Legislative History of Human Resources Policy Revisions October 2011, including

**Policy 5-111 Revision 10,**

**Rule 5-111A Revision 0,**

**Rule 5-11B Revision 0,**

And renumbering of other existing Rules to become renumber Rule 5-111C (formerly 5-111A) and renumbered 5-111D (formerly 5-111B).

The above Policy 5-111 and accompanying Rules presented for the Information and Recommendations of the Academic Senate, **October 3, 2011,**

and, Policy 5-111 approved by the Board of Trustees, **October 10, 2011**

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Prepared for the Institutional Policy Committee
Memorandum

To: Interim President Lorris Betz
From: Loretta Harper, V.P. Human Resources
Re: Fall 2011 Proposed changes to Human Resources Policies & Rules affecting staff (1-004; 5-111; 5-113; 5-140; 5-402) (and 5-001 and listed others) Date: September 8, 2011

The Division of Human Resources is proposing to create or revise several University Policies and associated Rules. Most changes are needed to make the regulations coincide with current Human Resource and University practices and procedures. For convenience, we present these proposals in two groups.

The first group includes: revised Policy 1-004 Violence in the Workplace and Academic Environment, (and new Rule 1-004A); Revised Policy 5-111 Corrective Action (and New Rules 5-111A, 5-111B); New Rule 5-113A Drug Free Workplace Provisions; New Policy 5-140 Telecommuting Policy for Staff Employees; and Revised Policy 5-402 Payroll Deductions (and New Rule 5-402A). A brief summary of the updates/revisions are listed below.

The second group involves a change of Policy 5-001 Personnel Definitions, and then a lengthy list of other Policies which would be affected by the change of terminology defined within 5-001 because those other Policies make use of those defined terms. Also included is New Rule 5-001A.

Group # 1.
Revised Policy 1-004  Violence in the Workplace and Academic Environment, and new Rule 1-004A.
Summary of Revisions: We propose updating the Policy to conform to the new IPC format and move specific information to a new Rule. We are also including as guidelines the brochures for employees and students regarding how to deal with threatening situations. Finally, the policy owner will now be the Director of Public Safety instead of University General Counsel, but the Policy Officer will remain University General Counsel.

Revised Policy 5-111 Corrective Action for Staff Employees, and new Rules 5-111A and 5-111B (and renumbering of existing Rules).
Summary of Revisions: The Hospital expressed the need to have their own corrective action policy, so the proposal is make Policy 5-111 more general and philosophical, and move the details to two new Rules—Rule 5-111A covers all areas of the University with the exception of the Hospital and Clinics, and Rule 5-111B applies only to the Hospital and Clinics. Inserting these two new Rules will require the re-numbering of other existing Rules.
Some of the current language and process in Policy 5-111A will also be moved to Rule 5-111A. While the process currently in place will continue, there will be a few changes. The purpose Statement will be changed to highlight Department participation in disciplinary and corrective actions and our intent to make the process fair and consistent. The term Patient Safety will be added for clarification regarding disciplinary actions associated with patient safety. A Typical Actions section will be added to reflect the typical severity of corrective and disciplinary actions associated with concerns, substantial actions and serious actions. We also will include a summary of the “Not Eligible to Reapply” (NER) process and criteria currently in use for staff with serious conduct and performance issues leading to termination of employment.
New Rule 5-113A Drug Free Workforce Provisions
This new Rule, which is associated with existing Policy 5-113, will set out the criteria and process for staff employee drug testing at the University (excluding the Hospital, which already has a drug testing policy). It identifies three types of jobs that have a higher standard—safety-sensitive jobs, security-sensitive jobs, and patient-sensitive jobs. Otherwise, managers should focus on job performance and on-the-job conduct.

New Policy 5-140 Telecommuting Policy for Staff Employees
Summary of Revisions: Human Resources developed some guidelines for managers and administrators to consider when an employee is telecommuting. These guidelines are just advice—they do not contain any mandates or other requirements. In order to have these guidelines available in the Regulations Library, there must be a policy as a “place-holder”. That is the purpose of this new Telecommuting policy.

Revised Policy 5-402 Payroll Deductions
Summary of Revisions: Minor wording changes to coincide with current HR management practices.

