Paid Sick Leave
IN SPOKANE
Contents

Introduction ................................................. 1
   Health In All Policies .................................. 1
   The Public Health Perspective ...................... 2

Access to Paid Sick Leave ............................... 2
   Community Voice ....................................... 3

Working While Sick ....................................... 4
   Community Voice ....................................... 4
   Communicable Disease ............................... 4

Other Social and Community Impacts ............... 6
   Workers with Children ................................. 6
   School Nurse Perspective ............................. 6
   Workers with Elder Care Responsibilities ........ 7
   Workers with Low Financial Security .............. 7
   Community Voice ....................................... 7

Employer Concerns ....................................... 8
   Abuse of Benefits .................................... 8
   Absenteeism and Presenteeism ....................... 8
   Employee Satisfaction and Turnover ............... 9

Importance of Paid Sick Leave:
   The Worker’s Perspective ............................ 10
   What Local Businesses Told Us ..................... 10

Recommendations ....................................... 12
   Further Research ...................................... 12
   Community Campaign ................................ 13
   Alternative Care Options for Sick Children ...... 13

Conclusion ............................................... 14

Methods & Limitations ................................. 16
   Survey ................................................. 16
   Survey Limitations ................................... 16
   Interviews ............................................ 17
   Interview Limitations ............................... 17

Introduction

Health In All Policies

Health In All Policies (HiAP) is a collaborative approach that integrates and articulates health considerations into policymaking across sectors to assure the health of all communities and people. The goal of HiAP is to assure that all policies are reviewed with health in mind – to take into account the health of people and implications to health systems in all decisions. Spokane Regional Health District (SRHD) embraces and advocates for the HiAP approach in all public policy considerations. Stakeholders interested in the adoption of a mandatory paid sick leave policy for the City of Spokane, including city officials, as well as the Spokane Alliance, a non-partisan and non-profit alliance of congregations, unions, schools, and community groups in Spokane County, asked SRHD to conduct an assessment of local paid sick leave.

Due to the limited availability of existing local data, three data collection methods were used to describe access to paid sick leave in Spokane County and linkages to public health concerns. First, questions regarding paid sick leave were added to a population survey, the 2015 Quality of Life survey for Spokane County. The survey was a cross-sector effort to measure the quality of life of Spokane County residents, including health-related quality of life, satisfaction with local government services, community engagement, social capital, mental health, and paid sick leave and had greater than 3,500 responses. Second, a total of 24 interviews of local businesses and individuals in key industries were conducted, and third, a discussion was held with a group of school nurses in the region. See the section on Methods & Limitations on page 14 of this report for more details. Additionally, personal interest testimonies are provided under the heading “Community Voice” to provide context to this document. These stories were gathered and provided by members of the Spokane Alliance. These perspectives help demonstrate the impact of paid sick leave on real people in our community. This report summarizes the information gathered to help inform local policy makers and other stakeholders interested in enacting mandatory paid sick leave policy in our communities.

A strategic goal of Spokane Regional Health District is to encourage the adoption of policies to address inequities by promoting a health-in-all-policies perspective and the use of health and equity impact analysis tools.
The Public Health Perspective

Paid sick leave, sometimes referred to as earned sick leave, is a benefit offered by some employers. It enables an employee to continue receiving salary or wages for time off, with little or no advance notice, while recuperating from his or her own illness, accessing medical care, or caring for ill family members. In addition to sick leave, some employers also offer safe leave. Safe leave enables employees to take paid time off in the event that their safety is in jeopardy, for instance in response to situations of domestic violence, sexual assault, or stalking.

The presence or absence of paid sick and safe leave benefits has important implications for both individual workers and society as a whole. For individuals, paid sick leave provides a measure of economic stability while recuperating from unexpected illness, injury, or chronic medical conditions, and other situations that require absence from work, such as caring for a sick child or loved one. Losing pay or losing a job to recoup from illness or care for a sick child can pose a serious financial hardship, particularly for low-income workers. The economic disincentive can discourage people from staying home while ill, deter them from keeping ill children home from school, or keep them from accessing preventive care like cancer screenings.\(^4\)\(^5\) For the public, sick workers can infect their coworkers and customers. Children who are not kept out of school can infect their classmates and others. The potential spread of illness to other people thereby impacts the public’s health, which is why paid sick leave policies, in addition to other concerns, are of interest to public health officials.

Aside from public health implications, paid sick leave benefits are associated with improvements in worker’s health, safety, morale, and productivity; children’s health and education; and other aspects of quality of life for individuals and families.\(^6\) In the absence of mandatory paid sick leave policy, access to paid sick leave is unequal. Low-income workers, women, and racial and ethnic minorities generally are less likely to have this employer-provided benefit and are disproportionately impacted.\(^7\) Unequal access to paid sick and safe leave contributes to systemic economic, social, and health inequities.

