



# INTERNAL MANAGEMENT POLICY & PROCEDURE

**Applicability:**  Adult Operation Only  JUVENILE Operations Only  DEPARTMENT-WIDE

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IMPP #: 02-115D

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## HUMAN RESOURCES: Employee Grievances

Original Date Issued: 06-30-15 Replaces IMPP Issued: 06-30-15 **CURRENT EFFECTIVE DATE: 06-20-23**

Approved By: , Secretary Next Scheduled Review: 06/2026

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### POLICY

Employees shall have access to a formal system to remedy unfair acts or practices that impede, restrict, limit, or otherwise adversely affect the full enjoyment of just and equitable terms and conditions of employment. In exercising this privilege, an employee shall be free from restraint, coercion, or reprisal. Provisions may be made to provide information and to provide or make available assistance to the aggrieved employee in processing the grievance.

Employees covered by an active Memorandum of Agreement (MOA) shall follow the provisions set forth therein for resolving grievances related to interpretation or application of the MOA.

### DEFINITIONS

Appointing Authority: As defined in IMPP 02-109D, any person or group of persons empowered by the constitution, by statute, or by lawfully delegated authority to make appointments to positions in the State service pursuant to K.A.R. 1-2-9. Anytime this term is used in this IMPP, it can be read as referring to the "appointing authority or designee".

Business Day(s): For purposes of this policy, business days include Monday through Friday, excluding legal holidays.

Grievance: A statement of dissatisfaction over any condition of work, which allegedly has an adverse effect upon the employee. A grievance shall not include any subject for which another method of settlement or an appeal procedure is established under Kansas Statutes, Kansas Administrative Regulations, or other Internal Management Policies and Procedures of the Department of Corrections.

Grievance Procedure: A formal and uniform procedure that provides a clear and understandable method for the remediation of employee dissatisfactions and establishes specific responsibilities to ensure every effort is made to resolve such concerns in a timely manner.

Management Team (MT): A panel of Central Office management staff designated by the Secretary. Currently, this panel is comprised of the Secretary; Deputy Secretaries; Chief Legal Counsel; Executive Director of Contract & Finance, Executive Director of Programs and Risk Reduction, Executive Director of Public Affairs, Director of Enforcement, Apprehension & Investigations, Human Resources Director; Chief Information Officer; Prisoner Review Board Chair, Director of Victim Services; and Director of Finance.

## PROCEDURES

### I. Steps to Follow in Filing a Grievance

#### A. Step One:

1. An employee, who believes that he or she has a grievance, shall take up the matter orally with the employee's immediate supervisor within five (5) business days of the occurrence of the incident being aggrieved.
  - a. If the basis of the grievance revolves around a series of incidents alleged by the grieving employee as being progressive in nature, the employee's immediate supervisor shall be orally advised of the matter within five (5) business days of the incident, which precipitated the grievance.
2. The immediate supervisor shall provide an opportunity for full discussion of the grievance with the employee.
3. The immediate supervisor shall then attempt to resolve the matter and shall respond in writing to the employee within five (5) business days of the date on which the employee first brought the grievance to his or her attention.

#### B. Step Two:

1. If the response of the immediate supervisor does not resolve the issue at Step One and the employee wishes to appeal the grievance to Step Two he or she may, within five (5) business days from the date the response is received, complete and submit an employee Grievance Form (Attachment A,) to his or her human resource manager or designee.
  - a. The Human Resources Manager will ensure that the grievance is appropriately documented and routed to the appropriate responding party at each step of the grievance process.
  - b. In facilities, the grievance shall be addressed with the deputy warden/superintendent responsible for the employee's work activity.
  - c. An employee in Central office, or parole services shall address the grievance with his or her supervisor's immediate superior.
2. The deputy warden or the supervisor's immediate superior shall provide an opportunity for discussion and review and shall respond in writing to the employee within five (5) business days of the receipt of the form.
3. If the employee's immediate supervisor is supervised directly by the appointing authority, the employee shall proceed directly to Step Three of the Grievance Procedure without fulfilling the requirements of Step Two.
4. If the employee's immediate supervisor is directly supervised by the Secretary of Corrections, the decision of the Secretary, as a direct superior of the supervisor, shall be final and not subject to further appeal, unless authorized by Kansas statute or regulation.

