SAN DIEGO UNIFIED SCHOOL DISTRICT

Date: April 13, 2017

To: School Principals, Division and Department Heads, Child Development Center

Administrators, and San Diego Education Association Representatives

Subject: REVISED JOB SHARE PROGRAM

Department and/or

Persons Concerned: Certificated Staff

Due Date: June 1, 2017

Reference: Article 21 of the Collective Negotiations Contract between the District and the San

Diego Education Association (SDEA) Administrative Procedure 7342

Action Requested: Disseminate information regarding the Job Share Program. Interested certificated

employees submit application as described below. Please print and post a copy of this circular.

Brief Explanation:

In accordance with Article 21 of the Collective Negotiations Contract between the San Diego Unified School District and the San Diego Education Association (SDEA), unit members may share their individual assignment with another unit member during the school year. Job sharing assignments allow two unit members to share one budgeted position. Unit members also have the option to submit a job share application with another unit member who is participating in the reduced workload program.

Please note: the deadline for reduced work load applications is April 21, 2017. Job share partners may apply up to June 1, 2017.

The health and welfare benefits available to each unit member participating in a job share are determined by the actual time worked. All assignments must be made with the mutual consent of the site administrator and the unit members involved in the job share assignment.

MAXIMUM PARTICIPATION

Job share assignments are limited to a maximum of one percent of the full-time positions in the SDEA bargaining unit. Unit members in an assignment with a reduced workload partner shall not count towards the limit.

ELIGIBILITY

Unit members who are interested in participation in the job share program must have permanent status with the district, hold the appropriate credential for the assignment, and have effective ratings on all elements of their most recent evaluation.

CONDITIONS OF PARTICIPATION

Job share assignments shall be limited to a term of one school year, with renewal by mutual agreement of the principal/supervisor and the unit member(s) involved in the job share assignment.

In accordance to Administrative Procedure 7342 upon termination of the job share assignment, where one partner was not previously at the site, the unit member with the required credential and greater district seniority will have the right of assignment to the budgeted position unless otherwise stipulated in the outline of responsibilities (Attachment 1) agreement. The unit member without the right of assignment to the budgeted position may, by mutual agreement with the site administrator, be placed in another appropriate vacancy at the site/cost center. Absent mutual agreement, the unit member will participate in the post and bid process without priority consideration. If this does not result in an assignment, then the Human Resource Services Division (HRSD) will reassign the unit member.

Administrative Circular No. 52 Office of the Chief Human Resources Officer Page 2

If both job share partners were members of the site staff prior to the job share agreement, and there is a need to reduce staff at the site, then the provisions of Article 12, Section 12.7.3 and Section 12.7.4 of the SDEA contract will apply.

During the period of the job share assignment, absences shall be covered by the job share partner (with payment at the daily substitute rate) or by a district-provided visiting teacher. Trading of workdays by job share partners shall be at the discretion of the principal or designee. Absences shall be reported as the appropriate leave categories (e.g., sick leave and bereavement leave) and charged to the absent job share partner.

APPLICATION PROCEDURE

Permanent certificated employees submitting an application to participate in the job share program shall identify their partner and the two shall jointly submit a completed job share Agreement (Attachment 1), the Health and Life Insurance Benefits forms (Attachments 2 and 2.1), and the Job Share Medical Rates (Attachments 3 and 3.1). The site-approved job share application must be forwarded to HRSD for final approval.

The job share forms can be printed from the San Diego Unified School District website at www.sandi.net. You can locate the forms by clicking "Staff Portal" then click on "Resources" and "Administrative" then click "Bulletins and Circulars" and locate the number of the circular. (https://www.sandi.net/staff/bulletins-circulars.)

Duplicate forms as needed. Prior to submitting your job share agreement, please review Administrative Procedure 7342. Job share agreements should be submitted to Lisa Padelford, HRSD, Eugene Brucker Education Center, 4100 Normal Street, Room 1241.

Questions regarding job shares please contact:

Areas 1, 4, (Special Education, Nursing, Central Office, Counseling):

Nina Tarantino (619) 725-8109

ntarantino@sandi.net

Areas 2, 3, (Leadership & Learning, Secondary Schools):

Jeane Kline (619) 725-7752 <u>jkline@sandi.net</u>

Areas 5, 6, (Special Ed. Alt. Sties, ECSE, ECE):

Stacy Boland (619) 725-8108 <u>sboland1@sandi.net</u>

Questions regarding health benefits may be referred to Employee Benefits, at (619) 725-8130.

