

Date: October 6, 2022

To: Department Directors

From: Daniella Levine Cava
Mayor

A handwritten signature in blue ink that reads "Daniella Levine Cava".

Subject: Leave Donations to Assist in Hurricane Fiona Relief Efforts in Puerto Rico

On September 20, 2022, the Board of County Commissioners adopted Resolution No. R-864-22 sponsored by Commissioner Rebeca Sosa, directing me to allow County employees to contribute the monetary value of accrued holiday and annual leave time to the County's Emergency Disaster Relief Fund towards recovery and reconstruction efforts as a result of the devastating impact of Hurricane Fiona in Puerto Rico.

Employees will be permitted to donate annual or holiday leave hours on a first-come, first-served basis for this worthy cause. Leave donations will be handled via the INFORMS Employee Self-Service Request to Donate Leave Tile. Once the transactions are processed, the employee's appropriate leave balance will be reduced by the number of hours donated. These leave donations and the corresponding financial transactions are irrevocable, so we kindly ask employees that no late changes be sent requesting to rescind the donation. The Human Resources Department has prepared the attached Job Aid to assist employees in donating to this worthy cause.

Should you have any questions regarding the leave donation process, please contact Arleene Cuellar, Director, Human Resources Department, at Arleene.Cuellar@miamidade.gov.

Attachment

c: Honorable Chairman Jose "Pepe" Diaz
and Members, Board of County Commissioners
Honorable Harvey Ruvin, Clerk, Circuit and County Courts
Honorable Pedro J. Garcia, Property Appraiser
Lazaro Solis, Deputy Property Appraiser
Geri Bonzon-Keenan, County Attorney
Gerald K. Sanchez, First Assistant County Attorney
Jess M. McCarty, Executive Assistant County Attorney
Office of the Mayor Senior Staff
Jose J. Arrojo, Executive Director, Commission on Ethics and Public Trust
Felix Jimenez, Inspector General
Javier A. Betancourt, Executive Director, Citizens' Independent Transportation Trust
William Diggs, Executive Director, Miami-Dade Economic Advocacy Trust
Aileen Bouclé, Executive Director, Transportation Planning Organization
Basia Pruna, Director, Clerk of the Board
Jennifer Moon, Office of Policy and Budgetary Affairs
Yinka Majekodunmi, Commission Auditor
Department Personnel Representatives



Miami-Dade County

Donate Leave to Leave Pool– Job Aid

DESCRIPTION

This job aid is for all employees.

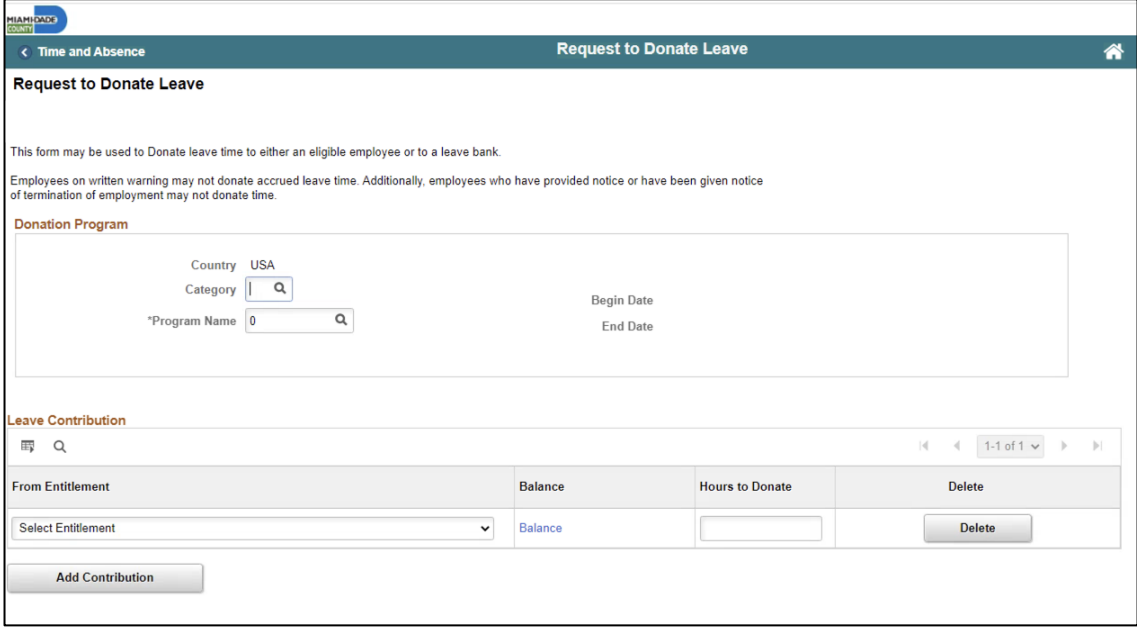
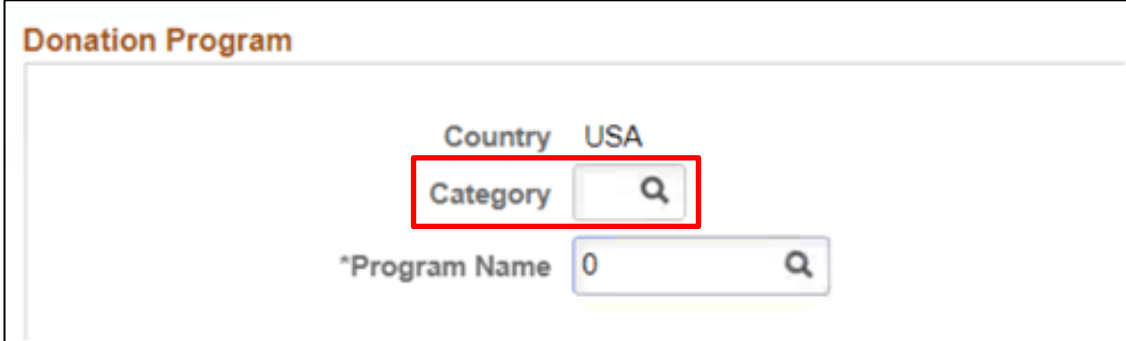
Employees can donate hours from their banks to Leave Pools of their choice in Employee Self Service.

