



COOK COUNTY BUREAU OF HUMAN RESOURCES

Victims' Economic Security and Safety Leave Policy

Approved: April 30, 2018

Effective: May 3, 2018

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A. OVERVIEW

The Illinois Victims' Economic Security and Safety Act ("VESSA"), 820 ILCS 180, provides that leave may be granted to, and reasonable accommodations may be made for, employees who are victims of domestic or sexual violence, to maintain financial independence necessary to leave abusive situations and to protect the civil and economic rights of such employees, or their family or household member who is a victim of domestic or sexual violence.

Cook County ("County") provides unpaid, job-protected VESSA leave, for up to twelve (12) weeks in a twelve (12) month period, to eligible employees who have complied with the applicable requirements. With respect to the terms, conditions, or privileges of employment, Cook County additionally provides reasonable accommodations to the known limitations resulting from circumstances relating to being, or having a family or household member that is, a victim of domestic or sexual violence.

B. PURPOSE

This policy provides procedures to be followed when taking leave and/or requesting a reasonable accommodation pursuant to VESSA.

C. INTENT


This policy is intended to be interpreted consistent with and subject to applicable law. It supersedes all previous policies and/or memoranda that may have been issued from time to time on subjects covered in this policy. This policy is not intended to supersede or limit the County from enforcing provisions in any applicable collective bargaining agreement. Should any provision in this policy conflict with a specific provision in the Personnel Rules, the provision(s) in this policy shall take precedence.

D. SEVERABILITY

If any section or provision of this document should be held invalid by operation of law, none of the remainder shall be affected.

E. JURISDICTION

The Bureau of Human Resources ("BHR") is authorized to develop and issue policies for the effective management of Cook County employees, pursuant to Section 44-45 of the Cook County Code of Ordinances.

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F. AREAS AFFECTED

This policy applies to all Cook County employees in Departments in the Offices under the President and/or covered by the County Employment Plan.

G. NONDISCRIMINATION

Cook County prohibits the discriminatory application, implementation, or enforcement of any provision of this policy on the basis of race, color, sex, age, religion, disability, national origin, ancestry, sexual orientation, marital status, parental status, military discharge status, source of income, housing, or any other protected category established by law, statute or ordinance, as provided in Section 44-53 of the Cook County Code of Ordinances.

H. EMPLOYEE AND MANAGEMENT RESPONSIBILITIES

The County's BHR Leave Coordinator (or Designee) will monitor County practices to ensure compliance with, and answer questions concerning, the information presented in this policy. Contact information for the BHR Leave Coordinator and additional Human Resources personnel can be found on BHR's website and/or the County's Policy Library. If a department Manager/Supervisor acquires knowledge that an employee's absence may be for a VESSA-qualifying reason, he or she should immediately notify the BHR Leave Coordinator. Department Heads (or Designees) are responsible for complying with all leave authorizations issued by BHR.

I. DEFINITIONS

The following words, terms and phrases, when used in this policy shall have the meanings ascribed to them in VESSA, provided in this section for convenience:

Domestic or sexual violence means domestic violence, sexual assault, or stalking.

Domestic violence means abuse, as defined in Section 103 of the Illinois Domestic Violence Act of 1986, by a family or household member, as defined in Section 103 of the Illinois Domestic Violence Act of 1986.

Family or household member means a spouse, parent, son or daughter, other person related by blood or by present or prior marriage, other person who shares a relationship through a son or daughter, and persons jointly residing in the same household.

Parent means the biological parent of an employee or an individual who stood in loco parentis to an employee when the employee was a son or daughter.

Sexual assault means any conduct proscribed by the Criminal Code of 1961 or the Criminal Code of 2012 in Sections 11-1.20, 11-1.30, 11-1.40, 11-1.50, 11-1.60, 12-13, 12-14, 12-14.1, 12-15, and 12-16.



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Son or daughter means a biological, adopted, or foster child, a stepchild, a legal ward, or a child of a person standing in loco parentis, who is under 18 years of age, or is 18 years of age or older and incapable of self-care because of a mental or physical disability.

Stalking means any conduct proscribed by the Criminal Code of 1961 or the Criminal Code of 2012 in Sections 12-7.3, 12-7.4, and 12-7.5.

Victim means an individual who has been subjected to domestic or sexual violence.

J. POLICY AND PROCEDURES – VESSA LEAVE

Cook County provides unpaid, job-protected VESSA leave, for up to twelve (12) weeks in a twelve (12) month period, to eligible employees who have complied with the applicable requirements.

1. ELIGIBILITY

A County employee who is a victim of domestic or sexual violence or an employee who has a family or household member who is a victim of domestic or sexual violence whose interests are not adverse to the employee as it relates to the domestic or sexual violence may be eligible to take VESSA leave from the first day of employment if the employee or employee's family or household member is experiencing an incident of domestic or sexual violence or to address domestic or sexual violence as provided in Section J(2) of this policy.

