

HAZARDOUS DUTY PAY ANALYSIS REQUEST FORM

DHR-STW-OP-Form #: To be assigned.	Authority: 29 Del. C. §5916(e); MR 4.18.1
Effective Date: March 5, 2019	Supersedes: N/A

Signature Section

Upon submission of the request, a copy to the appointing authority or designee serves as the signature approval of the appointing authority or designee, and acknowledgment that the statements provided in this request form are correct and complete, and that funding is available to support this request within the current budget.

By using this form, the parties acknowledge their agreement to conduct transactions by electronic means. A party's electronic signature for purpose of the Uniform Electronic Transactions Act, 6 Del.C.Ch.12A may be provided by checking a box as indicated, electronic initials or name, or email confirmation.

_____ Approve Deny Date: _____
Secretary, Department of Human Resources

Part 1: To be completed by DHR

Approved; Effective Date: _____

Denied; Memo Date: _____

Part 2: Agency Human Resources: Department Information

Please see the Number Key on page 3 for details on completing this section

Check the reason for this request:

Newly Established Hazardous Duty Pay Change Hazardous Duty Pay Level

1. Department/Division/Section Name: _____

2. Department/Division/Section Number: _____

3. Applicant/Employee Name: _____

4. Budget Position #: _____

5. Designated Work Location: _____

6. Overall Purpose of the Position:

7. Current Hazardous Duty Pay Level: _____

8. Requested Hazardous Duty Pay Level: _____

9. Salary Administration Plan: _____ 10. Effective Date of Action: _____

11. Contact Name/Email/Phone#: _____

12. Position is assigned to a secured facility: Yes No

13. If "Yes", specify the secured facility: _____

14. If answer to 12 is "No", describe the hazardous environment and the percentage of time spent in the hazardous environment:

15. Explain the duties performed within the secured facility or hazardous environment:

16. Specify the employee's responsibility to deal with hazards as a function of assigned job duties:

17. Specify required actions the employee must perform to deal with the hazard:

18. Specify the training the employee has received to support his/her ability to respond to and deal with hazards:

Part 3: Number Key

1. Provide the Department, Division and Section Name as it appears in PHRST.
2. Provide the nine-digit Department, Division and Section Number. This is known as the DEPTID in PHRST.
3. Provide the name of the current employee or applicant.
4. Provide the Budget Position number of the position being entered by the employee.
5. Provide the designated Work Location as it appears in PHRST.
6. Overall Purpose of the Position is a description of the primary job responsibilities.
7. Provide the current approved level of Hazardous Duty Pay as it appears in PHRST.
8. Provide the level of Hazardous Duty Pay being requested.
9. Provide the Salary Administration Plan as it appears in PHRST.
10. Effective Date of Action: Date employee's duties changed to include defined hazards, position moved to a secured facility.
11. List the Department representative that the Department of Human Resources (DHR) may contact for additional information on the request.
12. Answer whether the Budgeted Position is assigned full time to a secured facility.
13. If the Budgeted Position is assigned full time to a secured facility, please provide the name of the facility.
14. If the Budgeted Position is not assigned full time to a secured facility, describe the hazardous environment and the percentage of work time the employee will be exposed to the hazard. (Specificity is the key)
15. Explain the duties performed within the secured facility or hazardous environment.
16. Describe the responsibilities of the employee to deal with the hazard as a function of the job classification.
17. Specify the required actions the employee must take to deal with the hazard.
18. Detail and describe the training the employee received to support their ability to respond to, and deal with hazards.

Part 4: Hazardous Duty Pay Procedures

The HD Pay Analysis Form is to be utilized in the cases of:

- A position not previously designated being exposed to Hazardous Duty at some level, as defined in Merit Rules and within the parameters of 29 Del. C. §5916(e) Uniform pay plan; hazardous duty pay.
“(e) No employee of any department or agency shall receive hazardous duty pay, except those specifically included in the following paragraphs:
 - (1) Employees, otherwise qualified, who are employed by the Department of Corrections or its successor agency).
 - (2) Employees, otherwise qualified, who are employed by the Delaware Psychiatric Center (or its successor agency) and who are assigned to programs for the criminally insane.
 - (3) Employees, otherwise qualified, who are employed by the Department of Services for Children, Youth and Their Families and are assigned to work in the Division of Youth Rehabilitative Services facilities.
 - (4) Casual seasonal employees performing the same job duties as those eligible employees identified in paragraphs (e)(1), (2), (3) of this section, shall also be deemed eligible. The amount of the monthly hazardous duty pay supplement shall be prorated based on the actual hours worked.
 - (5) Employees employed in the Prison Education Program as authorized in Chapter 24 of Title 14 whose primary job location is within the institutions.”
- A position previously designated at one level of hazardous duty pay now has a new exposure.

“Hazardous Duty Pay”: uncontrollable circumstances that involve as unusual risk of serious physical injury, impairment to health or death resulting from accidental, negligent or intentional causes. Compensation for Exposure Levels A & B shall be set in the Budget Act. The following [two] degrees of exposure are recognized:

“Exposure Level A”: Continuing exposure to hazards where the employee’s responsibility is to deal with the hazard as a function of assigned duties.

“Exposure Level B”: Proximate exposure to hazards where it is not the employee’s stipulated job duty to deal with the hazard, or occasional exposure to hazards where the employee’s responsibility is to deal with the hazard as a function of assigned duties.

“Continuing”: frequency of exposure is normally more than 50% of employee’s working time.

“Occasional”: frequency of exposure is normally more than 5% but less than 50% of employee’s working time.

“Uncontrollable”: precautions, such as safety and life support equipment, are either impractical to be used continually or are insufficient to assure reasonable safety.

“Proximate”: the location of employee’s work site precludes evacuation as a means of avoiding exposure to serious physical injury, impairment to health or death resulting from accidental, negligent or intentional cause.”

Part 5: Compensation Procedures

The Hazardous Duty (HD) Pay Analysis request form is to be used when budgeted position not previously approved for HD pay will be assigned work that falls within the parameters set forth in the Merit Rules and Delaware Code.

Complete all sections on page 1 of the Hazardous Duty (HD) Pay Analysis request form. The HD request form is to be submitted to the DHR-Class-Comp@delaware.gov mailbox with a copy to the Department's appointing authority or designee.

- DHR will review the submitted information and will contact the Department to: (1) confirm that there is sufficient information on the request form; or (2) gather additional information via email; and/or (3) schedule a conference call with the Department's Human Resources representative.
- After review of the information, DHR will determine if the request meets criteria.
- Departments will receive written notification from DHR of the final decision.