

GRIEVANCE FACT SHEET (Article 9)

The shop steward and the representative of the Employer shall fill out a "shared fact sheet" listing an agreed statement of facts. The "shared fact sheet" is on a "without prejudice" basis and shall not be referred to by either party in any third party proceedings.

PLEASE PRINT

Local _____ Grievance No. _____

Agency Division: _____

Employer/Agency _____

Union _____

Aboriginal Services

Community Living Services

General Services

1. GRIEVOR

Name _____ Program/Site _____

Job/Position _____ Wage Rate _____

Seniority _____

Present position from (date) _____

Status Full-time Part-time Casual

SUPERVISOR OR OTHER MANAGEMENT INVOLVED IN THE GRIEVANCE

Name _____

Program/Site _____ Job Title _____

2. WHAT IS GRIEVANCE ABOUT?

Contract Violation Safety Regulations Discipline Past Practice

Human Rights Local Issue MOA Other

(The above are examples and are not meant to be an exhaustive list)

ISSUE:

3. DOES IT AFFECT A GROUP OF EMPLOYEES? YES NO UNSURE

WHO? (LIST THOSE AFFECTED)

4. IS THIS AN ISSUE THAT COULD HAVE SECTOR WIDE IMPLICATIONS?

YES NO UNSURE

COMMENTS:

5. GRIEVANCE DETAILS:

Grievance steps (When did the meetings take place? Who was there?) Step 1
Step 2

6. DATE AND TIME GRIEVANCE BEGAN, HOW OFTEN, AND HOW LONG:

11. ANY ADDITIONAL AGREED TO FACTS (review checklist):

12. SUPPORTING DOCUMENTS (REVIEW CHECK LIST) SENIORITY LIST, WAGE SCHEDULE, PERSONNEL FILE DOCUMENTATION, SCHEDULES, EMPLOYER POLICY, JOB POSTING, ETC.:

DATE _____

SIGNATURE _____
STEWARD OR COMMITTEE MEMBER

SIGNATURE _____
EMPLOYER REPRESENTATIVE

***REVIEW CHECKLIST TO ENSURE ALL RELEVANT INFORMATION AND DOCUMENTS ARE ENCLOSED**

Checklist for Grievance Investigation

Have these points been covered and entered on the fact sheet?

DISCHARGE AND PENALTIES

1. Discipline/discharge — type and reason(s)
2. Complete statement of events leading to discipline
3. Date and time (important to document)
4. Supervisor's name
5. Name, address, phone and statement of witness (if any)
6. Employee's record
7. Print or diagram of area (if applicable)
8. All correspondence concerning grievance
9. Articles violated

JOB POSTING

1. Grievor's classification and seniority
2. Grievor's previous classifications
3. What grievor was temporarily promoted to
4. Date of promotions (if any)
5. Pay stubs if applicable
6. Grievor's experience in vacancy requested
7. Name and seniority of employee awarded job
8. Posting and grievor's application
9. Articles violated
10. Job description and benchmark
11. Interview Scores

JOB POSTINGS (Improper or Non-posting)

1. Classification of vacancy
2. Area vacancy existed
3. Name of employee who held vacant position.
4. Employee's name promoted to fill vacancy
5. Start date/end date of vacancy
6. Copy of request that prompted vacancy

IMPROPER PAY (Work Assignment)

1. Grievor's regular posted classification
2. Grievor's regular work assignment
3. Grievor's assignment on day in question
4. Name of employees who worked in grievor's place (if any)
5. Date of grievor's last posting
6. Safety involved (if any)
7. Rate of pay applicable to assignment
8. Exact work performed by grievor and instructions from supervisor
9. Articles violated

OVERTIME

1. Grievor's classification
2. Shift or work group
3. Date and shift overtime was scheduled
4. Classification scheduled for overtime
5. Employee's name/classification who worked
6. Record of overtime from supervisor's book
7. The actual work that was performed
8. Articles violated
9. Copy of schedule

STATUTORY HOLIDAY

1. Same as overtime
2. Seniority of grievor
3. Seniority of employees who did work

VACATIONS

1. Seniority
2. Time requested
3. Time allotted
4. Number of employees in work group
5. Article violated

BARGAINING UNIT WORK

1. Name of personnel doing the work
2. Type of work performed
3. Amount of time worked
4. Area where work done
5. Grievor's classification
6. Availability of grievor

LEAVE OF ABSENCE

1. Type of leave requested
2. Date of request, date of denial
3. Reason for request/denial
4. Employer's policy regarding this type of leave
5. Past practice in similar cases
6. Name of supervisor
7. Details of request/denial made verbally (if not in writing)
8. Articles violated
9. All correspondence concerning grievance

CASUAL SENIORITY

1. Articles of collective agreement that apply
2. All correspondence regarding grievance
3. Details of vacancy: dates, job position, work location
4. Name and position of employee whose job became vacant
5. Name and seniority date of person who was awarded the position
6. Date employer became aware of vacancy
7. Employer's explanation of why grievor was not awarded the position
8. Copy of the casual registry for the department involved
9. Copy of the telephone log
10. Date and time call made to grievor, name and position of person who made call

SICK LEAVE

1. Date(s) requested
2. What reasons did employee give?
3. What was the employer's response?
4. Was a medical note required?
5. Was it provided? (attach copy)
6. Why was the note not acceptable?
7. Does the employer have sick leave policy?
8. Was the grievor aware of the policy? If not, why?
9. Does the grievor have accumulated unused sick leave? How much?
10. Is the employer relying on the grievor's previous sick leave record? Why?

GENERAL

1. It is important that the details/facts of the grievance be recorded for future reference.
2. Don't trust your memory, facts get lost with time.
3. Obtain copies of all the documents, e.g. postings, policies, letters of discipline, schedules, logs etc.
4. Fill out all areas as completely as possible.