2. BASIS

County employees may request VESSA leave for the following reasons related to domestic or sexual violence:

- a. To seek medical attention for, or recover from, physical or psychological injuries caused by domestic or sexual violence to the employee or employee's family or household member;
- b. To obtain victim's services, psychological or other counseling, legal assistance or remedies, including preparing for or participating in any civil or criminal legal proceeding related to or derived from domestic or sexual violence, for the employee or employee's family or household member; or
- c. To prepare a safety plan, temporarily or permanently relocate, or take other actions to ensure the health, increase safety from future domestic or sexual violence, or ensure economic security, of the employee or employee's family or household member.



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3. CONDITIONS

- a. VESSA leave may be taken in a block of time, on an intermittent basis, or in the form of a reduced work schedule.
- b. Employees on VESSA leave are expected to be reasonably responsive to the BHR Leave Coordinator, their Supervisor and/or Department Head during the leave.
- c. Employees on VESSA leave shall continue to pay the employee's and/or dependents' portion of insurance benefit premiums to continue health coverage during the leave.
- d. Employees on VESSA leave may use accrued paid time off during the leave, in accordance with the County's Time and Attendance Policy.
- e. Employees utilizing accrued paid time off while on VESSA leave shall continue to accrue benefit time. Employees not utilizing accrued paid time off while on VESSA leave shall not accrue benefit time, unless otherwise provided by an applicable collective bargaining agreement.
- f. VESSA leave runs concurrently with FMLA leave when the reason for VESSA leave also qualifies as an FMLA event, such as a serious health condition. As such, employees may be required to use accrued paid time while on FMLA leave.
- g. If the VESSA leave is taken for reasons other than an FMLA qualifying event, the 12-week VESSA leave entitlement is in addition to the 12-week FMLA entitlement.

4. REQUIREMENTS

Failure to meet the following requirements may result in delay or denial of VESSA leave.

- a. *Notice.* The employee shall notify the BHR Leave Coordinator at least forty-eight (48) hours in advance of taking VESSA leave, unless such notice is not practicable. If such notice is not practicable, then the employee must provide notice of VESSA leave within a reasonable time period.
- b. *Request.* The employee shall designate an absence in the Cook County Time and Attendance (CCT) System as VESSA related, or submit a completed VESSA Leave Request Form to the BHR Leave Coordinator, in order to request VESSA leave.
- c. *Certification.* The employee shall provide certification to the BHR Leave Coordinator indicating that: (i) the employee or the employee's household or family member is a victim of domestic or sexual violence; and (ii) the leave is for one or



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more of the permissible basis enumerated in Section J(2) above. Failure to provide proper certification may result in delay or denial of leave.

d. *Supporting Documentation.* The employee shall submit the following documentation corroborating the need for VESSA leave through the CCT System or to the BHR Leave Coordinator:

- i. Documentation from a victim services organization, attorney, health care provider, or other professional from whom assistance has been sought;
- ii. A police report;
- iii. A court order of protection; or,
- iv. Other relevant, written evidence.

Failure to provide proper documentation may result in delay or denial of leave.

e. *Approval.* The VESSA leave request will be pending until approved (or denied) by the BHR Leave Coordinator.

5. RETURN TO WORK

- a. Following a return from VESSA leave, the employee will be reinstated to their former position or an equivalent position with the same pay, benefits, and conditions of employment, unless the employee is unable to perform the essential functions of their former job with or without reasonable accommodation as required by law.
- b. An employee seeking additional leave time beyond the twelve (12) week period allowed under VESSA shall submit a request to the BHR Leave Coordinator to obtain some other form of leave, such as a personal leave of absence or medical leave, if eligible, in accordance with the applicable policies and procedures.
- c. If an employee does not return to work when the VESSA leave expires and has not been approved for an additional leave of absence or other reasonable accommodation as required by law, employment may be terminated in accordance with the County's Personnel Rules.

K. POLICY AND PROCEDURES – VESSA REASONABLE ACCOMMODATION

- 1. With respect to the terms, conditions, or privileges of employment, Cook County provides reasonable accommodations to the known limitations resulting from circumstances



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relating to being, or having a family or household member that is, a victim of domestic or sexual violence.

2. An employee seeking a reasonable accommodation pursuant to VESSA shall submit a request using the VESSA Reasonable Accommodation Request Form detailing the specific reason(s) for an accommodation, and supporting documentation, to the County's Equal Employment Opportunity (EEO) Officer. Such request for a reasonable accommodation shall be made promptly. Any exigent circumstances or danger facing the employee or his or her family or household member shall be considered in determining whether the accommodation is reasonable.
3. An employee has an affirmative obligation to assist and work with the EEO Officer in determining, if reasonable, an appropriate accommodation pursuant to VESSA that does not pose an undue burden on the County.

L. RESOURCES

General information concerning domestic or sexual violence and available resources may be obtained by contacting the County's Employee Assistance Program (EAP) or respective Personal Support Program.

M. CONFIDENTIALITY

Cook County maintains confidentiality of information, to the extent required by applicable law.