Currently, the only federally-mandated leave benefit is that imposed by the Family and Medical Leave Act (FMLA). FMLA requires only that employers provide up to 12 weeks unpaid leave for certain medical conditions of the employee or of their immediate family. At the state level, four states enacted paid sick time laws to date: Connecticut, California, Massachusetts, and Oregon.\(^8\) In addition, 11 cities or counties have enacted similar laws including two in Washington state: Seattle and Tacoma.

Because of the health and social implications, the National Association of County and City Health Officials (NACCHO), of which Spokane Regional Health District is affiliated, supports federal, state, and local legislation that requires employers to provide paid sick leave benefits.\(^9\) However, protecting the public’s health and taking action to reduce inequities in health and social outcomes is not a responsibility of public health officials alone. The implications of mandatory paid sick leave are much broader than health and is a policy concern of our society.

Access to Paid Sick Leave

Unless mandated by state or city policy, paid sick leave is offered at an employer’s discretion. Employers can offer paid sick benefits in a variety of ways. For some, paid sick leave is offered as part of paid time off (PTO), which is a set amount of time that a covered employee may use for a broad range of needs, including sick or vacation time. Other employers may offer paid sick leave that accrues in proportion to the number of hours worked, or a set amount per year that may increase with longevity at the job. In short, sick leave benefit packages vary broadly.

According to the 2015 Quality of Life Survey, in Spokane County, 72% of workers had paid sick leave with 47% of the workers having access to paid sick leave directly, and 25% receiving these benefits as part of a paid time off policy. Of those who had paid sick leave, 25% had less than one week per year, 59% had one to two weeks per year, and 16% had three or more weeks per year. More than one quarter (28%) of workers did not have paid sick leave. More than half (52%) of those without paid sick leave were part-time workers, those who work less than 40 hours per week. Only 20% of full-time workers did not have paid sick leave.

The proportion of workers without paid sick leave was higher among those with lower educational status, lower annual household incomes, younger persons, and part-time workers (see figure 1). More than half (51%) of workers who had a high school diploma, GED, or less did not have paid sick leave as opposed to 10% of workers with graduate or professional degrees. More than

---


two-thirds (67%) of workers with an annual household income less than $25,000 did not have access to paid sick leave; in contrast, 11% of those with an annual household income of $100,000 had no access to paid sick leave. There was no statistically significant difference between access to paid sick leave between male and female workers, though national data suggests female workers are less likely to have paid sick leave.

There was an insufficient sample size to analyze access to paid sick leave by race/ethnicity in the 2015 Quality of Life survey. However, other studies have shown that minority workers are generally less likely to have access to paid sick leave. Nationally, a lower proportion of black and Hispanic workers (56 and 42 percent respectively) had paid sick leave in comparison to Asian American and white workers (67 and 60 percent respectively). Access to paid sick leave varied between industries. In arts, entertainment, recreation, accommodation, and food service industries, 75% of workers did not have paid sick leave. In construction, 58% of workers did not have paid sick leave. In contrast, 9% of workers in professional, scientific, management, administrative, and waste management services and 12% of workers in educational service, healthcare, and social assistance did not have paid sick leave.

Of the factors discussed so far—age, sex, education, income, industry, and hours worked per week—only income, industry, and hours worked per week were independent predictors of access to paid sick leave. That is, regardless of industry or hours worked per week, workers with higher annual household income (and thus presumably higher wages) had better access to paid sick leave. Likewise, regardless of income, workers in different industries had different access to paid sick leave. Age and sex were not factors.

**Community Voice**

*In January 2015, Gloria Bercier, a home care worker, fractured her foot. She lost 16 hours of pay because she could not work with her injury. “Sixteen hours does not seem like a lot to most people, but to a low-wage worker [it] can be detrimental to a family.” Gloria had no choice but to return to work with an injured foot, which meant that her foot did not heal properly. Because of her lost wages, Gloria could only afford to pay her mortgage; she had to go to the food bank for food and get government assistance to help with her utilities. Gloria says that this experience was very humbling and she felt grateful to receive the help. “I just think that people that work really hard like I do shouldn’t have to utilize or even think about using government assistance programs.”*

Working While Sick

Attending work while sick, also called “presenteeism,” has been associated with increased risk of transmission of infectious diseases, like the common cold and influenza, as well as decreased worker safety, morale, and productivity. In Spokane County, 69% of all workers reported going to work sick. Of workers who had been sick in the last 12 months, 72% reported going to work sick. This statistic is similar for all workers regardless of age, education, or household income. When considered on its own, sex was not associated with going to work sick but was associated with going to work sick when considered in the context of other factors (see below).

