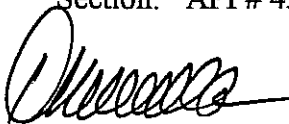
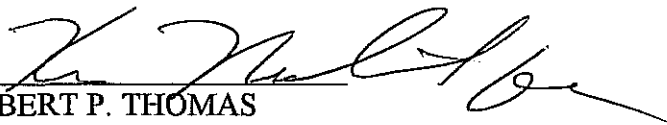


CITY OF SACRAMENTO
ADMINISTRATIVE POLICY INSTRUCTIONS

Topic: Employee Separation Effective Date: 2/1/05
From: Human Resources Department Supersedes: New
 Risk Management Division
To: Department Directors/Division Managers Section: API # 43



 TERRENCE L. WOODS
 Director of Human Resources

APPROVED: 
 ROBERT P. THOMAS
 City Manager

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Scope The procedures defined in this Administrative Policy Instruction apply to all employee separations including resignations, terminations, retirements, transfers, administrative leaves of absence, and other leaves of absence expected to exceed 180 days. This procedure also applies to separations of volunteers, contractors and others who have been allowed to use City equipment or granted access to facilities or computer systems.

Objective This API establishes a standard procedure to assure that: City property is accounted for and recovered for reutilization; computer network, financial systems and building access are appropriately controlled; and that employee compensation and benefit issues are addressed in a timely manner. To facilitate implementation, a model employee separation checklist is included as Attachment A. This procedure may be modified to address issues unique to a specific department.

Procedures

Property and Access Tracking

All departments will establish and implement a procedure documenting the assignment of City equipment and tracking of electronic systems access. A model equipment and access tracking form is included as Attachment B.

City Wide Separation Team

Human Resources Risk Management staff will establish a City Wide Separation Team with representation from Information Technology, Facilities Maintenance, Off Street Parking , Procurement and any other departments or divisions that control facility security, computer networks or financial systems access.

Employee Separation

Upon notice of separation by an employee or supervisor, the designated departmental representative will prepare and process a personnel action request (PAR) form and notify the City Wide Separation Team via e-mail.

Under all circumstances, the e-mail notice to the City Wide Separation Team will state only the employee's name and specify an effective date and time on which access shall be disabled (i.e. Remove Jane Doe's access on 7-19-03 at 5 p.m.). No further explanation of the circumstances nor any confidential personnel information will be transmitted by e-mail.

Responsibilities

Employees are responsible for:

Providing timely notice of resignation, to their supervisor or division manager; (Per Civil Service Rules, two weeks notice of resignation is required to assure separation in good standing unless otherwise agreed to by management.)

Returning all City property including debit cards, keys and electronic access cards to their supervisor; and

Contacting the Human Resources, Classification and Compensation Division to take action on their benefits.

Division Managers or their designees are responsible for:

Designating PAR representatives;

Approving the Divisions' equipment and access tracking and employee separation procedures;

Collecting a resignation letter;

Respectfully escorting an employee that is terminated or placed on administrative leave from the time of notification until they leave the work site;

Notifying departmental computer technical support staff of the need to disable local computer access;

Noting any performance concerns in the comments section of the PAR;

Providing a date and time for each employee separation to the department PAR representative;

Implementing procedures to track the property issued and access granted to each employee;

Collecting all City property as required by this policy;

Implementing the attached Employee Separation Checklist (Attachment A); and

Initiating a process to complete equipment and access tracking forms for all new and existing staff members.

Department PAR Representatives are responsible for:

Sending PAR forms, with the resignation or termination letter attached, to Human Resources as soon as possible but no later than two working days following departure of an employee;

Notifying the City Wide Separation Team members of the date and time of each employee separation no later than the day prior to departure of an employee and as soon as possible for a termination or administrative leave; and

Serving as the departmental liaison to Human Resources staff for implementation of this policy.

