

Principles of Fire and EMS Administration
Performance Standards
Human Resource Management
Execute Routine Administrative Functions
Unit II Scholarly Activity

PERFORMANCE STANDARDS:

NFPA 1021 4.1.2, 4.2.5, 4.2.6, 4.4.2

OBJECTIVES

1. Compare and contrast scientific and humanistic management – FESHE 3, 5, 8
2. Analyze Maslow's hierarchy of needs and its relation to management concepts – FESHE 8
3. Appraise the impact of organized labor on firefighter safety and working conditions – FESHE 4, 5
4. Determine the steps of the grievance process – FESHE 4, 5

INSTRUCTIONS

For this assignment, you are to complete Parts 1 & 2 of the activities below. Each is tied into the role of the Fire Officer as a function of Human Resources. You may complete the assignment in a separate word document, or scan the document and upload it once you are finished.

REFERENCE SOURCE

NFPA 1021 4.1.2, 4.2.5, 4.2.6, 4.4.2

PART 1

You are Lieutenant John Wilbanks assigned to B- Shift, Station #5 of Parkville Fire department. You are the shift officer of multi-company station and manage up to eight (8) personnel on your shift. On August 13, 2010 you arrive for your assigned shift and you are presented with the Form 10-200 from Firefighter /Medic Julia A. Freeman. You have received a memorandum from Sergeant Bart Casey explaining his actions concerning this issue. You as a company officer will utilize the enclosed policies, forms and memorandums to make a decision on the answer to the formal grievance. You will construct an answer to the formal grievance that complies with all department policies and maintains the station level staffing.

Staffing for Station #5 B-Shift

ENGINE 5

Lieutenant John Wilbanks
Sergeant Bart Casey
Firefighter/Medic Julia Freeman
Firefighter Jeff Bowman
Firefighter Roger Bell

MEDIC/TRANSPORT #5

Firefighter/Medic Robert A. Jones
Firefighter/Medic Olivia Brown

RELIEF PERSON STATION #5

Firefighter/ Medic James Durbin

Staffing For September 6, 2010

ENGINE #5

Lieutenant John Wilbanks
Sergeant Bart Casey
Firefighter/Medic Julia Freeman (Vacation)
Firefighter Jeff Bowman
Firefighter Roger Bell

MEDIC/TRANSPORT #5

Firefighter/Medic Robert A. Jones
Firefighter/Medic Olivia Brown
Firefighter/Medic James Durbin – (Kelley Day)

PARKVILLE FIRE DEPARTMENT

Policy and Procedures

Policy Number 10-201 Volume 1

Effective Date January 1, 2010 Approved Howard M. Jones Fire Chief

REQUEST AND UTILIZATION OF ACCRUED LEAVE TIME (Vacation Leave, Holiday Leave, and Compensatory Leave)

Authority-Vested in the Fire Chief by City of Parkville ordinance 104 – 1967

Responsibility-It is the responsibility of the Deputy Fire Chief to review and update this policy as needed for the safe and efficient operation of the Fire Department.

Policy- All personnel requesting the use of accrued leave time shall make their request in writing to their immediate supervisor one (1) shift prior to the requested date. Leave time shall be granted to personnel on a first request basis after minimum staffing requirements have been fulfilled. No personnel shall be granted leave when minimum staffing requirements can not be met. The shift officer or acting shift officer shall grant leave in accordance with this policy. This policy complies with Parkville Firefighters Association contract 2010 – 2015.

Procedure- Personnel requesting leave shall complete leave request form 10-01 and submit to their supervisor no less than one (1) shift and no more than ninety (90) days prior to the requested date. The shift officer or acting officer shall review the station calendar for any personnel vacancies posted. If leave is granted the approving officer will place leave on the station calendar and place the completed form 10-01 in the station leave file. The shift officer may grant the leave request on the following criteria:

1. All engine companies have four (4) qualified personnel assigned.
2. All truck Companies have four (4) qualified personnel assigned.
3. All medic units have two (2) paramedics assigned.
4. The requesting employee has adequate accrued time for the request.
5. If two (2) or more employees are requesting the same date the first submitted form 10-01 shall be considered.

See Attached Form 10-01

PARKVILLE FIRE DEPARTMENT

Leave Request Form 10-01

NAME _____ DATE _____

ASSIGNMENT/POSITION _____

DATE OF REQUESTED LEAVE _____

TYPE OF LEAVE __ VACATION __ HOLIDAY __ COMPENSATORY (CHECK ONE)

OFFICER RECEIVING REQUEST _____

DATE REQUEST RECEIVED _____

REQUEST APPROVED _____ DATE _____

REQUEST DENIED _____ DATE _____

REMARKS:

PARKVILLE FIRE DEPARTMENT

Policy and Procedures

Policy Number 10-100 Volume 1

Effective Date January 1, 2010 **Approved** Howard M. Jones **Fire Chief**

Employee Formal Grievance Policy

Authority-Vested in the Fire Chief by City of Parkville ordinance 104 – 1967

Responsibility-It is the responsibility of the Deputy Fire Chief to review and update this policy as needed for the safe and efficient operation of the Fire Department.