Of workers who were sick in the last 12 months, 84% of full-time workers reported attending work while sick in contrast to 57% of part-time workers. There were also differences in the proportion reporting to work sick by industry. Of workers in construction who were sick, 91% reported to work. In contrast, of workers in arts, entertainment, recreation, accommodation, and food services who were sick, 33% reported to work though there is substantial variability in this estimate. When considering all factors together, differences in attending work sick were mainly associated with sex, industry, and the number of hours worked per week.

Community Voice

Joe Spring is a graduate student, healthcare worker, husband, and proud resident of Spokane’s East Central neighborhood district. He has worked throughout the healthcare system as both a nurse’s assistant and an emergency medical technician. Joe has seen what it means for healthcare workers to go to work sick and says it is not a pretty picture. He says that oftentimes the healthcare workers who have the most sustained and direct contact with patients are some of the lowest paid and least able to take work off for any reason: “A minimum wage and a family to raise does not provide one with the luxury of making sound decisions regarding public health. You are sick. You must support a family. You have rent to pay and mouths to feed. You are going to work. End of story.”

While working in a rehabilitation facility Joe witnessed many coworkers coming to work sick and “sucking it up.” Although his fellow employees were often told to go home if they were sick, the recommendation was often empty when coupled with the realities of bills. He says that when healthcare workers are the vectors of the very illnesses they seek to prevent, it is wrong. “We want those who care for our loved ones to be those who promote health, not destroy it, and feel like they have a viable option to do so.”

Communicable Disease

Public health officials have long advocated for workers and general community to stay home when ill to prevent the spread of communicable illness to others. This is especially important for workers in industries with substantial contact with the public, such as food and healthcare workers. Foodborne illness can occur from contamination through food handling by an infected food worker.

“In a recent study of kitchen managers and food workers, 12% of surveyed workers reported that they had worked two or more shifts in the last year while experiencing vomiting or diarrhea. Male workers were more likely to work while experiencing these symptoms. The findings also indicated that workers who were entitled to paid sick leave were two times less likely to come to work with vomiting and diarrhea. Interventions suggested by the research include policies that encourage workers to tell managers when they are ill and policies to lessen pressure to work while ill.”

Proportion of Workers Attending Work among Workers who Were Sick by Industry, Spokane County 2015

<table>
<thead>
<tr>
<th>Industry</th>
<th>Proportion of Workers Attending Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entertainment, recreation accommodation and food</td>
<td></td>
</tr>
<tr>
<td>Public Administration</td>
<td></td>
</tr>
<tr>
<td>Educational service, health care, social assistance</td>
<td></td>
</tr>
<tr>
<td>Professional, scientific, management, administrative</td>
<td></td>
</tr>
<tr>
<td>Transportation, warehousing, and utilities</td>
<td></td>
</tr>
<tr>
<td>Finance, insurance, real estate, rental and leasing</td>
<td></td>
</tr>
<tr>
<td>Manufacturing</td>
<td></td>
</tr>
<tr>
<td>Other services, except public administration</td>
<td></td>
</tr>
<tr>
<td>Construction</td>
<td></td>
</tr>
</tbody>
</table>

*Estimates from four industry categories were not reported due to insufficient data: (1) Agriculture, forestry, fishing, hunting, and mining; (2) Information; (3) Public Administration; (4) Wholesale Trade.

Source: Quality of Life Survey, 2015, Spokane Regional Health District

Figure 3

The common cold or more serious flu is easily spread from person-to-person. Asking the public to stay home when sick is a common, consistent message promoted by the U.S. Centers for Disease Control and Prevention and local public health officials during flu season. In response to the more recent and potentially-serious threats posed by the H1N1 flu strain and other potential pandemics, liberal workplace leave policies were recommended as part of the national response plan. Staying home when ill with the flu is especially important for children given the close and frequent contact children have with one another. It is also important that employees avoid working in certain settings, such as long-term care or healthcare facilities, where residents and patients are more vulnerable to the consequences of becoming ill. However, losing pay to recoup from illness or care for a child can pose a serious financial hardship to individuals and families, particularly for low-income workers. Paid sick leave policies are therefore important in helping provide a measure of economic security for working families.

---


Other Social and Community Impacts

Workers with Children

Access to paid sick leave has special implications for those responsible for the care of a child. Public schools in Washington state have policies describing when parents are required to keep ill children out of school. For parents without access to paid sick leave, staying home to care for an ill child, or to take a child to a medical provider becomes a difficult choice. Even greater burden is imposed on parents or caregivers who have children with chronic health conditions, single parents, or parents who have their own health needs to respond to.

