Associate Supervisor Program

Assuming Responsibility For Supervision

Participant’s Guide
TD-41G-2
Course 17590-00

September 12, 1998

HUMAN RESOURCES
Employee Development
Associate Supervisor Program

Assuming Responsibility For Supervision

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TD-41G-2
Course 17590-00

September 12, 1998

United States Postal Service
Human Resources
Employee Development
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Use of Training Materials

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WEEK 9

SAFETY AWARENESS AND ACCIDENT INVESTIGATION
UNIT 1

SAFETY AWARENESS AND ACCIDENT INVESTIGATION

TERMINAL OBJECTIVE:
Upon completion of this unit, the participant will be able to recognize the importance of preventing accidents and injuries, and how to effectively investigate accidents when they occur.

Specific Activities: During this unit the participant will:

1. Learn the specifics of the USPS safety policy, rules and regulations, and the supervisor’s role.
2. Demonstrate how to correctly process PS Forms 1767, 1769, and other postal safety and accident forms.
3. Prepare a PS Form 1783, Job Safety Analysis (JSA).
4. Learn how to thoroughly investigate an accident.

ENABLING OBJECTIVES:
Participant will be able to:

1. Relate the USPS safety philosophy, policies, rules and regulations.
2. Describe the role of the initial level supervisor in the Postal Service’s safety awareness program.
3. Complete all required forms for safety and accident prevention and investigation.
4. Explain how to create and maintain a safe working environment for their employees.
SAFETY REVIEW

(Circle or write in the correct answer.)

1. Safety is __________________________ responsibility.
   a. the supervisor’s
   b. Office of Safety and Health
   c. the employee’s
   d. the union’s
   e. all of the above

2. According to the Postal Service’s safety philosophy any injury can be prevented.
   True or False.

3. Name three of the seven keys to good safety supervision.

   ____________________________________________________
   ____________________________________________________
   ____________________________________________________
   ____________________________________________________
   ____________________________________________________
   ____________________________________________________
   ____________________________________________________
4. Employees should be encouraged to report hazards using what form?
   a. PS Form 1767
   b. PS Form 1769
   c. PS Form 1783
   d. PS Form 1784

5. Which form provides a useful tool for reviewing job methods and uncovering hazards?

6. Safety training is more important for new employees than experienced ones. True or False.

7. Weekly safety talks and quarterly JSAs are optional for supervisors? True or False
SAFETY AND ACCIDENT INVESTIGATION

USPS Safety Philosophy

Seven Keys to Good Safety Supervision

1.

2.

3.

4.

5.

6.

7.

An eighth, and very important key is to *always reinforce good safety practices!* When you see your employees working in a safe and productive manner, let them know it.
ATTITUDES:
Underlying causes of unsafe work practices:

It is your responsibility to keep your employees’ minds on safety at all times through coaching, talking, and listening to them. Keep them aware of:

- general safety regulations;
- hazards and rules unique to your work area;
- protective equipment where appropriate.

Always be alert for unsafe conditions and continuously inspect your area for potential hazards. Keep asking yourself, “Is there any way people could injure themselves doing this job?”
When you do identify potential safety hazards in your work area, develop procedures to eliminate them. Consider these solutions:

- find a new way to do the hazardous job itself;
- change or eliminate the hazardous conditions that create the hazard;
- change the work procedure or process to eliminate or minimize any hazards that are still present;
- try to reduce the necessity or frequency of doing a hazardous job.

The final step for the supervisor is to let all employees know what your solutions to the hazardous situation are. Provide thorough explanations and training if necessary, so your employees know what their role is.

SAFETY AWARENESS TOOLS

There are several tools available to you, the postal supervisor, to help promote safety awareness and accident prevention.

These are:

__________________________________________

__________________________________________

__________________________________________

__________________________________________
SAFETY TALKS

Supervisors should keep a written record of the safety talks they give including the following information:

- time and date;
- subject matter;
- employees in attendance.

Some reasons for safety talks and training for new employees are:

Why safety talks and training for experienced employees is important:

Publication 129, Safety Talks, is available from your Customer Service or Plant Safety Specialist to assist you in the preparation of your talks. There are many other good sources for safety talks that all supervisors should be familiar with.
Developing interesting and effective safety talks for your employees requires some creativity by you, the supervisor. Keep your eyes and ears open for stories and other items that might be relevant to your employees safety and well-being.

Some always relevant topics for weekly safety talks are:
ACCIDENT INVESTIGATION

The purpose of an accident investigation is to identify the primary and contributing factors associated with an accident in order to implement corrective measures to avoid reoccurrence. As a supervisor, you have the important responsibility to complete a thorough, prompt, and accurate investigation and to document your findings and corrective actions.

CONCERN:

You can accomplish your safety goals by:

- being people, not task, oriented;
- always treating our employees as adults;
- respecting them as individuals;
- caring about our people.

Remember, they are our most important resource.

INVESTIGATION:

The immediate steps a supervisor should take after an accident happens:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
WHEN AN ACCIDENT HAPPENS

**Keys to an effective accident investigation:**

- Be specific, don’t guess or estimate if you can accurately measure.
- Separate fact from opinion when gathering statements from witnesses.
- Look for yourself, don’t rely on witnesses for all of your facts, investigate as much as you can yourself.
- Don’t depend on your memory, take as thorough and complete notes as possible of the incident and eyewitness statements. Studies show that a person loses 50% of their recollection of an incident within 12 hours, 70% within 24 hours, and 85% within 7 days.
- Don’t delay your investigation, grab a pen and paper and begin investigating immediately.
- Know your work area. Get to the scene of a vehicular or industrial accident as soon as possible. Have maps, street guides, post office locations, etc. readily available.
- Know location and telephone numbers of hospitals, emergency services, fire departments, etc. Be prepared to quickly summon an ambulance if necessary. Know the Safety and Health Office number for immediate contact.
- Have an accident kit prepared and available containing a clipboard with lined paper for notes, tape measure (100 ft.), pens and pencils, accident forms (1769, 1700). If possible, a camera and tape recorder should be included in the accident kit, particularly for vehicular accident investigations. Keep your accident kit stocked with the necessary items at all times.
Suggested sequence of steps to take when investigating an accident:

- identify witnesses;
- interview witnesses and injured party or parties if practical;
- photograph evidence, temporary or short-lived items first;
- develop a pencil and paper sketch for measurements if necessary;
- for vehicular accidents, confer with authorities regarding any traffic laws that may have been violated and by whom;
- ensure that the unsafe condition that caused the accident is abated immediately;
- review all forms for completeness prior to submission.

The critical evidence centers around three factors, 1) people, 2) equipment, and 3) environment. The people factor includes witnesses as well as the injured parties. The equipment includes any materials in use at the time of the accident. The environmental factor includes weather, temperature, lighting, noise, work layout.

Good interviewing techniques:

When interviewing witnesses and the injured parties try to observe the following interviewing techniques:

- put person at ease, conduct interview in a relaxed atmosphere;
- if practical, interview at the accident site;
- get the story without prompting or interrupting;
- be a good, concerned listener;
- ask open ended questions;
- take notes unobtrusively;
- repeat the information after the employee is finished;
- keep the “door open” (figuratively);
- always end on a positive note.
Remember, the purpose of interviewing is to find facts not fault. Therefore, avoid conflict or confrontation. A hostile interview will accomplish next to nothing, and probably be counter-productive.

**Reporting:**

- ensure the well being of the employee, provide for any necessary medical attention;
- visit the accident scene as soon as possible;
- begin your investigation immediately; secure the mail, if necessary

The accident report requires the following questions be answered:

- who?
- what?
- where?
- when?
- why?
- how?

Specifically, the accident report must address:

- who was involved?
- what exactly happened?
- where did the accident happen?
- when did the accident happen?
- who did the accident happen to, including events leading to the accident and causes of actual injury or damage?
- why did this accident occur;
- how did the accident happen, including hazardous conditions, equipment, machines, or material involved?
Corrective Action:

Only when the actual causes of an accident are known can corrective action be taken.

Some corrective actions are:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________
INDUSTRIAL ACCIDENT NARRATIVE
EXERCISE

On Tuesday, January 24, 1996, at 10:30 a.m., MPE (PS-6) mechanic Donald F. Jones was working in the incoming area on a conveyor belt near column H8 at the first floor of the main post office, St. Paul, MN 55101-9998. Mr. Jones was attempting to perform preventive maintenance (PM) on the Dual-Pass Rough Culler when he noticed a piece of flat mail revolving around the tail-end drum. With the conveyor running, he attempted to extract the piece of mail with his left hand. His little finger, then his hand, and finally his entire left arm were caught between the belt and the drum. Mailhandler Henry J. Brown stopped the machine and called the medical unit. Mr. Jones’ arm was badly mangled. Bone fragments could be seen protruding through the skin.

Mr. Jones is 32 years old. He has been with the Postal Service for 5 years and 6 months. He has had approximately 40 hours of safety related training. His SSN is 111-20-3333; pay location 213; finance number 07-4499; region/division B/A 6A; accident record: no vehicular accidents; industrial accidents: 1991, 1993 (2), 1994.

The building has 16 floors, covers an entire city block in the downtown area and is a Category A-GPO. The floors are concrete, lighting is by fluorescent-tube lamp. There is a JSA on file for performing PM on the Dual-Pass Rough Cull machine.
MOTOR VEHICLE ACCIDENT EXERCISE

On Friday, September 1, 1995, at 1:40 p.m., Rural Carrier Carl M. Smith was driving on West River Road. He had pulled halfway onto the shoulder to service a group of NDCBUs and was reentering the road when his vehicle was struck in the rear end by a 1992 Chevrolet sedan. Carrier Smith’s vehicle ran off the road into a ditch and came to rest on its right side. Mr. Smith received several cuts from broken window glass but, because he was wearing his seatbelt, received no other injuries. He received stitches for the worst cut to the head at the local emergency room and returned to work the next day. The driver of the Chevrolet sedan, 18-year-old Matthew Groves was hospitalized with multiple head injuries.

Mr. Smith is 31 years old and has been employed 1 year and 6 months. His SSN is 222-33-4444; pay location 102; finance number 24-6802; region/division 7W. He has no previous motor vehicle accidents, and one industrial accident (slipped and fell on ice in parking area). There is no JSA on file.

The accident occurred on a blacktop highway. The weather was cloudy and overcast, and the road surface was wet from rain earlier in the day. Mr. Smith was driving a privately owned 1981 1/4-ton right-hand-drive jeep. Damage to Mr. Smith’s vehicle was estimated at $1500, and $2500 to the other driver’s vehicle. Although state law requires rural carriers to use yellow flashing warning lights, Mr. Smith did not have such lights on his vehicle.

West River Road is a winding road. Mr. Groves had just come around a curve at high rate of speed when he struck Mr. Smith’s vehicle; Mr. Grove’s vision may have been partially obstructed by large trees and bushes at the end of the road. Mr. Smith is assigned to the Apple Valley Station, Apple Valley MN 55124-9998.
UNIT 1

SAFETY AWARENESS AND ACCIDENT INVESTIGATION:

KEY POINTS:

• set a good example;
• know the operation;
• be alert for unsafe conditions;
• inspect often and intelligently;
• take effective corrective action;
• maintain discipline;
• know your employees.

Remember, any injury can be prevented and you are accountable for employee safety!
ASSUMING RESPONSIBILITY FOR SUPERVISION

WEEK 9 — ON-THE-JOB ASSIGNMENT

A. Develop and present a five minute safety talk to employees on a subject relative to the safety statistics of the unit.

B. Prepare written suggestions to improve the unit’s achievement of safety goals, where goals are not being met. On-site trainer will review.

C. The trainee will explain the purposes of all safety forms to on-site trainer and know how to complete and distribute them. They are:

- PS Form 1700, Accident Investigation Worksheet,
- PS Form 1767, Report of Hazardous Condition,
- PS Form 1769, Accident Report,
- PS Form 1783, Job Safety Analysis.

On-site trainer will evaluate the presentation skills of trainee and relevancy of suggestions, and evaluate knowledge of Safety Forms.
WEEK 10

MANAGING DISCIPLINE
UNIT 2

MANAGING DISCIPLINE

TERMINAL OBJECTIVE:

Upon completion of this unit, the participant will be able to define and explain the supervisor's use of appropriate discipline procedures and how to create an environment where corrective measures are implemented positively.

Specific Activities: During this unit, the participant will:

1. Participate in a "Correcting Deficiencies" exercise.
2. Complete a case study on "Letters of Warning."
3. Discuss "Suspensions" and other discipline matters.

ENABLING OBJECTIVES:

Participant will be able to:

1. Explain the difference between Contract and Discipline Grievances.
2. Define the burden of proof for both parties.
3. Describe how to solve problems in a positive manner.
4. Relate the importance of developing a good working relationship with Union representatives.
MANAGING DISCIPLINE

CONTRACT GRIEVANCE:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

DISCIPLINE GRIEVANCE:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Discipline must be corrective in nature and not punitive; in addition, it must be for "just cause."
JUST CAUSE

WHAT IS JUST CAUSE? The term just cause is found in Article 16 of our National Agreements. Arbitrators frequently divide the question of what constitutes just cause into six sub-questions and often apply the following criteria to determine whether the action was for just cause. These criteria are the basic considerations that the supervisor must determine before initiating disciplinary action.

1. IS THERE A RULE? If so, was the employee aware of the rule? Was the employee forewarned of the disciplinary consequences for failure to follow the rule?

Important: It is not enough to say, "Well, everybody knows that rule," or "We posted that rule 10 years ago." You may have to prove that the employee should have known of the rule.

Certain standards of conduct are normally expected in the industrial environment and it is assumed by arbitrators that employees should be aware of these standards. For example, an employee charged with intoxication on duty, fighting on duty, pilferage, sabotage, or insubordination, etc., may be generally assumed to have understood that these offenses are neither condoned nor acceptable, even though management may not have issued specific regulations to that effect.

2. IS THE RULE A REASONABLE RULE? Management must maintain work rules by continually updating and reviewing them, and making sure that they are reasonable, based on the overall objective of safe and efficient work performance. Management's rules are reasonably related to business efficiency, safe operation of our business, and the performance we might expect of the employee, and this is known to the employee.

