



# COUNTY OF LOS ANGELES WORKFORCE DEVELOPMENT, AGING AND COMMUNITY SERVICES



## WORKFORCE DEVELOPMENT PROGRAMS DIRECTIVE

DATE: August 17, 2018

NUMBER: WDP D18-09

### Title V-Senior Community Service Employment Program (SCSEP) Authorized Break In Participation Policy

#### EXECUTIVE SUMMARY

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This directive provides guidance and establishes the procedures for the Los Angeles County America's Job Center of California (AJCCs) operating the Title V-SCSEP for implementation of the SCSEP participant approved break in participation policy.

#### REFERENCES

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- Title 20 CFR 641.570(d)
- CDA PM 14-15, *SCSEP, Title V, Authorized Break in Participation Policy*
- CDA PM 11-20, *Title V/Senior Community Service Employment Program, Participant Termination Policy*
- CDA PM 11-06, *Revised U.S. Department of Labor Regulations, Code of Federal Regulations, Title 20, Part 641 Senior Community Service Employment Program, Grievance and Termination Policy Changes*

#### BACKGROUND

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The purpose of this directive is to establish an Authorized Break in Participation Policy that aligns with California Department of Aging (CDA) Program Memo 14-15(P), and is in compliance with the U.S Department of Labor (DOL), Employee and Training Administration regulations, 20 CFR 641.570(d) as a guide on break in participation requirements.

#### POLICY AND PROCEDURES

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County of Los Angeles has established an Authorized Break in Participation Policy that will address the voluntary leave, administrative leave, administrative requirements, SPARQ reporting requirements, and yearly certification procedures. An authorized Break in Participation temporarily suspends a SCSEP participant's training activities for a period of three to 60 consecutive days.

Authorized Breaks in Participation:

- Are unpaid
- Do not apply to the SCSEP participant's individual durational limit.
- Must be approved by the WDACS SCSEP Program Coordinator in advance unless there is good cause, i.e., medical emergency, family emergency, etc.
- The extent of approval shall not exceed 60 days.

Two categories for an Authorized Break in Participation:

- Voluntary Leave
- Administrative Leave

All participants shall receive a copy of the SCSEP Extended Absence Policy (Attachment I) and sign a receipt of acceptance during their initial SCSEP Enrollment Orientation.

**VOLUNTARY LEAVE POLICY**

Voluntary Leave may be granted for up to 60 days for the following reasons:

- Illness
- Injuries
- Estate Settlement
- Marriage
- Family Care
- Bereavement
- Hospitalization

If a participant is on Voluntary Leave due to illness, a signed doctor's or medical provider's statement of the participant's status and/or limitations must be provided upon the participant's return to their training assignment and placed in the participant's case file. In addition, the WDACS SCSEP Program Coordinator may require a copy of the doctor's or medical provider's statement when a participant is absent for more than four (4) consecutive days because of illness.

**ADMINISTRATIVE LEAVE POLICY**

Administrative Leave pertains to participants who have been placed on leave for the following reasons:

- Workers' Compensation
- Administrative review

- A Host Agency closure when there are no other Host Agency placements available at the time of closure.

### Workers' Compensation

A workers' compensation injury may result in an approved break in participation. An injured participant, whether the participant is entitled to be restored to his/her Host Agency position or not, is a matter of State workers' compensation law. Under State law, the participant may be entitled to reinstatement to her/his original assignment if a medical release is provided. If the assignment is no longer available or appropriate, SCSEP will make every effort to locate a suitable assignment within the same Host Agency or with a different Host Agency. If SCSEP is over-enrolled and cannot accommodate the participant at the time of the doctor's return-to-work release, the participant may be terminated and then placed on the SCSEP waitlist.

Participants who are on a Workers' Compensation leave must be placed on an Administrative Authorized Break in Participation until they provide a medical release.

The medical release should describe the participant's current status and/or any limitations concerning the participant. The AJCC Case Manager must ensure the Host Agency can reasonably accommodate any limitations contained in the medical release. If the Host Agency is not able to reasonable accommodate the restrictions, or there is no longer a placement for the participant, the participant may be placed in another community service training assignment or terminated.

A participant's refusal to return to training after being released from Workers' Compensation Leave shall result in the participant's termination from the program.

Prior to the AJCC Case Manager terminating a participant from SCSEP, the SCSEP Termination Policy must be followed, i.e., 30 day written notice of termination.

### Administrative Review

A participant under Administrative Review may remain on an authorized Break in Participation until the review has been resolved for a period no longer than 60 days. Depending on the final determination of the Administrative Review, the participant can either be placed back into the same training assignment, rotated to another training site or terminated. Prior to AJCC Case Manager terminating a participant from SCSEP, the SCSEP termination procedure must be followed, i.e., 30 day written notice of termination.

### Host Agency Closure

If a participant's Host Agency/Training Site permanently closes, and there is no suitable training assignment, nor will there be one within a reasonable period, i.e. within 60 days, the participant must be terminated. Participants cannot be placed into an Authorized Break in Participation and left in suspension indefinitely as room must be made for other

applicants to take advantage of SCSEP services.

Documentation for Break in Participation: Request for Time Off/Break in Participation form (Attachment II)

1. Complete the Request for Time Off/Break in Participation form as follows:
  - a. For time off up to 3 calendar days -
    - i. Participant completes with first day and last day of leave, sign and date
    - ii. Participant obtains signature of Training Site Supervisor
    - iii. No SCSEP approval needed
  - b. For time off more than 3 days -
    - i. Participant completes first day of leave, reason for request, anticipated last day of leave, sign and date
    - ii. Participant obtains signature of Training Site Supervisor
    - iii. SCSEP Payroll must review, sign and date
    - iv. AJCC Case Manager must review & date, provide recommendation to WDACS SCSEP Program Coordinator regarding approval
    - v. Requires approval of WDACS SCSEP Program Coordinator
2. Provide detailed case notes in the participant's case file.

