



## CITY OF WEST ALLIS CLASSIFICATION AND COMPENSATION STUDY APPEAL PROCESS

**Important - All appeals must be filed with the Human Resources Director by May 15, 2017.**

The following information outlines the process for employee appeals of grade position allocations resulting from the Classification and Compensation Study.

### **BASIS FOR APPEAL**

*If an employee feels that the Consultant –*

- 1) Committed an error in classifying his/her position, i.e. – misunderstanding of responsibilities and duties;
- OR**
- 2) The employee's job has changed significantly since the original Job Description Questionnaire (JDQ) response – then the employee may supply additional information and request a re-evaluation.

### **APPEAL GUIDELINES**

- Appeals must be based on the original JDQ.
- Employee shall provide documentation and written reasons why they believe their grade has been incorrectly accessed.
- Any comparisons with other positions must be based on documented evidence submitted by the appellant.
- Appeals based solely on comparison with other positions without documented evidence will not be considered valid.
- Policy decisions on pay structure, market comparisons, and pay plan implementation are not subject to appeal.
- **All appeals must be filed by May 15, 2017 with the Human Resources Director.**

### **APPEAL PROCESS STEPS**

#### Step 1:

If an employee believes their job has been incorrectly graded the employee must first review the original submitted JDQ. If the employee then wishes to submit an appeal, then the employee shall complete an Appeal Form. The Appeal Form must include a statement for the appeal limited to the two criteria previously explained above:

- 1) The consultant committed an error in classifying his/ her position (*Employee shall provide documentation and written reasons why they believe their grade has been incorrectly accessed. Any comparisons with other positions must be based on documented evidence submitted by the appellant. Appeals based solely on comparison with other positions without documented evidence will not be considered valid.*)

**OR**

- 2) The employee's job has changed significantly since the original JDQ response. If the appeal involves a claim of additional responsibilities or significant changes to the position since the completion of the JDQ, the employee must attach a hard copy of their original JDQ, with any changes indicated on the JDQ itself. Changes can either be shown in handwriting, or if the employee uses the electronic form of the JDQ,

changes should be made very clear using underlining or some other demarcation.

Step 2:

The Department Head will review the information provided by the employee, certify that it is factual and correct or indicate any areas of inaccuracy or concern, and sign the form. The Department Head will then submit the appeal to the Human Resource Director for submission to the job evaluation Consultant for review.

Step 3:

The Human Resources Director will review each submittal for completion prior to submittal.

Step 4:

The Consultant will discuss each appeal with the Human Resource Director, reviewing the substance and merits of each appeal. Based upon this review, the Consultant will make a recommendation on each appeal to the City.

Step 5:

The Human Resources Director will review the Consultant's appeal recommendation with the Department Head and employee, if applicable.

Step 6:

If the Department Head does not agree with the appeal recommendation, a job evaluation level review from the Consultant may be requested. The Consultant will present this review to the Department Head, Human Resources Director, and City Administrator.

Step 7:

If after the job evaluation level review from the Consultant (or appeals recommendation), the Department Head, Human Resources Director, and City Administrator will review the JDQ rating and do not agree with the review results, adjustments to the grade placement may be recommended. by the Department Head, Human Resources Director, and City Administrator.

Step 8 (if applicable):

If an adjustment to the position's grade placement is decided upon by the Department Head, Human Resources Director and City Administrator; this information will be submitted to the Common Council for consideration/approval and subsequent inclusion in the salary/wage ordinance pursuant to Policy and Procedure 1110 –Creating, Maintaining, and Administering Pay Ranges.

The final decision on all appeals, including response to the appellant, will be the responsibility of the City under the direction of the City Administrator and Human Resources Director.

**All appeals must be filed with the Human Resources Director by May 15, 2017.**



# CITY OF WEST ALLIS EMPLOYEE COMPENSATION AND CLASSIFICATION PLAN APPEAL FORM

Important - All appeals must be filed with the Human Resources Director by May 15, 2017.

Employee Name: \_\_\_\_\_  
Current Title: \_\_\_\_\_  
Proposed Title: \_\_\_\_\_  
Department: \_\_\_\_\_

**I believe my position was incorrectly classified because: (Check the appropriate box and initial on applicable numbered lines.)**

**Option 1**

The Consultant committed an error in classifying my position.

1) \_\_\_\_\_ Documentation and written reasons why I believe my grade has been incorrectly assessed are attached.

**and**

2) \_\_\_\_\_ I understand that any comparisons with other positions must be based on documented evidence and that appeals based solely on comparison with other positions without documented evidence will not be considered valid.

**OR**

**Option 2**

My job has changed significantly since the original JDQ was submitted.

1) \_\_\_\_\_ A hard copy of my original JDQ, with any changes relating to additional responsibilities or significant changes to the position since the completion of the JDQ, are indicated on the attached updated JDQ. (*Changes can either be shown in handwriting, or if the employee uses the electronic form of the JDQ, changes should be made very clear using underlining or some other demarcation.*)

**and**

2) \_\_\_\_\_ On the attached updated JDQ, I have also explained when the duties changed, the reason for the change, and from where the duties originated. And if the duties came from another position, I have indicated from which position they were removed. (*Indicate the other position's current title and that of the proposed title.*)

**Note: City Council policy decisions on pay structure, market comparisons, and pay plan implementation are not subject to appeal.**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Department Head Section**

I agree with the information provided by this employee.

I provide the following clarifications, or additional information to this employee's submittal.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Department Head Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Human Resources Director Section

I have reviewed this submittal for completeness.

Additional Comments: \_\_\_\_\_

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\_\_\_\_\_

Human Resources Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ALL APPEALS MUST BE FILED WITH THE HUMAN RESOURCES DIRECTOR BY MAY 15, 2017.**