Policy- All employees shall be treated with respect and comply all policies and procedures of Parkville Fire Department and will be allowed to file grievance without fear of retribution.

Procedure – Any employee that believes that he/she has wrongly been denied fair and /or equal application of policy, procedures, pay scales, or promotion and receives no relief after a verbal request may file a formal grievance **Step Two (2)**. A formal grievance must be filed no more than ten (10) days after the incident or action. Any employee filing a formal grievance shall utilize grievance form 10–200. This policy complies with Parkville Firefighters Association contract 2010 – 2015.

See Attached Form 10-200

PARKVILLE FIRE DEPARTMENT

Policy and Procedures

Grievance Form 10 – 200

Step Two (2)

To be completed by Employee

SECTION A

Date of Filing_____

From_____

Employee Rank Assignment/Shift

Grievance must be submitted within ten (10) calendar days of being grieved

STATEMENT OF GRIEVANCE: (1) Must contain a statement, as complete as possible of the grievance and the facts upon which it is based, including dates, times, locations, names of witnesses, and any policy numbers violated.

(2) Must state the requested remedy or corrective action.

Employee may enter information here or attach additional pages as necessary.

Original copy of Form 10-200 shall be delivered to the employee's immediate supervisor with a copy to the Human Resources office.

Employee_____ **Date**_____

SECTION B

To be completed by the immediate supervisor within ten (10) calendar days of receipt of form

10-200

Supervisor Name Rank Assignment Date Received

Enter Supervisors response here or attach additional pages as necessary

Supervisor Signature_____

Date_____

If the employee is satisfied with the supervisors answer, sign the original and indicate agree and submit to Human Resources to be placed in the employee file. If the employee is dissatisfied sign the original and indicate disagree and forward to the Deputy Fire Chief within ten (10) calendar days of the supervisor's decision.

Agree_____ Disagree _____

PARKVILLE FIRE DEPARTMENT

Leave Request Form 10-01

NAME: Julia A. Freeman DATE: July 29, 2010

ASSIGNMENT / POSITION: Firefighter/Medic Engine #5

DATE OF REQUESTED LEAVE: September 6, 2010

TYPE OF LEAVE: ☒ VACATION ☐ HOLIDAY ☐ COMPENSATORY (CHECK ONE)

OFFICER RECEIVING REQUEST: Lieutenant John Wilbanks

DATE REQUEST RECEIVED: July 29, 2010

REQUEST APPROVED: Lt. J Wilbanks DATE: August 1, 2010

REQUEST DENIED _____ DATE _____

REMARKS: Staffing requirements met no other leave time on E-5

PARKVILLE FIRE DEPARTMENT

Policy and Procedures

Grievance Form 10 – 200

Step Two (2)

To be completed by Employee

SECTION A

Date of Filing: **August 13, 2010**

From **Julia A. Freeman Firefighter Engine #5 B-Shift**

Employee Rank Assignment/Shift

Grievance must be submitted within ten (10) calendar days of being grieved

STATEMENT OF GRIEVANCE: (1) Must contain a statement, as complete as possible of the grievance and the facts upon which it is based, including dates, times, locations, names of witnesses, and any policy numbers violated.

(2) Must state the requested remedy or corrective action.

Please see attachments.

Original copy of Form 10-200 shall be delivered to the employee's immediate supervisor with a copy to the Human Resources office.

Employee: Julia A. Freeman Date: August 13, 2010

SECTION B

To be completed by the immediate supervisor within ten (10) calendar days of receipt of form

10-200

Supervisor Name Rank Assignment Date Received

Enter Supervisors response here or attach additional pages as necessary

Supervisor Signature_____

Date_____

If the employee is satisfied with the supervisors answer, sign the original and indicate agree and submit to Human Resources to be placed in the employee file. If the employee is dissatisfied sign the original and indicate disagree and forward to the Deputy Fire Chief within ten (10) calendar days of the supervisor's decision.

Agree_____ Disagree _____

PARKVILLE FIRE DEPARTMENT

1983 Fire Prevention Way

Parkville Anystate 11223

TO: Lieutenant John Wilbanks

FROM: **Julia A. Freeman**

Firefighter Julia A. Freeman

DATE: August 13, 2010

SUBJECT: Grievance Attachment To Form 10-200

On July 29, 2010 I utilized form 10-01 to request vacation leave for September 6, 2010 in accordance with policy 10-201. On August 1, 2010 Lieutenant John Wilbanks approved the requested leave time and placed the leave on the station calendar. On August 4, 2010 Acting Officer Sergeant Bart Casey told me that my leave request had been rescinded because of an error on the calendar and I would report to duty on Rescue 5 on September 6, 2010. I reviewed the station leave request file and found that Sergeant Bart Casey had approved leave time for another employee after the approval of my request.

I file formal grievance in accordance with policy 10-100 when on August 4, 2010 policy 10-201 was violated and my leave request was cancelled. As a remedy I request that my leave request for September 6, 2010 be reinstated.

PARKVILLE FIRE DEPARTMENT

Leave Request Form 10-01

NAME: Robert A. Jones DATE : August 4, 2010

ASSIGNMENT / POSITION: Firefighter/Medic Rescue #5

DATE OF REQUESTED LEAVE: September 6, 2010

TYPE OF LEAVE: ☒ VACATION ☐ HOLIDAY ☐ COMPENSATORY (CHECK ONE)

OFFICER RECEIVING REQUEST: Sergeant Bart Casey

DATE REQUEST RECEIVED: August 4, 2010

REQUEST APPROVED: Sgt. Bart Casey

DATE: August 4, 2010

REQUEST DENIED _____ DATE _____

REMARKS: Staffing requirements met will utilize medic from engine#5

PARKVILLE FIRE DEPARTMENT

1983 Fire Prevention Way

Parkville Anystate 11223

TO: Lieutenant John Wilbanks

FROM: **Bart Casey**

Sergeant Bart Casey

DATE: August 16, 2010

SUBJECT: Julia Freeman Complaint

On August 4, 2010 I approved the leave request of Fire/Medic Robert A. Jones for September 6, 2010. I did review the calendar and found that Fire/Medic Freeman was off and I looked in the file and reviewed her leave request. The problem is that Fire/Medic Jones ask me for this day on July 26, 2010 and I forgot to do the paperwork and mention it to you. Fire/Medic Jones had already bought plane tickets for his trip and Fire/Medic Freeman was the only other medic so that is why I cancelled her leave. I made this decision in the best interest of the department and tried to follow policy 10-201.

PARKVILLE FIRE DEPARTMENT

Policy and Procedures

Grievance Form 10 – 200

Step Two (2)

To be completed by Employee

SECTION A

Date of Filing **August 13, 2010**

From: Julia A. Freeman Firefighter Engine #5 B-Shift

Employee Rank Assignment/Shift

Grievance must be submitted within ten (10) calendar days of being grieved

STATEMENT OF GRIEVANCE: (1) Must contain a statement, as complete as possible of the grievance and the facts upon which it is based, including dates, times, locations, names of witnesses, and any policy numbers violated.

(2) Must state the requested remedy or corrective action.

Please see attachments.

Original copy of Form 10-200 shall be delivered to the employee's immediate supervisor with a copy to the Human Resources office.

Employee: Julia A. Freeman Date: August 13, 2010

SECTION B

To be completed by the immediate supervisor within ten (10) calendar days of receipt of form

10-200

John Wilbanks Lieutenant Engine #5 B-Shift August 13,2010

Supervisor Name Rank Assignment Date Received

Please see attachment to form 10-200 (STUDENTS ANSWER TO GRIEVANCE)

Supervisor Signature: John Wilbanks Date: August 19, 2010

If the employee is satisfied with the supervisors answer, sign the original and indicate agree and submit to Human Resources to be placed in the employee file. If the employee is dissatisfied sign the original and indicate disagree and forward to the Deputy Fire Chief within ten (10) calendar days of the supervisor's decision.

Agree_____ Disagree _____

PARKVILLE FIRE DEPARTMENT

1983 Fire Prevention Way

Parkville Anystate 11223

TO:

FROM:

DATE:

SUBJECT:

PART 2

As Lieutenant John Wilbanks you have been ordered by your station Captain to complete a schedule for the month of September 2010 and submit it to the Captain. Utilizing all documentation from PART 1 of this project, complete this order while attempting to accomplish the request below.

1. Off-time request: a. Each person must be scheduled for an off-day (Kelley Day)
b. Review the attached form 10-01 leave request and approve as capable.
2. Memo from the administrative chief's office stating that your station is scheduled for annual physicals during the month of September. Each firefighter must be scheduled; allow two (2) hours for each physical. Clinic hours are Monday through Friday 0800 to 1200.
3. Pre-fire Planning; each shift must complete at least one (1) per week Monday – Friday average time, two (2) hours.
4. Memo from the district chief stating hydrant testing will be completed the month of September. You are to select two (2) consecutive shifts in which testing will be done so area residents can be notified.
5. Memo from chief of training stating each shift will complete the four (4) hour training class on hazardous materials and have a four (4) hour drill at the drill field. Each person must be present.

Utilize the enclosed calendar to make all assignments for the month. **September**
2010

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1	2		3 B	4	5	
6 B	7	8	9 B	10	11	12 B
13	14	15 B	16	17	18 B	19
20	21 B	22	23	24 B	25	26
27 B		28	29		30 B	