Department Heads are responsible for:

Designating City Wide Separation Team members and alternates as requested by Human Resources Risk Management staff;

Approving department and division equipment and access tracking and employee separation procedures;

If applicable, coordinating terminations or administrative leaves with Labor Relations;

Identifying EAP or outplacement services available to employees in the event of layoffs or separation without fault; and

Referring cases involving unreturned property to the City Attorney's Office.

City Wide Separation Team Members are responsible for:

Canceling or disabling computer network access including network I.D., e-mail accounts, remote access accounts, etc., financial system and building access on the date and time requested by PAR representatives or managers at the division level or higher.

Human Resources Risk Management staff are responsible for:

Assuring that representatives from Information Technology, Facilities Maintenance, Off Street Parking , Procurement and any other appropriate departments or divisions have been designated to serve on the City Wide Separation Team;

Assuring that PAR representatives are trained regarding the requirements of this policy; and

Assuring that equipment and access tracking and employee separation procedures are included in Human Resources training presentations in which personnel and risk management procedures are covered.

Attachments

Attachment A - Employee Separation Checklist

Attachment B - Model Equipment and Access Tracking Form

Attachment C - Exit Interview Procedure

ATTACHMENT A

**CITY OF SACRAMENTO
EMPLOYEE SEPARATION CHECKLIST**

This checklist is designed to assist department managers and support staff implement API # 43 , Employee Separation Policy. Department staff are responsible for completing the following actions at the time of employee separation.

- Designated PAR (Personnel Action Request) Representatives should notify the City-Wide Separation Team via e-mail of the only the date and time of each employee separation no later than the day prior to departure of an employee. No further explanation of the circumstances nor any confidential personnel information will be transmitted by e-mail. Separation Team members are responsible for terminating and disabling all computer network, financial systems and building access.
- Designated PAR Representatives should submit a PAR form, with a resignation or termination letter, to Human Resources, Classification and Compensation Division staff as soon as possible upon receiving notice of an employee separation but no later than two working days following an employee's last day at work.
- The Division Manager is responsible for the following actions.

Collect keys, ID badges, electronic equipment, credit cards, communication devices and other City property. See the Model Equipment & Access Tracking Form (Attachment B) for a sample tool to facilitate this process.

Terminate computer and/or facility access controlled at the department, division or work group level and provide instructions regarding the disposition of the employee's computer files and e-mail messages.

Provide the employee with an Exit and Transfer Survey (Attachment C). Face to face interviews are an option by calling the OD Division at 808-5943.

Provide the employee with Human Resources benefits contact information and an EDD Unemployment Booklet.

Collect a completed Leaving Office Statement of Economic Interest, if applicable, and an Unemployment Insurance Separation Questionnaire prior to departure of the employee.

When necessary, provide the employee with a change of address form and/or W-4 form to complete. The address on the W-4 form will determine where W-2, Wages and Tax Statement will be sent.

Revise accounting signature authorization forms to delete the employee leaving.

This form is provided as a model to assist departments with the equipment and access tracking process. It is intended for demonstration purposes only and is not intended to serve as an inclusive form for all City departments. Departments are strongly encouraged to establish departmental equipment and access tracking procedures and tools as specified by API # 43.



City of Sacramento
Model Equipment & Access Tracking Form

Date: _____

Employee Name _____ Classification _____
 Employee ID _____ Supervisor _____
 Organization Code _____ Separation Date _____

(Check all boxes that apply)

City Issued Items	Issued/Granted	Returned/Terminated
Uniforms: _____ _____ _____	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____)	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/>
Fuel Access _____	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Building Access: _____ _____	No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Safety Equipment: _____ _____	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____)	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/>
Communications: _____ _____	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____)	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/>
Network Access ▪ Mainframe ▪ GroupWise ▪ PAMS	No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Keys & Access Cards ▪ Special Keys ▪ City ID Badge(s) ▪ _____	No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Electronic Equipment ▪ Laptop ▪ Cameras ▪ _____	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____)	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/>
Procurement ▪ Petty Cash ▪ Debit Cards	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____)	N/A <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/>
Other: _____ _____	No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) No <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____)	N/A <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> (Quantity _____) N/A <input type="checkbox"/>

Notice to Employee: By signing below, I acknowledge that I have an obligation to return all City of Sacramento property issued to me and to assume financial responsibility for unreturned City property. Additionally, I acknowledge receipt of a copy of this form.