APPROVED:

Tim Asfazadour

Timothy I. Oxforodows

Chief Human Resources Officer

TA:lp

Attachments (4)

Distribution: Lists A, C, D, E, F, H and S



JOB SHARE PROGRAM SCHOOL YEAR 2017-2018

\square NEW	
☐ RENEWAL	_

Please return Job Share Agreement, Health & Benefits form to: Human Resources Services Division Eugene Brucker Ed. Center Room 1241.

JOB SHARE AGREEMENT NAMES OF PARTICIPANTS

REQUIRED Partner A	REQUIRED Partner B
Initial One	Initial One
Job Share Reduced Workload	Job Share Reduced Workload
Partner A	Partner B
Employee ID #	Employee ID #
Present site location and assignment:	Present site location and assignment:
Daytime Phone:	Daytime Phone:
Email Address:	Email Address:
INSTRUCTIONAL SCHEDULE FOR 2017-18	INSTRUCTIONAL SCHEDULE FOR 2017-18
School and Assignment Percentage (%):	School and Assignment Percentage (%):
Grade Level/Assignment Program:	Grade Level/Assignment Program:

OUTLINE OF RESPONSIBILITIES

According to Article 21.2.3: A written plan for a job sharing assignment shall be presented to the site administrator for approval by June 1, 2017 and referred to the appropriate administrator(s) and then to the Human Resource Services Division for final approval. In extenuating circumstances, the June 1 deadline.

Please provide a written plan that addresses who will be responsible for filling the follow requirements:	ving

Administrative Circular 7342:

- Pupil program reporting/grading
- Parental contacts/communications
- Planning and preparations
- Scheduling and grouping
- Performance of responsibilities such as yard duty, supervision of aides, open house and PTA functions
- Departmental/grade-level meetings
- Faculty meetings
- Extracurricular duties
- Intended work schedule for the school year (including calendars to show that both participants will work the required days)
- Method of covering short-term absences of a job-sharing partner

I acknowledge that upon termination of the job share assignment, the participant with the required credential and greater district seniority will have the right of assignment to the budgeted position. This right may be waived if both partners stipulate to the waiver in their original job share agreement. The other participant will not have a right of seniority over other teachers who are regularly assigned to the cost center.

Both job share partners must initial on the same line.

When there are two job share partners and one partner is coming from another site or program they agree that the right of assignment to the positions will be:

/	As stipulated in the above paragraph
/	Partner A
/	Partner B

I agree to the requirements of the program as outlined above and as described in Administrative Procedure 7342. Sign below only if you are a job share participant. **Reduced workload participant should not sign.**

Signature: Partner A	_ Date:	
Signature: Partner B	Date:	
		□ Approved□ Disapprove
Principal/Administrator Signature		
HR USE	ONLY	
		☐ Approved
		Disapprove
Human Resources Officer Signature		
Human Resources Specialist NR LP	·	

School Year: 2017-2018 Attachment 2

HEALTH BENEFITS FOR JOB SHARE ASSIGNMENT

The following conditions apply to the two employees in a job share assignment:

- 1. Job share employees must pay for medical, dental, and/or vision coverage on a tenthly pro-rata basis, if coverage is desired.
- 2. Job share employees who elect coverage under any district-sponsored medical, dental and/or vision plan must make the required tenthly pro-rata contribution for the plan(s) selected through the end of the calendar year. If coverage continues into a subsequent calendar year, the required tenthly pro-rata contribution must be through the end of that calendar year.
- 3. District-paid basic life insurance coverage will remain in effect for a job share employee who is in paid status in a monthly salaried position. The benefit is equal to one times your annual salary.
- 4. Job share employees may waive all of their percentage participation in each of the three health insurance programs (medical, dental and vision) and transfer such participation to their job share partner.
 - a. Such arrangements must be included in the job share agreement and may not be modified during the term of the agreement.
 - b. Employees who waive coverage under this provision will be eligible to enroll either on the first of the month following the first day of paid service in an assignment that is not a job share assignment or on the first of the month following the start of a new job share assignment.