Of workers who are single parents, 50% did not have access to paid sick leave. More than 74% of workers with children in the home reported attending work while sick. These workers were no more likely to attend work sick than workers without children in the home, even when accounting for differences in sex, hours worked per week, and industry. There was no difference in the number of days of sick leave used between workers with children and workers without children.

School Nurse Perspective

School nurses in the region were interviewed regarding a mandatory paid sick leave policy because of their unique perspective of working with parents and providing care to children.

All schools have policies that require ill students to go home or stay home from school when ill (e.g. temperature over 100 degrees, nausea, vomiting, diarrhea, rashes). These policies are fairly standard across districts and school nurses play a role in assessing student illness while at school. Additionally, school secretaries also sometimes play a role in assessing student illness using established decision aides.

Despite standard policy for infectious disease across school districts, school nurses still see kids coming to school sick. When asked why parents would send kids to school sick, the first answer given was, “Because the parent has to work.” Several nurses provided an additional explanation that kids are often fearful to have the nurse call the parent to come get them even though they are sick, because “the child takes on the fear about their parent losing their job.” Other reasons cited included: that kids just want to go to school for social reasons or because they don’t want to miss extracurricular activities like athletics; some kids are court-ordered to go to school because they’ve missed too much school so parents won’t call the kid in sick; sometimes parents just need the break; and sometimes parents send kids to school sick anyway because they have drug or alcohol dependencies that influence their decisions.

It was the group’s impression that children from low-income families are more likely to come to school sick. In addition to the reasons cited related to the parents’ employment situation, it was also discussed that low-income families aren’t always as “well connected,” meaning they have fewer family members to depend on for help when needed. The group stated that it was difficult for some families to pick up their sick child from school unexpectedly because they had problems with transportation.

Individuals in the group acknowledged the potential benefits of paid sick leave. However, despite beliefs that professional school nursing organizations support paid sick leave policy, as a group, the school nurses were reluctant to support a mandatory paid sick leave policy. They said parents who already have paid sick leave do not use it, because the expectations at work and limitations of their specific policies make it difficult to use sick leave. Also, they felt that sick leave will always be insufficient for chronically ill children. Finally, the consensus of the group was that mandated paid sick leave would not change the fact that kids would be sent to school sick, since some parents use schools as “babysitters.” Several nurses proposed that a better solution for keeping ill kids out of school would be to establish and sustain a sick care facility for kids, which would ensure healthcare for sick kids and enables the provision of preventive and wrap-around services (e.g. mental healthcare).
Workers with Elder Care Responsibilities

Caring for elderly family or relatives can be a significant time commitment and especially difficult for workers. It is estimated that in the next five years, nearly 1.2 million employees in the Washington workforce will have obligations to care for an elderly person. The impacts of care obligations on workers in Spokane County were explored due to the significant potential impacts on quality of life. Twenty percent of workers provided care to seniors including members of their own family once a week or more. Of these, 34% did not have access to paid sick leave.

Workers providing care to seniors once a week or more were no more likely to attend work sick than those who did not care for seniors. Together with the results on parent use of sick leave, this could indicate that workers with other care obligations do not conserve their sick leave for care obligations. Nonetheless, more than 60% of workers who had children at home or cared for an elder adult once a week or more felt that paid sick leave was important or very important.

Workers with Low Financial Security

As discussed earlier, workers with low educational attainment, low household incomes, and workers in certain industries were less likely to have access to paid sick leave. Among workers who were sick in the last 12 months, 65% who rated their personal financial situations excellent reported working while sick as opposed to 90% of workers with fair personal financial situations. Self-rated personal financial situation was associated with whether workers went to work while sick, regardless of industry, income, education, or hours worked per week.

Community Voice

Lannie MacAndrea is a retired Spokane Community College faculty member, where she taught in the Applied Education department helping students get a non-transferable degree or a certificate. Lannie served students from a lot of different backgrounds: some just out of the justice system; others proud to be the first in their families to attend college; middle-aged adults searching for a better life; and single parents with a dream and no means of support except for their will and stamina. Lannie is in favor of mandatory paid sick leave on behalf of her students who “had the courage to do whatever it took to get back into the work force.” From Lannie’s perspective, when students have no sick leave, they go to work ill. It is not a choice they make, it is the only choice they have. When a student needed to go to court in a domestic violence case, Lannie helped her schedule the appointment during class time rather than work time because she had no way to make up lost wages. Lannie had students bring sick children to class with them, which was against the rules. Lannie has given money to students who could not afford the medicine a child needed, which was also against the rules, but she says that if the child is not coughing she can go to daycare and the mom or dad can come to class. “Our community needs educated workers in secure jobs. Our full-time worker, full-time students deserve a safe health leave policy at their workplace. Our future does depend on educating the next generation. This is the right thing to do—we must find the will to do it.”