API 43 - ATTACHMENT C

Purpose of memo	The purpose of this memo is to ask you to complete the City's Exit and Transfer Survey.
Why complete the survey?	Your participation in this process will give the City critical information to ensure continued efficiency of our operations and the fair treatment of our employees. This information will help us to make improvement in areas which may have caused you some concern.
Confidentiality	In rare circumstances, the data shared may create a legal obligation for the employer to take action to assure non-discriminatory employment practices. Beyond this rare circumstance, the City's policy is to hold the identity of the respondent confidential. In order to improve our organization, information resulting from exit surveys will be shared with Department Heads in a summary format so that they can provide the necessary coaching to address the issues. If there are issues that warrant concern, someone from Human Resources will contact you directly.
Response Requested	Please fill out the enclosed exit survey and return it in the self-addressed stamped envelope. If, for some reason, an envelope is missing, you can return the survey to the above address.
Thank you	The City would like to express its thanks for your participation in the exit survey process, and for the time and energy you gave the City during your employment.
Questions	If you have any questions, please feel free to contact Organizational Development at 808-8441.

Revised 11.8.05



EXIT and TRANSFER SURVEY

Date of Survey Completion:

Work Information	
Department:	Division:
Length of Service <input type="checkbox"/> Less than 1 year <input type="checkbox"/> 1-5 years <input type="checkbox"/> 6-10 years <input type="checkbox"/> 11-15 years <input type="checkbox"/> 16-25 years <input type="checkbox"/> 26+ years	
Type of Separation <input type="checkbox"/> Resignation <input type="checkbox"/> Retirement <input type="checkbox"/> Transfer between departments	Effective date of separation/transfer:

1. What are your reasons for leaving (if more than one, rank in order of importance, with "1" being the most important reason) your current position?

PERSONAL	PROFESSIONAL
___ Care for another family member	___ Better benefits (i.e. medical, dental, etc.)
___ Changing careers	___ Better opportunity to advance/promote
___ Child care situation	___ Better retirement plan
___ Commuting distance too long	___ Broader range of duties
___ Education/returning to school	___ Better training/development opportunities
___ Moving outside of commuting area	___ City parking/transportation issues
___ Personal health	___ Conflict with supervisor
___ Relocation due to spouse's job	___ Conflict with co-workers
___ Undesirable work schedule	___ Higher pay
___ Other	___ Lack of flexible work schedule
	___ Quality of management/supervision
	___ Reducing schedule to part-time
	___ Unfair treatment
	___ Other

If you checkmarked "other" above, or want to provide more detail about your reasons for leaving, please describe here:

2. If you are leaving for other employment, where are you going?

- Private company
 Self-employment
 Military
 N/A (transfer to other City Dept)
- Public agency _____
 Other _____



EXIT and TRANSFER SURVEY

3. What does your new job offer that your current one does not? _____

4. Under what circumstances or conditions would you have stayed where you are?

5. How likely would you be to recommend the City to a friend as a place to work (circle the appropriate number)?

Absolutely	Most likely	Maybe	Not at all
4	3	2	1

6. Under what conditions would you return to work for the City?

What 3 factors (in order of importance) contributed to:	
Your satisfaction?	Your dissatisfaction?
1.	1.
2.	2.
3.	3.

PERSONAL INFORMATION	
Name (optional)	Class Title

Additional Comments (use additional paper, if necessary):

When complete, please return this form in the enclosed self-addressed stamped envelope.

This form will not become a part of your Personnel File. Your identity will remain confidential (unless there are issues brought up that need to be resolved legally). The comments and views you and other departing employees express are valued as a tool to ensure that the City is operating efficiently and treating its employees fairly. We invite your openness in identifying areas needing improvement.