



**Administrative Guidelines
for Offices affected by an Ebola Virus Disease
(EVD) Outbreak**

**Framework
for the
Management of staff members
in
United Nations Common System
Headquarters and Field Duty Stations**

**CEB Human Resources Network
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Table of Contents

	Page
I. General	5
Ebola virus disease (EVD).....	5
Applicability	5
Critical functions	5
Closure of offices	6
Information for staff and queries	6
II. Leave and attendance	8
Attendance	8
Compensatory time-off	8
Flexible working arrangements	8
Annual leave	9
Sick leave & inability to perform duties related to EVD	10
Maternity, paternity and adoption leave	10
Special leave without pay	10
III. Travel.....	11
Duty travel	11
Home leave and family visit travel	12
Education grant travel	12
IV. Recruitment and appointments	14
Recruitment and reassignments	14
Extension of Appointments	14
Staff members holding permits/visas	14
V. Salary, benefits and entitlements	16
Salary advances	16
Payment of benefits	16
Danger pay	16
Health insurance	16
Life insurance	17

VI.	Death of a staff member	18
	Death benefit	18
	Payments	19
	After-service health insurance	19
	Life insurance	19
	Appendix D	19
	Pension Fund benefits	19
	Permits/Visas	19
	Education grant	20
	Repatriation grant	20
	Repatriation travel and shipment	20
	Repatriation of remains or local interment	20
VII.	Other	21
	Appeals	21
	Disciplinary cases	21

INTRODUCTION AND EXPLANATORY NOTES

Rationale for the Framework

These internal administrative guidelines applicable to all UN system staff members have been prepared with the view of adopting a common approach with regard to the most important aspects of managing staff members in the event of an outbreak.

It is recognized that not all the provisions of the Guidelines may be applicable to all duty stations, especially where they need to take into account the provisions of national authorities (e.g. with regard to permits and visas). Therefore, organizations at each duty station are encouraged to adapt the provisions to their local requirements as necessary.

It is important to note however that the CEB/HR Network adopted the Framework on the explicit and shared understanding that the same country-specific provisions should be applied by all organizations present at any given duty station. Guidelines and provisions that differ from organization to organization at the same duty station are discouraged as they would undoubtedly lead to difficulties and further disruption at a time of severe crisis.

All UNCT members are required to ensure the implementation of the provisions of this framework.

The Framework is reviewed periodically by the HR Network and amended accordingly. This is the fifth version, hereinafter "V.5.0".

I. General

Ebola Virus Disease (EVD)

1. On 8 August 2014, in accordance with the International Health Regulations (2005), the Director-General of WHO determined, on the advice of an Emergency Committee, that the ongoing public health event regarding EVD in Guinea, Liberia, Nigeria and Sierra Leone, constituted a public health emergency of international concern (see WHO statement). A Public Health Emergency of International Concern (PHEIC) is an extraordinary event determined by the Director-General of WHO which constitutes a public health risk to other States through the international spread of disease and to potentially require a coordinated international response. Following this determination, on the advice of the above Committee, the Director-General issued temporary recommendations to guide States with the support of partners, in the response to the EVD outbreaks. UN System Medical Directors are responsible for communicating any changes in the EVD outbreaks and subsequent coordinated response as they apply to the UN system.¹

Applicability

2. These Administrative Guidelines are intended for executive and administrative personnel of the UN system Organizations worldwide. They are applicable to all staff members, their spouses and recognized dependents.

3. The Guidelines mainly address the issues which are likely to emerge during an EVD outbreak. They will be up-dated as necessary.

Critical functions

4. For purposes of these Guidelines, staff members are grouped into:

- a) **Critical staff.** Staff members who would be required to perform critical functions in the event of a closure of offices for normal operations due to an EVD outbreak, to ensure continuity of work. These staff members may be requested to carry out such critical functions on premises, in an alternate location or from home; *and*
- b) **Non-critical staff.** Staff members who would not be required to work during an office closure due to an EVD outbreak. Staff members who are not identified as critical but volunteer to work from home or another location will still be considered as non-critical.

