Amended _ 8/27/24

Rockdale County Fire and Rescue Incentive Program

Incentive Pav Plan

The Incentive Pay portion of this plan is intended to compensate full-time employees of Rockdale County Fire Rescue for accomplishments, certifications, and licensing that are related to their job and enhance the service capability of RCFR to the community. There are two (2) categories in which an employee can earn incentive pay:

EMS Certification

Longevity

Each of the categories has its own criteria and thresholds to be eligible for incentive pay compensation. The decision of the validity or acceptance of any submittal item for incentive pay rests with the Chief of the Department with approval from Talent Management. Portions of this program can be amended or deleted at any time at the discretion of the Chief of the Department with the approval of the Rockdale County BOC.

EMS Certification

This is one of the most important categories in the Incentive Pay plan. RCFR holds a First Responder license from the State of Georgia that allows RCFR to respond to medical emergencies. One of the criteria to hold the license is to have a certain percentage of EMTs to be certified at the EMT-Advanced level (A previous EMT-Basic certification).

There would be four (4) incentive annual levels in this portion of the plan for FIRE:

Level 1:	Firefighter-EMT/Recruit	Hourly, Non-suppression Min. Pay
Level 2:	Firefighter I	Hourly, suppression Min. Pay
Level 3:	Firefighter I/II/EMT	(includes + \$1350 incentive pay)
Level 4:	Paramedic	(includes + \$2700 incentive pay)

An employee can only be compensated for a single EMS Level at any one time.

Longevity

The purpose of Longevity Incentive Pay would be to add an additional financial anchor for our employees. The fire service is a paramilitary/ rank-based organization which promotes from within. The on-going working relationships and the level of trust required in this field are paramount to the effective and efficient operation of the organization.

The plan will be to acknowledge longevity annually with possible increases every 5 years. There are nine (9) steps in this portion of the plan. Longevity is computed by using the employee's anniversary date. Listed is the amount to be given annually.

Amended 8/27/24

Level 1:	0-1 year	\$0
Level 2:	1-4 years	\$450
Level 3:	5-9 years	\$900
Level 4:	10-14 years	\$1,350
Level 5:	I 5-19 years	\$1,800
Level 6:	20-24 years	\$2,250
Level 7:	25-29 years	\$2,700
Level 8:	30-34 years	\$3,150
Level 9:	35+ years	\$3,600

Eligibility for longevity will also include the stipulation that an employee must have received Solid Performer (or higher) in their most recent review (annual or mid-year) for the employee to receive Longevity Incentive Pay for that period.

In the instance of an employee who has been rehired by RCFR, Longevity Incentive Pay will be based upon the latest hire date on file. The purpose of rewarding longevity is for continuous service.

Policy Changes

The County reserves the right to delete, modify, amend, or terminate this policy at any time with or without prior notice.

Approved this 21th day of August, 2024

Rockdale County, Georgia Board of Commissioners

Osborn Nesbitt, Sr., Chairman

ATTEST:

Jennifer O. Rutledge, County Clerk/ Executive Director of Government Affairs



Board of Commissioners Agenda Item Transmittal Form Policy Transmittal Form

Type of Request: New and Amended Emplo	County Clerk Use Only Policy #:	
☐ Submission information	\square Information	
Contact Name:	Summary of Reques	st:
Chantall Hunt	This request includes	s the adoption of five (5) new
Department:	employee policies an	d the amendment of six (6) existing
Talent Management	policies.	
☐ Department Director /Elected Official		ting Officer Signature
Signature		
I have reviewed the attached, and it is approved as to substance.	I have reviewed the at	ached, and it is approved for processing.
Signature Mily Rodd Date: 85164	Signature:	Date:
☐ County Attorney Signature	Yell 1000年 100	irector of Government nty Clerk Signature
I have reviewed the attached, and it is approved as to form.	I have reviewed the at	tached, and it is approved for processing.
Signature: Date:	Signature:	Date:

Title	Type	Policy Number
Rehabilitation Policy	New	
Severance Pay Policy	New	
Travel Per Diem & Mileage Policy	New	The second of th
Civility & Anti-Bullying Policy	New	
Bilingual Incentive Program Policy	New	
Fire and Rescue Incentive Pay Policy	Amendment to Existing	2017:4-33 (Amended 10/10/2017)
Disciplinary Procedures Policy	Amendment to Existing	2006-4-29 (Amended 12/8/2020)
Tuition Reimbursement Policy	Amendment to Existing	2006-4-2 (Amended 12/13/2022)
Drug & Alcohol Use Policy	Amendment to Existing	2018-4-22
Sick Leave Policy	Amendment to Existing	2022-4-40
Non-Discrimination & Anti-Harassment Policy	Amendment to Existing	.2006-14-7 (Amended 12/10/2019)