
MARKLUND
HUMAN RESOURCES POLICY AND PROCEDURE

POLICY NO: 3.6

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SUBJECT: EMPLOYEE GRIEVANCE

DEPARTMENTS AFFECTED: All

APPROVED BY:

ISSUE DATE: 6-14-93 REVISED: 4-16-96, 6-26-98, 1-18-02, 08-07-08

EFFECTIVE DATE: 7-15-93

PURPOSE: To provide a formal method for resolving employee grievances in an impartial and timely manner.

POLICY: The grievance procedure is designed to allow employees full and impartial hearing of their complaints by a third party when such grievances are not resolved in an informal manner. The grievance procedure is available to all employees and may be used without fear of reprisal. Normally, the grievance procedure is not available to an employee after their termination. Before an employee is terminated, supervisors, department heads and Human Resources have already reviewed and investigated the circumstances prior to the actual termination. The following guidelines will be followed in the use of the grievance procedure. *If the following steps are not followed this may jeopardize the quick resolution of the employee grievance. Employees may contact the Human Resources Department for clarification of this policy before proceeding with the grievance.*

1. The procedure is intended for the use of individual employees and is not to be used as communication mechanism by groups of employees.
2. The grievance procedure is a non-legal process and, as such, participation will be limited to only those involved in the conflict. Although the employee presenting a grievance is allowed to have a fellow employee in attendance, non-employees will not be permitted.

PROCEDURE: The grievance procedure can be a *three*-step process designed to allow a full and fair hearing, thorough investigation, and to provide timely responses to all parties involved. Every attempt is made to resolve the grievance through the employee's normal chain of command.

Step 1: The grievance or complaint should be brought to the attention of the immediate supervisor within five (5) working days of the event giving rise to the grievance or complaint on the form provided. The supervisor will respond within five (5) working days of receiving the grievance or complaint, and will use the supervisor form to record the results of the meeting.

Step 2: If the grievance or complaint is not resolved to the employee's satisfaction in step 1, or if the grievance involves the employee's supervisor, it may be discussed with the department head within five (5) working days following the incident or the receipt of the response in Step 1. The department head will respond within five (5) working days. The department head will record the results of this meeting on the Department Head/Director form. If the department head is *a member of management*, the employee should report to the Human Resources Director first. Every effort will be made to resolve the issue the employee has brought forward.

EMPLOYEE STATEMENT OF GRIEVANCE

EMPLOYEE'S NAME:	DATE OF THIS REPORT:
DATE OF INCIDENT/SITUATION THAT PROMPTED THIS GRIEVANCE:	

Describe in detail the events that lead to your filing of this grievance. (Be specific with dates, times, and names of others involved.)

Please follow the steps listed below. This process will help to insure reaching a satisfactory resolution to the problem.

- 1) Set aside a time with your immediate supervisor to discuss the problem.
- 2) If you cannot reach an agreeable answer, you should make an appointment with the Department Head/Director within five days of your meeting with your supervisor.

Date and time of appointment:

- 3) Hopefully, at this point the problem will be resolved. If not, please contact the Human Resources Director within five days of your meeting the Department Head/Director and set up a time to discuss the problem.

Date and time of appointment:

- 4) If the problem is still not resolved, you are encouraged to contact the building Administrator within five days to set up an appointment. After the Administrator has reviewed the problems and spoken to all persons involved, a decision will be rendered in writing to everyone. This decision is final.

If you have any questions about any part of this form, please contact the Human Resources Director.

SUPERVISOR STATEMENT

SUPERVISOR'S NAME:	DATE OF THIS REPORT:
EMPLOYEE'S NAME:	

In the space below, please state what steps you and the employee discussed to resolve the grievance.

Has the employee agreed with this decision?

Has the employee indicated that they will be taking their grievance to the next step?

Please retain this form until it is requested.

DEPARTMENT HEAD/DIRECTOR STATEMENT

DEPT. HEAD/DIRECTOR'S NAME:	DATE OF THIS REPORT:
EMPLOYEE'S NAME:	

In the space below, please state what steps you and the employee discussed to resolve the grievance.

What barriers prevented the employee from resolving issues with supervisor?

Has the employee agreed with this decision?

Has the employee indicated that they will be taking their grievance to the next step?

Please retain this form until it is requested.

HR DIRECTOR STATEMENT

HUMAN RESOURCES DIRECTOR'S NAME:	DATE OF THIS REPORT:
EMPLOYEE'S NAME:	

In the space below, please state what steps you and the employee discussed to resolve the grievance.

Has the employee agreed with this decision?

Has the employee indicated that they will be taking their grievance to the next step?

Please retain this form until it is requested.