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|  | GOVERNMENT OF THE DISTRICT OF COLUMBIA  **Department of Human Resources** |  |

**Policy and Compliance Administration**

August 3, 2015

Mr. Vee Hickle

100 District Avenue NW

Washington, D.C. 20001

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| **Re:** | **Final Agency Decision – Enforced Leave** |

Dear Mr. Hickle:

This letter is in reference to the proposed enforced leave notice issued to you on July 24, 2015. After carefully considering the proposed action and your response, I conclude that the enforced leave is appropriate under the circumstances. Accordingly, you are being placed on enforced leave effective July 29, 2015.

You are being placed on enforced leave for the following reasons:

1. The agency has obtained reliable evidence that you falsified official timekeeping records. DPM § 617.3(c)

*Proposed Action:* **Enforced Leave**

I adopt the evidence, recommendations, rationale and conclusions of the proposing official. The proposed notice and related attachments are incorporated into this final action.

**Review Process.** You have the right to challenge this proposed action and may secure an attorney or other representative, at your own expense. You may seek review of this action by: (1) filing a grievance pursuant to DPM Chapter 16; (2) filing a grievance pursuant to any applicable collective bargaining agreement; or (3) for an enforced leave period of 10 or more days, you may file an appeal with the Office of Employee Appeals (OEA). You may choose only one method of review.

If you prefer, you may seek review by filing a grievance with your agency or with the Department of Human Resources. Please refer to DPM § 1626 or contact the Department of Human Resources for more information. A copy of the grievance form is included with this decision.

If you are a member of a union, you may, instead, elect to file a grievance pursuant to your collective bargaining agreement. For procedural guidance on filing a union grievance, please refer to your labor agreement or contact your union representative.

To seek review with the Office of Employee Appeals (OEA), you must file a Petition for Appeal with OEA within 30 days of the effective date of this action. A copy of the appeals application and OEA rules are included with this decision for your convenience.

**Enforced Leave.** You will remain on enforced leave status until a final decision is reached on any corrective or adverse action which follows. Your annual leave account will be charged for each day of enforced leave until depletion. Once exhausted, you will be charged leave without pay (LWOP).

**Continuation of Health Insurance.** If you are enrolled in an employee health insurance program, your coverage will continue uninterrupted for up to 365 days while in a leave without pay status; however, you may be required to pay any employee portions of benefit premiums while on LWOP, upon your return, or, in the case of separation, the amount will be deducted from any final pay. You will continue to accrue annual and sick leave until you are placed in a leave without pay status.

Should you have any additional questions regarding this action, please contact me on 202-555-5555.

Sincerely,

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| By: |  |
|  | SUPERVISING OFFICIAL  Deciding Official |

ATTACHMENTS

|  |  |
| --- | --- |
| No. | Title |
| 1 | *Proposed Enforced Leave Notice* |
| 2 | *DCHR Administrative Grievance Application* |
| 3 | *OEA Petition for Appeal Form* |
| 4 | *OEA Procedural Rules* |

**CERTIFICATE OF SERVICE**

On [Date], a copy of this final decision on enforced leave, along with supporting materials contained on an accompanying CD-ROM, on:

[Employee Name]

[Address]

[State City Zip]

*[By Hand Delivery] [OR USPS Certified No. ###] [OR FedEx Next Day No. ###]*

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| --- | --- |
| By: |  |
|  | SUPERVISING OFFICIAL  Deciding Official |