“For many of the parents, if the parent does not have sick leave, taking time off from work is literally taking a meal away.”
- School Nurse
Employer Concerns

Abuse of Benefits

Employers are most often concerned with the abuse of paid sick leave by employees. This is refuted by the experiences of locales who have implemented a mandatory paid sick leave policy in their jurisdictions. For example, after Connecticut passed a law mandating paid sick leave benefits, employers reported little abuse of the benefit; 86% of companies reported no known instances of abuse and only one-third of employees used the benefit at all.\(^\text{15}\)

In Spokane County, persons with paid sick leave reported taking, on average, 3.4 days of sick leave in the last 12 months and persons with paid time off reported taking 2.4 days of sick leave. There was no difference in the amount of sick leave taken by income, education or industry.

Absenteeism and Presenteeism

Employee absenteeism and presenteeism are also potential concerns of employers. However, absenteeism, defined as an unscheduled absence from work, has been found to account for less than 1% of all absences.\(^\text{16}\)

Presenteeism, defined as attending work while sick, has been associated with decreased job performance and is now thought to be more costly for businesses than absenteeism.\(^\text{17}\) Thus, employees working while ill has implications for the public’s health, but also implications for a company’s bottom line. Presenteeism likely reduces employee productivity by a third.\(^\text{18}\) This decline in production is estimated to cost the U.S. somewhere around $150 billion a year.\(^\text{19}\) Some research suggests that the availability of paid sick leave seems to diminish presenteeism.\(^\text{20}\) However, as discussed earlier, in Spokane County, 69% of all workers reported they went to work sick in the last 12 months and workers with paid sick leave or paid time off were just as likely to go to work sick as those without paid sick leave, suggesting that there are other factors influencing employee decisions to work while sick.

However, workers with paid sick leave or paid time off were more likely to stay home earlier in the course of their illness. Roughly half of workers with paid sick leave or paid time off reported they would not work when they felt the full effect of symptoms. In contrast, less than one-quarter (22%) of workers without paid sick leave reported they would not work at this point. Workers without sick leave were more likely to report always working when sick (25%)

---


than persons with paid sick leave or paid time off (9% and 15% respectively), though this observation should be interpreted with caution because of the considerable variability in the estimates.

Other factors that are hypothesized to have a strong correlation to presenteeism are job security and home life.\(^{21}\) If job security is low, research suggests that employees are more likely to come to work, despite illness.\(^{22}\) Additionally, if home life is particularly taxing, for example, a single mother with numerous responsibilities, an employee is more likely to come to work sick in certain work environments.\(^{23}\) Another interesting hypothesis that was tested by Swedish researchers found that professions involved in the care of a vulnerable person as the primary job task have much higher rates of presenteeism.\(^{24}\) There is limited support for these hypotheses in the data from Spokane County. The data from this survey suggest that parents are no more likely to go to work sick than non-parents and workers with elder care obligations are no more likely to go to work sick than those without those obligations. However, when considered in the context of all available factors, women were more likely to attend work sick than men and women were more likely to regard paid sick leave as important than men.

---

**Employee Satisfaction and Turnover**

Employee benefits are a major influence on employee satisfaction.\(^{25}\) Paid sick leave in particular is associated with higher levels of satisfaction.\(^{26}\) Higher levels of satisfaction are often translated to higher levels of productivity and less turnover.\(^{27}\) The availability of paid sick leave tends to have a positive effect on the rate of turnover, which results in lower expenses and overall cost savings for businesses.\(^{28}\) However, few businesses reported a reduction in turnover after the passage of a paid sick leave ordinance in San Francisco.\(^{29}\) This could be the result of a mandated benefit, which strips the competitive edge of offering the benefit.

In Spokane County, workers with access to paid sick leave had higher ratings of their employment situation. More than 66% of workers with paid sick leave or paid time off rated their employment situation as excellent or very good in comparison with 27% of workers without these benefits. The association between paid sick leave and high employment “satisfaction” remained significant even when accounting for other factors that might influence employment satisfaction, namely education, income, industry, and the number of hours worked per week.

---

Importance of Paid Sick Leave

The Worker’s Perspective

Overall, 57% of Spokane County workers thought that paid sick leave was very important or somewhat important.

