



CORPORATE POLICY

SUBJECT: Bereavement: Child Extended Bereavement Leave Act (CEBLA)

CATEGORY: Human Resources

ORIGINAL DATE: January 28, 2026

REVIEWED DATE:

I. POLICY:

It is the policy of Lake County Health Department and Community Health Center (LCHD/CHC) to allow employees to use available leave time, including sick leave, for absences related to the death of a child. Under the Child Extended Bereavement Leave Act (CEBLA), eligible employees may request up to 12 weeks of unpaid leave if the employee experiences the loss of a child by suicide or homicide.

A "child" for purposes of this policy is defined as an employee's biological, adopted, or foster child, a stepchild, a legal ward, or a child of a person standing in loco parentis. To be eligible for CEBLA leave, employees must be employed as full-time and have been employed by the LCHD/CHC for at least 2 weeks prior to requesting CEBLA leave.

Employees are entitled to a maximum of 12 weeks total of CEBLA leave if they experience the death of more than one child during a 12-month period.

Lake County has contracted with AbsenceResources to administer leaves of absence, including Child Extended Bereavement Leave. To apply, the employee must contact AbsenceResources at 1-877-462-3652 or visit their website at www.AbsenceResources.com.

Employees may use CEBLA bereavement leave time to:

- Grieve
- Attend the funeral or alternative to a funeral
- Make arrangements necessitated by the death

Employees are allowed to use CEBLA leave either all at once or "intermittently" in increments of no less than 4 hours and all leave must be completed within one year after notifying LCHD/CHC of the loss.

II. SCOPE:

LCHD/CHC full-time employees.

III. PROCEDURE:

A To request CEBLA bereavement leave

1. Employees requesting time away from work under this policy must give their supervisor reasonable advance notice, and if practicable, at least 48 hours' notice, before taking leave.



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1. If an employee has available benefit time, the employee may elect to use that time including all accrued sick leave, floating/fixed holidays, compensatory time, personal days, or vacation leave. For all bereavement leave time taken, a note should be added in the timecard comment section stating "bereavement" and the appropriate dates.
2. Employees may use CEBLA time in no less than four (4) hour increments.
3. Employees are required to provide reasonable documentation to AbsenceResources for CEBLA leave. Documentation may include a death certificate, published obituary or written verification of death, burial, or memorial services from a mortuary, funeral home, burial society, crematorium, religious institution, or government agency. If documentation submitted to Absence Resources does not include cause of death, the request may be denied.
4. Leave taken under this policy shall be counted towards the 12 weeks unpaid leave allowed under the Federal Family and Medical Leave Act of 1993.

B. Additional Information

1. Other special circumstances not addressed in this policy should be discussed with the Sr. Human Resources Business Partner and the employee's supervisor to determine whether additional considerations are needed.
2. Grief and loss resources are available through the Employee Assistance Program. Employees can speak to a counselor 24-hours a day, 7 days a week by calling 833-806-8722. All calls are confidential.

IV. REFERENCES:

Personal Days Policy
Vacation Leave Policy
Paid Holidays Policy
Sick Leave Policy
Federal and Family Medical Leave Act of 1993
Bereavement--Family Bereavement Leave Act

V. AUTHORS/REVIEWERS:

Designated Review Team, Executive Director, Deputy Executive Director, and Lake County Board of Health Personnel Committee.

VI. APPROVALS:

Lake County Board of Health President

Signature: _____ Date: _____