#### C. Step Three:

1. If the grievance is not resolved by the response received in Step Two, and the employee wishes to appeal it to Step Three, he or she may, within five (5) business days from the date the response is received, complete and submit Step Three of the employee's grievance form to the human resources manager or designee for processing and presentation to the employee's appointing authority.

2. The employee's appointing authority shall provide an opportunity for discussion and review and shall respond in writing on the grievance form within ten (10) business days of the receipt of the form.
3. If the immediate superior of the aggrieved employee's immediate supervisor is also the employee's appointing authority, the employee shall proceed directly to Step Four of the Grievance Procedure without fulfilling the requirements of Step Three.
4. If the aggrieved employee is directly supervised by the Secretary of Corrections, the decision of the Secretary as an immediate supervisor of the employee shall be final and not subject to further appeal, unless authorized by Kansas statute or regulation.

D. Step Four

1. If the grievance is not resolved at Step Three and the employee wishes to appeal the grievance to Step Four, he or she may within five (5) business days from the date the response is received, complete Step Four of the grievance process and forward the signed, completed form to the Secretary of Corrections through his or her human resource manager.
2. The Secretary of Corrections may take such actions as deemed necessary.
  - a. This decision shall be transmitted in writing to the employee and appointing authority within 15 business days after the date the grievance was received by the Secretary of Corrections.
  - b. The decision of the Secretary of Corrections shall be final and not subject to further appeal unless authorized by Kansas statute or regulation.

**II. General Guidelines Concerning Employee Grievances**

- A. A copy of the procedure shall be available on the KDOC intranet located in the IMPP section of the HR policies, and a copy shall be provided to employees upon request.
- B. The availability of this grievance procedure shall not be interpreted as granting any additional rights under the Kansas Civil Service Act and any amendments thereto.
- C. At any step in the grievance procedure, if any party believes that an extension of the time limit for action is required, the party may request an extension of the time limit by written memorandum or email on or prior to the grievance due date to the human resource manager.
  1. The human resources manager shall consider all relevant information, determine as to its appropriateness, and provide a copy of his or her response to all parties involved in a timely manner.
- D. A grievance shall not be considered finally resolved until:
  1. The employee indicates on the appropriate grievance form that he or she is satisfied;
  2. The Secretary of Corrections makes a final determination in the matter;
  3. The employee formally rescinds his or her grievance; or,
  4. The employee does not take further action to a response within the time frame and/or does not request an extension of the time frame for response.
- E. Records shall be retained and disposed of in accordance with the State Record Board's retention schedule.

- F. Each employee involved in a grievance investigation shall sign the Acknowledgement of Oath of Confidentiality (Attachment B).

### **III. Protections Concerning Employee Grievances**

- A. An employee who lodges a grievance shall be free from restraint, coercion, retaliation, or reprisal.
  - 1. If an employee believes he or she is being subjected to restraint, coercion, retaliation, or reprisal in filing his or her grievance, or as result of filing a grievance; he or she may file a separate grievance directly to the Secretary of Corrections.
- B. Persons involved in the grievance process shall exercise the maximum amount of confidentiality possible that is consistent with effort and staff involvement necessary to resolve the grievance.
- C. The filing of a grievance shall in no way reflect an employee's good standing with the Department.

### **IV. Assistance and Representation**

- A. An employee filing a grievance may select another person to represent or assist him or her at any step of the grievance procedure.
  - 1. When the person selected is employed within the Department of Corrections, he or she shall be allowed time during working hours to meet with the supervisor or other appropriate parties designated to respond at each applicable step of this grievance procedure, so long as the individual's absence does not create an undue hardship upon his or her work unit.
    - a. The selected individual's appointing authority shall make the final decision as to whether or not an undue hardship is created.
    - b. The selected individual shall not be a witness to or involved in the subject matter of the employee's grievance.
  - 2. Any cost resulting from the selection of a person to represent or assist an aggrieved employee shall be fully borne by the employee.
- B. At any step in the grievance procedure, the employee or any other affected party may contact the Human Resources Director for information and/or assistance in processing the grievance.

