

MISSION STATEMENT

“May Each Life Find Meaning”

AABR continues to offer people with disabilities and autism homes of their choice, quality medical care, a lifestyle that encourages positive life choices, the cultivation of healthy meaningful relationships and the promotion of self-worth, personal growth and productivity.

AABR is committed to accomplish its mission following the lifespan of people service while providing services including education, training and housing with the support of their family, agency staff and the communities in which they live.

EEOC Policy

It is the policy of AABR to provide equal employment opportunity to all employees and applicants for employment and not to discriminate on any basis including race, creed, color, national origin, ethnicity, alienage or citizenship status, gender/sex (including pregnancy), disability, religion, source of income, sexual orientation, gender identity or expression, age, familial status, caregiver status, military status, marital or partnership status, status as a victim of domestic violence, sexual violence or stalking, predisposing genetic characteristics, arrest or conviction record, credit history, unemployment status, employee's or dependent's reproductive decision making or any other characteristic protected by federal, state or local law. It is our intent and desire that equal employment opportunities will be provided in employment, recruitment, selection, compensation, benefits, promotion, demotion, layoff, termination, and all other terms and conditions of employment. The CEO and all managerial employees are committed to this policy and its enforcement.

AABR Inc. Code of Professional Conduct

All employees are expected to behave in a manner that is consistent with AABR's high standards of ethics, honesty, integrity, and professionalism. Generally, no conduct that is immoral, unethical, or illegal will be tolerated. AABR does not maintain a progressive discipline program of any nature; the type of disciplinary actions that may be administered in any given situation (e.g., verbal warning, written warning, suspension, termination, etc.) and/or the order in which the actions are administered shall not be construed as constituting a progressive discipline program. The purpose of this policy is to ensure the proper on-the-job conduct of employees toward the individuals we serve, fellow employees, supervisors, and AABR. While it would be impossible to compile a complete list of all possible actions that would be contrary to these expectations, the following are **examples** of misconduct that may result in disciplinary action, up to and including immediate termination:

1. Abuse, neglect, or mistreatment of the individuals we serve.
2. Engaging in any form of discrimination and/or harassment in violation of AABR's policies, including retaliation, unethical, or unlawful conduct.
3. The use of racial or ethnic slurs, or any other language (including profanity) or gestures that violate AABR's policies.
4. Falsifying reports, documents, or AABR records, including employment and benefit applications and timesheets; and providing false information.
5. Failure to perform fully, promptly, and properly any assigned task or lawful instruction from a supervisor.
6. Failure to report any incidents/accidents to a supervisor.
7. Disorderly conduct, including horseplay.
8. Theft, attempted theft, destruction, or defacement of Agency, the individuals served, or other employee's property.
9. Use of Agency supplies, property, vehicles, or premises for personal reasons without specific permission.
10. Unauthorized or improper use of the Agency's telephones, smartphones, mail, computers, tablets, printers, network, internet system, or other Agency equipment.
11. Creating or contributing to unsanitary conditions.
12. Smoking in violation of the No Smoking Policy.
13. Possessing or carrying weapons of any type while on Agency premises or while conducting Agency business.
14. Possessing or use of drugs and alcohol while on Agency premises or while conducting Agency business.
15. Gambling or soliciting gambling on Agency property or while conducting Agency business.
16. Immoral, indecent, or unlawful conduct.
17. Intentional misrepresentations made to AABR in an administrative review or investigation.
18. Sleeping on the job.
19. Failure to report an absence.
20. Excessive absenteeism, tardiness or leaving early (unless on approved medical leave, intermittent FMLA and/or PFL), unexcused absence, or leaving the job without permission.
21. Fighting on the job or the physical or verbal threat of bodily harm to co-workers or individuals served.
22. Violation of health, safety, or operating rules.