Group #2.
Revised Policy 5-001 Employee Definitions, and new Rule 5-001A.
Summary of Revisions: Within Policy 5-001, the term Employee will be defined so it is clear that all employment groups (other than independent contractors) at the University are considered employees. The term Staff will be defined so it is clear that this term is referring to non-faculty, non-academic employees. The term Benefits Eligible will be introduced in order to differentiate between positions that include a benefits package and positions that don’t. Some terms found in other Policies will be defined for clarification such as Probationary Period, Per Diem, and At-Will Employment. Temporary and Time/Fund Limited positions will be defined as these positions have become increasingly prevalent at the University. The various benefits categories will be moved to a new Rule 5-001A for continuity with other policies. References will be added for the other Policies which define the terms Faculty, Academic Officers, and Non-Faculty Academic Staff in detail.

Other Policies affected by the changes of defined terms within Policy 5-001.
Many of the terms defined within Policy 5-001 and Rule 5-001A are used extensively throughout other University Regulations, and so the changing of those terms will require simple changes to terms within those other Regulations. No substantial changes to the meaning of these Regulations are intended. Nevertheless, these changes should be approved through the usual approval process. Displaying the resulting changes in all here in this proposal would be too cumbersome, and so we merely identify the Regulations here. The affected Regulations are:
5-002 Personnel File
5-003 UUSAC
5-100 Employee Relations and Organizations
5-102 Staff Employment
5-103 Orientation Program
5-104 Health Requirements
5-105 Employment or Supervision of Immediate Family
5-106 Equal Opportunity and Nondiscrimination in Employment
5-107 Sexual Harassment and Consensual Relationships
5-108 Transfer of Staff Employees
Consultations and approvals.

These proposals were developed by the Human Resources staff. All have been reviewed with members of the Institutional Policy Committee as well as with other concerned officers and committees. If you approve of the proposals, please forward them to the Academic Senate Executive Committee for appropriate processing by the Senate, and then, as appropriate, to the Board of Trustees.
Proposal for addition/revision of University Regulation.

1. Regulation(s) involved (type, number, subject): Revised Policy 5-111: Corrective Action and Termination Policy for Staff Employees; New Rule 5-111A: Implementation of Staff Corrective and Disciplinary Actions (non-Hospital and Clinics-UUHC); New Rule 5-111B: Implementation of Staff Corrective and Disciplinary Actions (UUHC)

2. Responsible Policy Officer (name & title): Loretta Harper, Vice President for Human Resources; Vivian Lee, Senior Vice President for Health Sciences; or their designees

3. Contact person(s) for questions & comments (name, email, phone#): Tom Loveridge, tom.loveridge@utah.edu or 801-581-3296.

4. Presenter to Senate Exec (if different from contact person. name, phone#):

5. Approvals & consultation status.
   a. Administrative Officers who have approved (VP/President, name & date): Loretta Harper HR VP, 3/4/2011; Interim-President Lorris Betz 7/22/11
   b. Committees/Councils/other Officers consulted: Council Academic Deans 05/06/11, U of U Staff Council 04/10/11, Health Sciences 03/03/11, Legal 02/15/11, IPC 02/15/11.

6. Check YES or NA (not applicable) of documents submitted--- (In digital form. Preferred file format MS Word doc. Special exception allowed for PDF format if previously arranged.)
   YES Explanatory memorandum (key points of proposal, rationale).
   YES Text of proposed Regulation addition/revision.

   Yes (If revision of existing Regulation) text changes are clearly marked, using permanent font markings (not MS Word ‘Track’ Changes non-permanent markings).

Date submitted to Senate Office: September 12, 2011

The Executive Committee will consider whether the proposal is ready for presentation to the full Senate, and if so will schedule it for a subsequent Senate meeting either as i) a matter of academic significance—set on the “Intent” & “Debate” Calendars over two monthly meetings with final “approval” voting at the second, or ii) not academically significant—set on the “Information” Calendar for a single monthly meeting, with opportunity for questions and recommendations. See Policy 1-001
Summary: Proposed Revision of Policy 5-111, Corrective Actions and Termination of Staff, New Rules 5-111A and 5-111B (and re-numbering of existing Rules).

