

GRIEVANCE PROCEDURE FORM

STATE OF NEW JERSEY

NOTE: Every item must be completed to avoid delays in processing.

INSTRUCTIONS: This Grievance Form is for use by all State employees, including employees who are not covered by a union contract. To initiate the grievance process, complete all items in the **GRIEVANCE INFORMATION** section and submit this form to the appropriate office as designated by your union contract or within 30 calendar days from the date on which the alleged act occurred. **NOTE:** Appeals for which Merit System review mechanisms exist, such as those pertaining to Examination, Classification (out-of-title work), Sick Leave Injury or Layoff, should proceed through established Merit System appeal processes.

NAME OF EMPLOYEE: SMITH, Jeffrey (Group)		JOB TITLE: Corrections Lieutenant	
MAILING ADDRESS: P. O. Box 273, Richwood, NJ 08074		SOCIAL SECURITY NUMBER:	
DEPARTMENT: Corrections		DIVISION, INSTITUTION OR AGENCY: South Woods State Prison	

DESIGNATION OF GRIEVANCE:

- CONTRACTUAL:** State article and paragraph (section) of the contract which you claim is violated: XXXIV; A, C, & D.
 NONCONTRACTUAL

EMPLOYEE STATEMENT OF GRIEVANCE (Attach additional sheets if necessary):

On January 01, 2005, staff were brutally assaulted by a inmates at Bayside State Prison. Many forms of weapons were used by the inmates to inflict injuries upon the staff members during the assault. One of the most dangerous items used against staff members was a clothes iron. Following the incident at Bayside State Prison, I verbally requested that clothes irons be removed from all institutions pending investigation and review of the incident. On January 07, 2005, I also requested, in writing, that the clothes irons be removed pending investigation and review. My requests were ignored and/or dismissed. It appears that there is no consistency with regard to the clothes irons statewide. At this time, there are some institutions that still have clothes irons available to the inmate population, and some that have taken them away. These clothes irons have proven to be a very dangerous item, the employer is aware of this safety issue. The employer has refused or neglected to make provisions for a safe place of employment, thus requiring employees to work under unsafe and hazardous conditions.

TO CORRECT MY GRIEVANCE, THE FOLLOWING SHOULD OCCUR:

- The State shall remove all clothes irons from all institutions pending investigation and review of the incident at Bayside State Prison.
- The State shall provide a safe and healthful place of employment.
- The State shall investigate complaints of unsafe or unhealthful conditions promptly in the future, and shall take corrective action immediately.
- The State shall not require employees to work under conditions which present an imminent hazard to their safety or health.

I WILL REPRESENT MYSELF (or) **MY REPRESENTATIVE WILL BE:**

Name of Representative: Scott Derby, Executive Vice President Employee Organization: Fraternal Order of Police Lodge #183

WITNESSES MAY INCLUDE: All of those employees that were involved in the assault on staff, by inmates, on January 01, 2005, at Bayside State Prison, employees involved in the investigation of this incident, and management employees involved in reviewing the results of this investigation.

SIGNATURE OF EMPLOYEE: _____ DATE: February 08, 2005 _____

RECEIVED BY:

Signature of Management Representative: _____ Date: _____

STEP ONE DECISION:

STEP 1

SIGNATURE: _____
(Management Representative) (Date of Hearing) (Date Decision Served to Employee and Representative)

EMPLOYEE:

- I acknowledge settlement of my grievance** or **I appeal to STEP TWO***

SIGNATURE OF EMPLOYEE: _____ DATE: _____