23. Making excessive personal phone calls, including personal cell phone calls.
24. Failure to fully and truthfully disclose all facts related to workers' compensation and insurance claims.
25. Failure to participate in and/or complete AABR's sponsored training programs and/or staff meetings.
26. Failure to produce quality work or other unsatisfactory performance.
27. Borrowing or loaning money, personal items, or anything from or to an individual served.
28. Failure to wear proper attire to work.
29. Violation of any other AABR policy.

AABR may consider your job performance, prior violation of our work rules, and other relevant circumstances in determining whether to counsel, warn, suspend or terminate you. It is up to your manager and AABR's administration to decide whether corrective action, up to and including termination, is appropriate.

THE FOREGOING IS NOT INTENDED, NOR SHOULD IT BE CONSTRUED, TO BE AN ALL-INCLUSIVE LIST OF THE TYPES OF ACTS OR ACTIONS THAT MAY RESULT IN DISCIPLINARY ACTION.

Confidentiality Agreement

AABR is proud of the reputation it has earned as an ethical and highly professional Agency. In an effort to maintain this reputation and to avoid any disruption to the provision of services, employees are prohibited from using for personal reasons, or disclosing to any individual or entity outside of AABR any Confidential Information (as defined below) except (i) in the performance of the employees' duties for AABR, (ii) as authorized in writing by the Executive Director, or (iii) as required by law or legal process.

As used herein, "**Confidential Information**" means any information that AABR treats as proprietary, private or confidential, and is not generally known to the public. "Confidential Information" includes, without limitation, information relating to current or previous lists of individuals; names or contact information (e.g., addresses, phone numbers, etc.) for any current or former individual or their family members; medical information and/or personal information regarding any current or former individuals; internal memoranda, files, notes or records regarding the AABR's operations or finances; photographs of individuals, and personal information regarding any current or former individuals. "Confidential Information" also includes any and all proprietary and/or confidential information of individuals or their families.

I understand that AABR and its affiliated programs have a legal and ethical responsibility to maintain and protect the privacy and confidentiality of protected health information (PHI) and to safeguard the privacy of the individuals and AABR's information. In addition, I understand that during the course of my affiliation as an employee at AABR, I may see or hear other Confidential Information such as financial data and operational information that AABR is obligated to maintain as confidential.

Employees are also required to take steps to protect the confidentiality and privacy of individuals' Protected Health Information and other similar forms of Confidential Information. Please refer to the HIPAA policy herein.

Confidential information includes protected health information (PHI) as defined by the federal Health Insurance Portability and Accountability Act (HIPAA).

Protected Health Information ("PHI") under HIPAA is defined as information that is received from, or created or received on behalf of AABR or its affiliated programs and is information about an individual which relates to past, present or future physical or mental health or condition of an individual, their services or their treatment; the provision of services to an individual; or the past, present or future payment for the provision of services to an individual.

PHI includes medical records, treatment records, daily/weekly/monthly/semi-annual/annual documentation and financial or billing information relating to an individual's past, present or future services and/or mental or physical condition; or past, present or future provision of healthcare; or past present or future payment for provision of healthcare and contains any of the following identifiers that may be used to identify the individual in relation to PHI:

Names, Geographic subdivisions smaller than a state, Telephone/fax numbers, E-mail addresses, Social Security Numbers, Documentation or Medical Record Numbers, Health plan beneficiary numbers, Account numbers, All elements of dates related to an individual, including birth date, admission date, discharge date, date of death; and all ages, Certificate/license numbers, Vehicle identifiers and serial numbers including license numbers (including agency vehicles), Device identifiers/ serial numbers, Web Universal Resource Locators (URLs), Internet Protocol (IP address number), Biometric identifier (voice, finger prints), Full face photo image, Any other unique identifying number, characteristic, or code

Violations of the Confidentiality Agreement must be reported to the supervisor or compliance department. Retaliation for a complaint in good faith will not be permitted.

Employees shall treat all individual information as confidential and utilize such information in a professional manner at all times. The use of personal camera phones, video chatting, and any other communication which could share the identity or location of the individuals or AABR program locations is prohibited. The use of any recording devices (video and/or audio) in AABR programs is strictly prohibited.

