

The Corporation of the Municipality of Brockton



By-Law 2022-106

Being a By-Law to Adopt a Bereavement Policy for the Municipality of Brockton.

Whereas The Council for The Corporation of the Municipality of Brockton deems it expedient to establish policies;

And Whereas the *Municipal Act 2001, S.O. 2001, c 25, Section 5(3)*, as amended provides that a municipal power, including a municipality's capacity rights, powers and privileges under section 9, shall be exercised by by-law;

And Whereas the Municipality of Brockton wishes to adopt a Bereavement Policy;

Now Therefore the Council of The Corporation of the Municipality of Brockton enacts as follows:

- 1.0 That the Corporation of the Municipality of Brockton Council hereby adopts a Bereavement Policy as contained in the attached Schedule "A" to this By-Law.
- 2.0 This By-Law shall come into full force and effect upon final passage.
- 3.0 This By-Law may be cited as the "Adopt Bereavement Policy By-Law".

Read, Enacted, Signed and Sealed this 21st day of June, 2022.

Mayor – Chris Peabody

Director of Legislative and Legal Services (Clerk)
– Fiona Hamilton

Department:	Municipal Employees	Policy Number:	H01-0604-22
Section:	Human Resources	Effective Date:	June 21, 2022
Subject:	Bereavement	Revised Date:	
Authority:	<i>Employment Standards Act, 2000, By-Law 2022-106</i>		

1. Purpose

To provide paid time away from work in the event of a death of an employee's immediate family member.

2. Definitions

In this policy:

- a) "CAO" means Chief Administrative Officer;
- b) "Employee" means full-time, part-time – as outlined below;
- c) "Municipality" means the Municipality of Brockton;
- d) "Supervisor" means the person to whom any employee directly reports, and where applicable, includes Department Heads and the CAO; and

3. Eligibility

All employees are entitled to up to two full days of job protected *unpaid* bereavement leave every calendar year, whether they are employed on a full or part-time basis.

To be eligible for *paid* bereavement leave employees must be full-time employees have been employed by of the Municipality of Brockton for a minimum of 3 months.

Part-time employees are eligible to the extent that such leave is required during the consecutive period that coincides with the date of the funeral, on days that part-time employees are scheduled to work.

1. The Municipality of Brockton will pay an employee up to four (4) days regular pay in the event of the death of:
 - a) Your spouse (includes common law or same sex partners)
 - b) A parent, parent-in-law, common law parent, step-parent or foster parent of yours or your spouse
 - c) A child, step-child or foster child of yours or your spouse
 - d) A grandparent, step-grandparent, grandchild or step-grandchild of yours or your spouse
 - e) A brother or sister, step-brother or step-sister
 - f) A son-in-law or daughter-in-law
 - g) A brother-in-law or sister-in-law
 - h) A relative of yours who is dependent on you for care

The Municipality of Brockton will pay an employee one (1) day regular pay in the event of the death of, should the funeral fall within your scheduled work day:

- a) An aunt or uncle of yours or your spouse
 - b) A niece or nephew of your or your spouse
 - c) To attend a funeral as a pallbearer or participant in the funeral service, (pallbearer, reader, etc.)
2. An employee shall not receive paid bereavement leave while on any other authorized leave of absence, maternity/adoption, parental leave, short term or long-term disability.
 3. An employee shall receive paid bereavement leave to coincide with the date of the funeral and if the employee is on vacation leave, the affected vacation time will be re-credited to the employee.
 4. Any bereavement leave granted shall be consecutive days off and that one of the days so granted must be the day of the funeral. Special circumstance may require Department Head approval.
 5. The Municipality of Brockton is committed to supporting employees through a crisis, and recognize that the employee may not be ready to return to full duties following a bereavement leave. In such cases, the possibility of taking a further period of absence in the following order:
 1. Sick/ personal leave;
 2. Use of overtime hours;
 3. Vacation leave; and lastly
 4. Unpaid leave.

All requests must be approved by the Department Head in advanced.

6. Up to one working day may, at the discretion of the Department Head, be granted to any or all of the employees in the Department to be absent from work to attend the funeral of any fellow employee.

4. Responsibility

Employees must inform the employer as soon as possible before starting the leave. Notice does not have to be given in writing. Oral notice is sufficient.

Employees may be required to provide supporting documentation if requested. This may take the form of a death certificate, a notification from a funeral home, a published obituary, a copy of a printed program from a memorial service.

Supervisor shall complete the Bereavement Leave request form (Schedule A) and submit to payroll for attendance tracking purpose only.

5. Consequences for Failing to Adhere to Policy

If an employee does not comply with the terms of this policy, they may be subject to disciplinary action, including possible termination of employment in accordance with the Employee Discipline Policy (H00-0610-12).

6. Policy Changes

- a) The Municipality of Brockton has the ability to amend, change or rescind this policy at any time following Council approval and employees will agree to the changes without notice.
- b) If the minimum requirements of the Employment Standards Act, 200 provide employees with any greater entitlements than those set out in this Policy, the Municipality of Brockton will provide employees with such greater entitlements in substitution for those set out in this Policy.

Schedule A – PDF Fillable form available

Bereavement Time Off

Dept # _____

Employee # _____

Employee's Name:

☐ **A – 4 Days**

- ☐ Spouse (common law or same sex partner)
- ☐ Parent, Parent-in-law, Common Law Parent, Step Parent or Foster parent
- ☐ Child, Step Child, Foster Child
- ☐ Grandparent, Step-Grandparent, Grandchild, Step Grandchild
- ☐ Brother, Sister, Step Brother, Step Sister
- ☐ Son-in-law, Daughter-in-law
- ☐ Brother-in-law, Sister-in-law
- ☐ Relative who is dependent on your care

☐ **B – 1 Day**

- ☐ Aunt or Uncle
- ☐ Niece or Nephew
- ☐ Attend Funeral as Pallbearer or participant in the funeral service
- ☐ Other _____

Date(s)**Times****Hours**

From _____

to _____

From _____

to _____

From _____

to _____

From _____

to _____

Total Hours Used:_____
Department Head's Signature

Date: _____