*Note: In some cases, an employee can justify disobedience if it can be shown that to obey the order would jeopardize personal safety and integrity.
3. IS THE RULE CONSISTENTLY AND EQUITABLY ENFORCED? If a rule is worthwhile, it is worth enforcing, but be sure that it is applied fairly and without discrimination. Consistent and equitable enforcement is a critical factor, and claiming failure in this regard is one of the union's most successful defenses. The Postal Service has been overturned or reversed in some cases because of not consistently and equitably enforcing the rules. Consistently overlooking employee infractions and then disciplining without warning is one issue. If employees are consistently allowed to smoke in areas designated as "No Smoking" areas, it is not appropriate suddenly to start disciplining them for this violation. In such cases, management loses its right to discipline for that infraction, in effect, unless it first puts employees (and the unions) on notice of its intent to enforce that regulation again.

Singling out employees for discipline is another issue. If several employees commit an offense, it is not equitable to discipline only one.

When the Postal Service maintains that certain conduct is serious enough to be grounds for discharge, it is unwise—as well as unfair—to make exceptions. If the Postal Service is to maintain consistency in its position that theft or destruction of deliverable mail is grounds for discharge even on a first offense, for example, then the otherwise good employee guilty of this offense, like the borderline or marginal employee, must be discharged.

4. WAS A THOROUGH INVESTIGATION COMPLETED? Before administering the discipline, management must make an investigation to determine whether the employee committed the offense. Management must ensure that its investigation is thorough and objective.

This is the employee's "day in court" privilege. Employees have the right to know with reasonable detail what the charges are and to be given a reasonable opportunity to defend themselves before the discipline is initiated.
5. WAS THE SEVERITY OF THE DISCIPLINE REASONABLY RELATED TO THE INFRACTION ITSELF AND IN LINE WITH THAT USUALLY ADMINISTERED, AS WELL AS TO THE SERIOUSNESS OF THE EMPLOYEE’S PAST RECORD? The following is an example of what arbitrators may consider an inequitable discipline: If an installation consistently issues 5-day suspensions for a particular offense, it would be extremely difficult to justify why an employee with a past record similar to that of other disciplined employees was issued a 30-day suspension for the same offense.

There is no precise definition of what establishes a "good," "fair," or "bad" record. Reasonable judgment must be used. An employee's record of previous offenses may never be used to establish guilt in a case you presently have under consideration, but it may be used to determine the appropriate disciplinary penalty.

The Postal Service feels that unless a penalty is so far out of line with other penalties for similar offenses as to be discriminatory, the arbitrator should make no effort to equalize penalties. As a practical matter, however, arbitrators do not always share this view. Therefore, the Postal Service should be prepared to justify why a particular employee may have been issued a more severe discipline than others.

6. WAS THE DISCIPLINARY ACTION TAKEN IN A TIMELY MANNER? Disciplinary actions should be taken as promptly as possible after the offense has been committed.

The contract provides that for minor offenses management has the responsibility to discuss such matters with the employee. Such discussions must be held in private between the employee and the supervisor. These discussions are not considered discipline, and they are not grievable. However, following the discussion, you can make notations, as can the employee. Although you cannot use these notes as an element of prior adverse record in a subsequent disciplinary action against an employee, they may be, where relevant and timely, relied upon to establish that
employees have been made aware of their responsibilities and obligations. Now, let's go into discussions in a little more depth because this is truly a problem-solving element, and, if understood and properly administered, can do much to alleviate disciplinary problems in the future.

MENTAL OUTLINE

• How serious is the offense?
• What is its impact on the service?
• What is the employee's overall performance and past record?
• Did the employee have notice and knowledge of expected behavior?
• What is necessary to correct the employee’s deficiency?

Whenever you are faced with the decision-making aspects of disciplinary problems, attempt to answer the above listed questions in the process.

There are three elements that MUST be included when attempting to correct a deficiency in an employee.

IDENTIFY:

The employee must be told specifically what he/she is doing wrong. Do not use abstract or judgmental language; i.e., attitude, personality, ability, etc.

RECTIFY:

Tell employee EXACTLY what must be done to correct the deficiency.
FOREWARN:

The employee should be told what the consequences will be if the deficiency is not corrected.

One more element that should never be overlooked is POSITIVE REINFORCEMENT. When an employee corrects the problem, let him or her know that you appreciate the effort.
# DISCUSSION NOTES

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**IDENTIFY:**

- 
- 
- 
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**RECTIFY:**

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- 

**FOREWARN:**

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- 

**POSITIVE REINFORCEMENT?**

- 

**DATE:**

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- 
- 

"CORRECTING DEFICIENCIES"

When giving negative or positive feedback, the supervisor must focus on the behavior. The feedback must be specific. Rewrite the following situations in specific language directed toward behavior. Remember: Identify, Rectify, and Forewarn, if necessary. Use positive reinforcement when appropriate.

1. Bob, I just wanted to tell you that you're really doing a good job. You're really doing super. Just keep up the good work.

A. __________________________________________
   __________________________________________
   __________________________________________

2. Janice, you've been late three times in the last two weeks; what's your problem?

A. __________________________________________
   __________________________________________
   __________________________________________

3. Jim, you're a terrible employee; your error rate on the LSM is unacceptable.

A. __________________________________________
   __________________________________________
   __________________________________________

4. Okay, Sherry, I'm letting you off again, but this time bring a doctor's slip.

A. __________________________________________
   __________________________________________
   __________________________________________
CONDUCTING DISCUSSIONS WITH EMPLOYEES

(Do It Right--Not Wrong)

Right: Listen. Listen attentively and politely, not with the bored air of one who has been through this many times before.

Wrong: Do all the talking yourself.

Right: Let employee express his/her own ideas and feelings freely.

Wrong: Dominate the conversation by cross-examining. (No one wants to feel they are being cross-examined as a witness or a criminal.)

Right: Keep the discussion on track and firmly guide it. Do not discuss personalities. Keep to the issue, but don't let the employee feel he or she is the center of the discussion--rather, give the feeling that their work or performance is under consideration.

Wrong: Lose control of the interview.

Right: Be calm and patient. Remember, this is a serious time for the employee so you must show calmness and patience to demonstrate that you know in which direction you are going.

Wrong: Argue. Argument produces nothing but resentment. This definitely indicates that you are weak or have a weak case.
RIGHT: CREATE AN IMPRESSION OF FAIR MINDEDNESS, OPEN-MINDEDNESS. THEY WILL KNOW THAT THIS ISN'T THE END OF THE LINE, AND THAT YOU CAN CHANGE YOUR POSITION IF THE EVIDENCE WARRANTS IT.

Wrong: Leave the impression that you will not alter your opinion.

RIGHT: GET AWAY FROM THE WEAKNESS OR INFRACTION AS SOON AS POSSIBLE AFTER YOU HAVE POINTED IT OUT. DEVELOP PLANS FOR IMPROVEMENT AND MAINTAIN CONTACT.

Wrong: Keep dwelling on the weakness. Make him/her sweat.
HOT STOVE RULE FOR HANDLING FORMAL DISCIPLINE

Consider any proposed formal action not only in terms of the facts, but also consider the reasons for the employee's behavior.

Douglas McGregor draws an analogy between touching a hot stove and experiencing discipline. When you touch a hot stove, your response is immediate, consistent, and impersonal.

a. Immediate: The burn would be immediate, and there would be no question of cause and effect. The closer the consequences to the behavior, the more it is associated with the behavior.

b. Consistent: Everyone who touches the stove is burned. There are few behaviors a supervisor can engage in that are more demoralizing and disruptive than inconsistent disciplinary action.

c. Impersonal: Individuals are burned not because of who they are, but because they touched the stove. The supervisor MUST maintain a focus on behavior. The individual must be made to believe that the only thing being criticized is the behavior itself and not his/her personality.

NOTE: Act on, never react to, discipline that requires thought and preparation. Remember, consider the reasons behind the unacceptable behavior. Offer guidance, if possible.

CASE STUDY

Jack, an LSM clerk, has been in the Postal Service about 5 years and in your unit for about 1 1/2 years. You consider him an average employee who seems to like his job. Recently, you have had two discussions with Jack because he has been taking an inordinate amount of emergency annual leave and some sick leave. You decide to give him a letter of warning.
In the discussion at Step 1 of the appeal, the union representative reveals something you didn’t know. Jack’s wife left him, and he has the children. He’s been having trouble getting a baby-sitter.

How would you handle this case?

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
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_____________________________________________________________________
_____________________________________________________________________

Participant’s Guide
FAILURE TO FOLLOW INSTRUCTIONS

Question: What is the employer’s responsibility in a "failure to follow instructions" charge?
Answer: _____________________________________

Question: What evidence would be necessary?
Answer: _____________________________________

Question: What must you prove?
Answer: _____________________________________
FAILURE TO MAINTAIN REGULAR WORK SCHEDULE

Question: What is management's responsibility?
Answer: _____________________________________
_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________

Question: What is the employee's responsibility?
Answer: _____________________________________
_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________

Question: What must you be able to prove?
Answer: _____________________________________
_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________
FAILURE TO REPORT AS SCHEDULED

Question: What is the employer’s responsibility?
Answer: _____________________________________
________________________________________________
________________________________________________
________________________________________________

Question: What is the employee’s responsibility?
Answer: _____________________________________
________________________________________________
________________________________________________
________________________________________________

Question: What would be the element of proof?
Answer: _____________________________________
________________________________________________
________________________________________________
________________________________________________
INTOXICATION SHOULD BE HANDLED CAREFULLY

This charge should be handled carefully. You need to know how and when in order not to be reversed. Let's analyze.

Question: What is the employer’s responsibility?
Answer: _____________________________________
________________________________________________
________________________________________________
________________________________________________
________________________________________________

Question: What is the employee's responsibility?
Answer: _____________________________________
________________________________________________
________________________________________________
________________________________________________
________________________________________________

Question: What must you prove?
Answer: _____________________________________
________________________________________________
________________________________________________
________________________________________________
________________________________________________

Although you may have "just cause" in a situation (where an employee might be charged with consumption of alcoholic beverages on postal premises), you face difficulty in proving that the employee was legally "intoxicated" or that the cause of the intoxication was "alcohol" or another chemical dependency.
CHARGES YOU SHOULD AVOID USING

Two of the favorite charges formerly used and which still occur occasionally are (1) that the employee was not "ready, willing, and able" to do the job, or that (2) something constituted "conduct unbecoming of a postal employee."

Question: Why are you to not to use these charges?
Answer: _____________________________________
                                                 _____________________________________
                                                 _____________________________________
                                                 _____________________________________

Question: What is management's responsibility?
Answer: _____________________________________
                                                 _____________________________________
                                                 _____________________________________
                                                 _____________________________________

Question: What is the employee's responsibility?
Answer: _____________________________________
                                                 _____________________________________
                                                 _____________________________________
                                                 _____________________________________

Question: What do you have to prove?
Answer: _____________________________________
                                                 _____________________________________
                                                 _____________________________________
                                                 _____________________________________
Question: Now, how would you write up this charge?

Answer: _____________________________________
________________________________________________
________________________________________________
________________________________________________

The local labor relations office has access to the National Labor Relations Information System which includes a data base entitled "discipline." Extensive information is available about framing and writing charges plus other documents on all aspects of discipline.
EFFECTIVE DISCIPLINE

It is imperative that supervisors build the case in order of the events, gathering the facts through record evidence and testimony. This information should be filed and safeguarded, as it can take an extended period of time in some cases for a grievance to reach arbitration. Further, the information will be needed for the case file at Steps 2 and 3 of the procedure and also provided to the union, if requested. The following are examples of the type of evidence supervisors must gather prior to issuing disciplinary actions.

Infraction – Failure to Maintain Regular Attendance

- Form 3972, Record of Attendance
- Forms 3971, Leave Request for the date at issue
- Supervisor's private notes regarding previous discussions with the employee about this matter.
- ELM, Attendance Regulations (Parts 511 and 666.8)
- Relevant local policies, procedures service talk information, etc., which demonstrates the employee was made aware of the attendance requirements.
- Prior, citable disciplinary actions (within past 2 years)

Infraction – Failure To Follow Instructions

- Supervisor's written statement covering the complete incident, including exactly what instructions were given, and what, if any, additional dialogue occurred between the supervisor and employee.
- Witness statements (if any)
- Supervisor’s private notes regarding employee responsibility to follow instructions.
- Prior, citable disciplinary actions (within past 2 years)

See Article 16 Section 2 of the current National Agreement pertaining to job discussion notes, and Section 353.3 of the ASM regarding acts of disclosure.
UNIT 2

MANAGING DISCIPLINE

KEY POINTS:

- In contract grievances burden of proof is with Unions.
- In discipline grievances burden of proof is with Management.
- Enforce Rules Equitably and Consistently.
- Try to solve the problem in a positive manner.
WEEK 10

GREIVANCE PROCEDURES
UNIT 3

GRIEVANCE PROCEDURES

TERMINAL OBJECTIVE:

Upon completion of this unit, the participant will be able to apply the procedural requirements of Articles 15 and 17 of the National Agreement.

ENABLING OBJECTIVES:

The participant will be able to:

1. Define a grievance according to the language of the National Agreement.
2. Demonstrate how to properly complete PS Form 2608.
3. Explain the proper use of PS Form 7020 and the provisions of Article 17 of the National Agreement.
4. Demonstrate or observe the application of interpersonal skills in grievance handling.
5. Participant will be able to:
   • Complete PS Form 2608.
   • Understand grievance procedures of the National Agreement.
   • Understand time limits for filing/responding to grievances.
   • Understand the necessity of good interpersonal skills in grievance handling.
How do we define a grievance?
Answer:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Within how many days of the incident must the grievance be filed?
Answer:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

How many days do you, the supervisor, have to render a decision to the grievance?
Answer:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

How is the decision rendered?
Answer:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Within 5 days of the decision, what can the steward request?
Answer:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
What happens if supervisor does not give a decision within 5 days and has not agreed to extend the time limit?

