



Grievance Fact Sheet – updated to Feb 9, 2021

This Grievance Fact Sheet is designed to assist Area Representatives and their local union to keep a written record of what a grievance is about and what happens to it as it is processed through the various steps of the grievance procedure.

It is an important document and should be completed with care and accuracy. This document provides the union with a complete history of the case, including notes from the grievance meetings. It provides details about the grievance which may otherwise be overlooked or forgotten about. A copy of the completed fact sheet should be completed by forwarded to the Regional Director and Grievance Officer.

When the grievance is finalized, the completed fact sheet should be kept, along with the grievance form and Minutes of Settlement. These documents will be filed and stored electronically.

If there is not enough space in a section, please refer to and append additional pages as necessary.

If assistance or clarification is needed, contact the grievance committee as soon as possible.

GRIEVANCE FACT SHEET

To be filled out by the **Area Representative** and emailed from personal email to the **grievance officer** at grievancecupe1767@gmail.com

Grievance No*: _____ Local No.: 1767
 (*contact the grievance officer)

Who is involved in the grievance?

Grievor		
Name		
Department		
Classification		
Wage rate	\$ _____	
Seniority (provide start date, as applicable)	Employer-wide	Bargaining unit
	Department	Classification

Supervisor or other management involved	
Name	
Department	
Job Title	

Witnesses, potential witnesses or other persons involved	
Name	
Department	
Classification	

Name	
Department	
Classification	

What happened? What is the grievance about?

Make sure to include all points mentioned on the attached checklist for each type of grievance.

When did the grievance occur?

Provide date and time grievance began. How often? For how long? Is it within time limits to proceed with a grievance?

Where did the grievance occur?

Provide exact location – office, department, job number, etc. Include diagram, sketch or photo if helpful.

Why is this a grievance?

Was there unjust treatment? Was there a violation of:

- One or more Collective Agreement articles? Which ones?
- Employer policy?
- a law (Human Rights, Labour Relations Code?)
- past practice?
- a safety regulation?
- rulings or awards?

Want: what does the Grievor want?

What will make the Grievor whole? What is needed to completely correct the situation and settle the grievance with full redress? In the case of discharge, ask for back pay.

Employer contends:

Employee record of Conduct (Request the grievor’s record of employment when the grievance is filed)

Warnings and/or penalties for lateness, absenteeism, quantity or quality of work, etc.

Provide date and reason for the warning or penalties.

	Date	Reason
Verbal warnings issued:		
Written warnings issued:		
Other discipline imposed:		
Positive References (within PDP or otherwise)		

Any related information

Additional information

Information given by witnesses

Print the name of each witness followed by a summary of what each saw and heard. Get a signed statement.

Signature of Witness _____

Date __

Signature of
Area Representative _____

Date __

Signature of
Aggrieved Employee _____

Date __

CHECKLIST FOR GRIEVANCE INVESTIGATION

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

Discipline or Discharge 14	✓
Previous work record.	
Complete record of events leading to discipline including dates and times important to the case	
An account of the incident resulting in discharge or reprimand.	
Management’s reason for its action.	
Past practice in similar cases.	
Supervisor and managers names	
Name of witnesses, etc.	
If terminated: remind grievor to keep records of all job searches	
Discrimination / Duty to Accommodate	✓
Any discrimination on a prohibited ground?	
Has the employer identified or made accommodation(s)?	
Has the union identified possible accommodation(s)?	
Effect on other members of bargaining unit by any proposed accommodation(s)?	
Would the collective agreement be violated by any proposed accommodation(s)?	
Does employer claim that “undue hardship” would result from proposed accommodation(s)?	
Harassment	✓
Incident: Date, time, place.	
Kind of harassment: personal, racial, sexual.	
Consequences: promotion denied, position downgraded, unfair discipline.	
Health effects: mental and physical.	
Identify harassment source: Supervisor, Departmental Head or Co-worker.	
Identify Witnesses: Co-workers and others.	
Is this a repeated incident?	
Has it been drawn to management’s attention before?	