The University of Utah Hospital now has its own Human Resources Office, and they wish to have their own process for corrective action. To accommodate this, we have worked with Hospital HR on this proposal to make Policy 5-111 more general, and move certain details into two new Rules. The staff corrective action process for all areas of the University with the exception of UUHC will be moved to new Rule 5-111A. The corrective action process for UUHC staff will be placed in new Rule 5-111B. This will require a re-lettering of the other Rules under 5-111:

Policy 5-111 Corrective Actions and Termination of Staff
Rule 5-111A Corrective Actions and Termination of Staff – University (non UUHC)
  Guideline 5-111A (the old appendix)
Rule 5-111B Corrective Actions and Termination of Staff – UUHC
Rule 5-111C Egregious Behavior Rule
Rule 5-111D Removing Written Warnings Rule

The current Rule 5-111A is essentially a set of guidelines to use when implementing corrective actions. We propose that this current rule be attached to the new Rule 5-111A as guidelines – and remain published in the Regulations Library. Current Rule B “Egregious Behavior” will move to become Rule C, and the “Removing Written Warnings Rule” will move to become Rule D.

Essential Changes to 5-111;
- Greatly reduce the length and specificity of the policy
- Re-write of the Purpose and Scope to generalize applicability
- Remove specific discussion of “at will” employees – allow to be put into rules
- Remove specific requirements and criteria put these into rules
- Provide 2 Definitions
Policy 5-111: Corrective Action and Termination Policy for Staff Employees. Revision 10. Effective date [upon final approval]

I. Purpose and scope:

To ensure that the corrective action process is administered in a fair and consistent manner and that any action reflects the severity of the behavior. Outline the process for taking corrective and disciplinary action regarding staff employment at the University of Utah.

II. References{drafting note: contents merely moved to below.}

1. Policy 5-203, Staff Employee Grievances
2. Rule 5-111A, Corrective Action and Termination Policy for Staff Employees
3. Rule 5-111B, Egregious Behavior Rule
4. Rule 5-111C, Written Warnings Rule

III. Definitions

IV. Policy

A. Scope

1. This policy applies to all Full-Time permanent Benefited and Part-Time Benefited staff members employees of the University of Utah who have satisfactorily completed their probationary period.
2. Part-Time Non-benefited, Per Diem, Temporary (Benefited and Non-Benefited) and probationary employees are not included within the scope of this policy.

Temporary and probationary staff employees are not included within the scope of the policy as they are designated “at will” employees and, as such, may be terminated by the University without advance notice and without staff employee grievance rights. They do have grievance rights if they believe they have been subjected to illegal discrimination as outlined in Policy and Procedures 5-210.

Before any corrective action is taken the Employee's immediate Supervisor or Manager will make sure one of the following conditions has been met: 1) the employee was made aware of the expectations of the job as outlined in the job description and as communicated in the hiring, orientation and performance evaluation processes, or 2) the behavior, in the reasonable opinion of the immediate Supervisor, is such that no reasonable person should expect to receive prior warning.

II. Definitions

For purposes of this policy and associated rules, the following words and phrases shall be defined as follows:

A. Concern: An event occurring which is contrary to manager's/supervisor's reasonable expectations for the staff employee and/or represents violation(s) of University Regulations.
B. **Egregious Behavior:** Serious conduct or behavior issues that will likely result in termination of employment.

### III. Policy

{drafting note: contents marked as deleted are moved to new Rule}

**B. Application of the Policy**

A. In determining the level of corrective action which may be taken, consideration will be given to both the actual or potential impact and to the consequences of the behavior. The factors which will be considered within the decision making process will include:

- Physical/Safety Issues
- Service Impact
- Financial Implications
- Resultant Disruption Level
- Violation of University or Department policies, Procedures, or standards
- Violation of Law

B. The level of corrective action will be the result of an evaluation of each/all current incidents and any prior history of corrective action, based on the following factors:

- The 6 factors listed above (actual and potential impact) [Moved to Rule]
- Past history:
  - previous corrective actions taken.
  - the current incident need not be of the same type as previous incidents.

C. The corrective action will fall into one of the following general categories of increasing seriousness:

- corrective actions based on a concern,
- substantial corrective actions or
- serious corrective actions.

Supervisors or Managers, in consultation with Human Resources and others as deemed appropriate, will determine the category of seriousness. The decision will stand unless found during appeal to be arbitrary and capricious.

C. Possible corrective actions include Written Warning, Final Written Warning, Suspension Without Pay, Demotion and Termination of employment. Depending on the nature and severity of the issue, corrective action may be applied without prior warnings having been issued to the staff member.

4. In the event of future circumstances requiring corrective action, higher levels of seriousness will be assigned based on either violations of prior written warnings or the seriousness of future behavior. [Moved to Rule]

5. In some instances corrective action may be applied without prior warnings having been issued to the employee, depending on the nature and severity of the issue.
D. Prior to imposing any corrective action of Written Warning, Final Written Warning, Suspension Without Pay, Demotion or Termination, supervisors or managers must consult with the Human Resources Department as defined in the associated Rules, for review and approval of the action.