Answer:

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

Does the supervisor have any other responsibility after giving the Step 1 decision?

Answer:

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

If the union decides to appeal your decision to Step 2, how long does it have to appeal it?

Answer:

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

What happens if the grievance is not raised within the required 14 days?

Answer:

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________
DUAL FILINGS

When a supervisor is faced with an individual who has filed both an EEO complaint and a grievance, (and possibly even gone to the Merit Systems Protection Board), there is nothing that can be done except to handle each in the normal course. The supervisor must meet the contract provisions and issue a decision, as in any other grievance. He/she also would have to respond to an EEO Counselor, as in any other complaint.

BUT, THERE IS SOMETHING VERY IMPORTANT TO REMEMBER:

When you are involved in attempting to settle a grievance at step one, it is within your right to inquire if other appeals have been filed on the same issue in other forums (EEO and MSPB). You should make an attempt to resolve all the appeals with your settlement.

It is suggested that if a supervisor is aware that the employee has filed appeals in both forums and a settlement is reached—either on the grievance or the EEO complaint—it should be noted on the appropriate form.

PS FORM 2608

In discussing the grievance procedure, we mentioned the Standard Grievance Form used by the unions. Management also has a form you are required to complete; it is PS Form 2608, *Grievance Summary - Step 1*. The proper completion of this form is critical at Step 2. If it is not properly completed, it will likely be referred back to you for completion.

PS FORM 7020

Following along in our coverage of forms used in the grievance procedure, I want to discuss a small but important form, the PS Form 7020, *Authorized Absence From the Workroom Floor*. Article 17 of the National
Agreement allows the Union to designate stewards to investigate, present, and adjust grievances. The Agreement imposes conditions under which the steward may function, as well as the rights and responsibilities of the supervisor. Before we take an in-depth look at the language in Article 17, you should be familiar with PS Form 7020 which is used to authorize and record stewards' duty time.

**SITUATION 1**

A steward comes to you and wishes to investigate a grievance. You have no prior knowledge of a grievance having been filed; no employee has told you of a grievance. Should you let the steward have time on-the-clock to talk to this employee?

**SITUATION 2**

A steward comes to you after a Step 1 hearing; is not satisfied with your decision; wishes time on-the-clock to write up an appeal to Step 2. Do you grant it?

**SITUATION 3**

A steward comes to you, wishes to have a Step 1 meeting and says employee Chavis is the grievant. You set up the meeting.

Who is on-the-clock?
OBSERVER'S INSTRUCTIONS

The volunteer assuming the role of "supervisor" is being pressed to use his/her knowledge of grievance procedures to prevent a grievance from being filed. If the grievance is filed, the volunteer supervisor should not, by reason of his/her own actions, have strengthened the case of the grievant or made the grievance more difficult to settle later.

The second purpose is to see if the supervisor uses a humanistic approach to resolve the problems with which he/she is confronted.

Each supervisor will be provided with only the fact sheet pertaining to the scenario. Each participant without a direct role in a particular scenario will act as an "observer" for the scenario.

1. Observers are to focus their attention on the supervisor. The performance of the supervisor should be watched for the following:
   a. How is the supervisor handling the implied threat of a formal grievance? Is the threat dominating the meeting?
   b. To what degree has the supervisor, in the face of provocations from the steward,
      (1) Acted appropriately
      (2) Kept cool under fire
      (3) Acted assertively
   c. Did supervisor use "I" Statement techniques?
   d. Should the supervisor have terminated the meeting earlier?
   e. What devices did the supervisor use to counter put-downs? Did they work? How well?
   f. Overall, had you been the supervisor, what would you have done differently?
2. Observers are to take notes as needed.

3. Observers will get the opportunity at the close of the role play to comment on what they saw.

4. Observers should be reasonable. This is a learning experience. The participant who volunteered as supervisor has rendered a brave service. Really. Therefore, criticism, under the circumstances, to be valid must also be reasonable. The stewards, please remember, were given better weapons.
SUPERVISOR JERRY GARCIA’S FACTS:

You issued a letter of warning to David Grisman for tardiness. The employee has been tardy five times in the last three weeks.

Day 1 - 15 minutes late
Day 2 - 27 minutes late
Day 3 - 11 minutes late
Day 4 - 37 minutes late
Day 5 - 22 minutes late

Mr. Grisman has consulted Steward Liz Phair. Steward Phair is about to meet with you on the workfloor because the offices are being redecorated. As a consequence, the meeting will be within earshot of a number of employees.

You held a discussion with this employee 6 weeks earlier for three other occasions on which he was tardy. You wonder why David Grisman lasted through his probationary period. He is a poor performer with a bad attitude.

The only reason the employee gave you for being tardy is "personal problems."

You have sent Mr. Grisman a memorandum incorporating the earlier discussion and have it available for Steward Phair’s inspection.

Mr. Grisman is physically challenged. However, this does not keep him from driving a regular car or performing his work. Mr. Grisman’s tardiness problems predate the automobile accident that has caused his condition, the total loss of mobility of his left knee joint.

The problem for you, Mr. Grisman’s supervisor, is that you gave him a satisfactory rating out of pity for his being hurt in the accident.
STEWARD LIZ PHAIR'S FACTS:

You know David Grisman, from your own personal knowledge, is a liar. Furthermore, his attendance record, it has been rumored, is ridiculous. The facts Grisman gave you are that he was late a couple of times because of his car, that he is a good worker and that Supervisor Garcia hates him.

Yet, on the face of it, given the few facts you have from Grisman, you can make an argument that Supervisor Garcia is picking on Grisman.

After all, the only thing you know directly from Grisman is that he has been late "a couple of times."

If the supervisor has a written memo or letter of warning on file you have to accept it, knowing Grisman's reputation for withholding the whole truth. But, you only have to accept these facts if the supervisor proffers them. It is obviously not in your best interest to push the inquiry in a direction that shows Grisman for the poor employee that he is and that he is a liar to boot.

But, aside from representing Grisman, you have a bigger fish to fry, namely, the coming union election. Steward Lesh has made heavy inroads into your voting bloc. It has become obvious to you that if you are going to beat him in the election, you are going to have to "make things happen."

Representing Grisman is a natural. Grisman has a handicap, stemming from an automobile accident he had 6 months ago. His doctor's diagnosis is that his injuries are permanent. His problems with tardiness predate his automobile accident. He walks with a terrible limp and generates sympathy because of his appearance. Also, Grisman's performance according to his rating, once he's on the job, is acceptable.

Thus, one line of argument is to urge the supervisor to give Grisman a break. He puts in his 40 hours. It's just his being tardy that is the problem.
The steward has to agree to the fact that problems are caused when the supervisor doesn't know when the employee will show up or whether the employee will show up at all. However, if the supervisor doesn't make this argument, the steward is not under any duty to remind him to do so.

The steward's best arguments constitute an appeal to the supervisor's emotions and accusing the supervisor of discrimination against the handicapped. However, Grisman's welfare is secondary. Your real goal is to shake the supervisor up, perhaps getting him to look ridiculous in front of his own employees.

By the same token, if you can intimidate, or even appear to intimidate the supervisor, that's so much icing on the cake.

Some points, if you care to make them are:

1. "You just don't like Mr. Grisman because of his handicap. That is why you discriminate against him. You should be ashamed."
2. "You have a terrible reputation as a supervisor and I can see that the reputation is deserved."
3. "You know I have a perfect right to file a grievance on this."
4. "You know, if you have any 'smarts' at all, that I am in a position to make trouble for you."
5. Do you think that after this episode your employees will have any respect for you?"
6. "Do you think management is going to back you on this?"
7. "You are only being stubborn to spite the union, in general, and me, in particular."
8. "Why are you so anti-union?"
9. "Don't you have a heart? Can't you see how much Mr. Grisman has suffered already?"
10. "You yourself have rated Mr. Grisman's performance as satisfactory. That's the bottom line. All the rest is window dressing."
Remember. If you plan to run for office you must make a good showing. BUT, you can't be extreme. You need to strike a balance. If you become too abusive, your members will not see you as a leader.

If the supervisor tries to break off the meeting, you can try to talk him out of it, but you can't hound him.
### Grievance Summary - Step 1

**U.S. Postal Service**

**1. Grievant’s Name (Last, First and Middle Initial):**

Forward the original of this form to your Step 2 Management Official. Complete Items 1 through 12 and 21. If grievance is denied, complete Items 13 through 20. If additional space is required, continue on reverse. See Handbook EL-921, Supervisor’s Guide to Handling Grievances.

<table>
<thead>
<tr>
<th>2. Facility</th>
<th>3. Craft</th>
<th>4. Grievant’s Title</th>
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<tbody>
<tr>
<td>Bristol, TN</td>
<td>Clerk</td>
<td>Full-time Clerk</td>
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</tbody>
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<table>
<thead>
<tr>
<th>5. Date of Incident</th>
<th>6. Was Grievance Timely at Step 1?</th>
<th>7. Date of Step 1 Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/25/93</td>
<td>Yes</td>
<td>12/3/93</td>
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<tr>
<th>8. Union Official</th>
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<tr>
<td>/G5F/G5F</td>
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<tr>
<th>9. Issue (Complaint or alleged violation)</th>
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<th>10. Remedy Requested (Specific requirements to resolve grievance)</th>
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<tr>
<th>11. Decision (Check one)</th>
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<tbody>
<tr>
<td>Sustained</td>
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<tr>
<th>12. Reasons for Decision</th>
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<tr>
<th>13. Grievance Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Level</td>
</tr>
<tr>
<td>b. Step 12</td>
</tr>
<tr>
<td>c. Tour 2</td>
</tr>
<tr>
<td>d. Section</td>
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<tr>
<td>e. Pay Location</td>
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<tr>
<th>15. Check One</th>
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<td>FTR</td>
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<table>
<thead>
<tr>
<th>16. Off Days</th>
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<tbody>
<tr>
<td>Sat/Sun</td>
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<table>
<thead>
<tr>
<th>17. Work Schedule</th>
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<tbody>
<tr>
<td>7:30 - 4:00</td>
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<thead>
<tr>
<th>18. Background (State all relevant information and attach all supporting documents)</th>
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<tr>
<th>19. Management’s Position</th>
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<table>
<thead>
<tr>
<th>20. Union’s Position</th>
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**PS Form 2608, August 1986**

*U.S. GPO: 1992-312-605/51495*
UNIT 3

GRIEVANCE PROCEDURES

KEY POINTS:

- Use your human relations skills.
- EL-901, Article 15 & 17.
- PS Form 2608.
- PS Form 7020.
ASSUMING RESPONSIBILITY FOR SUPERVISION

WEEK 10 — ON-THE-JOB ASSIGNMENT

A. On-site trainer will provide trainee with a grievance. The trainee will meet with the appropriate union representative(s) after research in order to expedite step one grievance discussion. Trainee will complete PS Form 2608, Step One Grievance Summary, and present to on-site trainer for review and feedback.

B. Develop a comprehensive action plan which will establish a more proactive labor-management climate to resolve problems in the branch or operation for the benefit of labor and management.

C. Read all local agreements and memorandums.

On-site trainer will evaluate trainee’s knowledge and understanding of completed assignments.

OPTIONAL ASSIGNMENT TO SUPPORT CLASSROOM INSTRUCTION

Contact Labor Relations Office for a copy of Arbitrator Richard Mittenthal’s decisions regarding overtime.
WEEK 11

INJURY COMPENSATION PROGRAM
UNIT 4

INJURY COMPENSATION PROGRAM

TERMINAL OBJECTIVE:

Upon completion of this unit, participants will be able to define the purpose of the Injury Compensation Program, identify OWCP responsibilities and the provisions of FECA.

ENABLING OBJECTIVE:

The trainee will have:

• an understanding of the Federal Employees’ Compensation Act (FECA) and its benefits;
• a basic understanding of how the injury compensation program operates and how it is administered at the supervisory level;
• examples of the types of legitimate and fraudulent claims, and the forms used to record these claims;
• knowledge about the step-by-step procedures involved in processing a claim when an injury occurs;
• knowledge about follow-up procedures that can prevent a recurrence of the injury.
INJURY COMPENSATION PROGRAM:
HANDOUT—PRETEST

Participant’s Name ______________________________________________________
Date ______/ ______/ ______  Office _______________________________________
PRETEST ______________________________________________________________

1. When an employee suffers a traumatic injury and wants to report it, the supervisor will provide him/her with which OWCP form?
   a) CA-1
   b) CA-2
   c) CA-16
   d) CA-17

2. What is an OWCP form CA-16?
   b) Authorization for follow-up medical visits.
   c) Authorization to seek medical care at own expense.
   d) Initial authorization to receive medical care at OWCP expense.

3. When should a witness be allowed to discuss with the injured employee what he/she saw, relative to the injury, prior to preparing his/her statement?
   a) Only if the witness is also a family member.
   b) Only if the injury requires immediate medical attention.
   c) Under any circumstances
   d) Under no circumstances

4. When should a supervisor obtain statements from witnesses?
   a) Before close of business, the day of the accident.
   b) As soon as possible, after the witnesses has been identified.
   c) Within 24-hours.
   d) Within 48-hours.
5. When may an injured employee who has been treated by a physician be allowed to return to work?
   a) When the attending physician certifies the employee may return.
   b) When light duty is available.
   c) When limited duty is available.
   d) Whenever the employee can assume full duties.

6. What is a controversion/challenge, as it relates to the injury compensation program?
   a) Employee claim provision.
   b) Injury Compensation Act.
   c) Controversion/Challenge
   d) Injury compensation challenge

7. What is the OWCP; what does it do?
   a) Office of Worker’s Compensation Program; mediate worker claims.
   b) Office of Worker’s Compensation Program; administer FECA.
   c) Office of Worker’s Claims Profile; investigate workplace hazards.
   d) Office of Worker’s Claims Program; investigate employee claims.