74% of workers who already have paid sick leave regarded it as important in contrast to 59% of workers with paid time off and 34% of workers without paid sick leave or paid time off.

64% of women regarded paid sick leave as important in contrast to 51% of men. Age, sex, education, and having paid sick leave were independent predictors of regarding paid sick leave as important or very important. Income, industry, and the number of hours worked per week were not factors.

In Spokane County, the two industries with the fewest proportion of workers with access to paid sick leave also had a fewer proportion of workers who indicated that paid sick leave was important, as compared to other industries with greater access (figure 6).

What Local Businesses Told Us

A total of 24 interviews were conducted among local businesses in Spokane County and the results were themed by employer size: small employers (< 49 employees), medium employers (49 to 249 employees) and large employers (more than 249 employees). The purpose of the interviews was to gauge reactions to a draft policy that was proposed to the City of Spokane by local advocacy groups.

- Employees would accrue one hour of paid sick leave for every 30 hours worked
- Accrual would begin on date of hire, or for existing employees, the day the policy goes into effect
- Paid sick leave could not be used until after 90 days of employment
- Employees could use paid sick leave for personal injury or illness, taking care of a family member, or instances of domestic violence
- The following caps for paid sick leave used in a year would be:
  - Under 49 FTEs: 40 hours a year
  - 49 – 249 FTEs: 56 hours a year
  - Over 250 FTEs: 72 hours a year

The interview scripts were analyzed to identify themes for each question and are reported by employer size.

30 This was an early, initial draft policy proposal that was subsequently revised after the interviews were conducted.

Figure 6
Question: What are your initial reactions to the draft policy proposal?

**Small**

The response was overwhelmingly negative, six of the eight respondents were not in favor of the proposed policy.

**Theme 1: Bureaucratic control and loss of choice**

Six of the eight respondents remarked about their dislike for mandates and having to heed what a government agency thinks is appropriate. There was also discernible displeasure about losing control of their business and not being able to make independent decisions.

“As a small business owner, I think we get hit a million different ways and it’s all mandated to us. We really have no control and we lose control to run our business in a profitable manner.”

**Theme 2: Paid sick leave is cost prohibitive**

Four of the respondents voiced concern about cost and the generosity of the paid sick leave policy. Wage was also mentioned by two of the eight respondents, as justification for not needing a paid sick leave. Many of the respondents felt that they were generous employers with satisfied employees, with or without paid leave.

“I feel like I would love to, I would like to offer medical to our employees and those kinds of perks. It’s hard for me to figure out how to do that with 5 [full-time] employees and being a small business.”

**Medium**

The responses from nine businesses were more varied: three businesses responded positively, while four responded negatively and two had a neutral reaction. Responses from this group tended to be more muted than the smaller employers. All of the medium employers interviewed offered some sort of paid time off to full-time employees.

**Theme 1: Some sort of paid time off is fair**

Although only three of the respondents reacted positively to the proposed sick leave policy, five of the nine respondents thought that some form of paid time off was a good thing. However, there was some contention with the number of hours offered and the broad application of paid sick leave. There seemed to be a desire for more discussion and evaluation about the paid sick policy.

“From a city-wide ordinance, I think that’s an excellent policy.”

**Theme 2: Bureaucratic control and administrative burden**

The theme of distaste for more bureaucracy and the administrative burden that would come along with it continued, with three of the nine businesses voicing concern about the bureaucratic costs and time investment adhering to reporting requirements and appropriately tracking accrual.

“I think that the government getting involved in company policy is not only a waste of time, it’s a waste of taxpayer dollars. I think they should find a much more suitable initiative to spend taxpayer dollars on, it’s none of the City of Spokane’s business.”

**Large**

The majority of respondents had a negative reaction to the paid sick leave proposal (four of seven). It is important to note that all of the large employers offering paid time off actually had policies for full-time employees that exceed the proposed paid sick policy.

**Theme 1: Displeasure with mandated policy and administrative burden**

Four of the seven respondents stated their concern about the additional layer of bureaucracy the proposed paid sick leave policy would add. Many of the larger employers felt that complying with another regulation would be administratively cumbersome and difficult.

“From an administrative standpoint, I’m not a fan, it’s just another thing that we have to comply with and it’s already a challenge to comply with all those requirements and do reporting. Just the compliance side is a pain, honestly.”
Recommendations

This report provides an overview of the implications of paid sick leave and describes perceptions of and access to paid sick leave in Spokane County. As this report is descriptive in nature, with primary emphasis on implications of greatest importance to the public’s health, additional research could help inform discussions around mandatory paid sick leave. Also, further research could lead to the development of strategies that complement a mandatory policy if one is adopted and implemented.