To be completed by job share partners

In accordance with the conditions specified above, as job share partners, we agree to the following division of the benefits package:

PLEASE NOTE: If both partners participate in a specific benefit (i.e., medical), each will pay a pro-rata share of the cost of coverage equivalent to their own position. (Pro-rata rate chart attached.)

Name of	Work Location			
	Partner A		Partner B	
Medical Dental Vision	Participate Waive	Office Use Only	Participate Waive	nly
Percentage	e of job share assignment		Percentage of job share assignment	
Partner .	A		Partner B	
	Print Name		Print Name	
	Employee ID #		Employee ID #	
	Signature/Date		Signature/Date	

School Year 2017-2018 Attachment 2.1

HEALTH BENEFITS FOR JOB SHARE ASSIGNMENT TO COMPLETE A REDUCED WORKLOAD ASSIGNMENT ONLY

The following conditions apply in a job share assignment partner with a reduced workload partner:

- 1. Job share employees must pay for medical, dental, and/or vision coverage on a tenthly pro-rata basis, if coverage is desired.
- 2. Job share employees who elect coverage under any district-sponsored medical, dental and/or vision plan must make the required tenthly pro-rata contribution for the plan(s) selected through the end of the calendar year. If coverage continues into a subsequent calendar year, the required tenthly pro-rata contribution must be continued through the end of that calendar year.
- 3. District-paid basic life insurance coverage will remain in effect for a job share employee who is in paid status in a monthly salaried position. The benefit is equal to one times your annual salary.
- 4. Employees who elect not to participate in coverage under this provision will be eligible to enroll either on the first of the month following the first day of paid service in an assignment which is not a job share assignment or on the first of the month following the start of a new job share assignment.

To be completed by job share partner:

In accordance with the conditions specified above, as a job share partner, I agree to the following acceptance of the benefits package:

PLEASE NOTE: A job share partner participating in a specific benefit (i.e., medical), will pay a pro-rata share of the cost of coverage equivalent to their own position. (Pro-rata rate chart attached.)

Name of	Work Location			
		Job Share P	artner	
	Medical Dental Vision	Participate	Waive	Office Use Only
Percentag	e of job share assignment			
Partner	Print Name			
	Employee ID #			
	Signature/Date			

