# Exhibit B: Page 1 

## CERTIFICATION

## RE-EMPLOYMENT OF SBCERA RETIREE (Limited Duration) <br> (Pursuant to SBCERA Board Administration Policy No. 015)

DATE: January 16, 2020

## EMPLOYER INFORMATION:

| Name of EMPLOYER: | SAN BERNARDINO COUNTY SHERIFF | 909-387-3750 |
| :---: | :---: | :---: |
|  | Name | (Area Code \& Phone No.) |
| Address of EMPLOYER: | 655 E THIRD ST., SAN BERNARDINO CA |  |
|  | Street City | Zip Code |
| Employer Representative: | ANGELA HADDAD, COMMUNICATION | NAGER |

## EMPLOYEE INFORMATION:



Please note, If Retiree's Effective Date of Re-Employment commences prior to SBCERA's approval of this Certification form, Retiree's pension benefit may be subject to suspension.

1. Employer: Please certify that one or both of the following are true (check all that apply):
( The re-employment of the employee is necessary during an emergency to prevent stoppage of public business
$\boxed{\text { The employee has skills needed to perform work of limlted duration. }}$
2. Employer: Please indicate the limit or limits on the duration of the employee's re-employment by selecting the box that applies to the employee. An anticipated end date for the re-employment must also be provided.

Retiree has special skills/knowledge needed by employer AND employer is actively hiring/recruiting to fill Retiree's position
$\square$ Retiree training replacement
$\square$ Retiree working in a temporary assignment or working on a special project
$\square$ Temporary position due to peak or seasonal workload fluctuation for period: $\qquad$ to $\qquad$
$\square$ Retiree filling a short-term vacancy need
If duration of re-employment will exceed 18 months, please (1) explain the "extreme necessity" that requires the retiree's return, and (2) explain why the need for the retiree's return either is (a) unavoidable or (b) could not have been anticipated. Please attach additional sheets if necessary for explanation and mark it as "Attachment 1 "
$\qquad$
$\qquad$

See additional explanation in Altachment

## Exhibit B: Page 2

## Certification re Re-Employment of SBCERA RetIree (Limited Duration) <br> Page 2

3. a. Employer: Did or will the re-employment commence within 180 days following the date of retirement?Yes $\checkmark$ No
b. If you answered YES, to question 3. a., please check any/all of the following that apply:The employee is a public safety officer or firefighter, and the re-employment is for the performance of functions regularly performed by a public safety officer or firefighterThe re-employment is necessary to fill a critically needed position before 180 days have passed, and the re-employment has been approved by the governing body of the agency in a public meeting on the non-consent calendar. (Please provide documentation, e.g. meeting agenda and/or, minutes and/or back-up. Label attachment as "Attachment 2.")
4. Employee: Has the employee received any unemployment insurance compensation, during the 12 months prior to re-employment, arising out of the prior employment with any SBCERA participating employer?
$\square$ Yes
$\square$ No
5. Employer and the Employee acknowledge and certify that:
a. During re-employment, the employee may not work more than 960 hours during any fiscal year (July 1
through the following June 30).
b. The employee's pay may not be less than the minimum nor more than the maximum paid to other
employees performing comparable job duties.
6. Employer and Employee acknowledge that:
a. While SBCERA and the Employer will cooperate to facilitate compliance with the terms of Government Code sections 7522.56 and 31680.6 , and SBCERA Board Administration Policy No. 015, compliance is ultimately
the employee's responsibility.
b. Failure to comply with any of the requirements of Government Code sections 7522.56 and 31680.6, as implemented through SBCERA Board Administration Policy No. O15, may result in any or all of the following consequences, effective on the date that the re-employment ceased to be in compliance:
i. The employee's reinstatement to active SBCERA membership;
ii. The suspension of the employee's retirement benefit payments effective on the date that the reemployment ceased to be in compliance, which may include the recovery by SBCERA of any benefits improperly received;
iii. The collection from both the employee and the employer of retirement contributions on any pay received by the employee during any period of unlawful re-employment; and
iv. The employee earning a new retirement benefit during the period of re-employment, pursuant to
Government Code section 31680.7 ; and
v. Any other consequence provided by law.
7. Employer: The Employer agrees to do at least one of the following (check all that apply):
( Grant SBCERA staff direct access to the employer's payroll system in a manner that permits SBCERA to determine the number of hours that the employee, and others similarly situated, have worked in a
fiscal year; or

Provide a report to SBCERA, on a pay-period by pay-period basis, showing the number of hours worked in a given fiscal year by any re-employed retirees who have worked at least 700 hours in a
fiscal year.

