

Policy Title: Pay Continuation After Workplace Disruption
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Pay Continuation After Workplace Disruption

Policy Statement

It is NCIRE policy to consider how a regional or campus emergency situation/disruption may affect employees' ability to work or report to work, and to establish equitable procedures and compensation practices for payroll and human resources functions. As vital protection for our organization and our employees during unexpected or extraordinary circumstances, NCIRE has established a policy of continuation of salaries and benefits to currently active awards from all funding sources, Federal and non-Federal, after a period of 72 hours of the worksite being non-operational as determined by the Executive Director or a member of leadership authorized to make decisions on the Executive Directors behalf.

Purpose

To provide a framework of practices that will facilitate the continuous operation of human resources and payroll functions in the event extraordinary circumstances arise which would prevent normal operations which result in a workplace disruption.

Scope

This policy applies to all NCIRE employees who are in regular full-time or part-time regular status (with a set tour of duty). Intermittent and temporary employees and independent contractors are excluded from this policy.

Definition of Workplace Disruption

Any condition adversely affecting NCIRE facilities or operations including, but not limited to, earthquakes, fires, flooding, all manner of natural disasters, utility disruption, civil disturbances, diseases, bombs, fires, workplace violence, terrorism biological agents or toxic substances.

This policy does not apply to personal emergencies or localized conditions affecting smaller populations or transportation systems, such as transit or ferry strikes, bridge or road closures.

Pay practices

- Organization Worksite Non- Operational***

Depending on the circumstances, and the nature of the disaster, business operations may be damaged or devastated by an unexpected extraordinary circumstance leaving access to the worksite impossible for the time being. If NCIRE is closed due to an extraordinary circumstance that would prevent normal operations for a period of more than 72 hours during a period of worksite hours, then the Executive Director or an authorized member of NCIRE leadership may authorize charges to continue for salaries and benefits to current active Federal awards and non-Federal awards and from all funding sources as indicated within NCIRE's UltiPro Payroll

Timekeeping System (*). This measure is to ensure that NCIRE employees will be able to obtain what they essentially need so they may return to work as soon as NCIRE reopens. NCIRE needs its employees to be fully productive and ready to support disaster recover strategies, and research deadlines per our responsibilities to the funding organizations.

2. *Disaster has Occurred but NCIRE Worksite is Operational*

If the organization is open for business but an affected employee or small group of employees is/are unable to report to work because of a condition adversely affecting a specific region, they may request one of the following alternatives:

- Sick time accrual
- Vacation accrual
- Leave Without Pay (non-exempt employees)
- Additional days off if awarded by the Executive Director to mirror VA policies related to that event

Exempt employees working any time within that week are required to be paid in full for the entire week, however, NCIRE may require use of accrued vacation or sick time to cover any hours not worked.

Comments

It is recognized that circumstances addressed by this policy are beyond direct control of NCIRE leadership and its employees. This policy attempts to balance considerations of reasonableness, safety, equity, and responsibility for employees affected by environmental conditions or emergency situations while maintaining a commitment to the scientific research and funding organizations to which we are responsible.

**This policy references Notice Number: NOT-OD-18-114 issued by the National Institutes of Health ([NIH](#)) December 12, 2017*