Copy of 2017-JobShareRates.xlsx Job Share Splits - Medical

			HMO Netv	vork 1 - Single		HMO Networ	k 1 - Two-Party		HMO Netw	ork 1 - Family
Split		Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
	20	\$747.60	\$598.08	\$149.52	\$1,473.60	\$1,178.88	\$294.72	\$2,068.80	\$1,655.04	\$413.76
	30	\$747.60	\$523.32	\$224.28	\$1,473.60	\$1,031.52	\$442.08	\$2,068.80	\$1,448.16	\$620.64
	40	\$747.60	\$448.56	\$299.04	\$1,473.60	\$884.16	\$589.44	\$2,068.80	\$1,241.28	\$827.52
	50	\$747.60	\$373.80	\$373.80	\$1,473.60	\$736.80	\$736.80	\$2,068.80	\$1,034.40	\$1,034.40
	60	\$747.60	\$299.04	\$448.56	\$1,473.60	\$589.44	\$884.16	\$2,068.80	\$827.52	\$1,241.28
	70	\$747.60	\$224.28	\$523.32	\$1,473.60	\$442.08	\$1,031.52	\$2,068.80	\$620.64	\$1,448.16
	80	\$747.60	\$149.52	\$598.08	\$1,473.60	\$294.72	\$1,178.88	\$2,068.80	\$413.76	\$1,655.04
	90	\$747.60	\$74.76	\$672.84	\$1,473.60	\$147.36	\$1,326.24	\$2,068.80	\$206.88	\$1,861.92
			HMO Netv	vork 2 - Single		HMO Networ	k 2 - Two-Party		HMO Netw	ork 2 - Family
Split		Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
	20	\$990.00	\$792.00	\$198.00	\$1,958.40	\$1,566.72	\$391.68	\$2,749.20	\$2,199.36	\$549.84
	30	\$990.00	\$693.00	\$297.00	\$1,958.40	\$1,370.88	\$587.52	\$2,749.20	\$1,924.44	\$824.76
	40	\$990.00	\$594.00	\$396.00	\$1,958.40	\$1,175.04	\$783.36	\$2,749.20	\$1,649.52	\$1,099.68
	50	\$990.00	\$495.00	\$495.00	\$1,958.40	\$979.20	\$979.20	\$2,749.20	\$1,374.60	\$1,374.60
	60	\$990.00	\$396.00	\$594.00	\$1,958.40	\$783.36	\$1,175.04	\$2,749.20	\$1,099.68	\$1,649.52
	70	\$990.00	\$297.00	\$693.00	\$1,958.40	\$587.52	\$1,370.88	\$2,749.20	\$824.76	\$1,924.44
	80	\$990.00	\$198.00	\$792.00	\$1,958.40	\$391.68	\$1,566.72	\$2,749.20	\$549.84	\$2,199.36
	90	\$990.00	\$99.00	\$891.00	\$1,958.40	\$195.84	\$1,762.56	\$2,749.20	\$274.92	\$2,474.28
			HMO Netv	vork 3 - Single		HMO Networ	k 3 - Two-Party		HMO Netw	ork 3 - Family
Split		Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
	20	\$1,126.80	\$901.44	\$225.36	\$2,230.80	\$1,784.64	\$446.16	\$3,133.20	\$2,506.56	\$626.64
	30	\$1,126.80	\$788.76	\$338.04	\$2,230.80	\$1,561.56	\$669.24	\$3,133.20	\$2,193.24	\$939.96
	40	\$1,126.80	\$676.08	\$450.72	\$2,230.80	\$1,338.48	\$892.32	\$3,133.20	\$1,879.92	\$1,253.28
	50	\$1,126.80	\$563.40	\$563.40	\$2,230.80	\$1,115.40	\$1,115.40	\$3,133.20	\$1,566.60	\$1,566.60
	60	\$1,126.80	\$450.72	\$676.08	\$2,230.80	\$892.32	\$1,338.48	\$3,133.20	\$1,253.28	\$1,879.92
	70	\$1,126.80	\$338.04	\$788.76	\$2,230.80	\$669.24	\$1,561.56	\$3,133.20	\$939.96	\$2,193.24
	80	\$1,126.80	\$225.36	\$901.44	\$2,230.80	\$446.16	\$1,784.64	\$3,133.20	\$626.64	\$2,506.56
	90	\$1,126.80	\$112.68	\$1,014.12	\$2,230.80	\$223.08	\$2,007.72	\$3,133.20	\$313.32	\$2,819.88