8. What are the basic differences between LIMITED duty and LIGHT duty, if there are any differences? (As defined by USPS National Agreement)
   a) The two terms are interchangeable.
   b) Employee must request limited duty.
   c) Limited duty is provided for an on-the-job injury. Light duty for and off-the-job injury.
   d) Limited last 30-days; light duty continues indefinitely.
9. What is the legal penalty for a supervisor who rejects or delays the processing of a claim by an employee?
   a) Misdemeanor charges.
   b) Liability for $500 fine or 1 year in prison.
   c) Misdemeanor charges and liability for $500 fine, 1 year in prison, or both.
   d) Separation from the Postal Service.

10. Who is responsible for initiating a CA-17 for the initial medical visit?
   a) The injured employee.
   b) The supervisor of the injured employee.
   c) The injured employee’s physician.
   d) A family member of the injured employee.

11. When can a person other than the injured employee fill out the employee’s portion of the CA-1?
   a) If the injured employee is not physically or mentally able to do so.
   b) If the injured employee requests someone to do so.
   c) When the injured employee’s physician is available to do so.
   d) If a family member of the injured employee is also on the scene.

12. When does the Federal Employees’ Compensation Act (FECA) provide for the payment of Worker’s Compensation benefits to employees who are injured/disabled?
   a) If the injury/disability occurred during the performance of their duties.
   b) When the employees become sick or disabled as a result of Federal employment.
   c) When the injury or disability is reported within 24-hours of the occurrence.
   d) Both a and b.
13. An employee has been certified as fit for limited duty by a competent medical authority and does not report for duty. He requests to use sick leave due to the incident, can sick leave be approved? (Circle one) Yes/No Why or why not?
   a) Yes
   b) Not unless limited duty is not available.
   c) Not if medical certification states that the employee is capable.
   d) Not unless light duty is not available.

14. Is the USPS under any obligation to make limited duty available to employees who are injured on the job? Explain your answer.
   a) Only if the employee request limited duty.
   b) Yes.
   c) Not if the employee is willing to use annual leave.
   d) Not if the employee has sick leave to use.

15. When an installation does not have a control office, who is responsible for administration of the program within that installation?
   a) The Safety Specialist in the facility.
   b) The Injury Compensation Specialist.
   c) A supervisor identified by the installation head.
   d) The installation head.

16. Who is authorized to issue a CA-16?
   a) A control office.
   b) Designated and trained control point.
   c) A supervisor designated by the installation head.
   d) All of the above.

17. How are injury compensation records stored when not in use?
   a) In an office file cabinet, accessible to all personnel.
   b) In a restricted access, locked desk or file cabinet.
   c) In a storage closet in cardboard boxes.
   d) In an unlocked desk drawer of a locked office.
18. Is it optional for the control office/point, who is authorized to issue a CA-16, to make the initial appointment with a source of medical care prior to issuing the CA-16?
   a) Under non-emergency situations.
   b) Never, it is mandatory.
   c) Under emergency situations.
   d) Both a and c.

19. Which OWCP form is used to report an occupational disease?
   a) CA-2
   b) CA-16
   c) CA-17
   d) CA-1

20. When a medical report is required to document the ability of an employee to return to full or limited duty, which OWCP form is used?
   a) CA-1
   b) CA-2
   c) CA-16
   d) CA-17

21. When an employee reports a job-related injury and remains at home without seeing a doctor, can the absence from work be justified based on the injury?
   a) No; it must be certified by a competent medical authority.
   b) No; it must be related to the work injury.
   c) Both a and b
   d) Yes; if sick leave is used.

22. Why should you controvert/challenge a claim by a letter carrier who was injured during a lunch break taken at an unauthorized location 5 miles from their route?
   a) The person was not performing normal duties.
   b) The person had deviated from the authorized route.
   c) There is sufficient doubt as to how the injury occurred.
   d) Both a and b.
23. When an employee presents a disability certificate indicating total
disability, what action should be taken to return the individual to a
work status?
   a) Advise the medical source that limited duty is available.
   b) Advise the employee of the availability of light duty.
   c) Investigate the possibility of a detail to another position.
   d) Investigate opportunities for rehabilitating the employee.

24. When a bargaining-unit member is injured, why should you obtain
statements from other supervisors as well as from other bargaining-
unit members?
   a) To obtain credible statement.
   b) To obtain statements from everyone with knowledge of the
      injury.
   c) To provide statement for controverting the claim.
   d) To substantiate the possible need for light duty.

25. Where is authorization given allowing the USPS to deny COP to an
injured employee if the injury is traumatic?
   a) Supervisor
   b) FECA
   c) OWCP
   d) USPS
OWCP stands for _______________________________________________________
FECA stands for _______________________________________________________

SUPERVISOR’S RESPONSIBILITIES

FORMS:
• ___________________________________________________________________
• ___________________________________________________________________
• ___________________________________________________________________
• ___________________________________________________________________
• ___________________________________________________________________
• ___________________________________________________________________

Penalties
Supervisor: ____________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
Employee: ____________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

5 Types of Benefits
1) _____________________________________________________________________
2) _____________________________________________________________________
3) _____________________________________________________________________
4) _____________________________________________________________________
5) _____________________________________________________________________
Physician
- surgeons
- podiatrists
- dentists
- clinical psychologists
- optometrists
- chiropractors (for specific conditions)
- osteopathic practitioners

The CONTROL OFFICE is responsible for:
- ____________________________________________
- ____________________________________________
- ____________________________________________
- ____________________________________________
- ____________________________________________
- ____________________________________________
- ____________________________________________
- ____________________________________________

Injury: General Definition
The four components of an injury are:
1) ____________________________________________
2) ____________________________________________
3) ____________________________________________
4) ____________________________________________
What is an traumatic injury?

“Traumatic injury” means a wound or other condition of the body caused by external force, including stress or strain. The injury:

- must be identifiable as to time and place of occurrence and of the part of the body affected;
- must have been caused by a specific event or incident, or series of events or incidents, within a single day or work shift; and
- may also include damage to or destruction of prosthetic devices or appliances.

What is an occupational disease/illness?

“Occupational disease/illness,” often referred to an occupational injury, means an illness or disease produced by:

- systemic infections;
- continued or repeated stress or strain;
- exposure to toxins, poisons, fumes, etc., or
- other continued and repeated exposure to conditions of the work environment over a period of time longer than a single day or work shift.

What is a recurrence?

A “recurrence” is the reappearance of the symptoms/pains of a previously reported or accepted injury—either traumatic or occupational. The recurrence must not have been caused by a new incident; it must be caused only by the reappearance of the original symptoms for no identifiable reasons. Specifically, the recurrence must involve either:

- a new period of disability after returning to full duty work from an earlier period of disability; or
- a requirement for medical care after the employee had been released from such care.
OPTIONAL EXERCISE

SITUATION: This afternoon, an employee reports that she has re-injured her back. This same employee had reported a back injury three months ago. She goes to the doctor. The doctor diagnoses the condition as “recurrent back strain.” Upon her return to work, you question her as to the circumstances concerning the injury. She identifies a new set of work-related circumstances and a new date for the re-injury. Is this considered a recurrence or a new injury? (Provide support for your choice of answers).

SITUATION: On the 30th day of a 45-day Continuation of Pay period, the attending physician indicates that an employee is able to return to limited duty assignment. The employee refuses to do so. What actions should the supervisor take:
EVALUATING THE OPTIONS

COP:
When an employee is disabled (unable to work due to a traumatic injury or following a recurrence of a traumatic injury), within a 90 calendar day period, COP allowance has not been exhausted, the USPS may continue that employee’s full pay for a period of, or periods totaling, 45 calendar days.

Do these 45 days include off-days and holidays spanned by the period (s) of total disability? YES. They also include such days if a person returns to limited duty and can only work less than his/her normal daily hours or at a pay scale less than regular pay. Pay calculations for COP will include night differential and Sunday premium pay that the employee normally receives such pay. Basically, a completed CA-1 must be submitted within 30 days of the injury for the employee to eligible for COP.

Question: When can COP be used/authorized?
- within 90 days from the day of injury; or,
- within 90 days from the initial return to work date following the initial period of disability, if the 45 days were not all used during the initial period of disability.

Question: When can’t COP be used/authorized?
- when the initial disability from an accepted/reported traumatic injury occurs more than 90 days after the day of injury:
- when an employee uses a portion of the 45 days and has a recurrence of disability more than 90 days after the initial return to work date following the initial period of disability, since no further COP is authorized even if the full 45-day allowance has not been used; or;
- if the employee submits the completed CA-1 more than 30 calendar days after the claimed date of injury.

The period of COP normally will not start on the day of injury because, if the employee stops work on that day, the time is covered by administrative leave. Normally, the 45-day period of COP will commence on the day following the day of injury if the employee is medically certified as disabled due to the on-the-job injury. However, COP could commence on the day of injury if:
- the injury took place during a period of overtime immediately preceding the scheduled tour and resulted in disability, which precluded working the scheduled tour; or,
- the day of injury was the latter part of a scheduled tour that spanned 2 calendar days and the next scheduled tour began on the day of injury.
EXAMPLES:

1) Scheduled tour: 8 a.m. to 4:30 p.m. An employee reports for overtime at 6 a.m., is injured at 7 a.m., and is disabled and cannot start for the next scheduled tour at 8 a.m. COP would begin on the day of injury at 8 a.m.

WORKBOOK NOTE: In some situations a person may miss a portion, or possibly all, of the following/next scheduled tour to receive medical treatment, but no disability is involved. In such circumstances, COP would be authorized to cover the absence for treatment, and the day would count toward the 45-days. (See Section 4 for the instructions covering Item 29 of the CA-1.) Further absence from duty for medical treatment/therapy for which COP is authorized is not a lost workday injury (LWI).

2) Scheduled tour: 10 p.m. to 6:30 a.m. An employee is injured at 2 a.m. on October 16 and is certified disabled. COP would start on the day of injury at the beginning of the next tour; at 10 p.m. on October 16.

Before the timekeeper can enter COP into the timekeeping system, authorization must be received from the injury compensation control office or a designated control point. There will be instances when COP is not authorized; however, such determinations will be made by the control office/point.
COMPENSATION PAYMENTS:
Compensation payments are made by the OWCP after receipt of the required forms and medical reports/certificates. The amount of these payments is a percentage of the employee’s base wage plus routinely scheduled night differential and Sunday premium pay. The percentage is relative to the employee’s marital status, or number of dependents.

Compensation payments may be made by the OWCP when

- a person is disabled due to a traumatic injury and the period (s) of disability continue (s) after the 45 days of COP are exhausted.
- a person is/has been disabled due to an occupational disease/illness and the claim has been approved by the OWCP.
- a person suffers a period of disability due to a traumatic injury but fails to report it on a CA-1 within 30 days after the day of injury if the claims is later approved, if such payments are requested, and if OWCP authorizes.

NOTE: COP and COMPENSATION PAYMENTS. When an employee misses a part of a scheduled tour following either a traumatic injury or the onset of an occupational illness/disease because of medical treatment/therapy, COP or compensation may be paid from the time of the medical appointment and reasonable/actual travel time. COP or compensation payments are not authorized for medical treatment/therapy appointments provided outside the hours of scheduled hours.

Question What is third party/third party liability?
A “third party” is a person or firm not employed by the United State Government who is considered likely to have been responsible for an injury/illness to an employee of the USPS.

EXAMPLES:
A third party could be identified as, but is not limited to:

1) a property owner on whose property a USPS employee was injured due to a safety hazard.
2) a dog owner whose dog bit a USPS employee;
3) a private mechanic contracted by the USPS to maintain/repair a vehicle, where faulty maintenance by that mechanic resulted in an injury to a USPS employee; or
4) the private vehicle operator who is believed to be at fault in an accident causing an injury to a USPS employee. This would include an off-duty USPS/United States Government employee operating a private vehicle.
5) A manufacturer or firm responsible for the manufacture, sale, or installation of a defective piece of furniture or equipment that failed and caused an injury to a USPS employee.

**Question  How do you process a third-party claim?**

The USPS has been delegated the authority by the Department of Labor to administratively pursue collection of damages from third parties responsible for injuries sustained by Postal Service employees in certain traumatic injury cases. This authority and the related procedures are contained in ELM 545.8. Since this authority allows the USPS to recover money expended by OWCP and charged back to the USPS, each supervisor must make a concentrated effort to ensure that whenever an employee submits a claim of traumatic injury (CA-1), a determination is made relative to the involvement of a third party. When a third party is identified as the likely cause of an injury to a USPS employee, have the employee complete a Form 2562, *Injury Compensation Potential Third Party Claim*. This form must be completed in its entirety. A special effort must be made to ensure that item 15c, “Name and of Insurance Company.” is completed.

Within the USPS, administration of the third party program is the responsibility of the injury compensation control officer or control point supervisor.

**Limited Duty**

Limited duty is productive duty provided to an employee who has physical limitations, based on medical evidence from a qualified/treating physician, resulting from an on-the-job injury. Limited duty is provided when the physical limitations allow the individual to return to work, performing less than the normal work requirement. Every reasonable effort will be made to identify and make limited duty available to those employees who are physically able to perform limited duty. Remember, it is better to pay a person for performing some work rather than to pay the person for performing no work.

Subchapter 540 of the ELM clearly states the position of the Postal Service relative to limited duty. It is stated in 546.141. of the ELM: “Current Employees. When an employee has partially overcome a compensable disability, the USPS must make every effort toward assigning the employee to limited duty consistent with the employee’s medically defined work limitation tolerances.” In effect, limited duty must be made available if at all possible!

When an employee is provided limited duty, the work hours, work week, work location, and craft may be altered. An employee on limited duty is not eligible for out of schedule pay (see Handbook F-12, *Time and Attendance*, and Handbook F-22, *PSDS Time and Attendance*). Also, limited duty is provided to an employee
upon receipt of medical certification that such duty may be performed. The employee does not have to request limited duty; it is made available.

RETURN TO DUTY
Returning employees to full or limited duty as early as possible following an injury is a method of reducing both injury compensation costs and opportunities for employees to abuse the program.

Although you should be intent on returning an individual to work as soon as possible after an injury, you should always remember your responsibility for the welfare of your employees. Do not allow them to return to work prematurely. When they do return to work, do not allow them to exceed those restrictions imposed by qualified medical authorities.

