

**STATE OF VERMONT  
AGENCY OF HUMAN SERVICES  
DEPARTMENT OF CORRECTIONS**

**Directive: 106.04**

**Subject:** Special Team Allowance  
**Effective Date:** July 1, 2001 **Review and Re-Issue Date:**  
**Supersedes:** 106.04 **APA Rule Number:**

<b>Recommended for approval by:</b>		<b>Authorized By:</b>	
_____	_____	_____	_____
<b>Signature</b>	<b>Date</b>	<b>Signature</b>	<b>Date</b>

**1. Authority:**

**1.1** Effective July 1, 1997 the Corrections Bargaining Unit Agreements with the State of Vermont established a Special Team Allowance for Situational Response Team members, and as of July 1, 1998 extended this benefit to Certified Trainers.

**2. Purpose:**

**2.1** To establish a consistent procedure for employees to document their eligibility and to apply for the Special Team Allowance.

**3. Applicability/Accessibility**

**3.1** Anyone may have a copy of this Directive.

**4. Directive**

**4.1** Article 72 of the Corrections Bargaining Unit Contract recognizes and rewards those employees who serve as members of the State-wide or Local Emergency Response Teams, and certified trainers who deliver training as a related duty. This Directive was promulgated to provide a clear and consistent avenue for these employees to secure the Special Team Allowance bonus.

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- 4.2** Effective July 1, 2001, all employees applying for the Special Team Allowance must document their eligibility using the Request for Special Team Allowance Form (attached). The employee must complete all information and procure all required signatures to receive the benefit.
- 4.3** Employees can submit only one request for Special Team Allowance per year. An employee may apply for the bonus on any time report covering paychecks received on or after July 1. A copy of the authorized Request for Special Team Allowance Authorization Form must be submitted by the qualifying employee with the time report in which the allowance is requested. Employees should use time report line code "SCT" and put "01" hours under the first Sunday of the pay period to trigger payment of this benefit.
- 4.4** The Request for Special Team Allowance Form supersedes and replaces any previously used forms relating to Article 72. Employees who have already applied for the bonus since July 1, 2001 must complete this new form to receive or retain this benefit. Any employee who receives this benefit without completing this form will have the bonus subtracted from a subsequent paycheck.

### **5. Training Method**

- 5.1** All local site managers will be provided with a copy of this Directive, along with a memo discussing implementation responsibilities. A discussion will be facilitated by the site managers' Director to insure a clear understanding. Site managers will conduct a similar process with their staff.
- 5.2** This Directive will be distributed to all staff initially through e-mail. Training Coordinators will be asked to post the Directive. Local managers will establish a method by which staff without e-mail can review this directive.

### **6. Quality Assurance Processes**

- 6.1** Superintendents and CRSU Supervisors will verify that claims made by employees as regards training delivery and membership/participation on CERT/LERT Teams are legitimate.

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- 6.2** The Corrections Emergency Management Services Coordinator will sign all request forms submitted by CERT/LERT members, and forward to the HRD Unit.
- 6.3** The Director of HRD will sign all Request for Special Team Allowance Forms and assure that copies of all approved forms are sent to Corrections' Personnel Officer.
- 6.4** The Personnel Officer will check Article 72 approvals against payroll payments to assure that all payments are legitimate. All Article 72 approvals will be routed to the employee personnel files.
- 6.5** Local Training Coordinators will file all completed Request for Special Team Allowance Forms in appropriate employee training files.
- 6.6** The Human Resource Development Unit (HRD) will maintain records of all currently certified trainers and establish minimum criteria for maintenance of certification. Applications will be routinely checked against HRD certified trainer lists. The HRD Unit will maintain a file of all completed Request for Special Team Allowance Forms.
- 6.7** The Chief of HRD will give final approval on all forms and send a copy back to the employee.

### **7. Financial Impact:**

- 7.1** Projections suggest that 30 CERT/LERT members and 60 Certified Trainers will apply for the Special Team Allowance. Allowing for an undercount of 10, the cost of this benefit will be approximately \$25,000 per year

### **8. References**

### **9. Responsible Director and Draft Participants**



Agency of Human Services  
**DEPARTMENT OF CORRECTIONS**  
103 South Main Street  
Waterbury, VT 05671-1001

**Request for Special Team Allowance (Article 72)  
and Authorization Form**

Article 72 states:

1. In recognition of the higher standard of responsibility that comes with the selection by the Department of Corrections for participation on a Corrections Emergency Response Team, and maintenance of membership on such team, the following allowance will be offered. Effective with the first pay check received on or after July 1, 2001, employees who: are assigned by the Department of Corrections; and have obtained the requisite certification and served on a correctional facility's Corrections Emergency Response Team for the full previous fiscal year; and who have attended and successfully completed all required Team training and/or meetings conducted during that year shall receive an annual lump sum amount of \$250. Commencing with the first paycheck received on or after July 1, 2002, and each July 1 thereafter, the annual lump sum amount shall be \$300. No employee may receive more than one lump sum payment under either or both provisions of this Article.
2. Effective July 1, 1998, employees who receive and maintain certification as trainers from the Commissioner of Corrections and who, during the previous fiscal year, conducted training as required by their certification, shall receive an annual lump sum payment of \$200 effective with the first pay check received on or after July 1. No employee may receive more than one lump sum payment under either or both provisions of this Article.

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Waterbury Office

## ARTICLE 72 APPROVAL FORM

In order to be compensated for this article the employee must make the following request and obtain the necessary authorizing signatures.

### 1. CERT/LERT

A. I have served on the State-wide Corrections' Emergency Response Team (CERT) and/or Local Emergency Response Team (LERT) for the past year. I was certified and placed on the team on: \_\_\_\_\_

(Date)

B. I have attended and successfully completed all required team training or meetings during the past year.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Site Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized by Chief of  
Emergency Services: \_\_\_\_\_ Date: \_\_\_\_\_

### 2. TRAINER CERTIFICATION

I completed training for trainers in the following subject areas and delivered training at the listed dates and locations-thereby maintaining my certification in the fiscal year (June 30-July 1). Use additional sheet of paper if necessary.

Subject: \_\_\_\_\_

Location and Date: \_\_\_\_\_

Subject: \_\_\_\_\_

Location and Date: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Site Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_

HRD Director Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**SEND COMPLETED FORM(S) TO HRD, Central Office, Waterbury**