

## WORKPLACE CONCERN RESOLUTION PROCESS

The information contained in this guideline is the process typically recommended by Human Resource Services (HRS).

Neither these guidelines nor any University policies, procedures, or practices shall be construed as an express or implied contract of employment or a promise of continued employment. None of these guidelines are intended, by reason of their publication, to confer any rights or privileges upon you or to entitle you to be or to remain employed. The information appearing in these guidelines is not binding on WSU and is subject to change at the discretion of WSU.

The guideline contains a compilation of current practices relating to how to proceed, these may evolve over time as the institution and its internal and external environments change. For these reasons, the University reserves the right to revise these guidelines or any of its policies or benefits or to institute new guidelines, policies and benefits provided these changes are not inconsistent with state and federal law, or to act apart from these guidelines at any time. Any such modification applies upon adoption by the University, regardless of previous provisions that may have been in effect. The most current version of this guideline is available on the HRS web site.

The laws of the state of Washington and appropriate Washington Administrative Code provisions also apply to all employees, as does the University's Business Policies and Procedures Manual. All University guidelines and policies are subject to federal and state laws, as now existing or as hereafter amended; where there is deemed to be a conflict, the provisions of law apply.

### PURPOSE

To provide eligible employees with a responsive process for obtaining a review and resolution of their workplace concerns. Please note that this process does not cover concerns which are already provided for by other complaint processes, specifically: Sexual Harassment (CHR); Discrimination (CHR); OSHA violations (immediate supervisor); and Workplace Violence (HRS Employee Relations).

### QUESTIONS/CONCERNS

Employees or supervisors with questions or concerns about this process should contact Human Resource Services (HRS) at (509) 335-4521 or [hrs@wsu.edu](mailto:hrs@wsu.edu).

Employees of Branch Campuses should contact their local Human Resource Service office

- Spokane (509) 358-7553
- Tri-Cities (509) 372-7302
- Vancouver (360) 546-9595

### Assistance is also available from the following resources

- Office of Civil Rights Compliance and Investigation (CRCI) 335-8288
- WSU Ombudsman (509) 335-1195; and
- Employee Assistance Program (EAP) (509) 335-5759  
(for employees outside the Pullman area, the statewide EAP is available)

## ELIGIBILITY

This process is an option available to individuals currently employed full-time or part-time by Washington State University (WSU) within the following job types:

- Civil Service Classified Staff employees who have completed their initial probationary period. Individuals who have not completed their probationary period may use informal discussion and Step 1 of the process;
- Administrative Professional employees; and
- Non-student hourly employees (informal discussion and Step 1 only).

This process is ***not*** available to individuals within the following job types:

- Faculty members – covered by the provisions of the WSU Faculty Manual.
- Bargaining Unit Members - All employees whose *positions* are covered by a collective bargaining agreement (CBA), including probationary employees, must use the processes as specified in their particular CBA.
- Graduate Students – covered by graduate student policies as administered by the Office of the Dean of the Graduate School.
- Undergraduate Student Workers

*Questions regarding eligibility or appropriateness of this process should be directed to HRS.*

## RETALIATION PROHIBITED

It is a violation of university policy to retaliate against individuals who bring forth concerns or who initiate any action in this process. Individuals engaging in retaliatory conduct may be subject to corrective or disciplinary action up to and potentially including dismissal.

## DEFINITIONS

- **WORKPLACE CONCERN:** A situation that an eligible employee believes negatively affects his or her workplace environment.
- **APPOINTING AUTHORITY:** An employee of WSU who has been designated by the President to exercise responsibility for hiring and other employment decisions including dismissal of staff in a particular department, college, or division. A list of approved Appointing Authorities may be obtained by contacting Human Resource Services at (509) 335-4521 or by viewing the list on-line at [Appointing Authority List](#).
- **DAY:** Calendar days, excluding any day observed as a WSU holiday.
- **TIME LIMITS:** The Workplace Concern filing form must be submitted (Step 1 of this process) within thirty (30) days of the time the employee becomes aware, or reasonably should have become aware, of the event that precipitated their concern.

Extensions of time limits beyond those indicated in the steps of this resolution process may be secured by mutual written agreement of the parties involved. Failure by the employee to comply with time limitations shall constitute waiver of the concern. Failure by representatives of the University to comply with the time limitations shall automatically move the concern to the next step in the process.

