) The member has not already exhausted the 12-week group health insurance coverage benefit in the current FMLA eligibility period.

The Department shall maintain and pay for the coverage for the duration of the leave as required in Government Code § 12945(2).

The Department may recover premiums it paid to maintain health coverage, as provided by FMLA laws and Government Code § 12945(2), if a member does not return to work following pregnancy disability leave.

A member on pregnancy disability leave, who is not eligible to receive group health insurance coverage, may receive health insurance coverage in conjunction with Consolidated Omnibus Budget Reconciliation Act (COBRA) guidelines by making monthly premium payments to the District.

Sick leave, vacation leave and seniority do not accrue while a member is on unpaid pregnancy disability leave.

#### 1042.6 USE OF OTHER LEAVES

Members are required to use accrued sick leave for any authorized pregnancy disability leave. At the member's option, accrued vacation or other accrued time off may be applied toward the pregnancy disability leave. If no accrued sick or vacation leave is available, pregnancy disability leave is unpaid (2 CCR 11044).

Pregnancy disability leave will run concurrently with FMLA and any short-term disability leave for those members who are eligible for both.

#### 1042.7 PROCEDURE

The following procedures apply to all members requesting pregnancy disability leave:

- (a) Members who wish to take pregnancy disability leave shall provide their supervisor with 30 days of advance notice if the need for leave is foreseeable or as soon as practicable if the need for leave was not foreseeable (2 CCR 11050). The 30-day advance notice may be waived with the supervisor's written approval.
- (b) A member shall submit a written request for pregnancy disability leave approved by the member's supervisor or the Administration before the leave begins. The request

Policy Manual

#### Pregnancy Disability Leave

shall be supported by a written certification from a physician or qualified health care professional that the member is disabled from working by pregnancy, childbirth or a related medical condition. The certification must state the expected duration of the disability and the expected date of return to work (Government Code § 12945; 2 CCR 11050).

- (c) The supervisor should forward requests for pregnancy disability leave, including medical certifications, to the Administration and ensure that the pregnancy disability leave or transfer request is responded to as soon as practicable and in no event later than 10 days after receiving the request (2 CCR 11050).
- (d) Members shall submit any request for an extension of leave in writing to their supervisor prior to the agreed date of return. The request for extension must be supported by a written certification from the attending physician that the member continues to be disabled by pregnancy, childbirth or a related medical condition.
- (e) Members returning from pregnancy disability leave shall provide a written statement from a qualified health care professional attesting that the member is fit to return to full duty (2 CCR 11050).

#### 1042.8 REINSTATEMENT FOLLOWING LEAVE

Upon the expiration of pregnancy disability leave or transfer, and the department's receipt of a written return to full duty certification, the member will be reinstated to her original or an equivalent position, unless the position has been eliminated for a legitimate business reason during the leave (2 CCR 11043).

If the same position is no longer available, as in a layoff, the member will be entitled to a position that is comparable in pay, location, job content, promotional opportunity and geographic location if such a comparable position exists.

If upon return from pregnancy disability leave a member is unable to perform the essential functions of the job because of a disability, the member's supervisor should work with the Administration or legal counsel to engage in an interactive process with the member to identify a potential reasonable accommodation.

#### 1042.9 RESPONSIBILITY

Supervisors should work with the Administration to review requests for leave and any request to return to duty under temporary modified duty limitations. The Administration should advise the supervisor and inform members of their rights and responsibilities. Also see the Temporary Modified Duty Assignments Policy and the Return to Work Policy.

#### 1042.10 RECORDS

The Department will maintain leave-related records for at least four years or in compliance with the department's established record retention schedule (Government Code § 12946).

Policy Manual

## Pregnancy Disability Leave

Records and documents related to doctor certifications and other medical information created for purposes of complying with FMLA/California Family Rights Act (CFRA) and this policy shall be maintained as confidential medical records in separate files from the member's personnel files.





24901 County Road 95, Davis, CA 95616

(530) 756-0212

# STANDING COMMITTEE – BUDGET AND BENEFITS – MEETING - MINUTES June 6, 2024 at 6:00 PM

In Person Fire Station 24901 County Road 95 Davis, CA 95616

1. Call the meeting to order (Chair Stiles)

Chair Stiles called the meeting to order at 1800 hours. Present were:

Committee Members/Commissioners: Beth Stiles and John Lindsey

Staff: Chief Cherie Rita and Assistant Chief

**Dave Stiles** 

2. Public comment

No public comment.

- 3. Discussion / Action FYE 2025 Final Budget Development (All)
  - a. Review and Potentially Revise Draft Preliminary FYE 2025 Budget Chief Rita advised that her estimated usage for FYE 2024 did not currently need revisions. Chief Rita advised that because the 218 funds will not increase by the CPI and, therefore, will not be levied at the maximum allowed by a CPI increase, that the budget is out of balance by \$6,357.
  - b. Finalize FYE 2025 Budget Draft

Chief Rita suggested reducing the appropriation for the Capital fund to \$80,868 and find \$1,896 reduction in one of the funds in the Services and Supplies category. After some discussion, it was determined to reduce Minor Equipment (510190) and Utilities (510220) by \$948 each.

c. Recommendation(s) to Board
 Unless revised further, adopt revised draft Budget.

#### 4. Calendar

- a. The next Budget Committee meeting to be determined
  No further meeting was scheduled. Chief Rita will advise if the Committee
  needs to meet again before the July 16 regular Board meeting.
- 5. Adjourn (Chair Stiles)

Approved: June 25, 2024

Chair Stiles adjourned the meeting at 1826 hours.

BETH STILES. Commissioner / Chair	CHERIE RITA, Recorder	



24901 County Road 95, Davis, CA 95616

(530) 756-0212

# STANDING COMMITTEE – PERSONNEL – MEETING - MINUTES June 21, 2024 at 3:45 PM

Held: Lillard Hall 24901 County Road 95 Davis CA, 95616

1. Call the Meeting to Order (Chair Amy)

Chair Amy called the meeting to order at 1545 hours. Present were:

Committee Members / Commissioners: Emily Amy and James McMullen

Staff: Fire Chief Cherie Rita and Fire Captain

**Scott Bravo** 

2. Public Comment

No public comment.

- 3. Review Internal Resumes / Qualifications Submitted for Promotion for Volunteer Fire Chief Position
  - a. Close Session
  - b. Resume A
  - c. Resume B
  - d. Resume C
  - e. Resume D
  - f. Open Session and Report Out of Closed Session

Commissioner Amy closed the session at 1545 hours.

Commissioner Amy reopened the session at 1610 hours. Moving forward two candidates for interviews on or after July 11, 2024 (to be scheduled). Chair Amy will be sending the 360 evaluation out on the one additional candidate.

4. Discussion / Action – Timeline and Steps for Board Selection of Volunteer Fire Chief (Chair Amy)

As reported above out of closed session.

5. Adjourn Meeting (Chair Amy)

Chair Amy adjourned the meeting at 1612 hours.

Approved:	June 25, 2024		
<b>EMILY AMY</b>	. Chair / Commissioner	CHERIE RITA, Recorder	



24901 County Road 95, Davis, CA 95616

(530) 756-0212

# STANDING COMMITTEE – PERSONNEL – MEETING - MINUTES June 5, 2024 at 10:30 AM

Held: Lillard Hall 24901 County Road 95 Davis CA, 95616

1. Call the Meeting to Order (Chair Amy)

Chair Amy called the meeting to order at 1030 hours. Present were:

Committee Members / Commissioners:

Emily Amy and James McMullen

Staff: Fire Chief Cherie Rita

2. Public Comment

No public comment.

- 3. Review Internal Resumes / Qualifications Submitted for Consideration of Promotion to Volunteer Fire Chief Position
  - a. Close Session
  - b. Resume A
  - c. Resume B
  - d. Resume C
  - e. Open Session and Report Out of Closed Session

Commissioner Amy closed the session at 1030 hours.

Commissioner Amy reopened the session at 1112 hours. The Chair of the Committee will send emails to the members who participated in the process regarding qualifications, will send out a 360-evaluation request regarding the qualified members, and will schedule a special Board meeting to interview the qualified members.

4. Discussion / Action - Timeline and Steps for Board selection of Volunteer Fire Chief (Chair Amy)

The Chair of the Committee will request a special Board meeting at the end of June, early July, to interview the qualified members; possible dates are June 25 or July 2.

5. Adjourn Meeting (Chair Amy)
Chair Amy adjourned the meeting at 1

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Chair Amy adjourned the meeting at 1119 hours.

