

Forest Lake Hockey Association Nursing Mothers, Lactating Employees, and Pregnancy Accommodations Policy

Forest Lake Hockey Association (“FLHA”) recognizes and supports the needs and legal rights of nursing mothers, lactating employees, and pregnant employees requiring accommodations.

Acceptable Uses

Pregnant employees have the right to request and receive reasonable accommodations, which may include, but are not limited to:

- More frequent or longer breaks
- Seating
- Limits to heavy lifting
- Temporary transfer to another position
- Temporary leaves of absence
- Modification of work schedule or tasks

Lactating employees have the right to:

- Reasonable paid break times to express milk at work unless they are expressing milk during a break that is not usually paid, such as a meal break
- Receive break times to express milk even if the break time is disruptive to employer operations
- A clean, private, and secure room, that is not a bathroom, which is located near the work area, and includes access to an electrical outlet to express milk

Notification and Documentation

A. Employee Responsibilities

Employees who want to request a pregnancy or lactation accommodation should submit the request in writing, via email, to their supervisor with as much advance notice as possible. If the request is immediate, please indicate that in your request.

B. Supervisor Responsibilities

Supervisors should respond to the employee’s request in writing, via email, and print a copy of the request and response to include in the employee’s file.

- When adjustments to the employee’s daily work schedule or environment have been requested, include a description of the accommodation(s) made, and their effective date.
- If a requested accommodation cannot be granted:
 - Verify with the Board President before responding.
 - Include that the accommodation request will not be granted, along with the reason, in your response and copy the Board President.
- When a lactation room has been requested, include the specific location and agreed-upon lactation times in the response.
- Ensure that the room is:
 - Clean, private, and secure
 - Is not a bathroom
 - Is located near the work area
 - Includes access to an electrical outlet

Employees have the right to express milk regardless of a child’s age, and to be granted paid break times to express milk regardless of whether the break time would unduly disrupt the employer’s operations. In addition, employees cannot be required to take a leave or accept an accommodation, and an employee’s compensation shall not be reduced for time used for the purpose of expressing milk.

Employers must maintain benefits coverage under any group insurance policy, group subscriber contract, or health care plan for employees and their dependents during any leaves of absence, provided the employee continues to pay their portion of the cost.

Anti-Retaliation, Right to File Complaint

FLHA has a strict policy against retaliation for requesting pregnancy, nursing, or lactation accommodations, and employees have the right to file a complaint with the Minnesota Department of Labor and Industry, and/or bring a civil action if they believe they have been unfairly denied or retaliated against for requesting pregnancy, nursing, or lactation accommodations.

For More Information

Contact the Minnesota Department of Labor and Industry’s Labor Standards Division at (651) 284-5075 or dli.laborstandards@state.mn.us, or visit the department’s new parents webpage at <https://dli.mn.gov/newparents>.

[SIGNATURE PAGE IMMEDIATELY FOLLOWS]

Acknowledgment

My signature below acknowledges that I have received a copy of Forest Lake Hockey Association's Nursing Mothers, Lactating Employees, and Pregnancy Accommodations Policy. I agree to read, understand, and adhere to this policy and acknowledge that FLHA may modify or terminate this Nursing Mothers, Lactating Employees, and Pregnancy Accommodations Policy at any time for any reason in its sole discretion. I also understand that if I have questions regarding the contents of this policy, I should ask my supervisor, the Gambling Manager, or the Board President for clarification.

Signature: _____

Printed Name: _____

Date: _____