5. **Criteria for selecting critical functions.** Heads of Departments/Offices are required to identify staff members (principals and alternates) who will be required to perform critical functions in the event of an EVD outbreak. The list of names and respective contact information must be up-to-date at all times.

6. When selecting staff members (principals and alternates) required to carry out critical functions, Heads of Departments/Offices should ensure the following:

- a) Physical security of staff and facilities;
- b) Medical care of staff;

¹ <http://www.who.int/mediacentre/news/statements/2014/ebola-20140808/en/>

- c) Maintenance of telecommunications and information technology services;
- d) Ability to communicate with other Organizations and Governments;
- e) Maintenance of utilities (electricity, water and sanitation); *and*
- f) Ability to make important technical, operational and policy decisions related to critical aspects of the operations and programme continuity² as well as staff welfare.

7. **Critical functions at the duty station.** Heads of Departments/Offices should ensure that designated staff members (principals and alternates) are equipped to assume critical functions and have delegated decision making/signing authority.

8. The number should be kept to an absolute minimum, noting the recommended percentage is ten per cent of the total number of staff members in the duty station.³ Critical staff include the following:

- a) Executive Heads or Heads of Offices;
- b) Local Security Management Team;
- c) Medical staff;
- d) Security staff;
- e) Human Resources staff (including counsellors);
- f) Payroll/Finance;
- g) Information and communications; *and*
- h) Any other staff required to carry out critical functions, if necessary and as determined by Heads of Department/Office.

9. To the extent possible, staff members (principals and alternates) should be designated as critical on a voluntary basis, subject to the authority of the Secretary-General/Executive Head (at headquarters locations) or the Country/Regional Representative (at the field duty stations) to designate staff members who have to report should the number of volunteers prove to be insufficient to guarantee continued operations during a closure of offices.

10. Designated staff members must be notified and fully informed of the implications and the fact that they could be required to remain in quarantine for up to three weeks to limit their possible exposure. Designated staff members may be required to submit to the Medical Service, prior to or upon assuming the critical function, information about their health either through a statement or a form provided for this purpose.

Closure of Offices

11. UN offices may be closed at the instruction of the host government. Alternatively, the Designated Official, guided by WHO and following consultation with the UN Country Team, recommends to the Secretary-General, office closure when deemed necessary. Upon authorization by the Secretary General on the closing of UN offices, the Designated Official will notify the host government and local authorities.

Information for Staff and queries

12. UN system staff members and their families may find the latest information related to EVD at:

² Heads of Department/Offices may refer to the Programme Criticality Framework for guidance on the implementation of programme and business continuity plans.

³ Minimum presence, preferably working from home when internet connectivity is available.

<http://www.who.int/csr/disease/ebola/en/>
<http://un-epst.org/>

13. For further information, staff members at the duty station may contact:

Insert contact details of medical services, executive officers, etc. of all organizations at the duty station

II. Leave and attendance

Attendance

14. **When offices are open.** All staff members are required to report for duty unless and until informed otherwise. Unauthorized absence from office will be dealt with in accordance with rules governing such absence. Heads of Departments/Offices may authorize flexible working arrangements for non-critical staff including the possibility of tele-commuting (working from home or alternate location) to limit the possible exposure to EVD.

15. **When offices are closed.** It may be necessary to close the offices for normal operations. Only staff members (principals and alternates) designated as critical shall have access to the Offices. The decision will be taken by either the host government or the Secretary-General, upon the recommendation of the Designated Official, and broadcasted to all staff members.

16. Staff members, with the exception of those required to carry out critical functions (within premises, in an alternate location or from home), who are instructed not to report for duty, will be considered to be on special leave with full pay (SLWFP). Staff members will not be required to exhaust annual leave before being placed on SLWFP.

Compensatory time-off

17. **When offices are closed.** Locally- and internationally-recruited staff members who are required to carry out critical functions will receive compensatory time-off (CTO) for the time they are requested to report to duty and do so, if:

- a) ***within premises or in an alternate location***, at twice the normal rate;
and
- b) ***from home***, at one and a half the normal rate.

18. Head of Department/Offices will be accountable for ensuring that CTO accrued during the closure period:

- a) is taken during the twelve months following the month in which the offices are reopened; *and*
- b) at least five consecutive CTO days are taken during the first six weeks following the day in which the offices are reopened.