Employees can donate to four different categories of Leave Pools:

- 1) Bank – Department Leave Pool.
- 2) Bank – Special Event Bank Leave Pool.
- 3) Individual – Special Leave Pool.
- 4) Individual – Sick Leave Pool.

This document will help employees through the necessary steps to donate to a given Leave Pool.

DONATE LEAVE TO LEAVE POOL – JOB AID

Step	Action
1.	<ul style="list-style-type: none"> Log into INFORMS. Navigate to Request to Donate Leave Page: INFORMS Fluid Menu > Employee Self-Service > Time and Absence tile > Request to Donate Leave tile. 
2.	<ul style="list-style-type: none"> Search for the Leave Pool the user wants to donate to: <ul style="list-style-type: none"> Category (optional) – this will help the user narrow down the list of available Leave Pools based on the category. If the employee knows what category of Leave Pool they are donating to, this can minimize the search results on the following field. The different Leave Pool types are: <ul style="list-style-type: none"> Bank – Department Leave Pool. Bank – Special Event Bank Leave Pool. Individual – Special Leave Pool. Individual – Sick Leave Pool. 

- Program Name (required):
 - Click on the **Magnifying Glass icon** in the field to search through all the Leave Pools, and a pop-up search page appears.
 - Click on **Advanced Lookup**.

3.

- Now the user will be able to search by description. Users can choose the "begin with" default option if they know what the leave program description starts with, or if they know part of the pool's name, they can choose Description "contains."
- For example:

Look Up Program Name

Leave Program begins with

Description contains

Search **Clear** **Cancel** Basic Lookup

Search Results

View 100 | 1-1 of 1

Leave Program	Description
00000032	POLICE

Now that the user has selected which Leave Pool they will be donating to, they can go ahead and select the Entitlement from which they want to donate, such as Annual Leave, for example. Once they select the Entitlement, the page displays the last finalized balance available for that leave in the system.

4.

Request to Donate Leave

This form may be used to Donate leave time to either an eligible employee or to a leave bank.

Employees on written warning may not donate accrued leave time. Additionally, employees who have provided notice or have been given notice of termination of employment may not donate time.

Donation Program

Country USA
 Category
 *Program Name 00000032 POLICE
 Begin Date 11/21/2016
 End Date

Leave Contribution

From Entitlement	Balance	Hours to Donate	Delete
Annual Leave	613.50	<input type="text"/>	Delete

Add Contribution

5.

- Now, the employee must enter **Hours to Donate**, which is how many hours they wish to donate.
- Once they select how many hours they wish to donate, the employee will need to scroll down the page, read and acknowledge the **Agreement and Compliance** verbiage, and check the checkbox that says, "I hereby confirm that I have read and comply with the given statements."
- Then they can **Submit** the donation.

MIAMI DADE COUNTY

Time and Absence Request to Donate Leave

Leave Contribution

From Entitlement	Balance	Hours to Donate	Delete
Annual Leave	613.50	8	Delete

Add Contribution

Agreement and Compliance

- I have read the Leave Donation Policy.
- I acknowledge that if I am donating hours/days to this program or to another employee, I authorize the donation of hours/days and understand that the donation is irrevocable.
- I certify that I have not provided or been given notice of termination.
- I certify that I am currently not on a written warning of any kind.
- I hereby confirm that I have read and comply with the given statements.

Submit Save for Later

* Required Field

6.

- Once submitted and automatically approved, the system will pick up the donation and process it, reducing the employee's balance. Then, the donation will be reflected in the total available for the Leave Pool.
- The user will click **OK** to acknowledge the confirmation.

MIAMI DADE COUNTY

Time and Absence Request to Donate Leave

Request to Donate Leave

Approve Confirmation

✓ Your Request has been Approved.

OK

7.

The employee is then automatically transferred to the Leave Donation History Page, where they can see their Donations.

Specify the date range of interest. To retrieve a complete history, leave From and Through dates blank and select Refresh. Select the Request Type link to view request details. Select Edit button to modify and delete the request.

Begin Date End Date

Request History

Submit Date	Leave Program Name	Request Type	Approval Status	Process Status	Edit
06/13/2022	POLICE	Donate	Approved	Unprocessed	<input type="button" value="Edit"/>

8.

- Optional – The employee can edit unprocessed transactions only. If the transaction has been processed (it will be processed at least once daily), then the user can no longer edit the transaction.
- Example – The user decides right after entering the transaction to cancel it because maybe they chose the wrong Leave Program or no longer wish to donate. They can select **Edit** on the unprocessed transaction or scroll down and select the **Cancel** button if they wish to cancel the transaction entirely.

Category Begin Date 11/21/2016

*Program Name POLICE End Date

Leave Contribution

From Entitlement	Balance	Hours to Donate	Delete
Annual Leave	613.50	8.00	<input type="button" value="Delete"/>

Agreement and Compliance

- I have read the Leave Donation Policy.
- I acknowledge that if I am donating hours/days to this program or to another employee, I authorize the donation of hours/days and understand that the donation is irrevocable.
- I certify that I have not provided or been given notice of termination.
- I certify that I am currently not on a written warning of any kind.
- I hereby confirm that I have read and comply with the given statements.

[Return to Leave Transfer Requests History](#)

* Required Field