I understand that violation of this Agreement may result in disciplinary action up to and including termination of my employment with AABR as well as potential personal, civil, and criminal legal penalties. I understand that any PHI or Confidential Information that I access or view at AABR does not belong to me. I understand that any access to PHI for work purposes requires proper documentation and approval according to HIPAA policies.

Since the use of PHI and Confidential Information includes access, I will not access or view any PHI or Confidential Information other than what is required to perform my responsibilities as an employee.

I will not discuss any information pertaining to patient PHI or the health care organization in an area where unauthorized individuals may hear such information (for example), in hallways, on elevators, on public transportation, at restaurants, or at social events. I understand that it is not acceptable to discuss any PHI or Confidential Information in public areas even if specifics such as the individual's name are not used.

I will not make any unauthorized transmissions, copies, disclosures, inquiries, or modifications of PHI or Confidential Information. Such unauthorized transmissions include, but are not limited to, removing and/or transferring PHI or Confidential Information from AABR computer systems or hard copy documents to unauthorized locations (for instance, my home or computer).

My personal access code(s), user ID(s), access key(s) and password(s) used to access AABR, AABR computer systems or other equipment are to be kept confidential at all times. Upon termination of my affiliation with AABR, I will immediately return all property (e.g. keys, documents, ID badges, etc.) to my supervisor or HR.

The restrictions described above on the use or disclosure of Confidential Information shall continue after an employee's employment terminates for any reason for so long as the information is not generally known to the public. Nothing herein is intended to modify or affect employee rights under the law.

The term of this Confidentiality Agreement is the length of my affiliation with and during employment at AABR. As a condition of my affiliation as an employee AABR I understand that I must sign and comply with this Agreement. I have read the above Agreement and agree to comply with all its terms as a condition of my continuing employment with AABR.

DRUG-FREE WORKPLACE POLICY

SUBSTANCE AND ALCOHOL ABUSE:

Prohibited Conduct:

Employees are expected and required to report to work on time and in appropriate mental and physical condition for work. No employee shall work, report to work, or be present on Agency premises, in Agency vehicles, or be engaged in Agency activities while possessing, being under the influence, or using illegal drugs, alcohol, or controlled substances (except when the use of a controlled substance is prescribed by a licensed medical practitioner). If you are taking a prescription drug(s) and doing so impairs or may impair your ability to perform your job safely and properly, you must immediately advise your manager. AABR reserves the right to test employees for drugs and/or alcohol when there is reason to suspect that an employee has used or may have used drugs and/or alcohol in violation of Agency policy.

The unlawful or unauthorized manufacture, distribution, transfer, dispensation, possession, or use of a controlled substance or alcohol is strictly prohibited on Agency premises, in Agency vehicles, or while engaged in Agency employment. Unannounced inspections for the presence of illegal drugs or unauthorized alcohol on Agency and/or personal property, such as, but not limited to, vehicles, desks, file cabinets, lockers, clothing, packages, or purses may be conducted where there is reasonable suspicion to believe an employee may have violated this policy. Employees should maintain no expectation of privacy in any of the aforementioned areas.

The use, possession, and impairment of marijuana during work time is strictly prohibited, including during meal breaks and other breaks. The use of marijuana is not permitted in outdoor smoking areas or the parking lot. Employees are prohibited from reporting to work while impaired by marijuana. Employees in safety-sensitive positions (generally defined as those positions in which impairment by drugs or alcohol could threaten the health or safety of the employee or others) are prohibited from using marijuana for six hours before reporting for duty. Employees who violate these rules will be subject to discipline up to and including termination.

AABR strongly encourages any employee who is struggling with drug or alcohol dependency to get assistance before it begins to affect his or her job performance or workplace conduct. An employee may be sent home or may be sent for a drug and/or an alcohol test under applicable law if it is believed the employee is not fit for work. A positive test reading for drugs and/or alcohol may result in disciplinary action, up to and including immediate termination. Failure or refusal to submit to a test will be considered a positive test reading and may also result in disciplinary action, up to and including immediate termination.