## Exhibit B: Page 3

## Certification re Re-Employment of SBCERA Retiree (LImited Duration) Page 3

8. Employer: The employer agrees to report to SBCERA, by submitting an updated copy of this form:
a. When any employee's re-employment extends, or is proposed for extension, beyond the stated end-date;
b. When any employee's re-employment was originally limited to the completion of a discrete quantity of work or to termination upon some other stated event, and has extended or is proposed to extend beyond that
completion or event, with an explanation of the reasons.
9. Employer and Employee agree that in addition to the terms and conditions set forth herein, the parties have
(1) California Government Code section 7522.56
(2) California Government Code section 31680.6
(3) SBCERA Board Administration Policy No. 015

By executing this Certification, Employee and Employer certify that all statements herein are true to the best of their knowledge.

## EMPLOYEE:

DATED:


EMPLOYER:
DATED: $1 / 16 / 2020$

$\qquad$ BY:

## 

## RETURN COMPLETED FORM TO:

San Bernardino County Human Resources Dept.
ATTN: Employee Benefits and Services OFFICE: (909) 387-5787
157 West Fifth Street, First Floor
FAX: (909) 387-5586
San Bemardino, CA 92415

## 

Expected End Date Approved by SBCERA: $\qquad$
Accepted and Approved by 8BCERA
DATED: $\qquad$ Br :
Its:
$\qquad$
$\qquad$

Approval of this form by SBCERA entitles Employer and Employee to the conclusive presumption that the re-employment has
commenced lawfully, so long as all statements made herein are true, A commenced lawfully, so long as all statements made herein are true. A copy will be returned to the Employer and Employee.

Eff. 06/28/2018
PL108883-(Co. of SB Only)
PL FILLABLE FORM >108904

## Exhibit B: Page 4

SAN BERNARDINO COUNTY

## Interoffice Memo

DATE: January 16, 2020
PHONE: 909-356-3864
FROM: Angela Haddad, Communications Manager AD
Valley Control Center
TO: Alicia Rangel, Personnel Technicia Employee Resources

## SUBJECT

 TAMARA NOVOTNY-KAUP - JUSTIFICATION RECURRENTThe Communications Division continues to aggressively recruit for Sheriff's Communications Dispatcher positions over the past several years. This has included leaving the position open continuously on the Human Resources website for applications. The department held a massive hiring event in 2018 which resulted in filling some vacancies. However, even with these efforts, we presently have 14 vacant positions which affect our ability to answer emergency 9-1-1 calls, within the state standard of $95 \%$ in the first 15 seconds. We continue to rely on recurrent dispatchers to assist in fulfilling our emergency dispatch staffing needs.

Tamara Novotny-Kaup is a vital component in assisting us in meeting our public safety mandate. Any consideration to retaining her status in employment is greatly appreciated.

## Respectfully submitted.

AH

## Exhibit B: Page 5

Crook, Kathleen

From:
Sent:
To:
Cc:
Subject:
Ruiz, Diana - HR
Tuesday, January 21, 2020 11:35 AM
Crook, Kathleen
Fisher, Theresa; Vargas, Khristin - HR
RE: Returning Retirees

Hi Kathy,
Please see below the department's responses. These details will also apply for the SBCERA request on Tamara NovotnyKaup.

Please see the details regarding SBCERA's questions:

1. a) The Sheriff's Department has held several Mass Interview events for Dispatchers over the past 15 months.

- The Recruitment for Sheriff's Comm. Dispatcher II and II Trainee have been continuous for at least the past 24 months. The Sheriff's Comm. Dispatcher I Trainee recruitments have been opened at specific times to receive applications for the Mass Interviews. Due to the number of applications received for Dispatcher I Trainee, having a continuous recruitment would be counterproductive due to the number of applications that HR must review.
- There has been 47 Sheriff's Comm. Dispatchers hired over the past 12 months.
- There were approximately 370 applicants referred to the Sheriff's Department over the past 12 months.
- There were approximately 282 applicants interviewed over the past 12 months, approximately 90 applicants of the 370, were no longer interested in interviewing for a positions, no showed to the interview, etc...
b) The Sheriff's Department Currently has the following positions and number of vacancies:

