

GRIEVANCE INITIATION

Filed L.R.O.	For Management Use Only
File No:	
Association/Union:	
Unit:	

INSTRUCTIONS: Complete form and distribute in accordance with prescribed departmental procedures.

Grievant's Name(s) (If more than two, attach typed list) Jasper Kim , Et All		Class Title Open Water Lifeguard I&II
Dept/Bureau and Division Recreation and Parks Department	Section Aquatics Division	Business Phone
Has this grievance been discussed with your Immediate Supervisor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date of discussion May 13, 2019	
Name of Immediate Supervisor	Title	

What is the action or situation about which you have a grievance? (Be specific as to names and locations)

On April 1, 2019 the grievant advised his supervisors, including the Director of the Aquatics for the Recreation and Parks Department that the water in the Hansen Dam Recreation facilities were dangerous and unsafe for the employees and the public due to the lack of adequate and regular testing of harmful parasites (see attached emails). The grievant further advised his supervisors that based on his years of experience and because the presence of these brain eating parasites that people should stay out of the water until immediate testing could be completed. On or around April 24, 2019, prior to the mandatory retesting swim exam scheduled for April 25 and April 26, the grievant again advised his supervisors that the waters were unsafe. Despite these warnings management proceeded with the mandatory swim retest and orders all potential hires to report to the Hansen Dam facilities for qualifying exams. After swimming in the waters approximately 22 employees immediately suffered respiratory problems and their bodies were covered in rash and body irritants. The employees had to seek medical attention from the City's Industrial Medical Services, Workers Compensation and have been placed off work until further notice.

What do you think should be done about it?

The Recreation and Parks Department should immediately have the waters tested at all Open Water and Swimming Pools in accordance with prescribed safety protocols. Any and all health concerns with water quality should be posted in order to ensure the safety of all employees and the public. All Personnel policies should be reviewed and revised to ensure safety of every employee and the public. All responsible supervisors should be admonished and disciplined in accordance with Personnel policies and procedures. All employees shall be made whole for any and all loss wages and/or benefits

What was Supervisor's Response?

Date response was given:

What article of applicable Memorandum of Understanding (MOU) and/or Department Rule do you think has been violated?

Article of MOU MOU 18, Article 4.1- Mangement failure to make every reasonable effort	Departmental Work Rule Department rules on safety - Any and all other pertinent department policies	Date of Grievable Incident 4/27-28
--	--	--

What other person, besides yourself, do you want notified of any hearings held or actions taken on this grievance?
Name Kevin Monk Mailing Address 1545 Wilshire Blvd.

His/Her role in grievance: Union Representative

Grievant's Signature(s): <i>Jaswon Kim</i>	Date: <i>5/13/19</i>
--	----------------------

Received by: _____

Immediate Supervisors Signature: _____ Date: _____

GROUP GRIEVANCE WAIVER AGREEMENT

Instructions: Complete this waiver agreement form and obtain signatures of group grievants prior to the grievance meeting. Per the group grievance procedure, this completed document must be submitted to the Bureau Director or their designee prior to the grievance meeting.

Note: THIS DOCUMENT IS NOT A GRIEVANCE INITIATION FORM. To initiate a group grievance, the City's Grievance Initiation form, Form Gen. 162, must be filed with the Bureau Director within 20 business days following the date the issue arose. Please refer to your MOU's Group Grievance Procedure for details.

Union: 5 MOU Name and Number: 18
 Union Representative: Kevin Monk Phone number: 213 458-4171
 Bureau: _____ Division: _____
 Date issue arose: 4/27/19

Briefly describe nature of grievance:
<u>Article 4.1 Managements failure to make every reasonable effort</u>

- We hereby claim we have a grievance with the same facts and issues.
- We understand the Union will file this grievance on our behalf.
- We understand we will be part of a group grievance, whereby said grievance will be processed under our MOU's Group Grievance procedure.
- We understand we are voluntarily waiving our respective rights to file an individual grievance on this same issue.
- We voluntarily elect to waive our rights to discuss the grievance with our immediate supervisors at the informal level and all subsequent levels of review.
- We understand this completed waiver shall be submitted to the Bureau Director or their designee prior to the grievance meeting.

We, the undersigned, agree to the above statements and our signatures below indicates our understanding of the conditions described herein and confirms our recognition that we are party to the aforementioned grievance:

<u>Jasper Kim</u>	<u>Jasper Kim</u>	<u>5/13/19</u>
PRINT NAME	SIGNATURE	DATE
<u>JESUS Sandoval</u>	<u>Jesus Sandoval</u>	<u>5-13-19</u>
PRINT NAME	SIGNATURE	DATE
<u>Frank Meza</u>	<u>Frank Meza</u>	<u>5.13.19</u>
PRINT NAME	SIGNATURE	DATE
<u>E.T. All</u>		
PRINT NAME	SIGNATURE	DATE

Disclaimer: This form is not intended to concede, validate, or legitimize the merits of the dispute giving rise to its distribution. Management reserves the right to make this determination within the existing provisions of the applicable MOU and in conjunction with applicable Federal Law, State Law, and Local Ordinance.

(Attach additional sheet(s), if necessary)