Limited duty is not addressed by Postal Service collective bargaining agreements. It is covered under the FECA and is specifically addressed in the ELM as quoted above. Therefore, if limited duty is provided under 546.141 of the ELM, and in accordance with the law, provisions of specific Postal Service collective-bargaining agreements do not apply.

Every effort must be made to provide limited duty as the highest possible priority in accordance with ELM 546.141.

Question What is the priority for assignment of limited duty?
PRIORITY FOR ASSIGNMENT

Whenever possible, assign qualified employees to limited duty in their regular craft, during regular tour of duty, and in their regular work facility.

**Prioritize the limited duty assignment in the following manner:**

- To the extent that there is adequate work available within the employee’s work limitation tolerances, within the employee’s craft, in the work facility to which the employee is regularly assigned, and during the hours when the employee is regularly assigned, the work constitutes the limited duty to which the employee is assigned.
- If adequate duties are not available within the employee’s work limitation tolerances in the craft to which the employee is regularly assigned within the employee’s regular hours of duty, other work may be assigned within that facility.
- If adequate work is not available at the facility within the employee’s regular hours of duty, work outside the employee’s regular schedule may be assigned as limited duty. However, all reasonable efforts must be made to assign the employee to limited duty within the employee’s craft and to keep the hours of limited duty as close as possible to the employee’s regular schedule.
- An employee may be assigned limited duty outside of the work facility to which the employee is normally assigned only if there is not adequate work available within the employee’s work limitation tolerance at the employee’s facility. In such instances, every effort must be made to assign the employee to work within the employee’s craft within the employee’s regular schedule and as near as possible to the regular work facility to which the employee is normally assigned.

If it is necessary to change any of the elements to meet the employee’s physical limitations or to provide the employee with suitable work, the elements must be changed in this specific order:

<table>
<thead>
<tr>
<th>Priority of Choice</th>
<th>Regular Craft</th>
<th>Regular Tour</th>
<th>Regular Facility</th>
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</table>
Unlike light duty, employees do not have to request limited duty. Light duty is covered under the applicable article of certain Postal Service collective bargaining agreements and should not be confused with limited duty.

**LIMITED DUTY REFUSALS:**

By law, an employee who refuses limited duty, after being certified by medical authority as being fit to perform such duty, is not eligible for benefits under the Act. Therefore, if an employee who is capable of performing limited duty refuses such duty, the control office/point should be notified immediately so that action can be taken to notify OWCP of the refusal. If a person who has been certified by a medical authority as being able to perform limited duty (or even full duty) following an injury requests leave rather than performing the limited/full duty, annual leave may be authorized if the person is not needed. However, sick leave would not be authorized since medical certification is available indicating that the person may work.

In summary, one of the most meaningful benefits under the FECA is that a person’s income is not interrupted if a period of disability is caused by an on-the-job injury. Each supervisor must return an employee to full or limited duty at the earliest possible date.

**Question** Who can give me a definition of “light duty” and tell me how it is requested?

The definition of light duty is the same as the definition of limited duty except that light duty is normally provided, when possible, as the result of limitations arising from off-the-job injuries/illnesses and must be requested in writing by the employee. Light duty is provided in accordance with Article 13 of the National Agreement, and identification of light duty positions is negotiable at the local level. Although limited duty is provided upon receipt of a medical certificate indicating that an employee suffering from an on-the-job injury can return to such duty, light duty must be requested in writing by the employee, and the request must be accompanied by medical certification indicating the physical limitations of the employee and the duration such duty will require.
**Question**  Who approves light duty?

It is the right of the installation head to approve or disapprove light duty requests in accordance with the negotiated local memoranda, if such negotiations included light duty.

When a light-duty request is being considered, the injury/illness/limitation must be fully evaluated prior to allowing the employee to perform such duty - evaluated to be sure that if the individual returns to work on a light-duty assignment there is minimal chance that such duty will aggravate the off-the-job injury. Considering that such an evaluation is necessary prior to approval of a light-duty request, all such requests should be processed while the employee is off-the-clock. The full consideration is required because if the employee is allowed to perform light duty and aggravates the off-the-job injury while on-the-job, the injury compensation program would become liable for the costs of the aggravation of the former off-the-job injury.

The F-21 and F-22 Handbooks preclude out-of-schedule pay when an employee is in a light-duty status. Also, the light duty employee’s tour hours, work location, and basic work week shall be those of the light-duty assignment and shall meet the needs of the Service, whether or not they are the same as for the employee’s previous duty assignment.

Further, an employee known to have been absent from work in excess of 21 days due to an off-the-job injury/illness or known to have been hospitalized must present medical evidence that he/she can return to work without jeopardizing the safety of himself/herself or others.

In summary, limited duty is automatically provided, whenever possible, to an employee suffering from an on-the-job injury; when authorized by the local memorandum of understanding, light duty may be provided only upon receipt of a written request from the employee to the installation head, if it is accompanied by medical certification that such duty is required and provides that information outlined in the previous paragraph.

**Question**  What is the joint rehabilitation program?

During 1979, the USPS and the Department of Labor developed the joint rehabilitation program, which is designed to return employees with job-related disabilities to productive positions within the USPS. Employees who are drawing compensation payments from the OWCP because of disabilities resulting from their USPS work situation are evaluated to ascertain if they are recovered sufficiently to perform productive functions within the USPS.

Some of those identified to be returned to work with the USPS will still have some residual disabilities hence having limitations relative to the amount and type of work they will be able to perform. The purpose of this discussion is to advise you that the USPS is now obligated to ensure the successful operation of this program by
returning these disabled employees to productive positions. If such employees are assigned to your functional area, you should be prepared to accommodate their limitations and to ensure that they are given the opportunity to demonstrate their abilities without exceeding their limitations.

When you are advised that such a person is to be assigned to your unit, you should obtain as much information as you can relative to the individual and advise the other workers in the unit of the forthcoming disabled employee. You should prepare them for the employee’s work limitations and the fact that he/she will be a permanent part of the unit. Specifically, the employees should be advised that the returning person may not be allowed to perform certain functions, such as heavy lifting, and he/she should not be asked or expected to perform any function that exceeds the limitations imposed by competent medical authority. However, to protect the returning employee’s privacy rights, you should not disclose confidential medical information concerning the employee’s condition; your discussion should include information about the employee’s work limitations, the needs for assistance from coworkers and the manner in which coworkers can assist. You should also attempt to enlist the aid of the regular employees to assist the disabled person in his/her return to work by providing assistance and guidance whenever possible.

Remember, the rehabilitation employee has probably been disabled for a lengthy period of time. There may be fear of rejection from co-workers because of the special assignment. All workers should be requested to cooperate with returning employees in this category since this can be a very difficult time for them. You and your employees’ moral support of the rehabilitation program is needed to make this program work.
**Question** What is the Employee Assistance Program (EAP)?

The EAP is a counseling and referral service staffed by mental health professionals and designed to help you with personal, job or family problems. It is a formal, non-disciplinary program that is free, voluntary and confidential.

Professional counselors are prepared to assist with virtually any issue or problem which can affect work performance or personal health. Some of the most common concerns brought to the EAP include:

- Emotional
- Marital
- Family
- Alcohol or other drug abuse

A telephone call is all it takes to make an appointment with an EAP counselor. The counselor will meet in a confidential setting and:

- Help assess the problem
- Meet with family members, as needed
- Provide short-term counseling, as appropriate
- Assist in selecting other professional services and resources within the community, as necessary
- Follow-up to ensure that quality services are received

There is no cost to employees who receive counseling and other services provided directly by the EAP counselor. If additional outside treatment or professional services are needed, the cost are the employee’s responsibility if not covered by Federal Employee Health Benefits Plan or private insurance. The EAP counselor will work to identify the best available outside treatment program and services in line with individual finances.

**Confidentiality**

Privacy is protected by strict confidential laws and regulations and by professional ethical standards for counselors. The details of discussions with the counselor may not be released to anyone without prior written consent. Participation in the EAP will not jeopardize job or career.

The injury compensation program supports the aim of the EAP to assist the employee. Whenever a supervisor receives a claim of injury and has evidence or strong suspicions that alcohol, drugs or other problems caused or contributed to the injury, an EAP recommendation to the employee may be warranted.
The most valuable asset of the U.S. Postal Service is its employees. Both the employees and the organization benefit when employees have access to services that will help maintain and enhance the quality of their lives.

At varying times in each of our lives we must face personal problems. Some problems are more easily resolved than others, but many can best be solved with professional assistance.

In response to this need an Employee Assistance Program (EAP) is provided by the U.S. Postal Service, through an agreement with the Region V, U.S. Public Health Service, for its employees and their families.

**CHECKPOINT EXERCISE**

One of the nine reasons for controversion of a claim listed on the supervisor’s instruction of the CA-1 states: The injury was proximately caused by the employee’s willful misconduct, intent to bring about injury or death to self or another person, or intoxication;

- A proneness to accidents or injuries may indicate that an employee is experiencing alcohol, and/or drug-related problems. Name four additional signs or symptoms that an employee might show:

- Employees who incur an injury or series of injuries whose suspected cause was the use of alcohol and/or drugs may be recommended to the Employee Assistance Program because their conduct, health, performance, attendance, or dependability has been affected.

- What are the five key steps that a supervisor should take when (s)he suspects that an accident, injury, or both have occurred because an employee is experiencing problems associated with alcohol and/or drugs?
INJURY COMPENSATION PROGRAM:

The Supervisor’s Role and Responsibilities

Participant’s Name ______________________________________________________

Date _____/ _____/ ______ Office _________________________________________

1. What is a “third party”, relative to the injury compensation program?
   a) A person not employee by the US government.
   b) An off-duty government employee.
   c) One consider responsible for an injury suffered by a postal employee.
   d) All of the above.

2. After a disabled employee returns to work, a follow-up medical visit is scheduled during the employee’s regular tour of duty and the employee requests 8 hours of COP to cover the visit. Would you approve the request?
   a) Yes, if there is an eligible balance of the 45-days remaining.
   b) Yes, but only if the request does not exceed 2-hours.
   c) Yes, but only within the first pay-period of the return to duty.
   d) No.

3. From what source is COP paid?
   a) USPS revenues.
   b) The employee’s health benefit plan.
   c) OWCP.
   d) OSHA funds.
Using the calendar provided, if necessary, answer the following questions.

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Use the following data for questions 4 and 5.

An employee is injured on March 18 and is certified disabled by competent medical authority for the period March 18 through April 9.

- Workweek: Sat. - Mon. Thurs., and Fri.
- Off-days: Tues. and Wed.
- Workhours: 6 p.m. - 2:30 a.m.
- Time of injury: 11:30 p.m.
- Time stopped work for medical treatment: 11:45 p.m.

4. On what day would COP begin?
   a) March 18
   b) March 19
   c) March 25
   d) March 26

5. The injured employee returned to work on April 12. How many days of COP were used, and how many days of COP were left for later use?
   a) 22; 23
   b) 23; 22
   c) 18; 27
   d) 24; 21
6. Can an employee be directed to obtain medical care from a physician selected by the USPS? why or why not?
   a) Yes, under emergency conditions.
   b) Yes, if a medical unit is available on USPS premises.
   c) No.
   d) a and b

7. When an employee first reports a traumatic injury to the supervisor, what should the supervisor do if immediate medical care is not required?
   a) Complete a CA-2.
   b) Complete a CA-16.
   c) Visit the scene of the accident.
   d) Take time to listen to the employee, and discuss the nature of the injury.

8. If there is no disability following a traumatic injury, does the employee have to complete Item 15 of the CA-1—the election to use annual/sick leave or COP?
   a) No, this item is optional.
   b) No, this can be waved 24-hours.
   c) Yes, even if the immediate disability is not realized.
   d) Yes, only if an immediate disability seems possible.

9. After the submission of CA-1 or CA-2, what proof if any does the employee have that a claim for either a traumatic or an occupational injury was submitted?
   a) A carbon of either form.
   b) The receipt of notice detached from either form.
   c) Nothing.
   d) The supervisor’s word.
Using the following date to answer questions 10 and 11: An employee is performing limited duty following a knee operation, and the knee is struck by a nutting truck causing new period of disability. The employee previously used the total 45 days of COP following the knee surgery.

10. Is this a recurrence?
   a) Only if COP was given that same pay period.
   b) No, it’s a new traumatic injury.
   c) Yes, because it was the same knee.
   d) Yes, because COP was previously authorized.

11. Would the new period of disability be covered by COP?
   a) By COP.
   b) With limited duty.
   c) With sick leave.
   d) With annual leave, initially.

12. When an employee approaches a supervisor to report a recurrence, why is it important for the supervisor to discuss the recurrence with the employee?
   a) To determine if the claim is actually a recurrence.
   b) To determine if the claim is a new traumatic injury.
   c) To determine if a new occupational injury exists.
   d) All of the above.

13. To be eligible for COP, how soon after a traumatic injury must an employee submit a completed CA-1?
   a) Within 24-hours.
   b) Within 48-hours.
   c) Within 30-days.
   d) Within 45-days.
14. Which of the following conditions is not part of the definition of a traumatic injury.
   a) Caused by a specific event, at a specific place in time.
   b) Caused by a series of events during a tour or day.
   c) Damage to or destruction of a prosthetic device.
   d) Damage to or destruction of eye glasses.

15. What benefits are authorized at the time an employee submits a claim for an occupational disease/illness?
   a) None, until OWCP accepts the claim.
   b) None, until FECA accepts the claim.
   d) COP.

16. May an employee claim a work-related recurrence of an earlier, off-the-job injury? Why or why not?
   a) Not unless light duty assignments were approved.
   b) No, it must be related to an earlier, accepted/reported job injury.
   c) Yes, if the earlier injury was reported.
   d) Yes, if it occurred within the last 45-days.

17. What is a recurrence?
   a) Appearance of a related injury.
   b) Appearance of a new occupational injury.
   c) Reappearance of symptoms related to a previously reported job injury.
   d) Reappearance of symptoms not previously reported with an injury.