Further Research

First, data from the survey shows that, in Spokane County, workers with paid sick leave or time off were more likely to stay home earlier in the course of their illness—roughly half of workers with paid sick leave or paid time off reported they would not work when they felt the full effect of symptoms. In contrast, less than one-quarter (22%) of workers without paid sick leave reported they would not work when their symptoms were in full effect. However, without regard to severity of illness, the data also show that workers report to work sick whether or not they had paid sick leave, indicating that multiple factors influence presenteeism which is a finding supported in other studies. Further research could help our understanding of this information and the development of messaging strategies for workers and employers.

Second, the data presented in this report highlights a key disparity; low income and low education workers are much less likely to have paid sick leave. Arguably, these workers are most in need of the economic security that paid sick leave could provide. The survey found that paid sick leave is popular with workers who have it. Those workers who do not have paid sick leave currently are less likely to regard it as important. This could reflect that workers have other, more pressing concerns or needs, such as better paying jobs altogether. Additional research could help clarify competing concerns and priorities among low-income employees.

Third, related to the limitations of this report discussed earlier, there are additional items of public health concern that could be explored and considered further. Of particular importance is the relationship between paid sick leave and use of preventive healthcare, a link that has been established in research. The importance of preventive healthcare for the prevention and mitigation of both infectious and chronic disease is of continued importance for employees and their families. Further, the discussion with school nurses raised important considerations—that there are multiple factors that influence whether working parents or guardians send their children to school while ill. These are issues not adequately addressed within this paper but have important implications for overall health and wellbeing of children and families in our community.

Finally, the local employers interviewed expressed appreciated concerns with a mandatory sick leave ordinance; and, the financial impacts on local businesses in other locales that have implemented similar policy has varied. In 2006, San Francisco became the first city in the U.S. to pass a paid sick leave ordinance and there have been multiple studies measuring the outcomes of the policy. According to an Institute for Women’s Policy Research study, six out of seven employers reported no negative profitability effects from the ordinance. However, of businesses that implemented a new paid sick leave policy, 39% reported reducing some form of compensation, 49% reported having difficulty complying, while 32% reported worse profitability. Of the firms that implemented a new sick leave policy, a large proportion were small businesses and businesses that employed low-wage workers. Locally, businesses interviewed expressed concerns about the potential administrative burden imposed by an ordinance. Additional research to explore the concerns of local businesses would be helpful in informing the nuances and subsequent adoption of a mandatory policy.

Community Campaign

Paid sick leave has clear public health benefits, but it works best if it prevents employees from working while sick and sending children to school while sick, and enables employees to use sick leave benefits for preventive healthcare for themselves and their families. If a mandatory paid sick leave policy is enacted, a parallel public information campaign to encourage workers and employers on appropriate sick leave use could help reduce workplace presenteeism and improve health outcomes in our community. It can also influence the acceptance and ultimate success of a mandatory policy.

There is evidence that guidelines and targeted education can influence worker behavior. For example, there are strict guidelines for food workers in Washington state and similar guidelines in place for childcare workers. As the data shows, 33% of workers in the entertainment, recreation, accommodation, and food industry reported working while ill, in contrast to 91% of construction workers.

While strict guidelines might not be appropriate for all industries, a public information campaign that provides educational guidelines for employees, employers, schools and families on appropriate uses of sick leave could increase the effectiveness of a mandatory paid sick leave policy. Such guidelines should go beyond the use of sick leave to limit the spread of disease. The availability of paid sick leave may be of greater importance to overall wellness in our community when it is used to access preventive services and seek care for chronic health conditions.

Food workers may not work with food if they have:

- Diarrhea, vomiting, or jaundice
- Diagnosed infections that can be spread through food such as Salmonella, Shigella, E. coli, or hepatitis A
- Infected, uncovered wounds
- Continual sneezing, coughing, or runny nose

Further, food workers must tell their supervisor when they are sick and should be instructed to go home if possible. If unable to go home, they may take on other duties (e.g. mopping, cleaning) but are not allowed to handle food. If working with highly susceptible populations, food workers are not allowed in the facility at all. All food employees in Spokane County who handle unwrapped foods or beverages are required to hold a current Washington State Food Worker Card (WAC 246-217). To obtain a card, a food worker must take a course and successfully complete a test covering the course material, which provides instruction on safe food handling practices, including instruction on staying home while ill.

---

Conclusion

Public health policy is to stay home if you are sick. Paid sick leave can help to encourage sick workers and children to stay home. It can also create healthier workplaces and more productive businesses by limiting the spread of disease to others and reducing the potential for workplace accidents. Lower healthcare costs may also result from allowing workers to seek preventive care and early treatment for themselves and their family members. Access to paid sick leave can also provide economic security by enabling workers to care for their personal and family health needs without losing wages or even their job.