### **V. This IMPP shall serve as final policy for the Department and facility general orders shall not be allowed on this subject.**

**NOTE:** The policy and procedures set forth herein are intended to establish directives and guidelines for staff and offenders and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees or offenders, or an independent duty owed by the Department of Corrections to employees, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

### **REPORTS REQUIRED**

None.

**REFERENCES**

K.A.R. 1-2-9, 1-12-1

**HISTORY**

06-30-15 Original  
06-20-23 Revision 1

**ATTACHMENTS**

<b>Attachment</b>	<b>Title of Attachment</b>	<b>Page Total</b>
A	Non-Union Grievance Form	5 pages
B	Acknowledgment of Oath of Confidentiality	1 page

**KANSAS DEPARTMENT OF CORRECTIONS**

**NON-UNION GRIEVANCE FORM**

This form is to be used to initiate and resolve a grievance regarding a working condition or situation that is not covered in a union memorandum of agreement.

Additional sheets may be attached to this form if there is a need for more space than provided.

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**Employee's Statement**

**Employee's Name:** Click here to enter text.

**Employee's Facility / Department:** Click here to enter text.

**Employee's Work Unit:** Click here to enter text.

**Employee Work Telephone Number/Extension:** Click here to enter text.

**Employee's Immediate Supervisor:** Click here to enter text.

**Date of occurrence which resulted in the grievance:** Click here to enter a date.

**Grievance:**  
Click here to enter text.

**Requested Remedy:**  
Click here to enter text.

**GRIEVANCE RESOLUTION – SUPERVISOR’S VERBAL RESPONSE**

**Date Grievance was verbally discussed with immediate Supervisor:** [Click here to enter text.](#)

**Immediate Supervisor’s proposed verbal grievance resolution:**

[Click here to enter text.](#)

) I am satisfied with the Supervisor’s verbal grievance resolution and consider this grievance to be resolved.

(  ) I am not satisfied with the Supervisor’s proposed verbal grievance resolution and request the grievance be appealed to Step Two of the grievance procedure

**Please state the reason the Supervisor’s resolution is not accepted and sign/date below:**

[Click here to enter text.](#)

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**Employee’s Signature**

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**Date**

**GRIEVANCE RESOLUTION - STEP TWO**

**Date Grievance Received:** Click here to enter text.

**Grievance Forwarded to (Name/Title):** Click here to enter text.

**Proposed Step Two Grievance Resolution:**

Click here to enter text.

\_\_\_\_\_  
**Step Two Reviewer's Signature**

\_\_\_\_\_  
**Date**

**Employee's Response to Step Two Proposed Resolution:**

(  ) I am satisfied with the Step Two grievance resolution and consider this grievance to be resolved.

(  ) I am not satisfied with the Step Two grievance resolution and request the grievance be appealed to Step Three of the grievance procedure

**Please state the reason the Step Two resolution is not accepted and sign/date below:**

\_\_\_\_\_  
**Employee's Signature**

\_\_\_\_\_  
**Date**



**GRIEVANCE RESOLUTION - STEP THREE**

**Date Grievance Received:** Click here to enter text.

**Grievance Forwarded to (Name/Title):** Click here to enter text.

**Proposed Step Three Grievance Resolution:**

Click here to enter text.

\_\_\_\_\_  
**Step Three Reviewer's Signature**

\_\_\_\_\_  
**Date**

**Employee's Response to Step Three Proposed Resolution:**

(  ) I am satisfied with the Step Two grievance resolution and consider this grievance to be resolved.

(  ) I am not satisfied with the Step Two grievance resolution and request the grievance be appealed to Step Three of the grievance procedure

**Please state the reason the Step Three resolution is not accepted and sign/date below:**

\_\_\_\_\_  
**Employee's Signature**

\_\_\_\_\_  
**Date**

**GRIEVANCE RESOLUTION – FINAL DETERMINATION**

**Date Grievance Received:** [Click here to enter text.](#)

**Grievance Forwarded to (Secretary of Corrections):** [Click here to enter text.](#)

**Final Grievance Resolution:**  
[Click here to enter text.](#)

\_\_\_\_\_  
**Secretary of Corrections**

\_\_\_\_\_  
**Date**