19. Under no circumstances, will compensation accrued during the closure period take the form of additional cash payment.

20. CTO will not be granted if the staff member avails of rest and recuperation (R&R) time off and travel.

Flexible working arrangements

21. **When offices are open.** Taking into consideration the local health advisories and the WHO guidelines, and as far as feasible, flexibility will be exercised to authorize flexible working arrangements.

22. In order to address the needs of the United Nations Organizations in re-tasking their activities in response to the EVD Outbreak, Heads of Departments/Offices may:

- a) temporarily deploy a staff member to a UN office in another location to perform his/her or other duties, or a combination of both. Travel to the location and DSA will be payable;
- b) temporarily allow a staff member to carry out his/her or other duties, or a combination of both, on a telecommuting basis at the place of home leave (HL). (Advance) HL travel will apply and no DSA will be payable. The additional hardship allowance, when authorized by the Chairman of the International Civil Service Commission (ICSC), will be payable to internationally-recruited staff members based on the individual circumstances of the affected staff members, i.e. at the single or dependency rate. Staff members currently administered under the Special Operations Approach will continue to receive the Special Operations Living Allowance (SOLA); or
- c) when a) or b) above is not possible or feasible, allow a staff member to take (Advance) HL travel and place him/her on SLWFP. No DSA will be payable. The additional hardship allowance, when authorized by the Chairman of the ICSC, will be payable to internationally-recruited staff members based on the individual circumstances of the affected staff members, i.e. at the single or dependency rate. Staff members currently administered under the Special Operations Approach will continue to receive the Special Operations Living Allowance (SOLA).

23. When the Head of Department/Office authorizes a), b) or c), the organization will facilitate separate HL travel of staff members and eligible family members, and allow HL to be exercised at an alternate location, if local authorities of the HL country do not authorize entry or medical facilities are not adequate, and subject to the cost duty station-recognized place of HL-duty station.

24. **When offices are closed.** As far as feasible, flexibility will be exercised to authorize flexible working arrangements, including telecommuting, for staff members requested to report for duty to carry out critical functions.

Annual leave

25. **When offices are open.** Taking into consideration the local health advisories and the WHO guidelines, Heads of Departments/Offices may exercise flexibility in authorizing annual leave and advance annual leave to non-critical staff members that request leave to limit their possible exposure to EVD. Staff members (principals and alternates) required to carry out critical functions may be granted CTO or R&R where applicable and feasible.

26. Staff members who travel outside the duty station during annual leave must be aware that, re-entry into the duty station or departure from the countries to which they travel may not be possible. When staff members are unable to return:

- a) if feasible, at the request of the staff member, he/she may be authorized to carry out his/her duties on a telecommuting basis. No DSA will be payable;
- b) if possible, at the request of the staff member, he/she may report to duty at a UN system Office in the same travel destination. No DSA will be payable;

- c) if possible, they may be required to report to duty at a UN system Office in another location. Travel to the location and DSA will be payable; *or*
- d) if neither option a), b) or c) is possible, they may request annual leave, advance annual leave or special leave without pay (SLWOP).

Depending on circumstances, SLWFP might be granted if requested by a staff member for "other important reasons for such period as the Secretary-General may prescribe." For example, the staff member initiated travel before travel restrictions were put in place and has exhausted all annual leave.

27. **When offices are closed.** Staff members who are on annual leave at the time the offices are closed, will be placed on SLWFP as from the day they were due to report for duty.

Sick leave & inability to perform duties related to EVD

28. In cases of EVD affecting a staff member through contact with a suspected or confirmed EVD case, staff/family members must immediately notify their responsible Medical Service. Staff members should not report to duty.

29. **When offices are open.** Staff members who are unable to perform their functions:

- a) by reason of illness, including EVD, will be granted sick leave, or
- b) by reasons of quarantine at the direction of the Medical Service will be granted SLWFP.

30. **When offices are closed.** Staff members who are on sick leave at the time the offices are closed, will be placed on SLWFP as from the day they were expected to report for duty following exhaustion of their approved certified/uncertified sick leave.