E. Where institutional issues, rather than departmental issues, are involved, the appropriate institutional representative may take responsibility for any corrective action to be taken.

8. The employee will be advised, in writing, of the corrective action being taken and the details of the relevant grievance process.

9. Details of the corrective action Procedure are shown in Appendix 1 to this policy.

IV. Rules, Procedures, Guidelines, Forms and other related Resources

A. Rules
   1. Rule R5-111-A Corrective Action and Termination for University Staff (non-UUHC)
   2. Rule R5-111-B Corrective Action and Termination for UUHC Staff
   3. Rule R5-111-C Egregious Behavior Rule
   4. Rule R5-111-D Written Warnings Rule

B. Procedures

C. Guidelines:

V. References

A. Policy 1-004 Violence in the Workplace and Academic Environment
B. Policy 5-001 Personnel Definitions
C. Policy 5-106 Equal Opportunity and Nondiscrimination in Employment
D. Policy 5-107 Sexual Harassment and Consensual Relationships
E. Policy 5-113 Drug-Free Workplace
F. Policy 5-114 Drug Testing
G. Policy 5-203 Staff Appeals
   H. Rule 5-111-C Egregious Behavior
   I. Rule 5-111-D Removing Written Warnings

VI. Contacts

Policy Owner: Questions about this Policy and any related Rules, Procedures and Guidelines should be directed to the Director of Employee Relations for Human Resources.
Policy Officer: Only the Chief Human Resource Officer or his/her designee has the authority to grant exceptions to this Policy.

Policy Officers: Acting as the policy Officers, the Vice President for Human Resources, or the Senior Vice President for Health Sciences, or their designees, are responsible for representing the University's interests in enforcing this policy and authorizing any allowable exceptions.

Policy Owner: Acting as the Policy Owner, the Director of Employee Relations is responsible for answering questions and providing information regarding the application of this policy.

VII. History

Revision history:
A. Current version: Revision 10
   Date Approved: Board of Trustees, [____] . Effective date [upon final approval]
   Background information for Revision 10 [link to this proposal]

B. Revision History
Earlier versions:
Revision 9. Effective dates February 13, 2006 to [final approval of Rev. 10]
Summary: Proposed New Rule 5-111A

Background: New Rule 5-111A is, to a very large extent, an adaptation of the contents being moved out of current Policy 5-111. The minor changes identified below are the result of seeking and gathering input from stakeholders, including; Subcommittee of the Staff Council, Cory Higgins Administrative Group, Krista Pickens (OEO/AA), Larry Dew’s Administrative Group, Human Resources Employment Services Director and Consultants.

Minor Changes from the current Policy 5-111 to this new proposed Rule 5-111A;

- Section, I, 1, Purpose Statement changed slightly to indicate Department participation in disciplinary and corrective actions, while maintaining our intent to make it as fair and consistent a process as is practically possible.
- Wording changed throughout from “Employee” to “Staff Member” as an effort to focus the Rule in conjunction with recent changes to 5-001 Personnel Definitions
- Adds information regarding the current “Not Eligible to Reapply” process
- Section, IV, A, 3, Added to provide some parameters around what is considered to be a probationary period. As policy has not defined a probationary period.
- Section, IV, B, 1, expanded to include reference to Board of Regents Policy R841, to conduct that any reasonable person should not expect prior warning, and to conduct outside the work setting or off-duty that has a negative impact on the work or work environment
- Section, IV, B, 1, g, the term “Patient Safety” has been added as further support for this particular class of corrective actions associated with patient safety. Since there are School of Medicine departments that have patient interaction that are not under UUHC.
- Section, IV, B, 2, c – i, ii, iii “typical actions” added to reflect the typical severity of corrective and disciplinary actions associated with actions based on a concern, substantial actions and serious actions.
- History section changed to reflect that this is the first proposed Rule 5-111A.

{Note. Although this is a new Rule, for convenience this first version is marked as though changes are being made, so that readers may easily see how the new Rule contents would differ from the contents of existing Policy 5-111.}
I. **Rule 5-111 A: Implementation of Staff Corrective and Disciplinary Actions (non-Hospital and Clinics-UUHC)**

**Purpose and Scope:**
To ensure that the corrective action process is administered in a fair and consistent manner and that any action reflects the severity of the behavior, provide a corrective action process that gives managers the necessary tools to deal with concerns about a Staff Member’s performance and conduct in an effective, fair and consistent manner. This Rule is applicable to all University Staff Members holding a benefits eligible position who have completed their probationary period, with the exception of University of Utah Hospitals and Clinics (UUHC) Staff Members (see Rule 5-111B).

