

LACTATION ACCOMODATION POLICY AND REQUEST FORM - ADDITION TO THE SAUSALITO-MARIN CITY SANITARY DISTRICT HUMAN RESOURCE POLICES

BACKGROUND: The District adopted the SMCSD Revised Personnel Rules on April 4, 2016. Over the years, the document's name was changed to "Human Resource Policies" and other polices were revised to reflect changes in law.

In January 2020, California Senate Bill 142 required employers to develop and implement a policy regarding lactation accommodations. It specifies that the employer shall include the lactation policy and request form in an employee handbook or set of policies that the employer makes available to employees. District staff developed the policy and it has been approved by District Counsel and Operating Engineers Union Local 3 (OE3). On May 26, 2020 the SMCSD Personnel Committee reviewed the document with staff and recommended it for Board approval.

RECOMMENDATION: Approve the Lactation Accommodation Policy and Request Form for the Human Resource Policies

ATTACHMENT:

- 1 Lactation Accommodation Policy
2. Lactation Accommodation Request Form



SUBMITTED BY: _____
Jeffrey Kingston, General Manager

Rule # 31.A.

Lactation Accommodation Policy

California Senate Bill 142, which amended the Labor Code and took effect on January 1, 2020, requires Sausalito-Marin City Sanitary (SMCSD) to have a lactation accommodation policy.

Any SMCSD employee who is breastfeeding is entitled under the California Labor Code to a reasonable amount of break time to accommodate the employee's desire to express breast milk for their infant child each time the employee has a need to express milk unless provision of the break time would seriously disrupt the operations of the employer. The break time shall, if possible, run concurrently with any break time already provided to the employee (e.g., lunch time, etc.). Break time for an employee that does not run concurrently with the rest time authorized for the employee shall be unpaid.

Any SMCSD employee who is breastfeeding may take additional, unpaid breaks with their supervisor's approval to express breast milk for an infant child provided that the employee's taking of additional time does not seriously disrupt business operations. SMCSD will make reasonable efforts to provide employees who request a lactation accommodation with the use of a room or other private location, other than a bathroom, that is located reasonably close to the employee's work area, and shielded from view and free from intrusion by coworkers and the public while the employee is expressing milk.

SMCSD understands the space provided for lactation must:

- Be safe, clean, and free of hazardous materials, as defined in Section 6382 of the Labor Code
- Contain a surface to place a breast pump and personal items.
- Contain a place to sit.
- Have access to electricity or alternative devices, including, but not limited to, extension cords or charging stations, needed to operate an electric or battery-powered breast pump.

Additionally, SMCSD will provide the employee access to a sink with running water and a refrigerator suitable for storing milk in close proximity to the employee's workspace. If a refrigerator cannot be provided, SMCSD may provide another cooling device suitable for storing milk, such as an employer-provided cooler.

Employees who desire lactation accommodations should submit a written request (see request form) for accommodation to their supervisor or the General Manager prior to the birth of the child so that SMCSD has sufficient time to plan for and designate suitable space for the employee to express milk.

In spite of its best efforts, if SMCSD cannot make an accommodation, it will provide a written response to the requesting employee.

Employees may file a complaint with the Labor Commissioner's Bureau of Field Enforcement (BOFE) nearest the place of employment if they believe their lactation-accommodation rights have been abridged.

See <http://www.dir.ca.gov/dlse/HowToReportViolationtoBOFE.htm>.

Sausalito-Marin City Sanitary District
Request for Lactation Accommodation

Name of the Employee:	
Address:	
Contact no.	Email:

Start Date for Requested Accommodation:	
Requested Number of Breaks Per Day:	
Approximate Lactation Break Schedule Dates and Times:	

Employee Signature:	Date:
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Please return this form to your supervisor at least 5 business days before the start of request for Lactation Accommodation.

Supervisor Name (Print)	Supervisor Signature:	Date Received:
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