Maternity, paternity and adoption leave

31. **When offices are closed.** Staff members who are on maternity, paternity or adoption leave at the time the offices are closed, will be placed on SLWFP as from the day they were due to report for duty.

Special leave without pay

32. **When offices are open.** Flexibility will be exercised in authorizing special leave without pay (SLWOP) to staff members except those (principals and alternates) who could be required to carry out critical functions.

33. **When offices are closed.** Staff members who are on SLWOP at the time the offices are closed, will be placed on SLWFP as from the day they were due to report for duty.

III. Travel

34. The Medical Service Director (local UN Medical Doctor or designate), may require an "exit medical examination" prior to leaving an affected duty station or country.

Duty travel

35. **Planned travel.** The decision as to whether to travel to or from an affected duty station should be made in accordance with the national travel advisory set by the host country and taking into consideration WHO guidelines. This should be in conjunction with the local Senior Crisis Management Structure relevant to the duty station.

36. Planned duty travel that has not been initiated and which is considered non-critical may be deferred. Duty travel should be planned and authorized in accordance with the needs of the Organization as determined by the Head of Department/Office in line with all current security measures in place.

37. **Initiated travel.** In the event that the authorized itinerary has to be changed for reasons related to EVD travel restrictions, the following will apply:

a) **Departure from duty travel destination not possible.** If during the authorized duty travel, local authorities or UN guidelines do not allow departure, DSA will remain payable until departure is authorized and up until the first available flight.

b) **Re-entry into duty station not possible.** If authorities at the duty station or UN guidelines do not allow re-entry, DSA will continue to be payable until re-entry to the duty station is possible and up until the first available flight.

Where operationally and/or medically indicated, the traveller could be travelled to an alternative location. DSA for that location will be payable.

c) **Departure from duty travel destination and re-entry into duty station not possible.** DSA will remain payable until departure and re-entry is authorized by respective authorities.

d) **Staff member falls sick.** If the staff member falls sick, including with EVD, DSA, if applicable, would continue to be payable, however, if hospitalized DSA will be reduced to one third. See above regarding staff member's authorized absence.

e) **Staff member is quarantined.** If the staff member is quarantined, DSA will remain payable. See paragraphs above regarding staff member's authorized absence.

f) **Staff member dies.** In the unfortunate event that a staff member dies while on duty travel, DSA will stop as from the date of death. The UN system office where he/she was working (or the nearest UN/UNDP office) will assume the responsibility for coordinating the actions required and serve as the link between the parent office and the family of the deceased, providing the family assistance throughout the difficult period following the death.

Home leave and family visit travel

38. Flexibility will be exercised to authorize advance and deferred home leave (HL) and family visit (FV), and to allow separate HL travel of staff members and eligible family members, and to exercise HL/FV at an alternate location, if local authorities of the HL country do not authorize entry or medical facilities are not adequate, and subject to the cost duty station-recognized place of HL-duty station. The additional hardship allowance, when authorized by the Chairman of the ICSC, will be payable to internationally-recruited staff members in EVD affected countries when all of their eligible family members have departed from the duty station.

39. Staff members must be aware that respective local authorities or UN/Organization guidelines may at any time prevent either departure from the home leave destination or re-entry to the duty station. In such cases, staff members should take this into consideration when accepting the lump sum option, as in such cases they agree to waive all entitlements relating to HL and FV travel that would otherwise have been payable, i.e. there shall be no reimbursement of lost tickets when the staff member has availed of the lump sum option. Staff members are encouraged to purchase travel insurance when travelling under the lump sum option. When the organization purchases the tickets, then the organization assumes the liability for changes in itinerary due to travel restrictions.

40. **When offices are open.** When staff members are not authorized by the local authorities or UN/Organization Guidelines to depart from the HL/FV destination and they or any of their household members are not sick with suspected EVD:

- a) if feasible, at the request of the staff member, he/she may be authorized to carry out his/her duties on a telecommuting basis. No DSA will be payable;
- b) if possible, at the request of the staff member, he/she may report to duty at a UN system Office in the same HL location. No DSA will be payable.
- c) if possible, they may be required to report to duty at a UN system Office in another location. Travel to the location and DSA will be payable; *or*
- d) if neither option a), b) or c) is possible, they may request annual leave, advance annual leave or special leave without pay (SLWOP).

