

1. Care Leave Agenda August 31, 2022

Documents:

[CARE LEAVE AGENDA 08 31 22.PDF](#)

2. Care Leave Packet August 31, 2022

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[CARE LEAVE PACKET 08 31 22.PDF](#)

CARE LEAVE COMMITTEE
WEDNESDAY, AUGUST 31, 2022
10:00 A.M.
COUNCIL CHAMBERS

Old Business

1. Consideration and approval of minutes from previous meeting

CITIZENS PARTICIPATION

(Citizens wishing to speak should notify Department Head or Committee Chair in advance)

New Business

1. Consider and discuss new application to the Care Leave Donation pool by Cooper Vanwey.

Other Business

ADJOURNMENT

PERSONS WITH DISABILITIES WHO NEED SPECIAL ASSISTANCE CALL
417-237-7000 (VOICE) OR 1-800-735-2466 (TDD VIA RELAY MISSOURI) AT LEAST 24 HOURS
PRIOR TO MEETING.

Posted: _____

By: _____

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CARE LEAVE COMMITTEE MINUTES

Monday, August 1, 2022, 9:00 a.m.

City Hall Council Chambers

Members Present: Bill Hawkins, Jeff Pinnell, Michael Miller, Morgan Housh

Old Business:

1. Consideration and approval of minutes from previous meeting.

The committee reviewed the minutes from the previous meeting. Bill Hawkins made a motion to approve the previous minutes. Jeff Pinnell seconded the motion. Motion carried.

New Business:

1. Appointment of officers.

Michael Miller made a motion to nominate himself as Chairman, Jeff Pinnell as Co-Chairman, and Morgan Housh as Secretary. Bill Hawkins seconded the motion. Motion carried.

2. Reviewed request for Care Leave benefit (Courtney Walker).

The committee reviewed a request from Courtney Walker for supplemental paid leave. Following discussion, Bill Hawkins made a motion, seconded by Jeff Pinnell to disperse 40 hours from the care leave pool to the employee. Motion carried.

The meeting adjourned on a motion by Bill Hawkins at 9:20.

**APPENDIX J
CARE LEAVE REQUEST FORM**

Name: Cooper Vanwey Department: Street Dept. / Public Works
Position/Job Title: _____

Is employee on disciplinary leave without pay status? (Please Circle)

Yes ☐ No ☒

Has requesting employee has exhausted all accrued leave? (Please Circle)

Yes ☒ No ☐

Has the requesting employee experienced a personal injury or illness (to himself/herself or a family member; as specified in the City's Personnel Policy Manual) which is life threatening or catastrophic and not job related? (Please Circle)

Yes ☒ No ☐

Has requesting employee abused or misused sick leave in the past calendar year? (Please Circle)

Yes ☐ No ☒

If Yes, please explain:

Who is making the request? Employee, spouse, etc. spouse, or an immediate relative or legal guardian?

EMPLOYEE

Is physician's statement, describing the illness or injury, and a prognosis, including the estimated needed time away from work and whether the employee can work a modified work schedule attached? (Please Circle)

Yes ☐ No ☒

Start Date of Anticipated Leave: 8/26/22

Expected Date of Return to Work: 9/12/22 (WILL HAVE A FOLLOWUP AT 2 WEEKS)

Does physician's statement state whether the disability will be permanent? (Please Circle)

☒ Yes ☒ No

If no, please explain:

OFF AT LEAST 2 WEEKS FOR PROCEDURE.

GALLBLADDER REMOVAL.

NOTE:

I hereby authorize the City of Carthage to contact my physician to verify the reason for my requested leave or for any other information concerning my requested care leave. I further understand that a failure to return to work at the end of my leave period may be treated as a resignation unless an extension has been agreed upon and approved in writing by the City of Carthage beforehand.

Signature: [Signature] Date: 8/25/22
(Employee)

APPROVED BY:

JOSIAH BAYLESS
Department Head

[Signature]

Letter by Ro, Charles Young, MD on 8/22/2022



MERCY CLINIC GENERAL AND SPECIALTY
SURGERY JOPLIN
100 MERCY WAY SUITE 440
JOPLIN MO 64804-4524
Dept Phone: 417-781-4404
Dept Fax: 417-781-5845

8/22/2022

RE: Cooper Vanwey
DOB: 7/25/2002

To Whom It May Concern:

This is to certify that Cooper O Vanwey was seen in my clinic on 8/22/2022. He may return to work today. He is scheduled for surgery on 8/26/22. He will need to be off work for 2 weeks. He will be evaluated at the 2 week appt to determine return to work.

If you have any questions or concerns, please feel free to contact my office. Thank you for your assistance in this matter.

Sincerely,

Charles Y Ro, MD

MERCY CLINIC GENERAL AND SPECIALTY SURGERY JOPLIN