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APPENDIX A

VESSA ACCOMMODATION REQUEST FORM

**COOK COUNTY BUREAU OF HUMAN RESOURCES
REQUEST FOR VESSA ACCOMMODATION**

This form is to be completed by any Cook County employee who is requesting a reasonable accommodation pursuant to the Illinois Victims' Economic Security and Safety Act of 2003 (VESSA).

When complete, this form must be submitted to the Cook County Equal Employment Opportunity (EEO) Office at 118 N. Clark St., Room 834, Chicago, IL 60602 or EEO@cookcountyil.gov or by fax at (312) 803-9654. If you have any questions, you may call the EEO Office at (312) 603-6577.

EMPLOYEE INFORMATION

Name:

Best Contact Number:

Work Phone:

Job Title:

Department:

Work Location:

IF NECESSARY, PLEASE USE ADDITIONAL SHEETS FOR ANY OF THE INFORMATION REQUESTED

THE REASON FOR THE REQUEST

- The employee is the victim of domestic violence, sexual assault or stalking.**
- The employee has a family or household member who is a victim of domestic violence, sexual assault or stalking.**

Relationship to family or household member: _____

Along with this form, you must submit at least one of the following:

- Documentation from a victim services organization, attorney, health care provider, or other professional from whom assistance has been sought;
- A police report;
- A court order of protection; or
- Other corroborating written evidence of the need for leave.

THE REQUESTED ACCOMMODATION

Please describe the accommodation you are requesting. Examples of possible accommodations include adjusting your work schedule or location, changing your telephone number or seating assignment, installing a lock at a work location or on office furniture, or implementing a safety procedure.

By signing below, I attest that the information provided in this document is true and accurate to the best of my knowledge, and that any intentional misrepresentation contained in the request may result in disciplinary action, up to and including, discharge.

Employee/Volunteer Signature:

Date:

**COOK COUNTY
BUREAU OF HUMAN RESOURCES
REQUEST FOR VESSA LEAVE FORM**

EMPLOYEE INFORMATION

Name:	Employee #:
Job Title:	Phone:
Department/Bureau/Division:	

SECTION 1

THIS SECTION SHOULD BE COMPLETED BY THE EMPLOYEE AND SUBMITTED TO THE BHR LEAVE COORDINATOR AT LEAST 48 HOURS BEFORE TAKING ANY LEAVE, IF POSSIBLE.

IF THIS IS THE FIRST REQUEST FOR LEAVE:

Reason for leave request (check one):	
<input type="checkbox"/>	Domestic violence, sexual assault or stalking of employee
<input type="checkbox"/>	Domestic violence, sexual assault or stalking of family or household member
Expected duration (check one):	
<input type="checkbox"/>	Leave will be taken from (month/day/year): _____ to: _____
<input type="checkbox"/>	Leave will be taken intermittently. Anticipated first date (month/day/year): _____

To request an accommodation, please complete and submit the Request for VESSA Accommodation Form to the Equal Employment Office at 118 N. Clark St., Room 834, Chicago, IL 60602 or EEO@cookcountyil.gov or by fax at (312) 803-9654.
You may call the EEO Office at (312) 603-6577.

Along with this form, you MUST SUBMIT at least one of the following:

- Documentation from a victim services organization, attorney, health care provider, or other professional from whom assistance has been sought;
- A police report;
- A court order of protection; and/or
- Other corroborating written evidence of the need for leave.

IF THIS IS A NOTIFICATION OF UPCOMING LEAVE DATES AND VESSA LEAVE HAS PREVIOUSLY BEEN APPROVED:

I will be utilizing my VESSA rights and will be taking leave on _____.

(If leave will be for an extended period of time, until _____)

Reason for this leave?

I have read the VESSA Leave Policy and understand all my rights and obligations under this policy. I certify and affirm that all information provided is true and accurate.	
Employee Signature:	Date:

SECTION 2
TO BE COMPLETED BY THE DEPARTMENT HUMAN RESOURCES LEAVE COORDINATOR

IF THIS IS THE FIRST REQUEST FOR LEAVE:

Is the employee in active status? **YES / NO**

Has the employee provided certification that he/she is a victim of domestic violence, sexual assault or stalking or that he/she has a family or household member (spouse, parent, son, daughter, or person jointly residing in the same household) who is a victim of domestic violence, sexual assault or stalking? **YES / NO**

What type of certified documentation has been provided (check all that apply):

Documentation from a victim services organization, attorney, healthcare provider, or other professional from whom assistance has been sought

A police report

A court order of protection

Other corroborating written evidence of the need for leave

Based on the answers above, is the employee eligible for VESSA leave? YES / NO

If no, state reason(s):

IF THIS IS A NOTIFICATION OF UPCOMING LEAVE DATES AND VESSA LEAVE HAS PREVIOUSLY BEEN APPROVED:

Is the request for leave in this form approved? **YES / NO**

Current balance of VESSA leave hours remaining prior to the taking of this leave:

This form can be used retroactively to classify leave taken without notification as VESSA leave. **Please sign below to indicate your review of and response to this VESSA leave request.**

BHR Leave Coordinator Signature:

Date: