

DEPARTMENT OF PUBLIC WORKS MANAGEMENT MANUAL

**Personnel
Directive**

Subject: GRIEVANCE PROCEDURES

ADOPTED BY THE BOARD OF PUBLIC WORKS, CITY OF LOS ANGELES

June 20, 2007

PERSONNEL DIRECTIVE NO. 34

BACKGROUND

On July 1, 1974, the first Memoranda of Understanding (MOUs) were signed by representatives of the City of Los Angeles and recognized employee organizations representing various employee representation units. All the Memoranda of Understanding contain provisions for grievance procedures and grievance representation. All grievances filed within the time limits and on the proper form (Form General 162) must be accepted by the supervisor. Management is obligated to respond to a grievance even though the response may be that the complaint does not constitute a grievance. The merits or lack of merits of the grievance should be addressed in the response (Form General 163). For advice on the proper manner of processing grievances for both Represented and Non-Represented employees, Supervisors should contact their Bureau personnel section or the Employee Relations Division, Office of Management-Employee Services (OMES) at the earliest possible point in the grievance process.

PROCEDURES

I. REPRESENTED EMPLOYEES

The grievance procedures for represented employees of the Department of Public Works are contained in each Unit's Memorandum of Understanding (MOU). Procedures may vary slightly depending on the specific MOU involved.

Each MOU clearly delineates the grievance procedure including the time limits involved for each step; type of representation permitted and when City time may be used. Changes to this procedure occur through the bargaining process. Supervisors should have a complete set of MOUs pertaining to their employees and should ensure they are current. Consequently, this Directive will not describe the grievance procedures for represented employees.

II. NON-REPRESENTED EMPLOYEES

The following grievance procedure is intended for use by all employees of the Department of Public Works who are not represented by recognized employee organizations having a Memorandum of Understanding with the City of Los Angeles.

A. Definition

A grievance is defined as any dispute concerning the interpretation or application of a written Memorandum of Understanding or of Departmental rules and regulations governing personnel practices or working conditions. An impasse in meeting and conferring upon the terms of a proposed memorandum of understanding is not a grievance.

B. Responsibilities and Rights

1. Nothing in this grievance procedure shall be construed to apply to matters for which an administrative remedy is provided before the Civil Service Commission. Where a matter within the scope of this grievance procedure is alleged to be both a grievance and an unfair labor practice under the jurisdiction of the Employee Relations Board, the employee may elect to pursue the matter under either the grievance procedure herein provided, or by action before the Employee Relations Board. The employee's election of either procedure shall constitute a binding election of the remedy chosen and a waiver of the alternative remedy.
2. No grievant shall lose his/her right to process his/her grievance because of Management-imposed limitations in scheduling meetings.
3. The grievant has the responsibility to discuss his/her grievance informally with his immediate supervisor. The immediate supervisor will, upon request of a grievant, discuss the grievance with him/her at a mutually satisfactory time. The grievant may be represented by a representative of his/her choice in the informal discussion with his/her immediate supervisor, and in all formal review levels.
4. The time limits between steps of this grievance procedure may be extended by mutual agreement, or by mutual agreement, the grievant and Management may waive one or more levels of review from this grievance procedure. Please contact OMES to discuss this option.
5. The grievant and his/her representative may have a reasonable amount of paid time off for presenting grievances. This does not include investigation, preparation or any other preliminary activity. However, the representative will receive paid time off only if he/she is employed by the Department of Public Works and within a reasonable distance from the grievant's work location. City time is limited to the actual representation of employees and does not include time for investigation, preparation or any other preliminary activity.

C. The grievance procedure for non-represented employees shall be as follows:

1. Step 1 - The grievant shall discuss his/her grievance with his/her immediate supervisor on an informal basis in an effort to resolve the grievance. If it is not presented to the immediate supervisor within ten (10) calendar days following the day the grievable incident occurred, it shall be considered waived. The immediate supervisor shall consult with OMES and then respond by memorandum within five (5) working days following his/her meeting with the grievant.

2. Step 2 - If the grievance is not settled at Step 1, the grievant may within seven (7) calendar days of his/her receipt of the memorandum reduce the grievance to writing (using a Grievance Initiation, Form General #162) and submit it to his/her immediate supervisor.

A designated management representative at a higher level than step 1, after meeting with the grievant, shall render to the grievant and his/her representative, if any, a written response (using a Grievance Response, Form General #163) within fifteen (15) calendar days of the receipt of the Grievance initiation Form.

3. Step 3 - If the grievance is not settled at Step 2, the grievant may within (7) calendar days of his/her receipt of the written grievance response file a written appeal (using a Grievance Appeal Form General #164) with the appropriate Division Head through his/her immediate supervisor.

A management designee at a higher level than in Step 2, after meeting with the grievant, shall render to the grievant and his/her representative, if any, a written response (Form 163) within fifteen (15) calendar days of receipt of the Grievance Appeal Form.

4. Step 4 – If the grievance is not settled at Step 3, the grievant must serve written notice of the grievance, within seven calendar days from receipt of the response at the previous level (second level), on the Bureau Director or the grievant's immediate supervisor. The grievance is heard by the Bureau Director or his/her designee. The written decision must be issued within 120 calendar days from the date of the meeting with the Bureau Director or designee.

The Bureau Director or designee serves as the hearing officer. OMES staff assists the hearing officer in conducting the meeting and preparing the response. Both parties to the dispute normally appear at the hearing with Bureau management represented by the person who conducted the second level grievance meeting.

OMES shall mail to the grievant and his/her representative, if any, a copy of the Hearing Officer's report after it has been approved by the Bureau Director. OMES will also complete a grievance Disposition Form #165 to close the file.

The decision rendered at Step 4 shall be final and binding. Non-represented employees cannot appeal their grievance any further than this level. Arbitration is not a part of the NON - REPRESENTED GRIEVANCE PROCESS.

The grievance forms are as follows:

Grievance Initiation: Form General 162

<http://cityweb.ci.la.ca.us/repository/forms/up/id14.xfd>

Grievance Response: Form General 163

<http://cityweb.ci.la.ca.us/repository/forms/up/id15.xfd>

Grievance Appeal: Form General 164

http://www2.san.ci.la.ca.us/forms/grievance_appeal.pdf

Grievance Disposition: Form General 165 (***not yet posted on the internet***)

Unless mutually extended, grievances not appealed within the prescribed time limits shall be considered waived, and grievances not answered within the prescribed time limits may be appealed to the next step.

GRIEVANCE INITIATION

File No.	_____
Association/Union	_____
Unit	_____

For management use only

INSTRUCTIONS

Complete form and distribute in accordance with prescribed departmental procedures.

Grievant's Name (Please Print)		Class Title	
Department/Bureau and Division		Section	Business Phone
Has this grievance been discussed with your Immediate Supervisor?		Date of discussion	
Name of Immediate Supervisor		Title	

What is the action or situation about which you have a grievance? (Be specific as to names, dates and locations.)

What do you think should be done about it?

What was Supervisor's response?

What article of applicable Memorandum of Understanding (MOU) and/or Departmental Work Rules do you think have been violated?

Title of MOU	Departmental Work Rule	Date of Grievable Incident
--------------	------------------------	----------------------------

What other person, besides yourself, do you want notified of any hearings held or actions taken on this grievance?

Name _____ Mailing Address _____

His/Her role in grievance _____

Grievant's Signature	Date
----------------------	------

Received by: _____

Immediate Supervisor's Signature _____

DATE _____

GRIEVANCE RESPONSE

For management use only

File No. _____
Association/Union _____
Unit _____

INSTRUCTIONS

Complete form and distribute in accordance with prescribed departmental procedures.

Grievant's Name (Please Print)		Class Title	Filing Date of Grievance Initiation		
Dept./Bureau and Division	Section	Level of Review (Check One)			
		Informal Discussion <input type="checkbox"/>	1st Level <input type="checkbox"/>	2nd Level <input type="checkbox"/>	3rd Level <input type="checkbox"/>

What are the issues involved in this grievance?

What is your decision?

What is the basis for your decision?

Names of Supervisors and other persons with whom this grievance was discussed:

Reviewer's Signature	Title	Date
Reviewer's Name (Please Print)	Dept./Bureau	Division

File No. _____

Association/Union _____

Unit _____

GRIEVANCE APPEAL

INSTRUCTIONS

Complete form and distribute in accordance with prescribed departmental procedures.

Grievant's Name (Please Print)	Class Title	Filing Date of Grievance Initiation
Dept./Bureau	Division	Section

1. I wish to appeal the Grievance Response signed by: (See Grievance Response)

Name _____ Title _____ Date _____

1A. Level to which grievance is being appealed: **Check One**

2nd Level

3rd Level

Authorized Employee
Organization Representative
(If arbitration requested)

Signature _____

Arbitration

Title _____

Civil
Service
Commission

Date _____

Reason for Appeal

Grievant's Signature	Date
----------------------	------

Received by Immediate Supervisor _____
(Signature)

Date _____