



PPSM-63: Investigatory Leave

FORMAL REVIEW CLEAN DRAFT—SPRING 2019

Responsible Officer:	Vice President – Systemwide Human Resources
Responsible Office:	SHR – Systemwide Human Resources
Issuance Date:	TBD 2019
Effective Date:	TBD 2019
Last Review Date:	October 1, 2018
Scope:	Professional & Support Staff, Managers & Senior Professionals, and Senior Management Group Members

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I. POLICY SUMMARY

The policy describes the investigatory leave process for employees in the Professional & Support Staff and Managers & Senior Professionals personnel groups, and Senior Management Group Members.

II. DEFINITIONS

Detailed information about common terms used within Personnel Policies for Staff Members can be found in [Personnel Policies for Staff Members 2 \(Definition of Terms\)](#).

Investigatory Leave: A type of leave available to use when circumstances warrant removing an employee from the work site during the course of a university’s investigation of allegations against the employee.

III. POLICY TEXT

A. General

Investigatory leave is a type of leave available to use when circumstances warrant removing an employee from the work site during the course of the University's investigation of allegations against the employee. An employee may be placed on an investigatory leave, with or without notice. Investigatory leave is not a type of corrective action. Rather, it is a means of maintaining the status quo until the investigation and any related actions have concluded. For additional information on corrective action, refer to [Personnel Policies for Staff Members \(PPSM\) 62 \(Corrective Action\)](#).

Prior to placing an employee on an investigatory leave, management must consult with the local Human Resources office.

While on investigatory leave, the employee must be available to cooperate with the University's investigation.

The types of alleged conduct that may warrant placing an employee on investigatory leave include but are not limited to:

- dishonesty;
- theft, or misappropriation of University property;
- insubordination;
- unethical behavior;
- violation of federal or state law;
- exploitation, intimidation, discrimination, or harassment;
- acts endangering employees, students, visitors, or other University constituents;
- sexual violence, sexual harassment, or other prohibited behavior; or
- any other conduct that warrants removing the employee from the work site to conduct a University investigation.

For situations involving allegations of sexual violence and/or sexual harassment, please see the policy on [Sexual Violence and Sexual Harassment](#) and the [Investigation and Adjudication Framework for Staff and Non-Faculty Academic Personnel](#).

For situations involving allegations of discrimination and harassment, please see the policy on [Discrimination, Harassment, and Affirmative Action in the Workplace](#).

B. Written Notice

An employee placed on an investigatory leave must be notified in writing no later than three working days after commencement of the leave. The written notice must include the reason(s) for the leave and the expected duration of the leave. It should also direct the employee to remain available to speak with and provide information to the University investigator upon request. Such leaves may be extended by written notice to the employee.

Upon conclusion of the University's investigation, the employee must be notified in writing of the outcome of the investigation and whether the investigation's findings will result in continued employment, corrective action, or termination of employment. Refer to [PPSM 62 \(Corrective Action\)](#) and [PPSM 64 \(Termination and Job Abandonment\)](#) for additional information.

IV. COMPLIANCE / RESPONSIBILITIES

A. Implementation of the Policy

The Vice President–Systemwide Human Resources is the Responsible Officer for this policy and has the authority to implement the policy. The Responsible Officer may develop procedures or other supplementary information to support the implementation of this policy. Such supporting documentation does not require the approval of the President.

The Chancellor is authorized to establish and is responsible for local procedures necessary to implement the policy.

In accordance with [PPSM 1 \(General Provisions\)](#), the authorities and responsibilities delegated to the Chancellor in this policy are also delegated to the Executive Vice President–Chief Operating Officer, Vice President–Agriculture and Natural Resources, Principal Officers of the Regents, and the Lawrence Berkeley National Laboratory Director. Also in accordance with [PPSM 1](#), the authorities granted in this policy may be redelegated except as otherwise indicated.

B. Revisions to the Policy

The President is the Policy Approver and has the authority to approve policy revisions upon recommendation by the Vice President–Systemwide Human Resources.

The Vice President–Systemwide Human Resources has the authority to initiate revisions to the policy, consistent with approval authorities and applicable *Bylaws* and *Standing Orders* of the Regents.

The Executive Vice President–Chief Operating Officer has the authority to ensure that policies are regularly reviewed, updated, and consistent with other governance policies.

C. Approval of Actions

Actions within this policy must be approved in accordance with local procedures. Chancellors and the Vice President–Systemwide Human Resources are authorized to determine responsibilities and authorities at secondary administrative levels in order to establish local procedures necessary to implement this policy.

All actions applicable to PPSM-covered staff employees who are not Senior Management Group members that exceed this policy, or that are not expressly provided for under any policy, must be approved by the Vice President–Systemwide Human Resources.

D. Compliance with the Policy

The following roles are designated at each location to implement compliance monitoring responsibility for this policy:

The Top Business Officer and/or the Executive Officer at each location will designate the local management office to be responsible for the ongoing reporting of policy compliance.

The Executive Officer is accountable for monitoring and enforcing compliance mechanisms and ensuring that monitoring procedures and reporting capabilities are established.

The Vice President–Systemwide Human Resources is accountable for reviewing the administration of this policy. The Director–Systemwide Human Resources Compliance may periodically monitor compliance to this policy.

E. Noncompliance with the Policy

Noncompliance with the policy is handled in accordance with *PPSM* [62](#) and [64](#) pertaining to disciplinary and separation matters.

V. PROCEDURES

Not applicable.

VI. RELATED INFORMATION

- *Personnel Policies for Staff Members* [62](#) and [64](#) (referenced in Sections III and IV.E of this policy)
- *Personnel Policies for Staff Members* [2.210](#) (*Absence From Work*)
- [Sexual Violence Sexual Harassment \(SVSH\) Policy](#)
- [Investigation and Adjudication Framework for Staff and Non-Faculty Academic Personnel](#)
- [Discrimination, Harassment, and Affirmative Action in the Workplace](#)

VII. FREQUENTLY ASKED QUESTIONS

Not applicable.

VIII. REVISION HISTORY

To be updated.

This policy was reformatted into the standard University of California policy template effective July 1, 2012.

As a result of the issuance of this policy, the following documents are rescinded as of the effective date of this policy and are no longer applicable:

- *Personnel Policies for Staff Members 63 (Investigatory Leave)*, dated July 1, 1996
- *Staff Personnel Policy 270 (Corrective Action), Sections 270.8 - 270.10*, dated May 1, 1994