18. Is limited duty provided in accordance with the National Agreement?
   a) Yes.
   b) No, with local Memorandums of Understanding.
   c) No, with the FECA.
   d) No, with OWCP.
19. Can limited duty be made available to an employee who has physical limitations because of an off-the-job injury? Why or why not?
   a) Yes, the National Agreement mandates it.
   b) Yes, OWCP authorizes it.
   c) Yes, the FECA authorizes it.
   d) No, only to employees with job-related injuries.

20. What is the basic difference between a traumatic injury and an occupational disease?
   a) A traumatic injury occurs at a specific time during a single day/tour of duty.
   b) Occupational disease develops over a period of time, in excess of one day.
   c) A traumatic injury always results in COP.
   d) Both a and b.
CONTROVERSION/CHALLENGE

Question  How do we identify fraudulent claims?

FRAUDULENT CLAIM EXAMPLES:

a) A participant in a bowling league reports to work the day after bowling and, shortly after starting work, submits a claim of injury stating that he “just” hurt his back.

b) An employee injured in a private automobile accident was treated for a separated shoulder. On the day of the employee’s return to work, the individual claims that his shoulder was “just” hurt while dumping a sack.

c) An employee has used up all of his sick leave and annual leave due to an off-the-job injury. The employee, desperate for income, convinces the doctor that return to work is possible. Within minutes of starting work, the employee claims a traumatic injury similar to the off-the-job injury.

d) An employee who cancels a period of scheduled leave suffers a minor but disabling injury that disables him/her for the period for which the leave had been requested.

e) You observe an employee reporting to work with a defined limp. Later in the day the employee reports a traumatic leg injury.

Question   How do you prepare to challenge a claim?

If you have knowledge of factual evidence that would disprove a claimed incident, you are required to investigate and document that information to establish a basis for a controversion or challenge action.

Supervisors involved in the acceptance of a claim must always be aware of what is being said and what is being put down on paper. There is often a significant difference between what the employee says and what the employee writes on the claim form. Therefore, you should be very alert to the spoken word and its comparison to the written word.
WRONG INJURY TYPE

The employee submits a claim for a traumatic injury, but the description on the form (CA-1) as to how and why the injury occurred fits an occupational disease/illness rather than a traumatic injury. Since COP is not authorized for an occupational disease/illness and if the employee insists on submitting the claim for a traumatic injury, the USPS must challenge the traumatic claim based on credible evidence that the injury claimed is occupational. Again, the supervisor must notify the control office/point of the facts and have COP denied pending a decision from the OWCP.

LATE CLAIM:

The written claim for traumatic injury (CA-1) was submitted more than 30 calendar days after the date of injury. The fact that the employer was aware of the injury within 30 days does not excuse the injured employee or his/her representative from filing the CA-1 within the prescribed time limit.

OFF-PREMISES INJURY:

A claim for COP due to an injury sustained off the premises of the employer, especially if the person is not in a duty status, would also be denied/challenged. However, there are exceptions to off-the-premises injuries being denied.

1) A letter carrier, mechanic, inspector, etc., who normally performs duty on the road will be covered as long as the employee is in the performance of duty. However, the place of injury must be evaluated to determine if the employee was at an authorized place at the time of injury. For example, if a letter carrier is injured 5 miles from their route of delivery and the location is not an authorized deviation from the route, then denial of the COP would be effected. And, in such a case, it is probable that the entire claim would be challenged.

2) When an employee is in travel status for training, inspections, etc., that employee is normally covered from the time he commences such travel until the travel is terminated, and is engaged in activities considered reasonable and incidental to such work and travel.

3) The law would not cover an employee injured during a lunch break taken off the premises, except for a Carrier or other type of employee who routinely performs duty off the premises.
MISCONDUCT:
COP would also be denied if the claim was based on an injury sustained due to the employee’s willful misconduct or intent to bring about injury or death of self or another person. Controversions in this category must be factually documented with evidence that clearly supports the action. The fact that the employee was performing an act in an unsafe manner is, by itself, not justification for denial of COP; however, it may be the basis for internal disciplinary action.

UNDER THE INFLUENCE:
The injury was sustained while the employee was under the influence of drugs or alcohol. The fact that an employee was intoxicated or acted under the influence of alcohol is not sufficient grounds for successful controversion. It must be proven or reasonably demonstrated that the injury would not, or probably would not, have been sustained if the employee had not been consuming alcoholic beverages. How is action under the influence of alcohol or using drugs substantiated?

1) Observation: Without blood or breath tests, documented observations of an individual’s behavior, preferably by more than one person, could be valid evidence. Observations relative to unsteady walking, slurred speech, unsteady motions, inability to follow directions, and the presence of alcohol on the employee’s breath could be meaningful evidence.

2) Compare Performance: It could also be beneficial to compare the actions of the employee when he sustained the injury apparently under the influence of alcohol to the employee’s similar performance without the alcoholic influence.

3) Burden of Proof: The burden of proof in this situation is on the supervisor to provide sufficient evidence to prove that the injury was primarily caused by the alcoholic involvement and that the injury probably would not have occurred without the alcoholic influence.
**RECORDING CLAIMS**

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<thead>
<tr>
<th>CA-1</th>
<th>Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation.</th>
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<tbody>
<tr>
<td>CA-2</td>
<td>Notice of Occupational Disease and Claim for compensation.</td>
</tr>
<tr>
<td>CA-2a</td>
<td>Notice of Employee’s Recurrence of Disability and Claim for Pay/Compensation.</td>
</tr>
<tr>
<td>CA-3</td>
<td>Report of Termination of Disability and/or Payment. This form reports to OWCP that an employee has returned to duty, or that COP has been terminated for cause.</td>
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<tr>
<td>CA-16</td>
<td>Request for Authorization and/or Treatment. This form is not normally prepared/issued by supervisors, unless they are control office or control point personnel; but the instructions are provided in the event you are ever required to issue one.</td>
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<tr>
<td>CA-17</td>
<td>Duty Status Report.</td>
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HANDBOOK EXHIBIT
TAB CA-1

OWCP FORM CA-1  Federal Employees’ Notice of Traumatic Injury
Claim for Continuation of Pay/Compensation

PURPOSE  Official notice to the employee’s supervisor and to the OWCP that
a traumatic injury has been sustained (or it is alleged to have
been sustained.)

GENERAL PROCEDURES AND PREPARATION RESPONSIBILITIES:

a) The employee, or the employer’s responsibility, desiring to report a traumatic injury/claim benefits under
the FECA, requests a CA-1 from his/her supervisor.

b) The employee or the representative completes items 1-15 and submits the form to his/her supervisor.
(NOTE: When emergency medical Care is required, the form may be completed later, after medical care
has been provided.)

c) The supervisor, after reviewing the employee’s portion of the form for accuracy and completeness,
completes and returns the attached receipt of the employee. At this time, the supervisor should advise
the employee if the claim will be controverted; if there is doubt, the employee should be advised that a
decision to controvert will be made after an investigation is completed.

d) If a witness is identified, have the witness complete item 16; if there’s more than one witness, have each
witness prepare a statement.

e) The supervisor completes the supervisor’s portion of the form - items It, 23-26, 31-33, and 35 may be
completed by the control office/point.

f) The supervisor submits the completed form and witness statement, if available, to either the control office
or the control point.

g) The supervisor prepares Form 1769, Accident Report.

TIMELINESS:

The employee is required to submit the claim within 2 workdays following the injury. Statutory time
requirements are met if filed within 3 years. To be eligible for COP, the claim must be filed within 30 days
following the day of injury. OWCP requires that the completed CA-1 be submitted to their office within 10
workdays following receipt of the claim from the employee.
HANDBOOK EXHIBIT
CA-1

The page titled: Instructions for Completing Form CA-1 is provided on the opposite page for your information and use.

The EMPLOYEE portion can be used to show the employee the necessary, detailed information required for the block entries described. It can also be used to show the employee some of the necessary information required under item 15 relative to selecting either personal leave or COP. It should be emphasized to the employee that even though there may not be immediate disability, disability could occur in the future and the election should be made now. Also, it is required to advise the employee that an election for personal leave is made, it can be changed to COP retroactively. (This change became effective on June 1, 1987, in accordance with 20 CFR Part 10.202.)

The SUPERVISOR portion can also be used to assist you in the completion of the supervisor's side of the form and to show the employee those nine specific items for which controversion action may be initiated and COP withheld or terminated.

The Employing Agency-Required Codes section, which is applicable to the injury compensation section which is responsible for entering the necessary codes.

Handbook exhibit (cont.)

ITEM EXPLANATION (cont.)

*36. Pay rate when employee stopped work because of the injury.

*37. Supervisors should be aware of the penalty warning contained in this item, and enter commercial telephone number.
Handbook exhibit

The information presented on the CA-1 relating to the benefits a claimant has available to him/her following a traumatic injury is presented on the opposite page. It is the responsibility of the injury compensation branch to ensure that the injured employee is aware of such benefits.

In accordance with the Privacy Act of 1974 a person completing a form must be advised of the provisions of the Act concerning the use of the information provided on such forms. Therefore, the employee or the representative should be advised to read the notice so that they will be aware of the provisions of the ACT.

The Receipt of Notice of Injury is required to be presented to the employee or the representative at the time the form is submitted to management. Such receipt is the evidence an employee needs to prove not only that a claim was submitted in the event that the original documents are lost, but also to show the timeliness of the claim’s submission. When the receipt is completed, it is to be complied in its entirety. At this time the employer or the representative should be advised that the receipt should be retained in a safe place to insure that it is available in the future.

Handbook exhibit

**OWCP FORM CA-2 Federal Employees’ Notice of Occupational Disease and Claim for Compensation**

**PURPOSE**

Official notice to the employee’s supervisor as to the OWCP of a condition believed by the employee to have been Caused, aggravated, or accelerated by facts of his/her work environment.

**GENERAL PROCEDURES/PrePARATION RESPONSIBILITIES:**

a) The employee, or the employer’s, requests a CA-2 from the supervisor. At this time, the supervisor will review the employee’s Instruction for Completing Form CA-2 which are attached to the CA-2. He/she will ensure that the employee or the representative is aware of the data requirements and the need for a narrative statement from the employee.

   NOTE: The employee will also be provided two copies of the appropriate evidence checklist, OWCP Forms CA-35A-G, one for the physician and one for the employee. These forms are available from the injury compensation control office/point.

b) The employee will submit the form and statement to the supervisor or the designated agency official. At this time, the employee may submit the required medical data or have made arrangements for such to be submitted.

c) The supervisor, after assuring that the form is complete, gives the employee or the representative the receipt attached to the CA-2.

d) The supervisor completes the supervisor’s portion of the form, leaving blank those items for which he/she does not have information.

e) The supervisor prepares a statement commenting on the accuracy of details in the statement submitted by the employee or employee’s representative on behalf of the employee.

f) The supervisor prepares Form 1769, Accident Report.

g) The supervisor submits the CA-2., the employee’s and the supervisor’s statements, and a copy of the 1769 to the IC control office or control point.

**TIMELINESS:**

The employee or the representative should submit the claim within 30 days after realizing that the disease or illness was Caused, aggravated, or accelerated by the employment.
The page titled, Instructions for Completing Form CA-2 is provided on the opposite page for your information and use.

The employee portion is to be used to advise the employee that he/she is required to prepare a narrative statement as specified under paragraph ‘1)’ of the employee’s insurrections. Ensure that the employee is aware that the statement must respond to all of the sub-paragraphs under ‘1)’ and that particular attention should be given to the requirements of ‘1).d’ if the claim is related to a heart condition.

In accordance with paragraph ‘2)’, the employee is also required to arrange for the submission of detailed medical reports from each physician who has treated the claimant or the condition identified in the claim. The medical reports all other data submitted by the employee should be sent to the control office.

The supervisor (or appropriate official in the employing agency) should be aware of his/her responsibilities relative to instruction’s) ‘a’ and ‘c)’ through ‘e) under the supervisor portion of the opposite page.

The ‘Item Explanations’ portion contains amplification of the identified items; item 14 applies to the employee, while the other items apply to the supervisor or appropriate agency official. See the following pages for guidance on other items.

The Employing Agency - Required Codes portion is applicable to the injury compensation section, which is responsible for entering the necessary codes.
Instructions for completing Form CA-2

EMPLOYEE’S PORTION OF THE FORM, ITEMS 1-18 (REFER TO OPPOSITE PAGE).

Items 1 through 18 will be completed by either the claimant (employee) or by his/her representative.

EXCEPTION  The shaded blocks, a., b., and c., will be completed by either the SC control Office or control point

The following instructions should be followed when completing the employee’s portion of the form: items not listed are considered to be self-explanatory.

NOTE:  The item preceded by an asterisk is also explained on the CA-2, under the employee instructions.

ITEM EXPLANATION

6.  Insert appropriate grade designation as of date listed in item 29.; i.e., PS-5/9, EAS 16/8, etc.  If the claimant is still working in the area of exposure, give current grade information.

8.  If “other” in item is checked, have employee submit related information, e.g., identify and relationship.

9.  The title requested is the formal title of the employee’s position within the postal service. This item will be used by the IC personnel to identify the code to be inserted into shaded block ‘a’.

10.  Exact location where the claimant alleges he/she was exposed to conditions causing the illness or disease. Be sure that the location identified can be located by an investigator. Include the address of the installation.

11.  The date the employee first became aware of the illness/disease; this date may or may not agree with item 12.

13.  The employee should identify the specific conditions, substances, activities, etc., that he/she believes are responsible for the illness or disease.

*14.  Be sure that the specificity required on the instruction page of the form is provided: i.e., right, left, inside thigh, etc.