Approved:	June 25, 2024		
FMII Y AMY	/. Chair / Commissioner	CHERIE RITA, Recorder	

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#### Basic Incident Info with Number of Responding Apparatus and Personnel for Date Range

Start Date: 05/01/2024 | End Date: 05/31/2024

DATE	INCIDENT #	ADDRESS	INCIDENT TYPE	SHIFT	ZONE	# APP.	# PERS.
05/01/2024	2024-88		321 - EMS call, excluding vehicle accident with injury	C Shift	0- WPL - West Plainfield Station 30 Response Area	4	5
05/03/2024	2024-089	County Road 93A	631 - Authorized controlled burning	A Shift	261- WNF-WPL - Borderline Call Winters & West Plainfield	3	4
05/05/2024	2024-90	34670 County Road 96 CIR	553 - Public service	B Shift	0- WPL - West Plainfield Station 30 Response Area	1	1
05/07/2024	2024-91	County Road 97	611 - Dispatched & cancelled en route		0- WPL - West Plainfield Station 30 Response Area	2	3
05/09/2024	2024-092	8118 Sikes RD	611 - Dispatched & cancelled en route	C Shift	810- DIX - Special Call or Mutual Aid to Dixon	1	4
05/09/2024	2024-093	18111 County Road 94B	571 - Cover assignment, standby, moveup	A Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	1	3
05/10/2024	2024-094	County Road 25	611 - Dispatched & cancelled en route	A Shift	703- WOF Auto - Automatic Aid Willow Oak (Not Borderline)	2	5
05/10/2024	2024-095	County Road 95	324 - Motor vehicle accident with no injuries.	A Shift	0- WPL - West Plainfield Station 30 Response Area	4	5
05/10/2024	2024-096	18111 County Road 94B	571 - Cover assignment, standby, moveup	A Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	1	2
05/11/2024	2024-97	County Road 27	322 - Motor vehicle accident with injuries	B Shift	702- WOF-WDL-WPL - Borderline Call Willow Oak, Woodland, & West Plainfield	3	4
05/12/2024	2024-98		321 - EMS call, excluding vehicle accident with injury	B Shift	0- WPL - West Plainfield Station 30 Response Area	3	4
05/12/2024	2024-99	25170 Aviation AVE	735 - Alarm system sounded due to malfunction	B Shift	0- WPL - West Plainfield Station 30 Response Area	4	5
05/13/2024	2024-100		321 - EMS call, excluding vehicle accident with injury		00- WPL Out - West Plainfield Mutual Aid Out of District	1	3

This report was generated on 6/10/2024 4:03:11 PM



#### Basic Incident Info with Number of Responding Apparatus and Personnel for Date Range

Start Date: 05/01/2024 | End Date: 05/31/2024

DATE	INCIDENT #	ADDRESS	INCIDENT TYPE	SHIFT	ZONE	# APP.	# PERS.
05/14/2024	2024-101		321 - EMS call, excluding vehicle accident with injury		0- WPL - West Plainfield Station 30 Response Area	3	4
05/15/2024	2024-102	24830 County Road 95	541 - Animal problem	A Shift	0- WPL - West Plainfield Station 30 Response Area	1	2
05/15/2024	2024-103	E Highway 16	143 - Grass fire	A Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	2	5
05/16/2024	2024-104	County Road 31	622 - No incident found on arrival at dispatch address	A Shift	0- WPL - West Plainfield Station 30 Response Area	2	3
05/16/2024	2024-105	35301 County Road 31	631 - Authorized controlled burning	A Shift	0- WPL - West Plainfield Station 30 Response Area	2	3
05/17/2024	2024-106	County Road 94	162 - Outside equipment fire	B Shift	0- WPL - West Plainfield Station 30 Response Area	5	5
05/17/2024	2024-107	Cr 29	324 - Motor vehicle accident with no injuries.	B Shift	0- WPL - West Plainfield Station 30 Response Area	3	3
05/19/2024	2024-108	18111 County Road 94B	571 - Cover assignment, standby, moveup	C Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	1	4
05/21/2024	2024-109	County Road 31	352 - Extrication of victim(s) from vehicle	A Shift	0- WPL - West Plainfield Station 30 Response Area	2	4
05/21/2024	2024-110	County Road 95	622 - No incident found on arrival at dispatch address	A Shift	701- WOF-WPL - Borderline Call Willow Oak & West Plainfield	2	4
05/22/2024	2024-111	18111 County Road 94B	571 - Cover assignment, standby, moveup	A Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	1	3
05/23/2024	2024-112	700 Main ST	571 - Cover assignment, standby, moveup	B Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	1	2
05/23/2024	2024-113	8757 Winters RD	143 - Grass fire	B Shift	9999- XSO - Mutual Aid to Solano County (Not Dixon)	1	1
05/25/2024	2024-114	Cr 31	322 - Motor vehicle accident with injuries	C Shift	0- WPL - West Plainfield Station 30 Response Area	3	4





#### Basic Incident Info with Number of Responding Apparatus and Personnel for Date Range

Start Date: 05/01/2024 | End Date: 05/31/2024

DATE	INCIDENT #	ADDRESS	INCIDENT TYPE	SHIFT	ZONE	# APP.	# PERS.
05/26/2024	2024-115	Cr 95a	911 - Citizen complaint	C Shift	0- WPL - West Plainfield Station 30 Response Area	3	4
05/27/2024	2024-116	Cr 31	600 - Good intent call, other	A Shift	0- WPL - West Plainfield Station 30 Response Area	2	3
05/27/2024	2024-117	Cr 27	324 - Motor vehicle accident with no injuries.	A Shift	701- WOF-WPL - Borderline Call Willow Oak & West Plainfield	5	6
05/28/2024	2024-118	34577 22 CIR	143 - Grass fire	A Shift	703- WOF Auto - Automatic Aid Willow Oak (Not Borderline)	3	5
05/31/2024	2024-119		321 - EMS call, excluding vehicle accident with injury	C Shift	0- WPL - West Plainfield Station 30 Response Area	3	4
05/31/2024	2024-120	700 Main ST	611 - Dispatched & cancelled en route	C Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	1	4
05/31/2024	2024-121	7447 16 HWY	611 - Dispatched & cancelled en route	C Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	1	2
05/31/2024	2024-122	25500 22 CIR	112 - Fires in structure other than in a building	C Shift	00- WPL Out - West Plainfield Mutual Aid Out of District	1	5

**TOTAL # INCIDENTS: 35** 



24901 County Road 95, Davis, CA 95616

(530) 756-0212

# BOARD OF COMMISSIONERS – REGULAR MEETING - MINUTES May 21, 2024, at 7:00 PM

Held in Person at Lillard Hall 24905 County Road 95 Davis, CA 95616

Held by Zoom: https://us06web.zoom.us/j/98831083439

### 1. Call the Meeting to Order and Establish Quorum (President McMullen)

The meeting was called to order at 7:01 PM by President McMullen

Clerk of the Board, Kytiana Sayer-Peterson, called role and confirmed that a quorum was present

Present were:

Commissioners: President James McMullen, Commissioner Beth Stiles, Commissioner Emily Amy, Commissioner Warren Roos, and Commissioner John Lindsey

Staff: Board Clerk Kytiana Sayer-Peterson, Assistant Chief Dave Stiles, and Captain Scott Bravo

Public: West Plainfield Fire Protection District Resident and Property Owner Duane Chamberlain, and Representative from SCI Consulting Group Jeanette Hynson

#### 2. Public Comment

**NONE** 

#### 3. Discussion / Action – Hire Board Clerk Candidate Kytiana Sayer-Peterson

Commissioner Amy, head of Personnel Committee, introduced Board Clerk candidate Kytiana Sayer-Peterson. Kytiana works for the California Society of Health-System Pharmacists (CSHP) in a similar capacity, engaged with two boards. Personnel committee puts forth candidate as the Clerk of the board for the West Plainfield Fire Protection District (WFPD).

Motion: Accept Kytiana Sayer-Peterson put forth by the Personnel Committee for

the Role of Clerk of the Board

By: Commissioner Amy

Second: Commissioner Roos

Discussion: NONE

Motion passed unanimously

# 4. Presentations - Service Plaques for Retired Commissioners Richard Guarino and Jim Yeager (President McMullen)

Retired Commissioner Yeager was not able to be present at Lillard Hall, however he is honored to accept the Plaque. McMullen asks for a volunteer among the commissioners to deliver the plaque to Retired Commissioner Yeager's home.

There was no opposition among the commissioners to deliver Retired Commissioner Yeager's plaque to his home.

Retired Commissioner Richard Guarino accepted plaque for 12 years of service from 2011-2020.

Commissioner Amy volunteers to take Retired Commissioner Yeager's plaque to his home.

#### 5. Weed Abatement Report (Firefighter Lee)

Firefighter Lee is not present at Lillard Hall, Assistant Chief Dave Stiles presents the information on the Weed Abatement Report on his behalf.

Firefighter Lee has begun inspections and they are ongoing. Lee hopes to finish primary round of inspections by May 31<sup>st.</sup>

#### 6. New Business

#### a. Discussion / Action - E30 Replacement - Preapproval (AC Stiles)

Apparatus Replacement plan following the NFPA guidelines is ongoing within budget review. NFPA's recommendation is that a frontline apparatus is in service for approximately 10 years before moving to reserve. The current frontline engine for WFPD is 21 years old which is reaching the end of the current NFPA's recommended lifespan.

