

PURPOSE

To clarify the provision of vacation leave as applicable to Day Service participants.

DEFINITION

Vacation leave is defined as an approved planned absence by a participant from a Day Service, for a prescribed period of time for the purpose of a vacation.

POLICY

1. Boards of Directors responsible for Day Services will develop vacation leave policies for participants. Day Service participants have traditionally been granted a minimum of two weeks and maximum of three weeks annual vacation leave.
2. Day Services are encouraged to provide participants with the opportunity to choose when they take their annual vacation so that vacations may be planned in the most normative manner possible (see Vacation Planning Guidelines, Section C88.4). Therefore, Day Service providers should consider “slow downs” as opposed to “shut downs” during the summer months or other peak vacation periods.
3. Manitoba Families will continue Day Service per diem funding for participants taking up to maximum of three weeks annual vacation leave.

PROCESS

1. Participants with or without their support network may make a request for vacation leave to Day Service. Requests would be in the form and within the policy of the Day Service Provider.
2. The Community Service Worker is informed of the request by the Day Service. The Day Service reviews and approves vacation leave requests.
3. The Day Service submits attendance reports to the Regional Office which clearly indicate that the participant(s) are on vacation leave. Manitoba Families uses the normal billing process to continue Day Services per diems for participants on vacation leave within approved maximums.
4. When there is no option available other than a full “shut down” (see Temporary Closure - Day Services, Section C155.6), the Day Service must notify the Regional Program Manager, families and residential care providers at least sixty days in advance. If the “shut down” poses problems for families and care providers, the Regional Program Manager will facilitate discussions aimed at identifying and resolving concerns related to the “shut down”.

Date Issued:	January 1, 2019
Replacing:	October 1, 1996

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