Discipline or Discharge Continued	✓
Did you ask about any previous record, good or bad, long or short?	
Did you probe any extenuating circumstances, including personal problems of grievor?	
Did you ask about the personal character of all people involved?	
Did you discuss the consequences of the penalty?	
Did you consider whether or not the punishment fits the crime?	
Did you advise the Grievor to seek employment while waiting?	
Is the grievor a probationary employee? Obtain probation reviews.	
Was the grievor allowed union representation? If not was the waiver signed?	
Dismissal for Innocent Absenteeism	✓
Release by grievor for Union to receive medical records and authority to speak to their health care professionals.	
Grievor’s attendance record, including reasons for absences.	
Likelihood of recovery.	
Any disability requiring accommodation to the point of undue hardship?	
Job Postings – Unsuccessful Applicant 16	✓
Grievor’s classification and seniority.	
Grievor’s experience and previous jobs.	
Name, classification and seniority of successful applicant.	
Experience and previous jobs of successful applicant.	
Management’s reasons for rejecting the Grievor.	
Management’s reasons for choosing the successful applicant.	
On the eligibility list?	
Is this an acting assignment or permanent position?	
If acting – what is the duration of the assignment?	
If acting – is the grievor qualified? Previous assignment dates and duration?	

Improper Layoff or Recall 17	✓
Employer-wide seniority of Grievor.	
Bargaining-unit seniority of all involved.	
Departmental seniority of all involved.	
Classification or group seniority of all involved.	
Type of work to be performed.	
Previous experience of all concerned.	
Overtime 19	✓
Date and shift overtime was scheduled.	
Date of manager's authorization of overtime	
If not pre-approved was it beyond the grievor's control: why?	
Name and classification of employee who worked.	
The actual work that was performed.	
Previous record of overtime distribution.	
Denied the right to refuse overtime?	
Confirm overtime rates (1.5, 2 x etc)	
Overtime meal allowance applicable?	
Safety Hazards	✓
Name, classification, department of Grievor.	
An account of the incident.	
What caused the complaint?	
Has it been previously reported? Provide a copy of the complaint.	
What action has management taken?	
What law or rule is violated?	
Witnesses: names, etc.	
Any injuries/nature of injury	
Transfer – Denial of 16.03	✓
Grievor's seniority and classification.	
Department requested.	
Name of new employees hired.	
Date of request for transfer.	
Availability of replacement for Grievor.	
Supervisor's reasons for not agreeing to transfer.	

Improper Pay – Work Assignment 27	✓
Grievor's classification and seniority.	
Grievor's regular work assignment.	
Grievor's assignment on day in question.	
Rate of pay applicable to assignment.	
Exact work performed by Grievor and instructions from supervisor.	
Grievor's experience and previous jobs.	
Is the grievor working beyond their job description?	
- Compare job descriptions and compare/contrast	
- Identify employee classifications doing similar work	
Is the work accurately described in the job description?	
- Was the work previously performed by a different classification?	
- Are the demands of the work greater?	
- Date the duties were substantively changed	
Managers or Exempt Employees Working	✓
Name of person doing work.	
Type of work performed.	
Amount of time worked.	
Area where work was done.	
Grievor's classification.	
Availability of Grievor.	
Manager or exempt employee's reason for working.	
Vacations 22	✓
Time requested.	
When was the vacation request submitted or recorded in flex planner.	
Time allotted.	
Seniority.	
Number of Employees in work group.	
Employer's reasons for denial of request.	
Names of other employees involved (with seniority and classification)	

Grievance Procedure and Timelines

Within 15 working days of when an issue arises, the Employee notifies Union Area or Alternate Rep.

This is the most important time to gather all the facts and start filling out the Grievance Fact Sheet.

Within this 15 Working Days, the Rep will raise the issue with Management in an attempt to resolve it.

NOTE! - ANY timelines may be extended by mutual agreement

Resolved

Not Resolved

The Union has 3 Working Days from the initial meeting with management to file the grievance at Step 1.

The Manager has 3 Working Days to Respond after Grievance is Filed at Step 1.

Resolved

Not Resolved

The Union has 10 working Days from receipt of denial to elevate to Step 2.

Within 10 working days of the Employer receiving Step 2, the Union RD and/or Union Grievance Officer shall meet to attempt to resolve the grievance.

The Vice President will respond in 10 working days of the Step 2 meeting .

Resolved

Not Resolved

The Union can refer the grievance to arbitration within 15 working days of the Step 2 response.