16.  Do not leave blank. enter ‘NA’ if employee’s statement has been submitted.

17.  Do not leave blank. enter if ‘NA’ employee’s medical documentation has been received/submitted.

18.  a.  The employee or the representative should be aware of the certification statement in this item and the penalty notice that follows this item.

       b.  The date should be the date the form is submitted to either the supervisor or a management representative.
### Handbook exhibit

<table>
<thead>
<tr>
<th>ITEM EXPLANATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>19. Per instructions on the form and USPS policy, this is the identification and</td>
</tr>
<tr>
<td>address of the control office authorized to communicate with the district OWCP;</td>
</tr>
<tr>
<td>this is the office authorized to receive correspondence from the OWCP. THIS</td>
</tr>
<tr>
<td>IS NOT ALWAYS THE INSTALLATION IN WHICH THE INJURED EMPLOYEE IS EMPLOYED, SEE</td>
</tr>
<tr>
<td>ITEM 18.</td>
</tr>
<tr>
<td>NOTE: The “OSHA site code” is not required at its time.</td>
</tr>
<tr>
<td>20. Enter the name and full address of the installation in which the injured</td>
</tr>
<tr>
<td>employee is employed. This could be an associate office, a branch, a station, a</td>
</tr>
<tr>
<td>repair facility, a VMF, etc.</td>
</tr>
<tr>
<td>21. a. If claimant has fixed duty hours, enter start and end times.</td>
</tr>
<tr>
<td>b. If claimant has variable/flexible hours, enter “variable, DOI hours</td>
</tr>
<tr>
<td>listed,” and then enter work schedule for DOI.</td>
</tr>
<tr>
<td>22. a. If claimant has a fixed schedule, check the scheduled days.</td>
</tr>
<tr>
<td>b. If claimant has either a rotating (Carrier) or flexible schedule, or a</td>
</tr>
<tr>
<td>variable workday schedule, enter either variable or rotating and enter</td>
</tr>
<tr>
<td>week of injury; then check the days worked during the week of the injury.</td>
</tr>
<tr>
<td>23. This item is the disease or illness.</td>
</tr>
<tr>
<td>NOTE: If initial Care was given by either a nurse or other health professional</td>
</tr>
<tr>
<td>(not a physician), indicate this on a separate attachment.</td>
</tr>
<tr>
<td>24. This date is the date of the first visit to the physician listed in item 23.</td>
</tr>
<tr>
<td>25. Consider only medical reports from/countersigned by PHYSICIANS.</td>
</tr>
<tr>
<td>27. a. This item refers to the first tour of duty or date on which the injured</td>
</tr>
<tr>
<td>employee either did not report to work, or stopped work, due to disability</td>
</tr>
<tr>
<td>Caused by the illness or disease identified in item 14.</td>
</tr>
<tr>
<td>b. The time entry is either the start time of the first tour of duty missed,</td>
</tr>
<tr>
<td>or the actual time the employee departed the work area or installation due</td>
</tr>
<tr>
<td>to disability.</td>
</tr>
<tr>
<td>c. If claimant is not disabled, enter DID NOT STOP WORK.</td>
</tr>
<tr>
<td>28. A date is entered ONLY if the employee enters into a leave without pay (LWOP)</td>
</tr>
<tr>
<td>status Caused by absence due to the illness or disease.</td>
</tr>
<tr>
<td>29. Identify the date the employee was last exposed to the conditions alleged to</td>
</tr>
<tr>
<td>have caused or aggravated the disease or illness. This could be the last</td>
</tr>
<tr>
<td>day on the job before a transfer to another location, the last day on the</td>
</tr>
<tr>
<td>job before the period of disability, etc.</td>
</tr>
<tr>
<td>30. If the employee did not stop work, i.e., no disability, enter DID NOT STOP</td>
</tr>
<tr>
<td>WORK. Remember that this item must complement item 27.</td>
</tr>
<tr>
<td>34. Supervisors should be aware of the penalty warning contained in this item,</td>
</tr>
<tr>
<td>and they should enter their commercial telephone number.</td>
</tr>
</tbody>
</table>
The information presented on the CA-2 relating to the benefits a claimant has available to him/her following the acceptance of an OWCP claim is presented on the opposite page. It is the responsibility of the supervisor or the injury compensation personnel to insure that claimants are aware of such benefits.

In accordance with the Privacy Act of 1974, a person completing a form must be advised of the provisions of the Act concerning the use of the information provided on such forms. Therefore, the employee or the representative should be advised to read the notice so that they will be aware of the provisions of the Act.

The Receipt of Notice of Injury is required to be presented to the employee or the representative at the time the form is submitted to management. Such receipt is the evidence an employee needs to prove not only that a claim was submitted in the event that the original documents are lost, but also to show the timelines of the claims submission. When the form is completed it is necessary to be completed in its entirety. At this time the employee or the representative should be advised that the receipt should be retained in a safe place to insure that it is available in the future.

**Question**  
*How did we define recurrence?*
Handbook exhibit

INSTRUCTIONS FOR COMPLETING FORM CA-2a

RECURRENT OF DISABILITY

DEFINITION OF RECURRENCE

Recurrence - when an employee who sustained an occupational injury or disease suffers disability for work due to the original injury, and such disability occurs after the employee returned to work following the injury, and the disability is the result of (1) a spontaneous return of the symptoms of the previous injury or disease without intervening cause, or (2) the need for medical treatment, other than usual office call, for residuals of the previous condition. In these instances Form CA-2A is required. If a new incident or injury occurs which precipitates the disability, even if the injury is to the SAME part of the body previously injured, or is new exposure to the same causes of a previously suffered occupational disease, this constitutes a new injury and Form CA-1 or CA-2 should be filed accordingly.

INSTRUCTIONS FOR EMPLOYEE

♦ Review the definition of recurrence provided above. If you have suffered a recurrence, you should complete Part A completely. Attach a separate sheet of paper where necessary to provide full details.

♦ If you are employed by the Federal Government at the time of recurrence, Form CA-2a should be submitted promptly to your employing agency. If you are no longer employed with the Federal Government, you should complete Parts A and C and submit materials directly to OWCP.

♦ If the original injury was not previously reported to OWCP, a report specifically covering the original injury should be made on Form CA-1 (traumatic injury) or CA-2 (occupational disease) and attached when Form CA-2 is submitted. Medical reports concerning the original injury should also be attached, if not previously submitted.

♦ If this is a recurrence of an occupational disease, or if the 45 days Continuation of Pay (COP) have been exhausted, you may claim wage loss on Form CA-7 if this form was not submitted following original injury. If Form CA-7 was previously submitted, compensation may be claimed on Form CA-8. The OSCP will be responsible for payment of compensation if the claim is approved.

♦ You should arrange for the submission of a detailed medical report from your attending physician. The report should include: dates of examination and treatment; history given by the employee; findings; results of x-ray and lab tests; diagnosis; course of treatment, and the physician’s opinion, with medical reasons, regarding casual relationship between your condition and the original injury. The physician should also describe your ability to perform your regular duties. If you are disable for your regular work, (s) he should identify the dates of disability and provide work tolerance limitations.

♦ If you were treated by other physicians after returning to work following the injury, the supervisor shall authorize required medical care by use of Form CA-6. If the recurrence happens more than six months after the employee’s return to work, authorization for further medical Care must be obtained from the OWCP.

♦ If the recurrent disability continues after the expiration of the 45 days Continuation of Pay (COP) or if this is a recurrence of an occupation disease, you should instruct the employee to file Form CA-7. If Form CA-7 was submitted, compensation should be claimed on Form CA-8.
## INSTRUCTION FOR PROCESSING THE CA-3-Items 1-24

### PART A - GENERAL

**NOTE:** Items marked with an asterisk will be completed by the injury compensation control office/point.

<table>
<thead>
<tr>
<th>Item</th>
<th>Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Last name, first name, middle name (enter “NMN” if no middle name.)</td>
</tr>
<tr>
<td>3.</td>
<td>Obtain from control office/point.</td>
</tr>
<tr>
<td>4.</td>
<td>USPS.</td>
</tr>
<tr>
<td>5.</td>
<td>Name of office/facility/installation where the employee was employed at the time of the disabling injury.</td>
</tr>
<tr>
<td>*6.</td>
<td>Complete address of control office authorized to forward the CA-3 to the OWCP. This address may or may not be the same as item 5.</td>
</tr>
</tbody>
</table>
| *7.  | a. If the injury was traumatic, refer to items 10 and 21 on the CA-1.  
  b. If the injury was occupational, refer to item 29 on the CA-2. |
| *8.  | a. If the injury was traumatic, refer to item 23 on the CA-1.  
  b. If the injury was occupational, refer to item 27 on the CA-2.  
  c. If the injury period caused by a recurrence, refer to item 10 on the CA-2a. |
| *9.  | a. If the injury was traumatic, refer to item 24 on the CA-2a.  
  b. If the injury was occupational, refer to item 28 on the CA-2.  
  c. If the disability was occupational, refer to item 24 on the CA-1. |
| *10. | Month, day, year, and time employee returned to full-time duty. If total disability has been terminated and the employee has not returned to work enter “HAS NOT RETURNED”. |
Handbook exhibit

INSTRUCTION FOR PROCESSING THE CA-3-Items 1-24

<table>
<thead>
<tr>
<th>Item</th>
<th>Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.</td>
<td>If the employee returns to his/her normal workweek:</td>
</tr>
<tr>
<td></td>
<td>(a) If the injury was traumatic, refer to item 20 on the CA-1;</td>
</tr>
<tr>
<td></td>
<td>(b) If the injury was occupational, refer to item 22 on the CA-2 and enter the workweek that was in effect on the date indicated.</td>
</tr>
<tr>
<td>12.</td>
<td>Enter the employee’s pay rate on the day of return to work if it is different from that received on the date the total disability began.</td>
</tr>
<tr>
<td></td>
<td>(a) If the individual used either sick/annual leave in lieu of COP or pending approval of compensation payments - subsequent to the injury and prior to return to work - itemize such usage in 13 (a) and 13 (b).</td>
</tr>
<tr>
<td></td>
<td>(b) Enter all holiday or administrative leave pay provided employee during total/partial disability due to a traumatic injury. If the period of COP spans a holiday, holiday pay is given, but the day is counted as a day of COP.</td>
</tr>
<tr>
<td>14.</td>
<td>If employee returns to normal day without limitations, check “NO”.</td>
</tr>
<tr>
<td></td>
<td>(b) Check “YES” if the employee returned to work and the work assignment was modified to accommodate the disability. If so, describe the new duties and indicate if they are for limited duty or a permanent modification to accommodate a permanent disability.</td>
</tr>
<tr>
<td>15.</td>
<td>If the employee did not enter into a period of LWOP spanning at least one complete pay period, enter “NA”.</td>
</tr>
<tr>
<td></td>
<td>(b) If the employee was in a LWOP status at least one full pay period or if it was long enough for health and life insurance benefits not to be paid, enter the date on which the employee returned to a pay status; i.e., returned to work or entered an annual/sick leave status.</td>
</tr>
<tr>
<td>16.</td>
<td>Verify with Personnel/OPF.</td>
</tr>
<tr>
<td>17.</td>
<td>If the employee has not returned to work and if either the COP has been terminated or OWCP is being requested to terminate compensation payments, enter the appropriate details and attach pertinent documentation.</td>
</tr>
</tbody>
</table>

PART B - CONTINUATION OF PAY, to be completed by the injury compensation control office/point.
# Handbook exhibit

## OWCP FORM CA-16: Authorization for Examination and/or Treatment

**PURPOSE:** Authorization for an employee to obtain medical care/treatment from a doctor/medical facility of his/her choice following an injury/illness.

**PREPARED BY:** Part A of the CA-16 is completed only by authorized and trained control office/point supervisors; however, health unit nurses are also authorized to issue the form if they have been designated as control points.

**TIMELINESS:**
- a. Following a traumatic injury that does not require emergency care, the form must be issued within four hours after the injury/after request for medical care by the injured employee.
- b. When a traumatic injury requires emergency care, and a CA-16 cannot be provided at the time of the care, it will be issued to the source of emergency care within 48 hours.

**WHEN PREPARED:**
- a. Following is a traumatic injury that requires medical care.
- b. At the discretion of the control office, it may be issued following a recurrence.

**WHEN NOT PREPARED:**
- a. Following the submission of an occupational claim (CA-2), or following a recurrence of an occupational claim that has not been accepted by OWCP.
- b. Following a heart attack - the employee and/or representative may file a CA-2 if they believe that the heart attack arose out of and in the course of their job.
- c. Following a recurrence, consult your control office.
- d. Should not be used to authorize a change of physicians after the initial choice has been made.
- e. Employees may not execute a CA-16 in their own behalf.
- f. When an employee sustains an injury and refuses medical care, and later obtains medical care without a CA-16.
- g. When medical care is requested more than 7 days after the DOI.
## INSTRUCTIONS FOR PROCESSING THE CA-16-items 1-13

Items 1-13 will be completed by the control office/point supervisor authorized to issue the CA-16. Information required will be obtained from the forms completed by the employee and the employee’s supervisor, or directly from the employee.