Sheriff's Comm. Dispatcher I : 46 authorized positions currently 17 vacant positions
Sheriff's Comm. Dispatcher II: 65 authorized positions currently 15 vacant positions
Currently 32 vacant Dispatcher positions and 79 Dispatcher positions are currently filled.
c) The department just hired 6 Sheriff's Comm. Dispatcher I Trainee's on $1 / 6 / 2020$ and continue to have additional applicants in backgrounds. The next Sheriff's Dispatch Academy is scheduled for 3/14/2020 and the department will be opening a Sheriff's Comm. Dispatcher I Trainee recruitment with HR in the next week or two to begin the interview and backgrounds process.
d) If the retiree does not perform this work other staff will be mandated to perform overtime which is in addition to current OT mandates. Due to these being 911 calls, the department must be in compliance with the State of California's Emergency Operations standards for call pick up requirements or risk losing state funding.
e) If the retiree is not available the shifts must be covered by additional overtime of current staff.

Thank you,

## Diana Ruiz

Human Resources Analyst Human Resources Department
Phone: 909-387-9664
Fax: 909-387-5566
157 West Fifth Street, $1^{\text {st }}$ Floor

## Exhibit B: Page 6

## SAN BERNARDINO

 COUNTYOur job is to create a county in which those who reside and invest can prosper and achieve well-being.

## www.SBCounty.gov

County of San Bernardino Confidentiality Notice: This communication contains confidential information sent solely for the use of the intended recipient. If you are not the intended recipient of this communication, you are not authorized to use it in any manner, except to immediately destroy it and notify the sender.

## fㅂㅇㅇ

From: Crook, Kathleen
Sent: Friday, January 17, 2020 9:15 AM
To: Ruiz, Diana - HR
Vargas, Khristin - HR
Cc: Fisher, Theresa
Subject: RE: Returning Retirees
Importance: High

Diana \& Khristin,
Both of these extensions will have to go to the board for approval. Can you have the department answer the additional questions below for both Lori Franklin and Debra Holman. I need their response by Tuesday 1/21/2020 at 12 pm in order to include this information in the board packet for February's Board Meeting.

1. Additional questions the department should answer in their explanation:
a) Be more specific about what recruitment efforts the department has made, and what future efforts are planned, if any?

- Indicate if the recruitment for dispatcher is continuous or was only open for a limited period of time.
- How many positions have been filled in the past year?
- How many applicants applied in the past year?
- How many applicants were interviewed in the past year?
b) How many dispatchers are currently in this position?
c) What measures is the department taking to ensure they will have qualified employees on staff when the retiree's extension ends?
d) If the retiree does not perform the work will there be a stoppage of public business?
e) Who would perform this work if the retiree is not available?

Kathleen Crook
Retirement Benefits Officer
e: $\qquad$ | p: 909.885.7980 ext. 383 | f: 909.884-1904
348 W. Hospitality Lane, Third Floor | San Bernardino, CA 92415-0014

CONFIDENTIALITY NOTICE: This communication (including any attachments) contains legally protected and confidential information sent solely for the use of the intended recipient. If you are not the intended recipient of this communication, you are not authorized to use it in any manner except to immediately delete the original and any copy of any email and any printout thereof and notify the sender. Use, dissemination, distribution or reproduction of this message by unintended recipients is strictly prohibited.

## CERTIFICATION

## RE-EMPLOYMENT OF SBCERA RETIREE (Limited Duration)

(Pursuant to SBCERA Board Admunstration Policy No 015)
DATE December 11, 2017

## EMPLOYER INFORMATION



## EMPLOYEE INFORMATION

| Name of EMPLOYEE | $\frac{\text { Tamara }}{\text { Frrst }}$ | Suzanne |  | Kaup |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | Middle | Last | (Area Code \& Phone No) |  |  |
| Address of EMPLOYEE |  | . | City |  |  |  |  |
|  | Street |  |  |  |  |  | Zip Code |
| Date of Retirement 03 | 122 | , 2014 | Effectr | Re-Employment | 01 | , 06 | , 2018 |

1 Employer Please certfy that one or both of the following are true (check all that apply)
The re-employment of the employee is necessary during an emergency to prevent stoppage of public business
( $\downarrow$ The employee has skills needed to perform work of limited duration
2 Employer Please indicate the limit or limits on the duration of the employee s re-employment by selecting the box that applies to the employee An anticipated end date for the re-employment must also be provided
(7) Retiree has special skilis/knowledge needed by employer AND employer is actively hiring/recruitung to fill Retree s position