AC Stiles is weighing replacement options with consideration of financial solvency. Stiles addresses to commissioners the current estimated amount of apparatuses and details inflation percentages with manufacturers

increasing from 3-5% inflation rates historically, 5-8% inflation rates within the last 3-5 years, and up to 14-17% inflation rates last year, and are projecting a 20% inflation of costs for future years. Estimating costs amount to a total of 8.3 million unfunded dollars.

Considering the inflated cost for apparatus, may not expect carrying a fleet of the same size as current. AC Stiles conservatively estimates a total of 5.5-6 million dollars projected in expense for apparatus replacement.

There is a structural deficit in funding for apparatus replacement, at current around \$70,000 each fiscal year is allocated towards Capital Assessment Replacement Fund projected through Fiscal Year (FY) 2048. As notes within the Capital Assessment Replacement Fund projections, with the purchase of Engine 1 in FYE 29, WFPD can expect an estimated cost of 1.49 million dollars with a balance deficit of \$836,123.00. The deficit projections continue through the fiscal years as additional replacements are necessitated.

Capital Assessment Replacement Fund inputs were reassessed displaying over \$200,000.00 per FY in income to the fund will be required to offset the apparatus replacement over the coming Fiscal Years.

Discussion ensued addressing replacement options, options presented by AC Stiles include:

- Purchase and Finance over 15 years. Yearly costs would be equal to or greater than what we are currently able to set aside, however, this would entail little to no funding for replacements following the 15 year time period. This option does not account for savings needed for other large equipment replacement needs. Can investigate becoming self- or grantfunded over the next 5-8 years to cover other large equipment replacement.
- Buy New.
- Look for grant opportunities, many agencies have tried AFG grant funding. It is unlikely that we would be considered. Also consider private donors.
- Consider finding an apparatus 10 years old or newer that has undergone depreciation. Typical depreciation of these units represents a \$35,000.00 loss in value each year. With this option may still need to consider tertiary funding sources, however, this option may allow flexibility to grow Replacement Fund.
- Repower/Refurbish current engine. Time estimated up to a year for refurbishment. AC Stiles asserts that this option is not preferable/viable.

AC Stiles asks the Board of Commissioners for thoughts on the best course of action with provided options. Encourages the board to also consider external funding, or look at depreciated apparatus, however external funding will likely not cover full costs and will require financing.

Commissioner Amy inquires of AC Stiles what the goal is for replacement timeline. Stiles replies that they are looking for a replacement within the next 2 years. Some manufacturers have long build times for the ordered apparatus and can expect percentage of increase in due amount over time of build.

Commissioner Amy inquires what the cost would be to rebuild existing apparatus. AC Stiles replies that NFPA requirements would necessitate a full engine replacement in order to base age of the apparatus or replace/repower with a new chastity.

Commissioner Roos inquiries if there is any residual value in the apparatus when the old one is decommissioned. Stiles replies that there is and surmises that market prices may be between \$80,000-\$100,000.

President McMullen asks Chief Stiles to reference again the quoted NPFA standard. Chief Stiles asserts that the NFPA reference codes to 1901.

Commissioner Lindsey inquires if there is value in keeping old apparatus in reserve due to manufacturer delays and troubleshooting decommissioned time while apparatus is in service. AC Stiles replies that there can be value added, however old apparatus can be a liability regarding discarding later and depreciating re-sell value.

Commissioner Roos clarifies that the repair and out of service time will become excessive for maintenance comparable to a newer apparatus. Chief Stiles articulates that this information is difficult to anticipate in advance and can differ depending on each apparatus.

Commissioner Amy's initial reaction is to watch for a used apparatus as opposed to a new apparatus. AC Stiles speaks in support of this option

Commissioner Stiles speaks in support of Commissioner Amy's statement to watch for used apparatus to be open if additional funding is not attained.

Commissioner Lindsey inquires if a new apparatus would be more reliable as opposed to watching for a used apparatus. AC Stiles responds that anything less than 10 years old should face less system failures. However, the longevity of a unit has proven to have more long-term reliability for older model apparatus and newer apparatus have newer systems that encounter additional failures including emission system standards.

Commissioner Stiles inquiries about the duration of time typical for a preapproval for purchase of an apparatus, additionally asking if it is possible to hold an order while board deliberates or is it best practice to have a preapproval. Chief Stiles replies that it would be best to have preapproval to hold during deliberations.

Public comment received on this item following discussion from Duane Chamberlain stating the newer engines are equipped with sensors for air pollution, 20-year-old engine will continue to run. Chamberlain explains that the engine will shut itself down for air pollution and will not serve as well as an older engine. Chamberlain inquires of Chief Stiles of compliance with fire apparatus regulations given the trends of newer apparatus being faulty with regard to maintenance and emission-controlled apparatus operations. AC Stiles replies that the industry is currently leaning towards adoption of electric/hybrid apparatuses.

 b. Discussion / Action – Adopt Resolution 24-0x – Resolution of Intention to Continue Assessments for Fiscal Year 2024-25, Preliminarily Approving the Engineer's Report, and Providing for Notice of Public Hearing for the West Plainfield Fire Protection District, Fire Protection and Emergency Response Services Assessment (SCI)

President McMullen opens discussion with Commissioner Amy.

Commissioner Amy details old list of Board of Commissioners on the report as a major error on report. Report requires correction of retired, new, and promoted commissioners list. Representative from SCI Consulting Group addresses the Board of Commissioners and reminds the board that the report is available for preliminary approval as an internal function and assures that the mentioned changes will be made and re-submitted. Representative apologizes for oversight and reminds the board that they will be back during June meeting if the board moves forward with the resolution to provide notice of public hearing.

Motion: Approve resolution as written with correction to the engineers report as mentioned and move forward with public hearing at the June meeting.

By: Commissioner Amy

Second: Commissioner Stiles

Discussion:

Chief Stiles reminds the board that this process is a part of the annual requirements for the 218.

Motion passed unanimously.

# c. Discussion / Action – Adopt Preliminary Fiscal Year 2024 / 2025 District Budget (Commissioner Stiles)

Commissioner Stiles details that the budget committee has met twice to determine budget. Included in their considerations were the 218, personnel resources, and a large adjustment regarding upcoming building maintenance. Reorganized priorities to actively focus on roof sealing and painting the station. Deferred other maintenance to following year. Electricity costs were brought up as the expense was high. Discussing solar options to offset electricity monthly costs. Looking for a grant or looking to Yolo County for financing to pursue solar options. Another area of the budget details, not adding additional radios, will not be budgeted for this year as the district cannot afford updating although current inventory is not meeting all requirements.

Bravo inquiries about PGE costs, Stiles replies that the combined costs between station and hall electricity amounts to over \$1,100.00 a month.

Commissioner Stiles determines that overall, the budget is balanced, to still have revenue to use for services, with gaps in long-term funding needs.

Commissioner Amy inquires where shed will be located. AC Stiles replies that the shed will be located on the north side on site.

Commissioner Stiles motions that the board approves the tentative 2024/2025 budget.

Motion: Approve the tentative 2024/2025 budget for final approval at the June meeting

By: Commissioner Stiles

Second: Commissioner Roos

Discussion: No Discussion.

Motion passed unanimously

# d. Discussion / Action – Adopt Procedure 1005 – Leaves and Absences – Career Staff (AC Stiles)

Chief working on policy for leaves and absences, looking for direction from staff on how to sign up and get approval for Vacation Time. Proposes vacation time to be assessed in 6-month increments with a 4-month sign up period prior to that 6-month time incremental range.

Commissioner Amy inquires 1005.4 what is compassionate leave and is it paid? AC Stiles replies that it is compensated. Commissioner Amy inquires how it differentiates between vacation or sick leave. AC Stiles replies that it

is paid leave deducted from 'sick leave' time includes bereavement and compassionate time off. Commissioner Amy resplies that the State of California implemented language in January 2024 regarding compassionate leave.

Commissioner Amy recommends to postpone until the next meeting to establish language specific to this section pursuant to the changes recently made by the State of California.

Bravo speaks on behalf of career staff Packet was released under 72 hours ago. Nothing stands out as valuable to pay attention to, update from past where there were minimal policies on leave/bereavement.

Board is under consensus to defer item to June meeting.

### e. Discussion / Action - Standing Committee Appointments (President McMullen)

Lindsey to replace commissioner Roos on Budget Committee. Roos has stepped down from the Personnel Committee, replaced by McMullen. Board committee makeup will consist of the below:

Budget and Benefits Committee - Commissioner Stiles (Chair) and Commissioner Lindsey

Personnel Committee - Commissioner Amy (Chair) and President McMullen Lillard Hall Committee - Commissioner Amy (Chair) and Commissioner Roos Board thanks Commissioner Amy for chairing two of the committees of the Board.