SAFETY POLICY

AABR strives to provide a safe and healthy working environment. It is, therefore, a basic requirement that each manager makes the safety of all employees an integral part of his or her regular management function. It is equally your duty to accept and follow established safety regulations and procedures, and the instructions of management to prevent accidents and/or injuries. Unsafe conditions must be corrected and reported immediately. You will be expected to observe safe practice rules and instructions relating to the efficient handling of your work. Your responsibilities include the following:

- Know and obey safe practice rules and incorporate safety into every job procedure.
- Caution fellow workers when they perform unsafe acts and report serious or repeat instances.
- Don't take chances.
- Ask questions when there is any doubt concerning safety.
- Do not attempt to operate, repair or alter equipment on which you are not trained and authorized to use.
- Do not tamper with, remove, or attempt to defeat safety guards on equipment.
- Wear attire that is conducive to your job responsibilities.
- Report all unsafe conditions or equipment to your supervisor immediately.

Reporting Workplace Accidents / Injuries:

Every injury that occurs on the job, even a slight cut or strain, must be immediately reported to management and/or the administrator on duty; and an injury report must be completed. Under no circumstances, except in cases of a medical emergency or as otherwise permitted by law, should you leave the work site without prior notification and approval from management. Failure to report a workplace injury or reporting a false workplace injury may result in disciplinary action, up to and including termination.

WHISTLEBLOWER POLICY

AABR is committed to high standards of ethical, moral, and legal business conduct. In line with this commitment, and AABR's commitment to open communication, this policy aims to provide an avenue for you to raise concerns and reassurance that you will be protected from reprisals or victimization for whistleblowing. This Policy will be distributed to all directors, officers, employees, and volunteers who provide services to AABR.

This Policy addresses the submission by directors, officers, employees, and volunteers of complaints, concerns, and suspected violations concerning one or more of the following matters (together "Misconduct"):

- Questionable accounting, internal controls, and auditing matters.
- Illegal or fraudulent conduct or activity
- Compliance with legal and regulatory requirements.
- A violation or suspected violation of Agency policies.
- A retaliatory action against a director, officer, volunteer, or employee who reports a suspected violation of any of the above.

Anyone who is found to have intimidated, harassed, discriminated or other otherwise retaliated against someone who has reported an allegation of Misconduct in good faith shall be subject to discipline by the AABR, up to and including termination of employment and/or relationship with AABR.

Employees or volunteers wishing to report a good faith allegation of Misconduct by a director, officer, employee or volunteer should contact Radwa Elshaabany via telephone at (718)321-3800 ext. 2208 or via email at relshaabany@aabr.org. Ms. Elshaabany is the individual designated by AABR to administer this Policy, report to the Audit Committee or Other Committee of Independent Directors, and/or to the Board. All individuals filing a complaint of Misconduct should be prepared to include as many details as possible, in writing, including a description of the questionable activity, the names of the individuals involved, the names of possible witnesses, dates, times, and any other available details. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed.

AABR will investigate all good faith allegations of Misconduct made by a director, officer, employee, or volunteer against the Agency or an Agency director, officer, volunteer, or employee. Furthermore, AABR will not tolerate any act of intimidation, harassment, discrimination, or other retaliation or, in the case of employees, adverse employment consequences, against a director, officer, employee, or volunteer who makes such an allegation of Misconduct in good faith either internally or to a public body, or who refuses to participate in such Misconduct. Anyone who is found to have intimidated, harassed, discriminated or other otherwise retaliated against someone who has reported an allegation of Misconduct in good faith shall be subject to discipline by the AABR, up to and including termination of employment and/or relationship with AABR. AABR generally will notify the complainant of the results of any investigation and what action, if any, was taken.

