

Grievance Process

THIS POLICY

Policy Number: 503

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Policy:

Wesley Woods Senior Living, Inc., provides a grievance procedure so employees may present and resolve differences or problems as they relate to working conditions, co-workers, supervision, or other work-related topics. Any employee may call on Human Resources, a supervisor, manager or a peer employee for assistance in any step of the grievance process. There will not be retaliatory action taken against an employee for filing a grievance.

Procedure:

Employees should follow this procedure to register a grievance:

Step 1:

1. Employees wishing to register a grievance must contact their immediate supervisor within 7 calendar days of the occurrence or within 7 calendar days of obtaining knowledge of a problem.
2. If the employee cannot resolve the problem with the supervisor, a Grievance Form must be obtained from Human Resources, completed and submitted to the Department Director, Administrator / Executive Director or next level of management.
3. A copy of the Grievance form will be forwarded to Human Resources.

Step 2:

1. The department director, Administrator/Executive Director or next level of management, the supervisor and the employee will meet to discuss the issue and pursue a resolution within 15 calendar days of receipt of the grievance.
2. The employee will receive a written response from the appropriate manager within 15 calendar days of the meeting or conclusion of the review of the issue. A copy of the response will be sent to Human Resources
3. If the employee is not satisfied with the solution presented by the manager, this step is repeated until it is presented to the Administrator/Executive Director and/or the grievance may be appealed to the COO, if appropriate. The final appeal must be submitted in writing within 7 calendar days to the COO with a copy to Human Resources.

Step 3:

1. After all levels of management have reviewed the grievance, the grievance is presented to the COO who will chair an advisory grievance committee composed of 2 administrative level employees from an area not involved in the grievance. The committee will request that persons who have knowledge of or are involved in the grievance be available to present the facts at the committee meeting, designated at a specific time. Human Resources will facilitate the logistics of the advisory grievance committee.
2. A representative from Human Resources will be present at the meeting.
3. A written decision will be rendered by the COO within 14 calendar days of the last meeting of the committee. Copies will be sent to the parties involved in the meeting.
4. The decision of the COO will be final and binding.

Note: In cases where the employee is uncomfortable discussing a grievance with the immediate supervisor/manager, Department Director, Administrator/Executive Director, the employee may discuss the grievance with a representative from Human Resources.

Time Extensions:

The time limits at any step of the grievance procedure may be extended by mutual consent of the persons involved. An extension agreement must be written and signed by all parties.

Unless an extension agreement has been granted, any grievance not appealed within 7 calendar days of a decision at Step 1 of the grievance procedure will be considered settled on the basis of the last Wesley Woods Senior Living, Inc. decision.

Exclusions:

This policy does not apply to the following:

- a. Temporary employees or employees in the provisional period.
- b. Non-selection for promotion when allegation is based on qualifications.
- c. Administrative level employees
- d. Employees who are not in good standing or under investigation for serious infractions of the Standards of Conduct.

Approved By: Kenneth Weber, President/CEO, Wesley Woods Inc.

Margaret Bloomquist, Associate Administrator, Wesley Woods Human Resources

Last Date Reviewed: 09/01/07 Revised: 05/20/24 Adair Maller, Director Human Resources

WESLEY WOODS SENIOR LIVING, INC
EMPLOYEE GRIEVANCE FORM

Employee Name (Please print)

Position Title

Email Address

Supervisor's Name

Department/Section

Employee Phone Number

What are your normal work hours? _____

Date of incident: _____

Describe the incident/issue: (Use the back of this form or attach additional pages as needed.)

What do you want done to correct the situation?

Employee's Signature

Date Filed

Step 1: Department Supervisor

Date

Step 2: Department Director/Manager

Date

Step 3: Administrator/Executive Director

Date

Final Step: Chief Operating Officer

Date

Please refer to Wesley Woods Human Resources Policies and Procedures under Grievance Process #503 to review the Grievance Procedure. Failure to follow steps in a timely manner will void your grievance.