#### f. Discussion / Action – Standing Committee – Reports

### i. Lillard Hall Committee - Amy, Roos

#### 1. Hall Manager Report

Includes Bank account balances, funds in and out, and Rental Report.

Commissioner Amy takes questions on the report. No questions on this item.

### 2. Discussion / Action – Approval of May 15, 2024, Minutes

Minutes came later. Not a part of the packet, but were provided after.

No Questions on this item.

Motion: Approve minutes of May 15<sup>th</sup> Hall Manager Report

By: Commissioner Amy

Second: Commissioner Roos Motion passed unanimously.

# 3. Discussion / Action – Adopt Preliminary Lillard Hall Budget for Fiscal Year 2024 / 2025

Commissioner Amy notes that did include CPI increase written into contract going into effect in September. Needed to verify, estimated 2.25 increase, will need to confirm the increase. Won't know exact number until late in the summer. Numbers this year are looking lower than the preceding year.

Additionally, Commissioner Amy did not include 2.25 increase into the kitchen instead allocated to repairs and maintenance category. Kitchen remodel costs in at around \$21,000.00 already received payback (noted in minutes) by the end of the budget year will be closer to \$15,000.00. Include funds in repairs and maintenance and continue at \$600.00 for Kitchen remodel deduction fund allocations.

Motion: Approve the Preliminary Lillard Hall Budget for Fiscal Year 2024 / 2025

By: Commissioner Amy

Second: Commissioner Stiles

Discussion: No Discussion

Motion passed unanimously.

#### ii. Budget and Benefits Committee - Stiles, Roos

#### 1. Discussion / Action - Approval of April 26, 2024 Minutes

Motion: Approve April 26, 2024, Budget and Benefits Committee meeting minutes in combination with May 7, 2024, Budget and Benefits Committee meeting minutes.

By: Commissioner Stiles

Second: Commissioner Roos

Discussion: No Discussion

Motion passed unanimously.

#### 2. Discussion / Action – Approval of May 7, 2024 Minutes

Approved in combination with prior item 6.f.ii.1.

### 3. Discussion / Action – Creation of Additional Restricted Fund – Non-Leave Benefits

Funds that carry over within their account require a line item created in budgetary ledger to show funds at the end of the year as they transfer into that account. Item 3.b on the May 7, 2024, Budget and Benefits Committee minutes.

Commissioner Amy inquires if this will be an account that indicates to the county to separate these funds. AC Stiles replies that the WPFD will budget that, whatever is unused will be transferred into a reserve account through a county transfer.

Motion: Create an additional restricted fund for the Non-Leave Benefits

By: Commissioner Stiles

Second: Commissioner Roos

Discussion: No Discussion

Motion passed unanimously.

#### iii. Ppersonnel Committee - Amy, Roos

### 1. Discussion / Action – Approval of April 17, 2024 Minutes

Motion: Approve April 17, 2024, Personnel Committee meeting minutes in combination with April 25, 2024, Personnel Committee meeting minutes

By: Commissioner Amy

Second: Commissioner Lindsey

Discussion: No Discussion

Motion passed unanimously

### 2. Discussion / Action – Approval of April 25, 2024 Minutes

Approved in combination with prior item 6.f.iii.1.

 Discussion / Action – Adopt Revised Policy 1003 – Position Descriptions – Attachment: Position Description – Board Clerk

Do not require the Board Clerk to attend all the Committee Meetings. The Clerk does not need to be present at those

meetings and will need to make corrections in the job description. Making changes to the Job Description in these sections: Policy 1003 Pages 73-77 in Meeting Packet.

Motion: Approve revisions in Job Description for the Board Clerk.

By: Commissioner Amy

Second: Commissioner Stiles

Discussion: No Discussion

Motion passed unanimously.

### 4. Discussion / Action - Fire Chief Replacement Process / Timeline

Chief Rita has formally given notice that she will be stepping down at the end of the year.

Discuss process for selection of the new Fire Chief. Started consideration in three people in house that are interested in the position. Things that have been submitted so far will be considered when the selection process has begun. This evening only the process will be determined as this item has not been done for a long time and the process will need to be clarified.

Chief Rita, through Commissioner Amy, suggested sending out 360 Evaluations to the whole department. Commissioner Amy proposes a locked steel box with a slot in front of the department to avoid mailing to receive these materials.

The Personnel Committee may reach out to receive additional materials from parties that have expressed interest.

Commissioner Amy opens the floor to discussion among the commissioners in terms of recommendations for process.

Stiles speaks in support of receiving feedback. Surmises that information will be brought forward that isn't normally included (eg., praise, opportunities to improve) would be nice to have when deciding. Inquires how or timeframe for that hiring process. Commissioner Amy inquires about the timeline and when a hire would need to be made. Commissioner Amy replies that there needs to be a shadowing period. The committee can utilize the same

questions from past 360 evaluations, populate with the names of those that have expressed interest and allow evaluations for two weeks. Commissioner Amy states that the Board would have a special meeting to do an Interview Panel before the end of June to provide a candidate recommendation to the board/make a final determination. Special meeting likely before the end of June.

Commissioner Roos suggests entertaining the idea of recusal if any candidates should have a family member on the board. AC Stiles replies that Yolo County Counsel has advised that if it is an unpaid position and/or no-stipend position, there is no recusal process required to be implemented.

Commissioner Amy asks the board if they are comfortable with moving forward.

Commissioner Roos confirms timeline of decision by July, Commissioner Amy confirms a tentative decision by July and in place by August for shadowing time and sharing of information.

Motion: Approve April 26, 2024, Budget and Benefits Committee meeting minutes in combination with the May 7, 2024, Budget and Benefit Committee meeting minutes

Captain Bravo inquires if there will be a cross check to ensure that all that have applied meet the minimum requirements. If an individual were to be inclined to participate in the process as a candidate, but did not meet the minimum requirements, would the Personnel Committee continue to do evaluations on those individuals? Commissioner Amy determines that she will meet with Chief Rita to discuss that and consider whether to include candidates that don't meet the minimum requirements in the evaluation stage for candidates/applicants. Commissioner Amy thanks Captain Bravo for bringing this to the attention of the Board and Personnel Committee members.

Commissioner Amy thanks everyone for their input.

#### 7. Assistant Chief's Report (Assistant Chief Stiles)

No further to report. Chief Rita did include a copy of the incidents responded to within the meeting packet.

Commissioner Amy inquiries about a note on the incidents that she does not typically see on the report, curious what a 553 Public Service entails or covers. AC Stiles details that a public assist or public service is a catch all or umbrella category including any service call for the public that does not have another existing reporting code. Series of codes are broken down by type of service, something that doesn't apply to most other code series will become attributed to public service (eg, goat herding).

#### 8. Fire Fighter's Association Report (President Lee)

Captain Bravo presents report on behalf of President Lee. No items to report. No discussion received on the Item.

### 9. Clerk's Report

 a. Discussion / Action – West Plainfield Fire Protection District Bill Review / Ratification

Commissioner Amy inquires of Assistant Chief Stiles of the longevity of some of AV pads, glucose strips, and other items. AC Stiles states that most items will expire within a year or two and will be replaced on their expiration date. Even if unused will need to be replaced to replenish expired stock.

Motion: Approve the Bill Packet as presented

By: Commissioner Amy

Second: Commissioner Roos

Discussion: No Discussion

Motion passed unanimously.

# b. Discussion / Action - Approval of April 16, 2024, Regular Board Meeting Minutes

President McMullen asks the board if there are any corrections in the meeting minutes.

Commissioner Amy asks a question about Item 5.a, noticed that there was not a dollar amount listed in what was said to be approved at the meeting which was \$199.00 would like dollar amount to be listed in the minutes. Commissioner Amy asks if the other board members have a recollection of the cost for purchasing a template from the QSEHRA plan template.

Commissioner Stiles speaks in agreement that the recollected dollar amount is accurate but does not specifically remember.

Commissioner Amy infers that the feeling of the board is that the dollar amount does not need to be included in the minutes? Commissioner Amy continues with next meeting minutes' item at Page 83 Section 6.b, requests to change "specially" to 'specifically.' Commissioner Amy continues to next item of the minutes at Page 85 Section 6.d.iv, requests to change "Commissioner Am" to 'Commissioner Amy.'

Motion: Approve the April 16, 2024, Regular Board meeting minutes as corrected

By: Commissioner Amy

Second: Commissioner Lindsey

Discussion: No Discussion

Motion passed unanimously.

#### 10. Open Forum

Commissioner Roos brings to the attention of the board a past discussion of seizure of personal computers in the event of a legal dispute. If hardware were to be seized, would result in great concern. Would prefer to not be required to have additional/ separate hardware specifically for WPFD. In the event of a lawsuit or legal incident requiring seizure of personal hardware, there would need to be systems in place to avoid this if there is any possibility. This could include issuance of hardware for board communications. Commissioner Roos urges the board to take this item into serious consideration.