Nothing in this policy protects individuals from the consequences of their own unethical or unlawful conduct, including submitting false or baseless allegations. Individuals who deliberately make false or baseless allegations are subject to disciplinary action, up to and including termination.

PERSONAL APPEARANCE AND HYGIENE POLICY

Your appearance contributes to the image the public, fellow workers, individuals served and other visitors to AABR's offices and facilities may have of our organization. Appropriate dress and grooming serve to develop an image of professional competency and professionalism that builds trust with others. In addition, appropriate dress is critical to the safety of the people we serve. For these reasons, you are expected to dress in a manner that is appropriate to the work setting and to present a neat and clean appearance.

Departments may determine appropriate workplace attire and grooming for their area based on the needs of the program. If an employee comes to work inappropriately dressed, he/she may be required to go home, change and return to work. You may seek guidance from your manager or a member of the Human Resources Department if you have any specific questions. Continued violations will lead to disciplinary action. Employees who regularly work in administration at the main office are expected to adopt a casual business attire dress standard.

AABR recognizes the importance of individually held religious beliefs. Therefore, AABR will reasonably accommodate an employee's religious beliefs in terms of workplace attire, and personal hygiene unless the accommodation creates an undue hardship. Employees requesting accommodation based on religious beliefs (or medical conditions) should contact the Human Resources Department.

The following serves as guidelines to assist you in determining what may be considered inappropriate. Do note that this list is not all-inclusive:

- Provocative or sexually suggestive clothing.
- Clothing potentially perceived as displaying obscene, profane, or unprofessional language or images.
- Clothing that is unclean, dirty, or projects an offensive odor.
- Do-rags, hats, headscarves, hoodies, or other headwear.
- Jeans with holes/frayed
- Shorts above the knee
- Mini Skirts
- Spandex/Lycra
- Sagging pants.
- Pajama pants.
- Crop tops and midriffs.
- Clothing that is too tight or too loose.
- Open-toe shoes/high heels when working directly with the individuals served.
- Slippers.
- Jewelry, such as hoop earrings that are easily pulled.
- Excessively long fingernails.

I have received, read and understand the above personal appearance policy.

Notice of Employee Rights: Safe and Sick Leave

If you work part time or full time at any size business or nonprofit in NYC or if you work in an NYC household as a domestic worker, you have the right to safe and sick leave to care for yourself or anyone you consider family. You have this right regardless of your immigration status. Your employer must give you this notice explaining your rights.

Amount of Safe and Sick Leave:

- All employers must provide up to **40 hours** of safe and sick leave each calendar year.

Beginning January 1, 2021:

- **Employers with 100 or more employees** must provide up to **56 hours** of safe and sick leave each calendar year.

Your employer's calendar year is: JULY 1 to June 30
First month Last month

You earn safe and sick leave at a rate of **1 hour for every 30 hours worked**.

You have a right to **PAID** safe and sick leave if:

- Your employer has 5 or more employees.
- Your employer has fewer than 5 employees but a net income of \$1 million or more. (effective January 1, 2021)
- You work in someone's home as a domestic worker; for example, babysitter, housekeeper, or companionship worker. *Note: The law covers 1 or more domestic workers working in a household.*

You have a right to **UNPAID** safe and sick leave if:

- Your employer has fewer than 5 employees and a net income of less than \$1 million.

You can carry over unused safe and sick leave to the next calendar year.

Use of Safe and Sick Leave:

- Use it for your health, including to get medical care or to recover from illness or injury.
- Use it to care for a family member who is sick or has a medical appointment.
- Use it when your job or your child's school closes due to a public health emergency.
- Use it for your safety or for a family member's safety because of domestic violence, unwanted sexual contact, stalking, or human trafficking.

Your employer can require you to give advance notice of a planned use of safe and sick leave; for example, to attend a scheduled doctor's appointment or court hearing. You do not have to give advance notice of an unexpected use of safe and sick leave; for example, a sudden illness or medical emergency.

You have a right to privacy. You do not have to give your employer details about why you used safe or sick leave.