Retiree training replacement
$\square$ Retiree working in a temporary assignment or working on a special project
Temporary position due to peak or seasonal workload fluctuation for penod $\qquad$ to
Retiree filling a short-term vacancy need
Other
$\qquad$
Enter the anticipated end date for the selection above $1 / 2020 \quad$ (month and year)

TSee Attachment 1 for further explanation [Please attach explanation and label as Attachment 1]

$\square \mathrm{Y}$
$[\square$ No

REV 11/04/2015
PL66859 - CO OF SB

## Exhibit B: Page 8

## Certification re Re-Employment of SBCERA Retiree (LImited Duration) Page 2

b
If you answered YES, to question 3 a please check any/all of the following that apply
$\square$ The employee is a public safety officer or firefighter and the re-employment is for the performance of functions regularly performed by a public safety officer or firefighter
$\square$ The re-employment is necessary to fill a critically needed position before 180 days have passed and the re-employment has been approved by the goveming body of the agency in a public meeting on the non-consent calendar (Please provide documentation eg meeting agenda and/or minutes and/or back up Label attachment as Attachment 2 )

Employee Has the employee received any unemployment insurance compensation duning the 12 months prior to re-employment ansing out of the prior employment with any SBCERA participating employer) (Note Question \#4 does not apply to employees whose onginal re-employment date was pror to January 12013 )
$\square$ Yes $\quad \square$ No
5 Employer and the Employee acknowiedge and certify that
a During re-employment the employee may not work more than 960 hours during any fiscal year (July 1 through the following June 30)
b The employees pay may not be less than the minımum nor more than the maximum paid to other employees performing comparable job duties

Employer and Employee acknowledge that
a While SBCERA and the Employer will cooperate to faciltate complance with the terms of Government Code sections 752256 and 316806 and SBCERA Board Administration Policy No 015 compliance is ultmately the employee s responsibility
b Fallure to comply with any of the requirements of Government Code sections 752256 and 316806 as implemented through SBCERA Board Administration Policy No 015 may result in any or all of the following consequences effective on the date that the re-employment ceased to be in compliance

1 The employee s reinstatement to active SBCERA membership
" The suspension of the employee s retirement benefit payments effective on the date that the reemployment ceased to be in compliance which may include the recovery by SBCERA of any benefits improperly received

III The collection from both the employee and the employer of retirement contributions on any pay received by the employee during any penod of unlawful re-employment and
iv The employee earning a new retrement benefit during the period of re-employment pursuant to Government Code section 316807 and
$v$ Any other consequence provided by law
7 Employar The Employer agrees to do at least one of the following (check all that apply)
$\square$ Grant SBCERA staff direct access to the employer s payroll system in a manner that permits SBCERA to determine the number of hours that the employee and others similarty situated have worked in a fiscal year or

Provide a report to SBCERA on a pay-period by pay-period basis, showing the number of hours worked in a given fiscal year by any re-employed retirees who have worked at least 700 hours in a fiscal year

## Exhibit B: Page 9

## Certification re ReEmployment of SBCERA Retiree (Limited Duration) Page 3

8 Employer The employer agrees to report to SBCERA by submitting an updated copy of this form
a When any employee s reemployment extends or is proposed for extension beyond the stated end-date
b When any employees reemployment was originally limited to the completion of a discrete quantity of work or to termination upon some other stated event and has extended or is proposed to extend beyond that completion or event with an explanation of the reasons

9 Employer and Employee agree that in addition to the terms and conditions set forth herein the parties have reviewed and further agree to comply with
(1) California Government Code section 752256
(2) California Government Code section 316806
(3) SBCERA Board Administration Policy No 015

By executing this Certification Employee and Employer certify that all statements herein are true to the best of their knowledge


Employee / Retire o
TYPE NAME Tamara K ap

## EMPLOYER



BY

## Authonzed Representative of Employer

TYPE NAME Sam Lucia

## RETURN COMPLETED FORM TO

San Bernardino County Human Resources Dept
OFFICE (909) 387-5787
ATTN Employee Benefits and Services
FAX (909) 387-5566
157 West Fifth Street First Floor
San Bemardino CA 92415


Expected End Date Approved by SBCERA


Accepted and Approved by SBCERA


BY


Approval of this form by SBCERA entitles Employer and Employee to the conclusive presumption that the reemployment has commenced lawfully so long as all staternents made herein are true A copy will be returned to the Employer and Employee