Commissioner Lindsey asserts that, in his experience, it is unlikely that a device would be seized. There would be a reason directly related to the legal matter at hand. Data can be obtained; however, a physical device is unlikely to be seized. Additionally, the information that can be used in the legal dispute has to be requested and related to the case.

Commissioner Amy reflects the conversation also including utilization of personal email addresses. And in that case the full email would be able to be used in the search.

Commissioner Lindsey advises that they could potentially do a keyword search. Additionally advises that there is unlikely to be a scenario for a blanket discovery request, this would be the determinations of the legal parties at play. It is a reasonable concern, however diligence from the board to be mindful about limited communications and adherence to detailed filing systems is import.

Commissioner Amy reflects concerns from past conversations regarding the data more so than the device itself.

Commissioner Lindsey speaks from his experience in the legal field with past experiences on data acquisitions detailing that it is typically a fight to obtain materials in this way.

Commissioner Amy clarifies that the recommendation was to utilize provided devices specifically for Board/District Activities to protect personal devices. President McMullen asks of Commissioner Stiles the Board had discussed providing hardware to Board members for board related activities/communications. Commissioner Stiles asserts that the Board had discussed looking at the budget for room to accommodate the expense of the hardware and was not able to implement it.

Commissioner Amy proposes old tablets as a potential avenue, to which Assistant Chief Stiles replies that they will become available over time as they are replaced.

Commissioner Lindsey reminds the board that the data would be within the Google or Microsoft Cloud as opposed to on a device itself if a file is located on that device. Commissioner Lindsey asserts that this is a good thing for the board to consider.

President McMullen states that he would like to be informed when the tablets are made available. Assistant Chief Stiles to touch base with Captain Fish to get a timeline on the tablets for the board to utilize.

Commissioner Lindsey advises the board to be consistent when managing data.

Commissioner Roos inquires if there is a preemptive measure that can be taken to protect the board. Commissioner Lindsey will investigate options to take precautionary measures.

Captain Bravo career firefighters met on May 2, 2024, and provided Chief Rita a petition for recognition. Captain Bravo and Chief Rita received an email request for local rules by May 28, 2024. Captain Bravo reads the letter provided. Bravo has not been able to find any local rules related and wanted to put this on the Board's radar.

Commissioner Roos asks what the board needs to understand of the request made. Captain Bravo identifies the main request as identifying any rules applicable to this item of coming to either board or district when forming a bargaining unit.

Commissioner Amy reflect on a few sections of policy that may be applicable to bargaining units, doesn't recall where the policy was located.

Captain Bravo Lexipol policy approvals November-January 2024 there were discussions regarding Bargaining Units.

Commissioner Amy asserts that the language might be within those policies.

Commissioner Lindsey proposes looking at Lexipol policies to get further direction.

Commissioner Lindsey will be out the 10<sup>th</sup>-19<sup>th</sup> of June, may be able to Zoom into June 18, 2024, meeting if possible.

Defer Special Meeting until after June 19, 2024.

### 11. Next regular Board meeting on June 18, 2024

#### 12. Meeting Adjourned (President McMullen)

Motion: To adjourn

By: Commissioner Roos

Second: Commissioner Lindsey

Discussion: No Discussion

Motion passed unanimously.

Meeting Adjourned at 9:00 PM

Minutes approved:					
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JAMES McMULLEN, President/Commissioner KYTIANA SAYER-PETERSON, Clerk



#### **West Plainfield Fire Protection District**

24901 County Road 95, Davis, CA 95616

(530) 756-0212

# MINUTES BOARD OF COMMISSIONERS – SPECIAL MEETING June 05, 2024, at 8:00 PM

Held in Person at: Fire Station 24901 County Road 95 Davis, CA 95616

Held by Zoom: <a href="https://us06web.zoom.us/j/98831083439">https://us06web.zoom.us/j/98831083439</a>
One tap mobile - +16699006833,98831083439#
Dial by your location - (669) 900-6833 US (San Jose)
Meeting ID: 988 3108 3439

1. Call the Meeting to Order and Establish Quorum (President McMullen)

The meeting was called to order at 8:00 PM by President McMullen

Clerk of the Board, Kytiana Sayer-Peterson, called role and confirmed that a quorum was present.

**Present Were:** 

Commissioners: James McMullen, Emily Amy, Beth Stiles, Warren Roos, and John Lindsey

Staff: Fire Chief Cherie Rita, Assistant Fire Chief Dave Stiles, Firefighter Jon Lee, Captain Patrick Fish, Fire Captain Dave Osborn, Firefighter Jason Gallagher

Public: Fire Chief Dan Tafoya of Yolo, Fire Chief Marcus Klinkhammer of Willow Oak, Fire Chief Jack Snyder of Winters, West Plainfield Fire Protection District Resident and Property Owner Duane Chamberlain, and West Plainfield Fire Protection District Property Owner Ken Breckenridge

Via Zoom: Fire Captain Tom Stiles

2. Public Comment

Dan Tafoya, Yolo Fire Chief, had spoken to Assistant Chief Stiles and Chief Rita, and intended to speak to President McMullen about the board's actions that have impacted other districts regarding CPI increase. Fire Chief Dan Tafoya indicates that Assistant Chief Stiles and Chief Rita had expressed to the board that it would be political suicide for Fire Chiefs. Fire Chief Dan Tafoya does not see any reason to implement it so early, as holding off 1-2 years would give other districts a chance to pass their assessments. Fire Chief Dan Tafoya asserts that this is a huge conversation and issue to the extent that they started with 5% CPI and dropped to 3% based on feedback from constituents. After WPFD started the process, Yolo Fire District felt forced to implement a 5 year wait on engagement with CPI increase to satiate constituents. The West Plainfield adoption spread like wildfire and has affected Winters Fire District and Madison Fire Department. Many farmers are shared between the districts. The damage has been done, needing to go through recovery. Fire Chief Dan Tafoya inquires of the board, what has been determined in the budgeting that necessitates such an increase to be in place rapidly and what are the determining factors to consider implementation of the increase emergent. Fire Chief Dan Tafoya's understanding is that it would generate \$6,200.00 revenue. Does not see why this is necessary given the positive relationship thus far with the other districts. Yolo County Fire would never have been conducted in the same way as West Plainfield Fire Protection District and does expect same courtesy. Fire Chief Dan Tafoya asserts that it was a very bad choice to move forward at this time. He continues to say that this is a particularly important thing to landowners, and that shutting down now is a great idea. Districts may have to do it someday if they pass, however, they will have to postpone as long as possible for their district and have not touched for 10-15 years. If it does come and bring a huge increase, Yolo County will have to come to constituents and district. In the lens of a landowner, they would be upset as they have come to the board about these concerns in the past.

President McMullen thanked Chief Tafoya for his comments and for coming down and speaking to the Board. President McMullen asks if the board would like to address presenter, Fire Chief Dan Tafoya, with questions.

Commissioner Lindsey inquires with Fire Chief Dan Tafoya about the process for gearing up for 218 Ballot. Fire Chief Dan Tafoya confirms that they are two weeks away from putting ballots out. Commissioner Lindsey questions of Fire Chief Dan Tafoya if the 218 will pass or not. Fire Chief Dan Tafoya felt confident at that time, given the assurance that there would be a pause on CPI Increase. The increase going away would make the passage of 218 in his district a lot easier, states Fire Chief Dan Tafoya.

Commissioner Lindsey replied that it is likely all districts are seeing what the West Plainfield Fire Protection District had been seeing in terms of inflation of costs.

Recognizes that he understands the sensitivity and that it is important to him that the district retains a good relationship. Commissioner Lindsey expresses gratitude for the presenter to come because this is an extremely important consideration for potentially large constituents of the district. Commissioner Lindsey appreciated that he was provided input for what is on the mind of potentially large constituents within our district. Commissioner Lindsey stated that within boards can be isolating, appreciates the input to gain perspective outside of what has been brought to the board during his short term thus far.

Fire Chief Dan Tafoya adds to the public comment that constituents are a big part of relationship for those voting on balloted measures. Fire Chief Dan Tafoya expressed hurt since the two districts are fellow rural fire protection districts. Having endured the trials of getting the 218 in place, they should understand the difficulties faced by another fellow rural fire protection district and are on the same page.

Commissioner Roos inquires of Fire Chief Dan Tafoya how many residents and residencies are served within the Yolo County Fire Protection District. 1,300 residents and around 300-400 homes. Commissioner Roos surmises that the West Plainfield Fire Protection District serves around 1,000 residents and close to three hundred homes and in serving less residents would be lower in income. Fire Chief Dan Tafoya challenges the board in the assumption that they are operating with less revenue than other districts, and states that they are one of the 'richest' districts in the county. Fire Chief Dan Tafoya states that the Yolo County Fire Protection District is working with around one-third of the operating revenue of West Plainfield Fire Protection District.