If you use more than three workdays in a row of safe and sick leave, your employer can require documentation. Your employer must reimburse you for any fees you pay for required documentation. Documentation should *not* include the details of your private medical or personal situation.

Required Written Disclosures about Safe and Sick Leave:

Your employer must:

- Give you a written safe and sick leave policy that explains how to use your benefits.
- Tell you how much safe and sick leave you have used and have left each pay period.

No Retaliation:

It is illegal to punish or fire employees for requesting or using safe and sick leave or for reporting violations.



Eric L. Adams
Mayor

Consumer and
Worker Protection

Vida Vera Mayuga
Commissioner

Contact Consumer and Worker Protection to learn more or to file a complaint.

Visit nyc.gov/workers | Call 311 and ask for "Paid Safe and Sick Leave"
You can also make an ANONYMOUS tip.

Paid Safe and Sick Leave: What Employees Need to Know

New amendments to NYC's Earned Safe and Sick Time Act (Paid Safe and Sick Leave Law) take effect September 30, 2020 and January 1, 2021. If you work part time or full time at any size business or nonprofit in NYC or if you work in an NYC household as a domestic worker, read this fact sheet¹ to understand employee rights. Under the Law, covered employees have the right to use safe and sick leave for:

- health, including the care and treatment of themselves or a family member; and
- safety, including to seek assistance or take other safety measures if the employee or a family member may be the victim of any act or threat of domestic violence, unwanted sexual contact, stalking, or human trafficking.

Employees Covered/Not Covered by the Law

Covered	Not Covered
<ul style="list-style-type: none"> • Full-time employees • Part-time employees • Domestic workers • Transitional jobs program employees • Employees who are family members but not owners • Employees who live outside of New York City 	<ul style="list-style-type: none"> • Students in federal work-study programs • Employees whose work is compensated by qualified scholarship programs • Employees of government agencies • Physical therapists, occupational therapists, speech language pathologists, audiologists who are licensed by the New York State Department of Education (if they call in for work assignments at will, determine their own work schedule, have the ability to reject or accept any assignment referred to them, and are paid an average hourly wage that is at least four times the federal minimum wage) • Independent contractors who do not meet the definition of an employee under New York State Labor Law • Participants in Work Experience Programs (WEP) • Certain employees subject to a collective bargaining agreement

Note: If your employer has an existing policy allowing employees to use safe and sick leave, the policy must meet or exceed the requirements of the Law.

Notice of Employee Rights

If you are a covered employee, your employer must give you written Notice of your right to safe and sick leave. You have a right to the Notice in English and in your primary language if a translation is available on the DCWP website nyc.gov/workers. **Keep a copy of the Notice you are given.** Your employer must also post the Notice in the workplace in an area that is visible and accessible to employees.

Amount of Safe and Sick Leave

Number of Employees Employed by Employer	Employer's Annual Income	Amount of Leave per Calendar Year*	Paid or Unpaid Leave
1-4	Less than \$1 million	Up to 40 hours	Unpaid
	effective 1/1/2021: \$1 million or more	Up to 40 hours	Paid
5 or more <i>employed by private or nonprofit employer</i> OR effective 9/30/2020: 1 or more domestic workers <i>employed by household employer</i>	N/A	Up to 40 hours	Paid
effective 1/1/2021: 100 or more <i>employed by private or nonprofit employer or employer of domestic workers</i>	N/A	Up to 56 hours	Paid

*Note: "Calendar Year" means any regular and consecutive 12-month period of time determined by an employer. The Notice of Employee Rights must state the employer's Calendar Year.

If your employer is required to provide *paid* safe and sick leave, you must be paid your regular hourly rate and not less than the current minimum wage.

Safe and Sick Leave Accrual and Use

You:

- Accrue safe and sick leave as soon as you begin working. The minimum rate of accrual is 1 hour for every 30 hours worked.
- Can use safe and sick leave immediately as you accrue it.
- Must receive from your employer written documentation each pay period that shows how much safe and sick leave you have used, accrued, and have left.

