FORCE MAJEURE LEAVE

POLICY

For all staff in Education and Training Boards Ireland

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Document Reference Number	HR027 Force Majeure Leave
Implementation Date	01 November 2020
Review Date	01 November 2022
Next Review Date	01 November 2022
DES Circular Letter	Provisions of the Parent's Leave and Benefit Act 2019
Date approved by ETBI Board	26th January 2021

Force Majeure Leave Policy for all staff in Education and Training Boards Ireland

This policy must be brought to the attention of all staff employed by and seconded to ETBI including those on approved leave of absence.

ETBI will provide this policy to all staff through appropriate means (e.g. direct correspondence, SharePoint, CPD, induction and mentoring programmes and/or on the ETBI website).

Any queries in relation to the ETBI Force Majeure policy should be communicated to internalpolicies@etbi.ie in the first instance.

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1. PURPOSE

Force majeure leave is short-term paid leave that employees can avail of to enable them to deal with family emergencies resulting from a family member's sudden injury or illness once certain conditions have been met. The policy aims to communicate the statutory entitlement of employees taking *Force Majeure* leave and sets out the arrangements for the administration of the same.

The *Force Majeure* leave policy reflects the commitment of Education and Training Boards Ireland (ETBI) to the promotion of equality and will be fully compliant with the provisions of the Parent's Leave and Benefit Act 2019.

2. STAFF MEMBERS COVERED BY THIS POLICY

The policy is applicable to all staff employed and seconded to ETBI.

3. WHO CAN TAKE FORCE MAJEURE LEAVE

An employee is entitled to paid leave owing to the urgent illness or injury of:

- A child (Natural or adopted)
- A spouse or civil partner
- A person to whom he or she is in loco parentis
- A brother/sister
- A parent/grandparent

- A domestic dependent

This entitlement applies only when the immediate presence of an employee is indispensable, at the place where the ill/injured person is located.

4. HOW THE FORCE MAJEURE LEAVE WILL BE TAKEN

Your entitlement to *force majeure* leave is limited to three days in 12 consecutive months or five days in 36 consecutive months. There is no service requirement for an employee to avail of *force majeure* leave.

5. PROCEDURE

Due to the nature of *force majeure* leave, prior notice cannot be given. However, you are required to inform the organisation as soon as possible on the first day of absence. On return to work, you will need to discuss the reasons for taking the leave. You must also complete the enclosed *force majeure* notice document on your return to work (attached).

Your manager will conduct a review of the application and will confirm whether or not the leave will be treated as *force majeure* leave. HR will be notified of the outcome, and the details will be recorded on Time and Attendance system and your personnel file.

Medical appointments for which your presence is necessary and for which you have prior knowledge will not be deemed eligible for force majeure leave

6. NOTICE TO EMPLOYER OF FORCE MAJEURE LEAVE

Appendix A must be completed by an employee who takes *force majeure* leave as soon as is reasonably practicable after the leave is taken

7. REVIEW OF POLICY

There will be a review of this policy two full years after its introduction or earlier if deemed necessary by ETBI management.

DATA PROTECTION

The information contained in this form will be processed in accordance with our obligations under data protection law. The information is collected and processed to comply with the Parental Leave Acts 1998 and 2006 and to administer payment for force majeure leave in accordance with the employment contract and related policies.

As this form may contain special categories of personal data, it will be stored in a separate file. This is done to ensure the highest level of confidentiality and to ensure that only authorised personnel have access to it. [Set out here any other security measures applied to the information collected by way of this notice.]

For further information regarding the processing by the organisation of personal data, please see our data protection policy. Please see our data retention policy for further information regarding the retention periods applicable to this document and other personal data held by the organisation.

DECLARATION

I declare that the information given by me above is true, accurate and complete in all respects. I both understand and accept that if that is not the case, whether knowingly on my part or otherwise, then, following a due investigation by my employer, I may be denied force majeure leave and/or liable to appropriate disciplinary action.

Signed: _____Date: _____

(Employee)

Signed: _____Date: _____

(Manager)

APPENDIX A FORCE MAJEURE LEAVE FORM

Name of employee: _____

Department:_____

Staff ID (if applicable):_____

PPS number:_____

Name and address of injured/ill member of the employee's immediate family:

_____

_____

Relationship of employee's immediate family member to employee:

_____

_____

Nature of injury/illness of immediate family member:

_____

_____

Dates of the emergency family (*force majeure*) leave: _____

I confirm that I am applying for *force majeure* leave on the above-mentioned date(s) because of urgent family reasons, as a result of the injury to/illness of the member of my immediate family stated above and per details stated, as a result of which my immediate presence with that family member was indispensable.