Depending on circumstances, SLWFP might be granted if requested by a staff member for "other important reasons for such period as the Secretary-General may prescribe." For example, staff member initiated travel before travel restrictions were put in place and has exhausted all annual leave.

41. Staff members who fall sick, including EVD, during HL/FV will be granted certified sick leave upon submission of a medical certificate to the Medical Director or designate.

42. Staff members who are unable to return by reason of EVD affecting a member of his/her household, or because of quarantine affecting the household/area, will be placed on SLWFP, upon evidence for the necessity of this measure, acceptable to the Medical Director or designate.

43. **When offices are closed.** Staff members who are on HL/FV travel at the time the offices are closed, will be placed on SLWFP as from the day they were due to report for duty. No DSA will be payable.

Education grant travel

44. During a recognized EVD outbreak, flexibility will be exercised to authorize advance and defer education grant travel (EGT).

45. Staff members must be aware that respective local authorities may at any time prevent either departure from the EGT destination or re-entry to the duty station. In such cases, staff members should take this into consideration when accepting the lump sum option, as in such cases they agree to waive all entitlements relating to EGT that would otherwise have been payable.

IV. Recruitment and appointments

Recruitment and Reassignments

46. The decision as to whether to initiate recruitment and reassignment of staff should be made in accordance with the national travel advisories set by the host country and taking into consideration WHO guidelines. This should be done in conjunction with the Senior Crisis Management Structure relevant to the duty station.

47. Recruitment and reassignment of staff:

- a) will be carried out in accordance with interests, needs and priorities of the Organization;
- b) initiated in direct support of critical functions and in connection with EVD will be given priority and the process will be expedited to the extent possible; and
- c) will be decided upon on a case-by-case basis by Heads of Departments/Offices and deferred whenever possible, for individuals who are not envisaged to perform critical function or in support of EVD.

Extension of Appointments

48. Every effort should be made to renew staff members' appointments one month in advance. Conversely, staff members should be informed of non-renewal of their appointments at least one month prior to expiry dates when possible.

49. The heightened alert situation shall not be a factor in deciding on renewal and non-extension of appointments, including extension beyond retirement age.

Staff members holding permits/visas

50. A staff member's authorized stay in the duty station normally expires upon separation from service. The same applies to family members and household employees whose permits/visas are derived from the status of the staff member.

51. Most national authorities allow staff members and their families a certain period (e.g. 30 days) after the date of separation in which to leave the country, or adjust their status. If additional time is required, the family members should contact the relevant personnel responsible for permits/visas at the duty station for guidance in requesting extension of the normal grace period.

52. **Repatriation travel and shipment.** If a staff member holds a visa/permit and is not requesting residency status, he/she should be repatriated upon the expiration of his/her contract, and as soon as practicable. If a staff member chooses to remain in the duty station for a longer period, this will not give rise to additional entitlements or further responsibility by the Organization. The two-year time limit for submission of a claim for repatriation grant upon separation will be suspended during any office closure period due to an EVD outbreak.

53. If departure from the duty station is possible, but entry to the repatriation destination is not, a staff member can opt to be repatriated to a third location. In such cases, the cost of repatriation should not exceed the amount normally payable.

54. **Extension of Appointment.** Depending on the circumstances, an appointment of an international staff member holding a permit/visa in the duty station and who is not requesting residency status in the host country, could be extended until departure/entry is possible and up until the first travel opportunity or flight is available to the staff member. Such extension would be solely for administrative reasons, and would not give rise to any further entitlement to salary increment, annual leave, sick leave or home leave, but credit towards repatriation grant may continue to accrue. In the event of death during the period of the extension, the period prior to the staff member's death may be taken into account in the determination of the death benefit, if applicable.

V. Salary, benefits and entitlements

Payroll and Salary advances

55. **When offices are open.** Organizations may authorize salary advances in such amount as the Chief Executive of the Organization may deem appropriate. Salary advances shall be liquidated at a rate as determined by the Comptroller's (payroll) office. As far as feasible, the recovery start date and rate should be communicated to the staff member at the time the advance is individually authorized.