¹ Note the date on the back. The NYC Department of Consumer and Worker Protection (DCWP) will update this sheet as appropriate. Monitor nyc.gov/workers for updates.

Exception: If you are covered by a collective bargaining agreement that was in effect on April 1, 2014, you begin to accrue safe and sick leave under the Law beginning on the date the agreement expires.

Acceptable Reasons to Use Safe and Sick Leave

You can use safe and sick leave to take time off from work when:

- You have a mental or physical illness, injury, or health condition; you need to get a medical diagnosis, care, or treatment of your mental or physical illness, injury, or condition; you need to get preventive medical care.
- You must care for a family member who needs medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition, or who needs preventive medical care.
- Your employer's business closes due to a public health emergency or you need to care for a child whose school or child care provider closed due to a public health emergency.
- You or a family member may be the victim of any act or threat of domestic violence, unwanted sexual contact, stalking, or human trafficking, and you need to take actions necessary to restore the physical, psychological, or economic health or safety of you or your family members or to protect those who associate or work with you, including to:
 - Obtain services from a domestic violence shelter, rape crisis center, or other services program.
 - Participate in safety planning, relocate, or take other actions to protect your safety or that of your family members, including enrolling children in a new school.
 - Meet with an attorney or social service provider to obtain information and advice related to custody; visitation; matrimonial issues; orders of protection; immigration; housing; discrimination in employment, housing, or consumer credit.
 - File a domestic incident report with law enforcement or meet with a district attorney's office.

The Law recognizes the following individuals as "family members:"

- Any individual whose close association with the employee is the equivalent of family
- Child (biological, adopted, or foster child; legal ward; child of an employee standing *in loco parentis*)
- Grandchild
- Spouse
- Domestic Partner
- Parent
- Grandparent
- Child or Parent of an employee's spouse or domestic partner
- Sibling (including a half, adopted, or step sibling)
- Any other individual related by blood to the employee

Advance Notice

If the need is foreseeable, your employer can require up to seven days' advance notice of your intention to use safe or sick leave. If the need is unforeseeable, your employer may require you to give notice as soon as practicable (reasonable). Your employer may require you to provide written verification that you used safe or sick leave for safe or sick leave purposes.

Documentation

Your employer can require reasonable documentation if you use more than three consecutive workdays as safe or sick leave. Your employer may require:

- a note signed by a licensed health care provider for sick leave; or
- documentation from a social service provider, legal service provider, member of the clergy, or notarized letter written by you indicating the need for safe leave.

Your employer may not require that documentation specify the reason you used safe or sick leave. Disclosure may be required by other laws.

Your employer must reimburse you for:

- fees charged by health care providers to provide required sick leave documentation; and
- all reasonable costs or expenses to obtain required safe leave documentation.

Unused Safe and Sick Leave

You can carry over up to 40 hours (or, if applicable, 56 hours effective January 1, 2021) of unused safe and sick leave to the next Calendar Year. However, your employer is only required to let you use up to 40 (or 56) hours of safe and sick leave per Calendar Year.

Retaliation

Your employer cannot retaliate against you for requesting or using safe and sick leave. Retaliation includes any threat, discipline, discharge, demotion, suspension, or reduction in your hours, or any other adverse employment action against you for exercising or attempting to exercise any right guaranteed under the Law, which includes actions related to perceived immigration status or work authorization.

Complaints

You may file a complaint with DCWP. To get the complaint form, go to nyc.gov/workers or contact 311 (212-NEW-YORK outside NYC).

Updated 11/20/2020



Bill de Blasio
Mayor

Consumer and
Worker Protection

Lorelei Salas
Commissioner

Questions? For more information or to contact DCWP:

- Visit nyc.gov/workers for the law and Frequently Asked Questions
- Email PSSL@dca.nyc.gov
- Call 311 (212-NEW-YORK outside NYC) and say "Paid Safe and Sick Leave"