SRHD applauds those employers who provide paid sick leave to their employees. Unfortunately, not all employers do so. The lack of paid sick leave is particularly prominent for low-wage jobs and disproportionately affects people with lower incomes and lower education levels. Public health encourages all employers to provide some level of paid time to allow employees to attend to the healthcare needs of themselves and their families. In the absence of such voluntary measures, government regulations, such as those being considered by the City of Spokane, may help promote greater equity in our community by expanding access for low income workers and those with lower education—groups already experiencing health and social inequities. Consideration should be given to the adoption of additional strategies that could complement a mandatory paid sick leave policy, if it were adopted.
Methods & Limitations

Survey

The 2015 Quality of Life survey conducted March 2015 through June 2015 followed a “push-to-web” model used extensively within Washington state and other states. Respondents were encouraged to respond to the survey online (pushed-to-web) before being given the option of completing a hardcopy survey. Letters inviting respondents to complete an online survey were mailed to a random sample of addresses within Spokane County drawn from the vendor-augmented version of the United States Postal Service’s computerized sequential delivery file. This file included names and address details of known active addresses. A second and third letter were mailed at appropriate intervals to those who did not respond to earlier mailers. The invitation letters were branded with the SRHD logo and carefully worded to encourage participation. Replacement surveys and a survey assistance hotline were provided. A portion of those surveyed were mailed paper surveys to mitigate low response rates among certain demographic subgroups to online surveys.

More than 3,500 persons countywide 19 years or older responded. The survey was weighted to account for sampling of adults within households as well as differential response rates among age, sex, and education groups. Weights were calculated using Spokane County population proportions for age, sex, and educational status from the 2009-2013 American Community Survey (five-year estimates). For this report, analysis was limited to data from respondents who were employed for wages or out of work for less than one year. An estimated 56% of Spokane County residents were employed for wages with an additional 1% out of work for less than one year. Self-employed respondents were not included. Data analysis was performed using SAS 9.4. Chi square tests and multivariable logistic regression were used with alpha levels of 5%.

Survey Limitations

There are several limitations to the survey conducted. First, the random sample for the survey was drawn from an address list provided by a third-party vendor. This address list may not reflect the true universe of mailable addresses. Additionally, the survey was used to capture a broad spectrum of quality of life issues in Spokane County. Consequently, the space for questions related to paid sick leave was limited. There were a number of additional questions that if included, would have improved this analysis, including jurisdiction of employment (city or county) and size of employer (number of employees). These additional elements would have provided information useful in guiding policy deliberations for relative employer/company size. Finally, response rates were low among young persons, minorities, and individuals with low income and/or low education, although low response rates in these categories have been documented in other studies and are now routinely expected by survey researchers. These low response rates could cause instability in some categories.


Interviews

Businesses were selected from the DemographicsNow database which lists 12,778 businesses within the City of Spokane. A stratified random sample was performed, using the following tiers: businesses with less than 49 employees, with 49 to 249 employees, and more than 249 employees. Businesses with less than two employees were culled from the sample. Twenty businesses from each tier were randomly selected for an interview. An introductory letter was sent to all 60 businesses with a request to participate in the interviews. Due to an initially low response rate to the requests for interview, more businesses were added to the sample; however, the businesses that were added did not receive an introductory letter. An additional 17 medium-sized and 19 small businesses were contacted. During the initial interviews, Data Center researchers found that some smaller businesses that were listed as having less than 10 employees actually had no employees at all. Thus, businesses with less than 10 employees were removed from the sample. By the end of the interviews, 95 businesses were contacted. A total of 27 interviews were performed from April 2015 to May 2015, but three interviews were removed due to business size and quality of data collected.

Staff spoke to business owners, human resource managers, or individuals employed in a similar role and able to represent their organizations’ personnel policies. During the course of the interviews, respondents described their reactions to the proposed city ordinance discussed earlier.

Respondents also identified potential benefits of the proposed sick leave policy and potential consequences. Detailed information about the respondent’s current sick leave policy was also collected.

Interview Limitations

The overall response rate for the interviews was 28%. Due to the poor initial response rate from businesses that received mailed information prior to being contacted via telephone, an additional 37 businesses were contacted. Additionally, the businesses that participated were predominately those where the owner or human resource manager could be reached initially by phone; less than 10% of businesses that were contacted and left messages responded. Finally, while the interviews conducted provide important information needed to inform public policy decisions, the interviews cannot be construed as representative of businesses in the City of Spokane due to insufficient sample.