56. **When Offices are closed.** Organizations should consult with the Comptroller's (payroll) office to determine the relevant arrangements.

Payment of benefits

57. **When Offices are closed.** Benefits may be payable only upon submission of the appropriate support documentation. This time limit will be suspended during any office closure period due to an EVD outbreak.

Danger pay

58. Where authorized by the Chairman of the ICSC, staff members performing medical functions in non-protected environments where they are specifically at risk to their life when deployed to deal with public health emergencies as declared by the WHO, as defined in Annex II of the 2011 report of the ICSC (A/66/30), are entitled to danger pay. On an exceptional basis, Danger Pay may be approved for non-medical staff who are involved in the handling of potentially hazardous specimens or work directly with communities in designated isolation zones specified by WHO.

59. **Amounts.** The current rates are:

a) **International Staff members:**

- i) *monthly, US\$1600; and*
- ii) *daily, US\$52.60; and*

b) **Locally-recruited staff member:**

- i) *monthly, **(insert relevant amount)**; and*
- ii) *daily, **(insert relevant amount)**.*

Health insurance

60. Staff members and their family members who are enrolled in the following medical programmes are covered for expenses incurred for qualified medical treatment of EVD according to their insurance plan policies: **(insert relevant insurance programmes)**. Staff members and their family members not enrolled in a medical plan indicated herein should ensure that their insurance plans cover sickness associated with EVD.

61. **When offices are closed.**

- a) **Staff members newly recruited or reassigned and eligible for health insurance:**
- i) *who arrive during closure of offices due to an EVD outbreak:* applications will be accepted within 31 days of the date offices re-open; insurance will be effective from the first day of the qualifying contract; and
 - ii) *who arrive before closure of offices due to an EVD outbreak:* every effort should be made to file applications as soon as possible. Should the offices close due to an EVD outbreak within the 31-day time limit, applications will be accepted within 31 days of the date the offices re-open; insurance will be effective from the first day of the qualifying contract.
- b) **Retiring staff members and eligible for ASHI**
- i) *who separate during closure of offices due to an EVD outbreak:* ASHI applications will be accepted within 31 days of the date the offices re-open; active service coverage will be continued in the interim; and
 - ii) *who separate before closure of offices due to an EVD outbreak:* every effort should be made to file ASHI applications as soon as possible. Should the offices close due to an EVD outbreak within the 31-day time limit, ASHI applications will be accepted within 31 days of the date the offices re-open; active service coverage will be continued in the interim.

Life insurance

62. Staff members who are enrolled in the following life insurance programmes **(insert relevant life insurance programme, if applicable)** are covered for death as a result of EVD.

VI. Death of a Staff Member

63. It cannot be over-emphasized that all staff involved in making the various arrangements must use their utmost discretion, tact and sensitivity, particularly when dealing with the family of the deceased. In case of queries from the family or insurance companies, it is recommended that complete documentation on the procedures followed should be kept in a confidential file.

64. When a staff member, or his/her accompanying spouse or dependant child, dies the Human Resources Office will assume responsibility for coordinating the actions required and serves as the link between the office concerned and the family of the deceased, providing the family assistance throughout the difficult period following the death.

Death Benefit

65. In the case of death **of a staff member**, the date on which entitlement to salary, allowances and benefits shall cease shall be the date of death, unless there is a surviving spouse or dependent child. In this event, the date shall be determined in accordance with the following schedule:

<i>Completed years of service in the Secretariat</i>	<i>Months of salary</i>
3 or less	3
4	4
5	5
6	6
7	7
8	8
9 or more	9

66. The months of salary referenced above may be made in a lump sum as soon as the pay accounts and related matters can be closed. Such payment shall be made only to the surviving spouse and dependent children.

67. For:

- a) **staff in the Professional and higher categories**, the payment shall be calculated on the basis of the staff member's gross salary less staff assessment;
- b) **staff in the Field Service category**, the payment shall be calculated on the basis of the staff member's gross salary, less staff assessment plus language allowance, if any;
- c) **staff in the General Service and related categories**, the payment shall be calculated on the basis of the staff member's gross salary, including: language allowance, if any; and in respect of staff in receipt of non-resident's allowance, such non-resident's allowance, less staff assessment applied to the gross salary alone.