A. This Rule applies to all permanent Staff Members employees holding a benefits eligible position of the University of Utah who have satisfactorily completed their probationary period.

B. Temporary and probationary staff employees are not included within the scope of the policy as they are designated “at will” employees and, as such, may be terminated by the University without advance notice and without staff employee grievance rights. They do have grievance rights if they believe they have been subjected to illegal discrimination as outlined in Policy and Procedures 5-210. This rule does not apply to Staff Members who are “at-will” as defined in Policy 5-001. Staff Members employed “at will” may be terminated by the University without advance notice and without staff appeal rights. However, Staff Members employed “at will” do have the right to file a complaint with the Office of Equal Opportunity and Affirmative Action (OEO/AA) pursuant to Policy 5-210, if they believe they have been subjected to illegal discrimination, sexual harassment, or a violation of the Americans with Disabilities Act (ADA).

C. “At Will” Staff Members also include those who are in their probationary period. This is defined as the first six (6) months of employment beginning from the date of hire, unless otherwise extended pursuant to Human Resource’s guidelines for extending probation.

D. Before any corrective action is taken the Employee's Staff Member’s immediate Supervisor or Manager will make sure one of the following conditions has been met, including but not limited to: 1) the employee was made aware of the expectations of the job as outlined in the job description and as communicated in the hiring, orientation and performance evaluation processes, or 2) the behavior, in the reasonable opinion of the immediate Supervisor, is such that no reasonable person should expect to receive prior warning.

   1. The Staff Member was made aware of the expectations of the job as outlined in previous corrective actions.
   2. The Staff Member was made aware of the expectations of the job, through the job description, communicated in the hiring process, orientation, or performance evaluation processes.
   3. The behavior or performance concern, in the reasonable opinion of the immediate Supervisor, is such that no reasonable person should expect to receive prior warning.

II. Definitions

III. Rule

A. Application of the Policy
C. In determining the level of corrective action which may be taken, consideration will be given to both the actual or potential impact and to the consequences of the behavior. The factors which will be considered within the decision making process will include: Staff Members Employees may be disciplined for unsatisfactory job performance, for any conduct described in Section 4.3 of the Utah Board of Regents Policy R841, or for any conduct or behavior of a nature that no reasonable person should expect to receive prior warning. Unsatisfactory job performance is defined by reference to University or any sub-unit expectations, including any verbal or written expectations communicated by a supervisor; University Regulations; and federal and state laws. Further, Staff Members employees may be disciplined for conduct off-duty or away from the University if that conduct impacts the University, violates University or department policy, or violates the law. In determining the level of corrective action which may be taken, consideration will be given to both the actual or potential impact or consequences of the behavior or performance concerns. The factors which will be considered within the decision making process will include:

1. Physical/Safety Issues
2. Service Impact
3. Financial Implications
4. Resultant Disruption Level
5. Violation of University or Department policies, Procedures, or standards
6. Violation of Law
7. Patient Safety

B. The level of corrective action will be the result of an evaluation of each current incident based on the following factors:

1. 67 factors listed above (actual and potential impact)
2. Past history:
   a. previous corrective actions taken.
   b. the current incident need not be of the same type as previous incidents.
3. The corrective action will fall into one of the following general categories of increasing seriousness:
   a. corrective actions based on a concern, typically resulting in a written warning.
   b. substantial corrective actions, or typically resulting in a final written warning.
   c. serious corrective actions, typically resulting in a demotion, suspension, or termination of employment. Performance or behavior on the Egregious Behavior List (see Rule 5-111D) typically falls into this category
4. Supervisors or Managers, in consultation with Human Resources Employee Relations and others as deemed appropriate, will determine the category of
seriousness. The decision will stand unless found during appeal to be arbitrary and capricious.

C. Possible formal corrective actions include Written Warning, Final Written Warning, Suspension Without Pay, Demotion and Termination.

D. In the event of future circumstances requiring corrective action, higher levels of seriousness will be assigned based on either violations of prior written warnings or the seriousness of future behavior.

E. In some instances corrective action may be applied without prior warnings having been issued to the employee Staff Member, depending on the nature and severity of the issue concern.