- COUNTING: Counting begins with the day following the event. Filing must occur on or before "day 30."
- DESIGNEE: Named by the appropriate Appointing Authority to represent the Appointing Authority in this process.
- SUPERVISOR: An employee assigned responsibility by WSU to participate in the following functions with respect to their subordinate employees: (1) selection of staff, (2) training and development, (3) planning and assignment of work, (4) evaluation of performance, and (5) corrective action. Generally this is the individual assigned to, and responsible for, signing the employees' annual review as the initial rater.

## OVERVIEW

When an employee chooses to use the Workplace Concern Resolution Process, he/she must tell his/her immediate supervisor that he/she expects the concern to be dealt with according to this process.

All concerns addressed under this process must:

- a. Be submitted in writing using the attached form.
- b. Identify the specific concern.
- c. Identify steps already taken to remedy the concern.
- d. Identify other individuals who have knowledge of the concern.
- e. State the desired resolution.

**WSU strongly encourages discussions between supervisors and employees regarding workplace concerns.**

The procedures detailed below include steps designed to facilitate resolutions at the closest supervisory level.

## INITIAL INFORMAL DISCUSSION

- a. The employee shall, whenever possible, communicate (personal discussion, email, etc.) the workplace concern to the employee's immediate supervisor. This communication must occur sufficiently less than thirty (30) days after the occurrence of the event so the employee has time to proceed to Step 1 of the formal process if necessary.
- b. If the concern is the responsibility of a supervisor other than the employee's immediate supervisor, the employee will, whenever possible, communicate the matter to the responsible supervisor. The employee must also make his/her immediate supervisor aware of the circumstances.
- c. Reasonable efforts shall be made by all parties to resolve the concern with informal discussion. If the matter is not resolved, the employee may proceed to Step 1 of the formal resolution process.

## THREE STEP FORMAL RESOLUTION PROCESS

**Step 1**

- a. The employee completes the Workplace Concern Filing Form and submits the form to his/her immediate supervisor and sends a copy to HRS Employee Relations.
- b. The supervisor shall meet with the employee within ten (10) days of receipt of the written concern.
- c. The supervisor shall issue a written decision to the employee within ten (10) days of the meeting. The supervisor shall provide a copy of their written decision with a copy of the employee's form to HRS Employee Relations.
- d. If the supervisor's decision does not resolve the employee's concern, the employee has ten (10) days from the date of receipt of the supervisor's decision to forward the concern, the supervisor's written decision, and the written reasons requesting reconsideration to the Appointing Authority or designee who is in the employee's chain of command.
- e. In the event the Step 1 supervisor is the Appointing Authority, the concern shall proceed to step 3.

**Step 2**

- a. The Appointing Authority or designee in the employee's chain of command shall meet with the employee within ten (10) days of receipt of the forwarded concern as outlined in Step 1-d.
- b. A written decision will be provided to the employee within ten (10) days of the meeting. The Appointing Authority or designee shall provide a copy of the written decision to HRS Employee Relations.
- c. If the concern is not resolved, the employee has ten (10) days from date of receipt of the Appointing Authority's written decision to submit all the material plus the employee's reason for reconsideration to the appropriate Vice President/Vice Provost or designee.

**Step 3**

The appropriate Vice President/Vice Provost or designee shall review the matter and issue a written decision to the employee and HRS Employee Relations within fourteen (14) days of the receipt of the employee's request for reconsideration. This decision is the final step in this process and concludes the WSU Workplace Concern Resolution Process.

## WORKPLACE CONCERN FILING FORM

### Instructions:

- All fields must be completed.
- Please print or type required information.
- Refer to timelines set forth in Three Step Formal Resolution Process.
- Questions regarding this process may be directed to Human Resource Services Employee Relations.
- A copy of this form needs to be forwarded to Human Resource Services

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Campus Zip: \_\_\_\_\_

Position Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Immediate Supervisor's Name: \_\_\_\_\_

### STATEMENT OF CONCERN:

1. I discussed my concern with my supervisor and the answer was not satisfactory to me. My concern is as follows (include additional sheets if needed):

Date I spoke with my supervisor: \_\_\_\_\_

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2. My supervisor's response was:

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3. Other individuals having knowledge of this concern

*Print full name and contact information*

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4. I request the following action be taken as a remedy to my concern:

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Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

cc: HRS Employment Services