**ADMINISTRATIVE REQUIREMENTS**

The WDACS SCSEP Program Coordinator has the authority to approve or decline a documented request for an Authorized Break in Participation.

Participants on any type of Authorized Break in Participation are not permitted to participate in any trainings, workshops, and/or meetings.

Upon returning from an Authorized Break in Participation, a participant may be placed in a vacant training assignment position that supports his/her Individual Employment Plan (IEP). If there are no vacant positions, the participant will be terminated and placed on the waiting list for a priority placement until an appropriate community service training assignment becomes available.

**SPARQ REPORTING REQUIREMENTS**

AJCC Case Managers must enter all Authorized Breaks in Participation into SPARQ under the Assignments/Exits section and include case notes in the comment box. SPARQ reporting requirements apply to both Voluntary and Administrative Leave.

## **ANNUAL RECERTIFICATION**

If a participant's annual recertification is due while that participant is on an Authorized Break in Participation, the recertification must be completed immediately upon the participant's return to the program, i.e. within one month of the return.

## **TERMINATION**

All terminations must be in accordance with the SCSEP Termination Policy Directive. In addition, please refer to the SCSEP Data Collection Handbook – Revision 7 (March 2017) regarding termination for extended absence while on a Break in Participation.

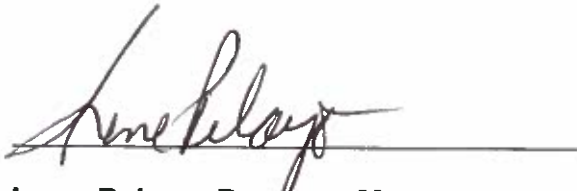
## **ACTIONS**

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Los Angeles County AJCCs must ensure that the policies and procedures described herein are communicated throughout the operations, management and governance structure of the contractor organization and that this Directive is appropriately maintained until further notice. The AJCC Case Managers shall provide all SCSEP participants with a copy of the SCSEP Extended Absence Policy (Attachment I).

## **INQUIRIES**

Inquiries regarding this directive and the policies and procedures described herein should be directed to [SCSEP@wdacs.lacounty.gov](mailto:SCSEP@wdacs.lacounty.gov)



**Irene Pelayo, Program Manager**

**Workforce and Community Services Branch**

Attachment I: SCSEP Extended Absence Policy

Attachment II: SCSEP Request for Time Off / Break in Participation form



**COUNTY OF LOS ANGELES  
SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM  
EXTENDED ABSENCE POLICY**

No participant may hinder the progress of the Senior Community Service Employment Program (SCSEP) by occupying a training slot and not reporting to a training site for an extended period of time without approval. The extent of the approval will be no more than 60 days.

Each participant shall report to the Training Site Supervisor an absence from their training site for a period of 3 days or more. The Case Manager must also review the following extended absence policy with the participant:

1. Any participant not reporting to a training site for more than 3 days must be placed on an Approved Break in Participation.
2. A Break in Participation form should be completed and submitted with the participant's name, training site, the first date of absence, expected date of return, and reason for request.
3. After reaching the 60 day period following the first date of the approved break, the participant may be terminated from the SCSEP if he/she has not returned to the program.
4. A participant on medical leave should contact their Case Manager before the 60 day period ends to update the status of their medical condition. If there is no doctor's release, the participant may be terminated from the SCSEP 60 days after the first date of the approved break.
5. All transactions WILL be documented in the case notes of the participant and placed in the participant's file.
6. A participant terminated under this policy cannot reapply to the Los Angeles County SCSEP at any time.

Your signature indicates that the above policy of the SCSEP has been reviewed with you and that you understand the provisions therein.

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



COUNTY OF LOS ANGELES  
SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM

REQUEST FOR TIME OFF / BREAK IN PARTICIPATION

The County of Los Angeles Senior Community Service Employment Program (SCSEP) does not offer paid leave benefits. Although the SCSEP may approve time off, it is without pay. A request for an Approved Break in Participation (BIP) may be granted according to the SCSEP Extended Absence Policy. Approval may not exceed 60 days. Absences exceeding 60 days will result in termination. (See SCSEP Extended Absence Policy).

Time Off Requested:      Personal Time off (up to 3 calendar days)  
   Break in Participation (3 calendar days or more)

Participant Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_

**The Time Off Requested:**

1<sup>st</sup> Day of Leave: \_\_\_\_\_ Last Day of Leave: \_\_\_\_\_  
Total Number of Hours: \_\_\_\_\_ Total Number of Calendar Days: \_\_\_\_\_

**Reason For Request:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

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***BIP approval by SCSEP administration only. Host Agencies may not approve or disapprove requests for time off. Host Agency training site staff, indicate by signing that they acknowledge this request and that the participant must be excused from training for date(s) approved.***

Training Site Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

SCSEP Case Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

SCSEP Case Manager Comments \_\_\_\_\_

SCSEP Payroll Signature \_\_\_\_\_ Date \_\_\_\_\_

**APPROVAL:**     Approved                       Not Approved

\_\_\_\_\_  
SCSEP Program Coordinator      Date \_\_\_\_\_

COMMENTS:

\_\_\_\_\_