Commissioner Roos follows his statement asserting that the district is in trouble with financial operations from his experience on the Budget and Benefits Committee of the Board. Commissioner Roos follows with additional comments on the 218. Commissioner Roos begins that originally though that the 218 was a great idea and has not pivoted to believe that it is a terrible idea because as all are in the same boat, it should be a collective effort. Additionally, Commissioner Roos calls leaders of each district to act, to bring a meeting to the County as first responders in rural areas that provide mutual aid. Commissioner Roos expresses frustration in 'diving for dollars' and obtaining funds to operate. Commissioner Roos asks of the group if it is fair to assume that all districts are enduring financial constraints? The problem derives at a higher level and Commissioner Roos proposes that representatives from each district pursue advocacy for County funding before disputing among the districts. He additionally proposed the representatives can remind them of efforts on behalf of the fire protection districts and speak comparable to the covalent Sheriffs Departments that are more well-funded. Is it fair to say that financial constraints are shared among all the districts? Finally,

Minutes – Board Meeting – Special June 5, 2024 Page 4

Roos determines that the district took quick action as they were in a position of need to utilize the additional revenue.

Fire Chief Dan Tafoya speaks towards enduring extreme financial constraints for a long time, and the efforts to pursue funding that is earmarked for emergency services personnel. It is give and take because if 218 is passed it is funding that the district needs, have received small amounts but more is necessitated. The district is constantly looking at ways to bring in larger sources of funding/revenue. Fire Chief Dan Tafoya does not think it is the right time to refute or advocate within the board of supervisors as they are working with the districts, things could change on an annual basis and as such is not considered stable funding. Fire Chief Dan Tafoya proposes waiting until the other districts get their 218.

President McMullen thanks Fire Chief Dan Tafoya for his comments.

Duane Chamberlain, West Plainfield Fire Protection District Resident/Property Owner, and former 5<sup>th</sup> District Supervisor, recalls paying an additional 20,000 a year and would not appreciate accruing an increase to this expense. Chamberlain states that he would like to support the fire department and reflects on examples of WPFD showcasing excellence in comparison to other protection agencies, however, he cannot keep paying more and more. Chamberlain also warns district to be careful buying new machinery. Many problems with this hardware.

Ken Breckenridge, West Plainfield Fire Protection District Property Owner, owns around 588 acres within the district. Breckenridge asserts that the West Plainfield Fire Protection District has always asked for more money than others district. Breckenridge states that he has never had a call to the property, and that paying more than residential is not right. There are currently no houses on the property and no calls. The increase last year brought taxes up \$3,263.62 and Breckenridge speaks in opposition to wanting to increase the taxes more, someone needs to budget and accounting better. Every crop is down and cannot continue to pay. Breckenridge continues that the district and department have sustained thus far without these increases and continued taking care of others. Breckenridge asserts that someone is not doing something right.

President McMullen thanks Ken Breckenridge for his comments and asks if anyone else would like to speak during the public comment period.

Assistant Chief Stiles reported he was contacted by Blake Garland with the Willow Fire Protection District who wanted to express concern of the depressed prices of the agriculture commodities this year and how it will affect those landowners. Blake Garland questions and urged the Board not to use SCI for reporting next year, because the district itself is better suited to know what is changing in the district, and that the expenditure is something unnecessary.

President McMullen asks if there are questions of Assistant Chief Stiles. Commissioner Lindsey asks what is the impact of not outsourcing the report or alternative to using SCI. Assistant Chief Stiles replies that the district would have to do the report in-house, which is additional workload and time on staff. Would be happy to look at a report at a different time to comparably review expenses and provide reasoning as to why expenses are allocated where they are.

Fire Chief Rita reads email from Bob Eoff for the submitted written comments. Email text is below:

Subject: special meeting to consider COLA

Message: I farm seven hundred acres in the district. I learned on the street (no notice from you that a special meeting is being held to consider the COLA. SECIAL MEETING? At 8 PM? Flying under the radar?? The initial assessment was extremely high for farm ground. We are subsidizing everyone else. We farmers ensure our crops and in the 40 years I have owned the property, never a fire.. I find it poor planning on your part, if a COLA is passed. W. Plainfield's assessment was the highest in the rural county. I PROTEST THE COLA

Chief Rita reports that she responded to that letter stating that tonight's meeting is part of the process and that he was welcome to attend, the district has not yet set the official public hearing to review official numbers, and how the district is moving ahead.

President McMullen declares, with no further discussion, the conclusion of the public comment period.

- 3. West Plainfield Fire Protection District Fire, Fire Protection and Emergency Response Services Assessment
  - a. Discussion / Action Authorized Assessment Rate; Amount to be Levied.

Here tonight to discuss whether the board may want to consider changes to last month's adoption of the resolution 24-01 that set the maximum assessment rate, increased it by the CPI, and levied at the increased rate. The three options before the Board tonight are: (1) to do nothing or leave as is, (2) sign different resolution to not increase the maximum assessment rate by this year's CPI and continue to levy at last year's assessment rate, (3) or increase assessment rate to the maximum by CPI but levy to last fiscal year's rate.

President McMullen opens the floor for discussion on this item.

Commissioner Amy's understanding is that when setting the final rate the district will be taking it to the community for comment, and depending on comments, the district could change what it was set to be.

Chief Rita confirms that the Board can make changes after the official public comment meeting and before levying and assessment.

President McMullen opens the floor for discussion or a motion on the item.

Commissioner Roos articulates that the West Plainfield Fire Protection District needs to be sensitive to other districts and should consider them even if it means enduring additional financial hardship.

Commissioner Stiles addresses Fire Chief Dan Tafoya stating that the West Plainfield Fire Protection District fortunately has multiple women operating on the board and requests of all to be sure to address all genders when referring to or addressing the board.

Commissioner Stiles also speaks towards the 218 asserting that it was first passed in '96 and speaks in opposition to not supporting in the past. The district board of the past did not pass; they decided not to go through it as they did not want to increase their rate. Costs have gone up almost 50%. Had the West Plainfield Fire Protection District, similarly to other districts, done their due diligence, they would have been assessed multiple times to raise costs appropriately to work with a moderate budget. When presented with the opportunity to gain funding to address the district funding shortfall, they were advantageous of the opportunity. Costs have been raised so that the district can survive. There is no other funding available currently. Commissioner Stiles speaks in support of moving forward with raising the maximum assessment rate as all expenses have risen significantly.

President McMullen opens the floor for further comments on this item.

Commissioner Amy received more information on this topic, but initially did not understand the difference between assessment rate and levy rate. Commissioner Amy would still like to see assessment rate increase but maintain the levy rate. Hate to lose money for the budget. Commissioner Amy inquires how other districts would feel, would it be more promising to not have higher assessment rates with an no increase in levy rate. Fire Chief Dan Tafoya identifies that the districts are trying to pass 218's right now, and CPI is a huge part of conversation being had. Proceeding with an increase by the CPI will be misconstrued as the district grossly taxing and will ultimately affect other districts negatively as they work to get it passed. Fire Chief Dan Tafoya asks for cover while the 218 is passed.

Fire Chief Dan Tafoya asked the Board about the budget increase before and after 218 implementations. Fire Chief Rita states that it was \$243,000.00 from the assessment and \$127,000.00 from the county for operating revenue.

Fire Chief Dan Tafoya asks them, had they not obtained the 218 what would they have. Commissioner Stiles replies that they would have been operating with one person on staff. The 218 going into effect allowed for there to be additional people on staff, as such, a majority of the 218 funding goes to human resources to staff the station. The volunteer world is failing, and thee West Plainfield Fire Protection District does not have a lot of volunteers and needs to staff the department.

Fire Chief Dan Tafoya shares his opinion that whoever determined the budget did a poor job because the additional operating revenue is being claimed to be not enough.

Commissioner Roos surmises that the districts may need to entertain the perspective of consolidation, in an effort to maintain.

President McMullen asks for any further discussion. Given no further discussion, President McMullen opens the floor for a motion.

Commissioner Lindsey states that there is obviously dissonance between board members, as there is a budget committee meeting tomorrow where the board can discuss further and with a sharper pencil. Lindsey proposes taking an assessment of the cost increase and to carefully examine budget and table discussion. If tabled can take decisive action based on the budget committee review. Commissioner Lindsey does not feel as though there is enough information now to confidently make a decision with new information and should be carefully considered.

Postpone increase for a set time, and table decision until after Budget and Benefits Committee.

Commissioner Roos asks Fire Chief Rita what the timeline is for the Board to have decided. Chief Rita replies that in early August levy amounts must be sent to the Assessor's office. There needs to be 10 days' notice published in the paper before a public hearing about it and likewise for the decision made.

Commissioner Roos reiterates we need to be sensitive to other Districts.

Commissioner Amy expresses concerns that the next discussion will be on the 18<sup>th</sup> of June where Lindsey will not be present. Lindsey may be able to arrange zoom call and potentially provide written comments to board clerk.

Commissioner Roos will also not be available for the June 18<sup>th</sup> meeting.

Chief Rita proposes to reconvene discussion at July meeting with official public comment proposed and potentially an additional special meeting.

Motion: Table decision on the approval of resolution 2402 to the July 16<sup>th</sup>, 2024, meeting of the board

By: Lindsey

Discussion:

Fire Chief Rita suggests a Special Board meeting to make a determination prior to July as the District must give 10 days and add time to get notice published (can take papers a few days to get notice setup and published) between adopting resolution of intent to levy and conducting meeting to adopt actual resolution to levy.

Commissioner Lindsey withdraws motion.

Motion: To move forward with adoption of resolution 24-02, the version that does not increase the maximum assessment and leaves the levy rate at last year's rate.

By: Commissioner Roos

Second: Commissioner Lindsey

Discussion:

Marcus Klinkhammer, Willow Oak Fire Chief, inquires of the board if they are confident that they could adjust budget and be in good standing for the next fiscal year moving forward with what has been proposed? Assistant Chief Stiles responds that the district has adopted a preliminary balanced budget for income to expenses over the year. The budget does not address long-term structural deficits for the district.

Commissioner Amy expresses concern and discomfort in switching completely from the original resolution last meeting.

Assistant Chief Stiles expresses that there is still time following Budget and Benefits Committee meeting to redetermine decision to move forward.

Commissioner Amy speaks in support of next steps that are more balanced or an approach like the original Motion by commissioner Lindsey.

Commissioner Lindsey clarifies that his thinking has changed when discussing time frames for decision. Preference is to assist districts in passing their 218's as it could be harmful to colleagues.

Commissioner Amy speaks in support of looking for an option in between where it does not have as great of an impact on the district. Leaning towards an option that would not lock the district into place as much as what was originally proposed.

Fire Chief Rita reminds date of submission of actual rate of assessments to the county as August 2<sup>nd</sup> and confirmation of final levy is September 30<sup>th</sup>. Last year the county did allow information late due to ballots were still incoming, seems as though they may be able to accommodate/be flexible.

In Favor: Commissioner Lindsey, Commissioner Roos, President McMullen

Opposed: Commissioner Amy, Commissioner Stiles

Motion passed with a 3:2 majority vote.

b. Discussion / Action – Adopt Resolution 24-02 – Resolution of Intention to Continue Assessments for Fiscal Year 2024-25, Preliminarily Approving the Revised Engineer's Report, and Providing for Notice of Public Hearing for the West Plainfield Fire Protection District, Fire Protection and Emergency Response Services Assessment

Motion: Adopt Resolution 2402 with draft mark stating 'No Change to Rate or Levy'

By: Commissioner Lindsey

Second: Roos

Discussion: NONE

In Favor: Commissioner Lindsey, Commissioner Roos, President McMullen

Opposed: Commissioner Amy, Commissioner Stiles

Motion passed with a 3:2 majority vote.

4. Next regular Board meeting on June 18, 2024, unless another date is agreed upon. Lindsey available June 20-26 for any special meetings scheduled.

No change in date for the regular board meeting.

The Public Comment meeting for Resolution of Intent to Levy will be moved to July.

5. Meeting Adjourned (President McMullen) at 9:00pm

Motion: To Adjourn

By: Commissioner Amy

Second: Commissioner Lindsey

Discussion: No Discussion

Minutes – Board Meeting – Special June 5, 2024 Page 10

Motion passed by unanimous consensus.

Meeting Adjourned at 9:00 PM

Minutes approved:	·	

JAMES McMULLEN, President/Commissioner KYTIANA SAYER-PETERSON, Clerk



#### **West Plainfield Fire Protection District**

24901 County Road 95, Davis, CA 95616

(530) 756-0212

# MINUTES BOARD OF COMMISSIONERS – SPECIAL MEETING June 12, 2024, at 7:00 PM

Held in Person at: Fire Station 24905 County Road 95 Davis, CA 95616

To be Held by Zoom: <a href="https://us06web.zoom.us/j/98831083439">https://us06web.zoom.us/j/98831083439</a>
One tap mobile - +16699006833,98831083439#
Dial by your location - (669) 900-6833 US (San Jose)
Meeting ID: 988 3108 3439

Additional (Remote) Location at 2655 Portage Bay E #2, Davis, CA 95616

Call the Meeting to Order and Establish Quorum (President McMullen)
 The meeting was called to order at 7:01 PM by President McMullen

Clerk of the Board, Kytiana Sayer-Peterson, was off on this evening, Fire Chief Rita filling in for Board Clerk called role and confirmed that a quorum was present Present Were:

Commissioners: James McMullen, Emily Amy, Beth Stiles, and Warren Roos

Staff: Fire Chief Cherie Rita, Battalion Chief Marc Beoshanz, Firefighter Jon Lee,

Captain Patrick Fish, Captain Scott Bravo Public: Winters Fire Chief Jack Snyder

#### 2. Public Comment

Letter submitted by Fire Fighter read by Fire Fighter John Lee and submitted in writing to the Board.

"Dear Members of the West Plainfield Fire District Commission, As we approach Chief Rita's well-deserved retirement at the end of this year, it marks a pivotal moment of transition within our organization. In light of this, I feel compelled to address a matter of significance regarding the education requirements for the Chief position.

While I recognize the value of the education requirement for the Chief position, I believe it must be supplemented with a consideration of work equivalency. It's essential to acknowledge that some of our esteemed members may not possess college degrees. Their commitment to their careers, coupled with their demonstrated leadership and expertise, makes them invaluable assets to our organization.

After careful consideration, I am convinced that it is in the best interest of our

> organization to revisit the education prerequisites for the Chief's position. While formal education undoubtedly brings merit, we must equally value the practical experience and skills that many of our candidates offer.

By revisiting these requirements, we not only widen our pool of potential candidates but also reaffirm our commitment to inclusivity and diversity within our workplace. Every member brings unique strengths to the table, and it's imperative that our leadership selection process reflects this diversity of talent and experience.

I wish to emphasize that my sentiments are shared by numerous members within our association. While I may not represent the entirety of our organization, I can attest to the widespread support for reevaluating these requirements.

Thank you for considering this matter with the attention and gravity it deserves. I am eager to engage in further discussions to explore how we can best move forward in fostering a more inclusive and effective leadership structure within our

Thank you for your attention to this important issue.

Sincerely, Jon Lee"

Captain Scott Bravo addressed the board with concerns on procedure regarding recent internal promotions within the West Plainfield Fire Protection District. Captain Bravo has served as a company officer of district since 2018 and deems necessary to bring attention to areas that merit the attention of the board. During the recruitment process for paid Fire Battalion Chief in 2021, Bravo among other candidates had undergone the interview process conducted by the Personnel committee and despite experience, was told that they did not meet the minimum requirements for the role. However, it was later made available that the selected candidate also did not meet certain minimum requirements such as EMT Certification. This discrepancy prompted legitimate questions regarding the selection of a candidate for promotion and the Personnel committee's adherence to the listed minimum requirements. While embarking on the next hiring process Bravo is faced similar concerns. Intention to embark on promotional process is out of interest to contribute to district growth, however, disregard for protocols and failure to address concerns had compromised integrity of process. Captain Bravo expressed disappointment on behalf of himself. Assistant Chief Stiles, and other interested parties. Asked the board to ensure that future processes adhere to high standards of professionalism.

Commissioner Roos addressed Captain Bravos comment and assures that the comment will be addressed during discussion of that item on the agenda. Commissioner Amy follows inquiring what specific Certifications Captain Bravo felt were missing from the job description?

Captain Bravo replies that it is the expertise and professional assertion of the Personnel committee and the Fire Chiefs/Battalion Chiefs and respectfully is unable to answer.

Battalion Chief Marc Beoshanz sent an email with comments and concerns. present before the board to urge the board to take another look at the process and consider what we have in terms of candidates willing to apply for the position.

Posted June, 2024	@	hours by	
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Battalion Chief Beoshanz believes the board had leeway and as a small district can be flexible to accommodate the volunteers willing to take on the position. Battalion Chief Beoshanz again, urges the board to reconsider and to consider all applicants

Fire Captain Patrick Fish speaks in support of Chief Beoshanz, understanding that there is a time sensitive deadline for a determination, would like to encourage the board to revisit educational requirements for the Fire Chief position. Captain Fish Can spoke to traditional education, and ascertains it is best to make a selection from those that are qualified to take on the role.

President McMullen calls for additional public comments. With no discussion, President McMullen concludes the public comment period.

3. Discussion / Action – Review and Potentially Revise Fire Chief Job Description (Commissioner Roos)

Commissioner Roos began discussion on Job Description by providing context to how the dynamic had changed. The Guidelines are out of date and if it is the vote of the board they can be updated. Commissioner Roos acknowledges the passion of the topics discussion and assures that there is a great value to experiential knowledgeability.

Fire Chief Rita sent an email in April suggesting that the board takes time to review Job Descriptions and hasn't followed up since return. Chief Rita speaks in support of establishing a procedure to review job descriptions before moving forward with promotion/hiring.

Commissioner Stiles speaks in support of readjusting when moving forward with a promotional process, and also asserts that a degree may not be a need for a volunteer Fire Chief position.

Commissioner Amy is unsure of email from April and had searched to find job descriptions for other districts, however, most had educational requirements and were paid positions. Commissioner Amy is open to discussion on this but is frustrated as well because of the time spent on the promotional process.

Captain Bravo asks of the board if there are legal ramifications to changing the hiring process during a promotion.

President McMullen replies that the board is speaking this evening only of the Job Description

Firefighter Jon Lee asked the board if the job position opening has closed or if it has closed to receive applicants, Fire Chief Rita confirms that it was closed in June. Firefighter Lee continues that from what he knows is that once a position stops taking applicants that the promotional/hiring process has officially begun.

Commissioner Amy clarified that there may need to be changes to the hiring process if the job description is changed.

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Modification proposed by Commissioner Amy: "Fifteen years of Fire department operation suppression and training experience, including five years with experience at the rank of Captain or greater and associates degree at an accredited association, bachelors or master's degree at accredited institution is preferred. Excelled experience with more than Thirty-Five years' experience in the fire service may override education requirement with a high school diploma. Fire Officer/Chief Officer certification issued by the State Fire Marshall is also required."

Commissioner Roos asked if the thirty-five years of experience is necessitated to override educational requirements. Additionally, Chief Rita states that for State Certification a degree is a minimum requirement to get certification.

Commissioner Stiles spoke in favor of 15 years of experience to override qualifications. Captain Bravo spoke in agreement with Commissioner Stiles and suggested a 2:1 ratio of experiential knowledge to education as a Thirty Five year requirement for experience is too much.

Fire Chief Rita states that because the Certification requires a degree, that it should be reduced to requiring completion of the classes or removed to prevent the additional educational barrier.

Commissioner Amy proposes revised modifications: "Ten years of Fire department operation suppression and training experience, including five years with experience at the rank of Captain or greater, and associates degree at an accredited institution, bachelor's or master's degree at accredited institution is preferred. Excelled experience with more than Twenty years' experience in the fire service may override education requirement with a high school diploma. Fire Officer/Chief Officer certification issued by the California State Fire Marshall is desired."

Commissioner Stiles commented on the proposed modifications, spoke in support of the modifications, however, asserted that Twenty years is still too long of an experience to require to override educational requirements. Commissioner Stiles recommended 15 years as a more reasonable term. Commissioner Amy spoke from concern that educational requirements were being removed that made a candidate more well-rounded.

Commissioner Stiles asked Winters Fire Chief Jack Snyder to share background which included degree, training and certification courses, as well as over 20 years of experience for his paid Chief position.

Firefighter Lee inquired of Commissioner Amy to restate the modifications. Commissioner Amy clarified that the 20 years of experience would not be in addition to earlier requirement, it is to replace or override qualifications. Firefighter Lee thanks Commissioner Amy for clarifying

Fire Chief Rita asked Commissioner Amy how to quantify the excelled experience. Commissioner Amy replied that it would mean the candidate has been recognized

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for their achievements. Fire Chief Rita spoke in support of delaying modifications to not rush through the process and identify quantifiable and measurable qualifications.

Commissioner Roos asked if the board took no action to change at this time, that the board could waiver candidates that do not meet qualifications.

Captain Bravo states that this is embarrassing because these items should have been addressed by the board prior to beginning and making changes now can exclude candidates that are in the process.

Battalion Chief Marc Beoshanz spoke to the board that he appreciates Commissioner Amy's revisions and speaks in favor of the rewording giving the board leeway and thinks that it will speak well to knowledgeability of the candidates.

Commissioner Roos advocates for the board in response to Captain Bravos statement in that they are not all subject matter experts on the process and are volunteer board members who care about executing the promotion process appropriately.

Motion is restated:

Motion: Approve modifications to section 790.06 Training and Education Experience with the following language "Ten years of Fire department operation suppression and training experience, including five years with experience at the rank of Captain or greater, and associates degree at an accredited institution, bachelor's or master's degree at accredited institution is preferred. Excelled experience with more than Twenty years' experience in the fire service may override education requirement with a high school diploma. Fire Officer/Chief Officer certification issued by the California State Fire Marshall is desired."

By: Commissioner Roos

Second: Commissioner Stiles

Motion passed unanimously

Commissioner Amy follows that essential functions must be included within the Job Description as an ADA requirement to modify job descriptions. Chief Rita inquires if that requirement addresses essential functions or physical duties. Commissioner Amy clarifies that it refers to tasks or duties that must be met to complete work assigned.

Motion: Approve modification to section 790.03 from "Typical Tasks" to "Essential Functions"

By: Commissioner Amy

Posted June, 2024	@	hours by
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Second: Commissioner Roos

Motion passed unanimously

Commissioner Amy asked if there are specific certifications that should be included in Job Description. Captain Bravo addresses the board recommending that the Personnel Committee is convened to determine these items as opposed to on an evening Board meeting. Commissioner Amy asserted that she is asking the room what certifications may be needed because, as a board member and personnel committee member, she is unsure of what would be required and doesn't have the background knowledge or prior statements/information from the staff.

Fire Chief Rita brings to the attention of the board Winters Fire Chief Jack Snyder's job description including following Certifications/Licenses: California Drivers License, Firefighter 1&2, Chief Officer Certification provided by the California State Fire Marshall is also required, Current EMT and CPR certifications.

Commissioner Amy asks if requirements for positions below Fire Chief build incrementally between the positions. Chief Rita states that it is not specifically listed for the fire Chief position but has been the case for other positions.

Commissioner Roos asks if it may be possible to move forward as is or is it necessary to get details now. Chief Rita advises deeper diving into everything during committee meetings.

President McMullen determined that the details of certifications can be deferred to committee meeting and asks if there are commissioners interested in an Ad Hoc Committee to make draft revisions. Captain Bravo indicated interest in joining the committee meeting as Staff. Commissioner Roos indicated interest in joining Ad Hoc committee as chair. Commissioner Amy is happy to share job descriptions with the committee. Commissioner Stiles volunteered to join Ad Hoc Committee.

Ad Hoc Committee convened to review details of Fire Chief Job Description with Chair, Commissioner Roos, Member, Commissioner Stiles, and staff support of Captain Bravo.

 Discussion / Action – Review Timeline and Potentially Re-Open Promotional Opportunity Regarding Upcoming Open Volunteer Fire Chief Position (President McMullen)

Commissioner Amy began discussion and asserted that whenever criteria for promotion or hire are changed, you need to start search over again. Recommended that board cancel interviews scheduled and collect additional materials from candidate but will need to start over again.

Fire Chief Rita asks of commissioner Amy what the basis of process is to stop the current process. Commissioner Amy replies that the board needs to allow candidate to apply for review with the new criteria for the posting, further that it is

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not ethical to change promotional process mid-course without allowing other candidates and existing to resubmit materials for consideration.

Commissioner Stiles deliberated that If the Ad Hoc Meeting happens to address certifications, they will not be able to do so to be posted and in use within submission and interview time period.

Commissioner Amy proposed allowing candidates to submit and collect materials through early June 19<sup>th</sup> where Personnel committee can meet and make a determination going into interview period.

Captain Bravo speaks in opposition to changing process as it has disrespected excluded and included candidate prospects and questions if the district is protected if there are ramifications from the flawed process.

President McMullen comments that all that has been changed in the meeting is content for the Job Description and restates options before the board to either keep current deadline or extend and cancel current process and restart. Legality concerns can be brought to Yolo County Counsel.

Commissioner Stiles speaks in support of re-inviting candidates to apply/re-apply as long as there is an agreed upon meeting on June 19<sup>th</sup> and if not the 19<sup>th</sup> then the process should be put on hold.

Commissioner Amy asks the board when may be reasonable to ask for materials in order to distribute 360 or reschedule interviews

Commissioner Stiles proposes relisting position for 1 week and estimate 2 weeks for 360 review receipt and should aim to schedule interviews for end of July. Commissioner Amy proposes to reschedule current process

Motion: Republish position requesting submission of current resumes and documentation for June 19<sup>th</sup>

5. Next regular Board meeting on June 24, 2024, unless another date is agreed upon

Proposed Next meeting Date as June 25<sup>th</sup>, 2024. President McMullen will be unavailable. Approved by consensus

6. Meeting Adjourned (President McMullen)

Motion: Adjourn Meeting By: Commissioner Roos

Second: Commissioner Stiles
Discussion: No Discussion
Motion carries unanimously

Posted June, 2024	@	hours by
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Minutes approved: \_\_\_\_\_

JAMES McMULLEN, President/Commissioner KYTIANA SAYER-PETERSON, Clerk