Payments

68. Priority will be given to arrange for the survivors/designated beneficiaries to receive any payment (or an advance) against any salary, allowances and benefits standing to the credit of the staff member as of the date of death.

After-service health insurance

69. **When offices are closed.** Family members who are eligible for ASHI must normally make application for ASHI within 31 days of staff member's death. If

- a) **staff member dies during closure of offices due to an EVD outbreak:** ASHI applications will be accepted within 31 days of the date the offices re-open; active service coverage will be continued in the interim; *and*
- b) **staff member dies before closure of offices due to an EVD outbreak:** every effort should be made to file ASHI applications as soon as possible. Should the offices close due to an EVD outbreak within the 31-day time limit, ASHI applications will be accepted within 31 days of the date the offices re-open; active service coverage will be continued in the interim.

Life insurance

70. **When offices are closed.** There is no prescribed time frame for submitting claims.

Appendix D

71. Compensation will be provided to eligible staff members in the event of death, injury or illness considered to be attributable to the performance of official duties on behalf of the United Nations. All claims for compensation will be subject to the review of the UN Advisory Board on Compensation Claims (ABCC) or (insert other relevant claims authority). The four-month period to file a claim will be suspended during any office closure period.

Pension Fund benefits

72. **When offices are closed.** The UNJSPF has offices in New York and Geneva and would therefore be able to provide services to participants and beneficiaries from both offices. In an extreme situation the UNJSPF would be able to implement its disaster recovery policy for payroll payments to beneficiaries.

Permits and Visas

73. A family member's authorized stay at the duty station normally expires upon staff member's death. The same applies to any household employee whose visa is derived from the status of the staff member.

74. Most national authorities allow staff members and their families a certain period (e.g. 30 days) after the date of separation in which to leave the country, or adjust their status. If additional time is required, the family members should contact the relevant

personnel responsible for permits/visas at the duty station for guidance in requesting extension of the normal grace period.

Education grant

75. When a staff member dies while in service **after** the beginning of the school year, no prorating or disqualification will take place in respect of any element of the education grant (EG) to which the staff member would have been entitled had he/she lived to the end of the school year, including boarding expenses or a flat sum for board and EGT.

76. As a result, no recovery from prorating the amount of the grant based on a period of service shorter than the normal school year will be initiated when processing the separation of the deceased staff member. The EG related forms may be completed by the surviving spouse, the legal representative of the child for whom the EG or EGT is paid, or by the child for whom the claim is requested, if 18 years of age or older. If the school year ends when the final payment has already been processed, settlement will be made as a direct payment to the survivor.

77. **When offices are closed.** The time limit to file EG claims will be suspended during any office closure period due to an EVD outbreak.

Repatriation grant⁴

78. **When offices are closed.** Family members who are eligible for payment of repatriation grant, must normally claim and provide evidence of relocation within two years of the staff member's death. This time limit will be suspended during any office closure period due to an EVD outbreak.

Repatriation travel and shipment⁵

79. Family members who are entitled to repatriation should initiate travel and/or shipment of personal effects as soon as practicable. If a family member chooses to remain at the duty station for a longer period, this will not give rise to additional entitlements or further responsibility by the Organization. The two-year time limit will be suspended during any office closure period due to an EVD outbreak.

Repatriation of remains or local interment

80. Before making any arrangements, it is necessary that the family be consulted whether they wish: local burial; cremation and repatriation; *or* embalming and repatriation. In all instances, the local regulations and laws and international health regulations shall apply while the specific instructions of the family of the deceased should be observed as closely as possible. However, during an EVD outbreak, the repatriation of a deceased staff member (or his/her family member) could be delayed or not authorized.

⁴ International staff members only.

⁵ International staff members only.

VII. Other

Appeals

81. Should the office be closed, consideration shall be given to suspending the statutory time limits for the period of office closure due to an EVD outbreak.

Disciplinary Cases

82. Should the office be closed, consideration shall be given to suspending the statutory time limits for the period of office closure due to an EVD outbreak.