Copy of 2017-JobShareRates.xlsx Job Share Splits - Medical

			PPO - Single			PPO - T	wo-Party		PPO - Family	
Split		Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
	20	\$1,015.20	\$812.16	\$203.04	\$1,976.40	\$1,581.12	\$395.28	\$2,758.80	\$2,207.04	\$551.76
	30	\$1,015.20	\$710.64	\$304.56	\$1,976.40	\$1,383.48	\$592.92	\$2,758.80	\$1,931.16	\$827.64
	40	\$1,015.20	\$609.12	\$406.08	\$1,976.40	\$1,185.84	\$790.56	\$2,758.80	\$1,655.28	\$1,103.52
	50	\$1,015.20	\$507.60	\$507.60	\$1,976.40	\$988.20	\$988.20	\$2,758.80	\$1,379.40	\$1,379.40
	60	\$1,015.20	\$406.08	\$609.12	\$1,976.40	\$790.56	\$1,185.84	\$2,758.80	\$1,103.52	\$1,655.28
	70	\$1,015.20	\$304.56	\$710.64	\$1,976.40	\$592.92	\$1,383.48	\$2,758.80	\$827.64	\$1,931.16
	80	\$1,015.20	\$203.04	\$812.16	\$1,976.40	\$395.28	\$1,581.12	\$2,758.80	\$551.76	\$2,207.04
	90	\$1,015.20	\$101.52	\$913.68	\$1,976.40	\$197.64	\$1,778.76	\$2,758.80	\$275.88	\$2,482.92
			Δllian	ce - Single		Alliance -	Two-Party		Δlliano	e - Family
Split		Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
Jp.i.c	20	\$907.20	\$725.76	\$181.44	\$1,657.20	\$1,325.76	\$331.44	\$2,265.60	\$1,812.48	\$453.12
	30	\$907.20	\$635.04	\$272.16	\$1,657.20	\$1,160.04	\$497.16	\$2,265.60	\$1,585.92	\$679.68
	40	\$907.20	\$544.32	\$362.88	\$1,657.20	\$994.32	\$662.88	\$2,265.60	\$1,359.36	\$906.24
	50	\$907.20	\$453.60	\$453.60	\$1,657.20	\$828.60	\$828.60	\$2,265.60	\$1,132.80	\$1,132.80
	60	\$907.20	\$362.88	\$544.32	\$1,657.20	\$662.88	\$994.32	\$2,265.60	\$906.24	\$1,359.36
	70	\$907.20	\$272.16	\$635.04	\$1,657.20	\$497.16	\$1,160.04	\$2,265.60	\$679.68	\$1,585.92
	80	\$907.20	\$181.44	\$725.76	\$1,657.20	\$331.44	\$1,325.76	\$2,265.60	\$453.12	\$1,812.48
	90	\$907.20	\$90.72	\$816.48	\$1,657.20	\$165.72	\$1,491.48	\$2,265.60	\$226.56	\$2,039.04
			Kaise	r - Single		Kaiser - 🗆	Two-Party		Kaise	r - Family
Split		Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
	20	\$678.00	\$542.40	\$135.60	\$1,338.00	\$1,070.40	\$267.60	\$1,885.20	\$1,508.16	\$377.04
	30	\$678.00	\$474.60	\$203.40	\$1,338.00	\$936.60	\$401.40	\$1,885.20	\$1,319.64	\$565.56
	40	\$678.00	\$406.80	\$271.20	\$1,338.00	\$802.80	\$535.20	\$1,885.20	\$1,131.12	\$754.08
	50	\$678.00	\$339.00	\$339.00	\$1,338.00	\$669.00	\$669.00	\$1,885.20	\$942.60	\$942.60
	60	\$678.00	\$271.20	\$406.80	\$1,338.00	\$535.20	\$802.80	\$1,885.20	\$754.08	\$1,131.12
	70	\$678.00	\$203.40	\$474.60	\$1,338.00	\$401.40	\$936.60	\$1,885.20	\$565.56	\$1,319.64
	80	\$678.00	\$135.60	\$542.40	\$1,338.00	\$267.60	\$1,070.40	\$1,885.20	\$377.04	\$1,508.16
-	90	\$678.00	\$67.80	\$610.20	\$1,338.00	\$133.80	\$1,204.20	\$1,885.20	\$188.52	\$1,696.68

Copy of 2017-JobShareRates.xlsx Job Shr Splt - Dent and Vision

		Delta PPO DeltaCare USA				Western Dental			
Split	Rate	Employee	Employer	Rate	Employee	Employer	Rate	Employee	Employer
20	\$93.60	\$74.88	\$18.72	\$42.72	\$34.18	\$8.54	\$36.05	\$28.84	\$7.21
30	\$93.60	\$65.52	\$28.08	\$42.72	\$29.90	\$12.82	\$36.05	\$25.23	\$10.81
40	\$93.60	\$56.16	\$37.44	\$42.72	\$25.63	\$17.09	\$36.05	\$21.63	\$14.42
50	\$93.60	\$46.80	\$46.80	\$42.72	\$21.36	\$21.36	\$36.05	\$18.02	\$18.02
60	\$93.60	\$37.44	\$56.16	\$42.72	\$17.09	\$25.63	\$36.05	\$14.42	\$21.63
70	\$93.60	\$28.08	\$65.52	\$42.72	\$12.82	\$29.90	\$36.05	\$10.81	\$25.23
80	\$93.60	\$18.72	\$74.88	\$42.72	\$8.54	\$34.18	\$36.05	\$7.21	\$28.84
90	\$93.60	\$9.36	\$84.24	\$42.72	\$4.27	\$38.45	\$36.05	\$3.60	\$32.44
			VSP						
Split	Rate	Employee	Employer						
20	\$10.20	\$8.16	\$2.04						
30	\$10.20	\$7.14	\$3.06						
40	\$10.20	\$6.12	\$4.08						
50	\$10.20	\$5.10	\$5.10						
60	\$10.20	\$4.08	\$6.12						
70	\$10.20	\$3.06	\$7.14						
80	\$10.20	\$2.04	\$8.16						
90	\$10.20	\$1.02	\$9.18						