F. Prior to imposing any formal corrective action of including Written Warning, Final Written Warning, Suspension Without Pay, Demotion or Termination, supervisors or managers must consult with the Human Resources Department for review and approval of the action.

G. Where institutional issues, rather than departmental issues, are involved, the appropriate institutional representative may take responsibility for any corrective action to be taken.

H. The employee Staff Member will be advised, in writing, of the corrective action being taken and the details general information regarding of the relevant grievance appeal process. Documentation of formal corrective actions will be entered into the personnel files.

I. Details of the corrective action Procedure are shown in Appendix 1 to this policy.

I. A Staff Member may be assigned a designation of “Not Eligible for Re-application” (NER) upon termination of employment for reasons consistent with the Egregious Behavior Examples under policy 5-111.

1. An NER designation prohibits a former Staff Member from re-applying or being hired for a minimum of five (5) years from the date of termination and/or designation of NER. After five (5) years the former Staff Member may petition for removal of NER designation by submitting a detailed request to the Vice President of Human Resources.

2. An NER designation prohibits a former employee from:
   a) Becoming employed by the University, this includes but is not limited to University departments, divisions, affiliates, or entities.
   b) Providing services to or on behalf of the University including but not limited to services provided as a consultant and/or contractor.
   c) Participating in any Volunteer services or capacity.

J. IV. Procedures, Guidelines, Forms and other Related Resources
   A. Guideline 5-111---Additional information regarding staff corrective action

VI. References
   A. Policy 5-203, Staff Appeals
B. **Rule 5-111C**, Egregious Behavior Examples  
C. **Rule 5-111D**, Removing Written Warnings  
D. **Policy 5-210**, Complaints of Discrimination and Sexual Harassment  

VIII. **Contact**  
1. **Policy Owner**: Questions about this Policy and any related Rules, Procedures and Guidelines should be directed to the Director of Employee Relations for Human Resources.

   Policy Officer: Only the Chief Human Resource Officer or his/her designee has the authority to grant exceptions to this Policy.

   Policy Officers: Acting as the policy Officers, the Vice President for Human Resources, the Senior Vice President for Health Sciences, or their designees, are responsible for representing the University’s interests in enforcing this rule and authorizing any allowable exceptions.

   Policy Owner: Acting as the Policy Owner, the Director of Employee Relations is responsible for answering questions and providing information regarding the application of this rule.
Summary: Proposed New Rule 5-111B

To: Institutional Policy Committee Members

From: Melissa Lugo, Employee Relations Manager for University of Utah Hospitals and Clinics (UUHC)

Date: February 9, 2011

Subject: Proposed Rule 5-111B—Rule for Formal Corrective Action and Termination Policy for University of Utah Hospitals and Clinics Staff (Excepting University, non UUHC)

The Human Resource (HR) function at the University of Utah divided into two Human Resource departments over a year ago to better align with UUHC’s organizational goals and objectives. We wish to have a process for dealing with staff corrective actions that is different than the one used by the rest of the University. We are proposing a new Rule 5-111B, Corrective Action and Termination Policy for Staff.

The UUHC Rule suggests that although a Written Warning is considered part of the corrective action process, only Final Written Warnings, Suspension without pay, Demotions, and Terminations need approval from HR. We are creating a culture of accountability and are putting the responsibility of Written Warnings on management. HR is still available as a resource to review and consult as to the appropriate level of discipline; however we do not need approve Written Warning.
UUHC Rule 5-111B: Corrective Action and Termination approval process for UUHC staff. Revision 0. Effective date [upon final approval]

I. Purpose and Scope

To identify the level of corrective action and discipline that needs approval from Human Resources.

II. Definitions

(Reserved)

III. Rule

A. Prior to imposing Final Written Warnings, Suspension without pay, Demotions, and Terminations supervisors and managers must consult with the Human Resources Department for review of the action. Written Warnings are held at the discretion of Supervisors and Managers and, although are part of the formal discipline process, do not need to come through Human Resources for approval.

B. Although Written Warnings do not need to come through HR, we are available at the discretion of the supervisor for consultation and review.

IV. Procedures, Guidelines, Forms, and Other Related Resources

V. References

A. Policy 5-111: Corrective Action and Termination Policy for Staff Employees

VI. Contacts:

1. Policy Officer: Head of Human Resources
2. Policy Owner: Employee Relations

VII. History

1. Current Rule Date (Date—New Rule)

Checklist & coversheet form—for submitting to Academic Senate Executive Committee
Proposal for addition/revision of University Regulation.