<table>
<thead>
<tr>
<th>Item</th>
<th>Content</th>
</tr>
</thead>
</table>
| 1.   | a. Full name and address of the physician/hospital selected by the employee will be entered AFTER AN APPOINTMENT HAS BEEN MADE BY THE ISSUING AUTHORITY.  
     b. If issued to cover emergency care, enter the source of the emergency care and indicate “EMERGENCY CARE PROVIDED.”  
     c. If issued due to recurrence, and if a CA-16 is authorized, the source of care should be the source of medical care that previously provided care to ensure continuity of treatment. |
| 2.   | Last name, first name, middle name (enter “NMN” if no middle name). |
| 3.   | Date of original injury. (See items 10 and 21 on the CA-1 or item 29 on the CA-2). |
| 4.   | Official title of employee’s position. |
| 5.   | Provide a DESCRIPTION of the injury and how it took place. This information can assist the doctor. If traumatic, check item 13 on the CA-1. |
| 6.   | a. Check block “6.B.1” if there is no doubt as to the validity of the injury.  
     b. Check block “6.B.2” if there is doubt or if issued in support of a CA-2. |
| 7.   | If the injury compensation control office has obtained permissions to issue a CA-16 for treatment of an occupational disease claim, the OWCP official authorizing the issuance of he CA-16 will be identified. |
| 8-9. | These blocks will identify the supervisor authorized to issue the form the form must be signed. |
| 10.  | Include area code. |
| 11.  | The date of issue. |
| 12.  | Add the address of the servicing OWCP. |
| 13.  | Add the address of the control office/point authorized to process medical reports. |
Handbook exhibit

<table>
<thead>
<tr>
<th>OWCP FORM CA-17: Duty Status Report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PURPOSE:</strong> To keep the control office and the OWCP informed of the injured/ill employee's ability to return to either limited or full duty.</td>
</tr>
<tr>
<td><strong>PREPARED BY:</strong> Part A</td>
</tr>
<tr>
<td>1. For initial disability; direct supervisor.</td>
</tr>
<tr>
<td>2. For continuing full/partial disability; the control office/point.</td>
</tr>
<tr>
<td>The issuance of Form CA-17 allows the supervisor to prepare a meaningful description of the injured employee's duties for the treating medical source to consider. This description will provide the actual physical demands on the employee and enable the physician to make a more meaningful determination relative to the ability of the injured employee to return to full or limited duty.</td>
</tr>
<tr>
<td><strong>SUBMISSION:</strong> When the supervisor has completed items 3-10 of the CA-17, it should be forwarded with the CA-1 to the control office/point for completion of items 1, 11, and 12. At this time, the employee will be advised in writing that he/she must ask the treating physician to complete Part B and after completion, the employee must submit the CA-17 to the control office/point.</td>
</tr>
</tbody>
</table>
Handbook exhibit

CA-17; Duty Status Report

INSTRUCTIONS FOR COMPLETING THE FORM

Part A to be completed by the immediate supervisor or control office/point before referring the form to the attending physician for completion of Part B.

<table>
<thead>
<tr>
<th>Item</th>
<th>Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Completed, by the control office/point. Refer to Item 1 of the CA-16, or current treating physician if a change of doctor has been approved.</td>
</tr>
<tr>
<td>3.</td>
<td>Claimant’s complete name, last name, first name, and middle name (enter “NMN” if no middle name.)</td>
</tr>
<tr>
<td>4.</td>
<td>Date of injury; items 10 and 21 on the CA-1 or item 29 on the CA-2.</td>
</tr>
<tr>
<td>7.</td>
<td>Brief description of injury/illness and part(s) of body affected. Refer to items 13 and 14 on the CA-1 or to item 14 on the CA-2.</td>
</tr>
<tr>
<td>8,9,10.</td>
<td>Complete as accurately as possible based on the work the employee ACTUALLY performs in his/her REGULAR ASSIGNMENT.</td>
</tr>
<tr>
<td>12.</td>
<td>Complete with the address of the DIV/MSC/BMC control office/point. NOTE: The employee should be instructed to hand-carry the form back to the office if he/she is physically able; otherwise, have doctor mail it back with the CA-16.</td>
</tr>
</tbody>
</table>

NOTE: The attending physician completes Part B. However, note that a physician’s assistant, nurse practitioner, nurse, or other person not with the FECA definition of a physician is not acceptable as the certifying physician. Certification by a physician’s assistant will be acceptable if such certification is countersigned by a physician.
INJURY COMPENSATION PROGRAM
THE SUPERVISOR’S ROLE AN RESPONSIBILITIES

Participant’s Name _________________________________________________
Date ______/ ______/ ______ Office __________________________________

1. Is form 1769, Accident Report, prepared by the supervisor after either a CA-1 or a CA-2 is submitted by an employee?
   a) No, only after a CA-1 is submitted.
   b) No, only after a CA-2 is submitted.
   c) Yes.
   d) Neither.

2. What is the purpose of the CA-17?
   a) It authorizes initial medical attention.
   b) It authorizes follow-up medical attention.
   c) It describes the actual physical requirements of the employee’s duties.
   d) It details the physical restrictions of the injured employee.

3. In addition to the CA-2, what other documentation must the employee submit before the OWCP will evaluate the claim?
   a) Related medical reports, and employee’s personal statement.
   b) A medical history for the past 5 years.
   c) A medical history for the past 10 years.
   d) A history of work-related accidents and/or injuries.

4. Who is responsible for issuing the CA-16?
   a) The employee’s immediate supervisor.
   b) The control office/point or its designee.
   c) The employee’s medical doctor.
   d) OWCP.
5. When an employee returns to regular work following a period of disability, what form is prepared to advise the OWCP of the return?
   a) CA-16
   b) CA-1
   c) CA-2
   d) CA-3

6. When an employee submits a CA-2 with all required supporting documentation, how shall authorization for medical care be issued?
   a) It will not be issued for 30-days.
   b) It will not be issued, unless OWCP evaluates and approves the claim.
   c) It will be issued, immediately as an occupational claim.
   d) The employee pays the medical bill and claims reimbursement.

7. When is a medical certification from a physician’s assistant acceptable as medical evidence on the Duty Status Report?
   a) Only when countersigned by a physician.
   b) When the physician’s assistant's name is approved by OWPC.
   c) When the regular physician’s signature is not available.
   d) It is never acceptable as medical evidence.

8. When is a Receipt of Notice of Injury required to be presented to the employee or the employee’s representative?
   a) When the employee asks for the receipt.
   b) When the employee returns to work full-time.
   c) At the time the form is submitted to management.
   d) After medical treatment is received.

9. Within how many days must an employee submit a CA-1 following an alleged injury?
   a) 2 working days.
   b) 5 working days.
   c) 7 sequential days.
   d) 10 days from the time medical attention is sought.
WITNESS STATEMENTS:

**Question**  What enhances a statement’s validity?

The validity of a statement is significantly enhanced when it is obtained immediately following an incident or as soon as possible thereafter. More specifically, the value of the statement is enhanced if it is obtained before the witness has had the opportunity to discuss the incident with others, especially the claimant.

**Question**  What causes a statement’s validity to be lost?

Too often, the validity of a witness’ statement is lost because the words presented in the statement were influenced by others. In effect, the witness has been allowed to discuss what was seen/heard with the claimant, the shop steward, or other employees/witnesses. When this is allowed, you will obtain statements that are not purely the observations of the witness but may include observations obtained in conversation; the written words could be the result of “guidance” provided by others.

**Question**  How do you get a “pure” witness statement?

In order to acquire valid, “pure” statements, it is considered essential to isolate the witness when he/she is preparing a statement. If such a witness asks for time to think about it or to discuss it with others, it should be explained that a statement is requested now that will reflect what he/she saw/heard. If the witness insists, ask him/her to prepare an “initial” statement now and state that further clarification may be submitted in a later statement.

**Question**  What is needed in a statement?

- a) Who was injured?
- b) How was the injury caused?
- c) Was another person or other persons involved?
- d) What part of the body appeared to be hurt?
- e) Where did the accident take place?
- f) At what time did the accident take place?
- g) What was the injured employee doing at the time of injury?
- h) Where were you (the witness) at the time you witnessed or heard of the accident?
- i) Did you see anyone else in the area who could have seen or heard the accident? If so, who?

In summary, you should recognize that the witness can play a significant role in either supporting or refuting a claim of injury and, to be a statement, it should be:

- a) obtained immediately after the incident/injury.
- b) obtained in private.
- d) obtained before the witness has had the opportunity to discuss what was seen/heard relative to the injury with others.
INJURY COMPENSATION PROGRAM:
HANDOUT—POST-TEST

Participant’s Name _________________________________________________
Date ______/ ______/ ______  Office ___________________________________

1. When an employee suffers a traumatic injury and wants to report it, the
   supervisor will provide him/her with which OWCP form?
   a) CA-1
   b) CA-2
   c) CA-16
   d) CA-17

2. What is an OWCP form CA-16?
   b) Authorization for follow-up medical visits.
   c) Authorization to seek medical care at own expense.
   d) Initial authorization to receive medical care at OWCP expense.

3. Should a witness be allowed to discuss with the injured employee what he/she
   saw, relative to the injury, prior to preparing his/her statement? (Circle one)
   Yes/No
   Why or why not?
   a) Only if the witness is also a family member.
   b) Only if the injury requires immediate medical attention.
   c) Yes
   d) No

4. When should a supervisor obtain statements from witnesses?
   a) Before close of business, the day of the accident.
   b) As soon as possible, after the witnesses has been identified.
   c) Within 24-hours.
   d) Within 48-hours.
5. When may an injured employee who has been treated by a physician be allowed to return to work?
   a) When the attending physician certifies the employee may return.
   b) When light duty is available.
   c) When limited duty is available.
   d) Whenever the employee can assume full duties.

6. What is controversion/challenge, as it relates to the injury compensation program?
   a) Employee claim provision.
   b) Injury Compensation Act.
   c) Controversion/Challenge
   d) Injury compensation challenge

7. What is the OWCP; what does it do?
   a) Office of Worker’s Compensation Program; mediate worker claims.
   b) Office of Worker’s Compensation Program; administer FECA.
   c) Office of Worker’s Claims Profile; investigate workplace hazards.
   d) Office of Worker’s Claims Program; investigate employee claims.

8. What are the basic differences between LIMITED duty and LIGHT duty, if there are any differences? (As defined by USPS National Agreement)
   a) The two terms are interchangeable.
   b) Employee must request limited duty.
   c) Limited duty is provided for an on-the-job injury. Light duty for and off-the-job injury.
   d) Limited last 30-days; light duty continues indefinitely.

9. What is the legal penalty for a supervisor who rejects or delays the processing of a claim by an employee?
   a) Misdemeanor charges.
   b) Liability for $500 fine or 1 year in prison.
   c) Misdemeanor charges and liability for $500 fine, 1 year in prison, or both.
   d) Separation from the Postal Service.
10. Who is responsible for initiating a CA-17 for the initial medical visit?
   a) The injured employee.
   b) The supervisor of the injured employee.
   c) The injured employee’s physician.
   d) A family member of the injured employee.

11. When can a person other than the injured employee fill out the employee’s portion of the CA-1?
   a) If the injured employee is not physically or mentally able to do so.
   b) If the injured employee requests someone to do so.
   c) When the injured employee’s physician is available to do so.
   d) If a family member of the injured employee is also on the scene.

12. When does the Federal Employees’ Compensation Act (FECA) provide for the payment of Worker’s Compensation benefits to employees who are injured/disabled?
   a) If the injury/disability occurred during the performance of their duties.
   b) When the employees become sick or disabled as a result of Federal employment.
   c) When the injury or disability is reported within 24-hours of the occurrence.
   d) Both a and b.

13. An employee has been certified as fit for limited duty by a competent medical authority and does not report for duty. He requests to use sick leave due to the incident, can be approved? (Circle one) Yes/No Why or why not?
   a) Yes
   b) Not unless limited duty is not available.
   c) Not if medical certification states that the employee is capable.
   d) Not unless light duty is not available.

14. Is the USPS under any obligation to make limited duty available to employees who are injured on the job? Explain your answer.
   a) Only if the employee request limited duty.
   b) Yes.
   c) Not if the employee is willing to use annual leave.
   d) Not if the employee has sick leave to use.
15. When an installation does not have a control office, who is responsible for administration of the program within that installation?
   a) The Safety Manager in the facility.
   b) The Injury Compensation Specialist.
   c) A supervisor identified by the installation head.
   d) The installation head.

16. Who is authorized to issue a CA-16?
   a) A control office.
   b) Designated and trained control point.
   c) A supervisor designated by the installation head.
   d) All of the above.

17. How are injury compensation records stored when not in use?
   a) In an office file cabinet, accessible to all personnel.
   b) In a restricted access, locked desk or file cabinet.
   c) In a storage closet in cardboard boxes.
   d) In an unlocked desk drawer of a locked office.

18. Under non-emergency situations, is it optional for the control office/point, who is authorized to issue a CA-16, to make the initial appointment with a source of medical care prior to issuing the CA-16?
   a) Under non-emergency situations.
   b) Never, it is mandatory.
   c) Under emergency situations.
   d) Both a and c.

19. Which OWCP form is used to report an occupational disease?
   a) CA-2
   b) CA-16
   c) CA-17
   d) CA-1
20. When a medical report is required to document the ability of an employee to return to full or limited duty, which OWCP form is used?
   a) CA-1
   b) CA-2
   c) CA-16
   d) CA-17

21. When an employee reports a job-related injury and remains at home without seeing a doctor, can the absence from work be justified based on the injury?
   a) No; it must be certified by a competent medical authority.
   b) No; it must be related to the work injury.
   c) Both a and b
   d) Yes; if sick leave is used.

22. Why should you controvert/challenge a claim by a letter carrier who was injured during a lunch break taken at an unauthorized location 5 miles from their route?
   a) The person was not performing normal duties.
   b) The person had deviated from the authorized route.
   c) There is sufficient doubt as to how the injury occurred.
   d) Both a and b.

23. When an employee presents a disability certificate indicating total disability, what action should be taken to return the individual to a work status?
   a) Advise the medical source that limited duty is available.
   b) Advise the employee of the availability of light duty.
   c) Investigate the possibility of a detail to another position.
   d) Investigate opportunities for rehabilitating the employee.

24. When a bargaining-unit member is injured, why should you obtain statements from other supervisors as well as from other bargaining-unit members?
   a) To obtain credible statement.
   b) To obtain statements from everyone with knowledge of the injury.
   c) To provide statement for controverting the claim.
   d) To substantiate the possible need for light duty.
25. Where is authorization given allowing the USPS to deny COP to an injured employee if the injury is traumatic?
   a) Supervisor
   b) FECA
   c) OWCP
   d) USPS
ASSUMING RESPONSIBILITY FOR SUPERVISION

WEEK 11 — ON-THE-JOB ASSIGNMENT

A. Ensure that all Injury Compensation forms are available and easily obtainable for employee’s use.

B. Ensure that all limited and light duty updates are current for employees if appropriate.

C. The trainee will explain the purposes of all Injury Compensation forms to the on-site trainer and know how they should be completed and distributed. These forms are:
   • CA1, Notice of Traumatic Injury
   • CA2, Notice of Occupational Disease
   • CA16, Authorization for Medical Treatment
   • CA17, Duty Report

On-site trainer will evaluate trainee’s knowledge and understanding of completed assignments.

Optional Assignment to Support Classroom Instructions

The trainee will be responsible for interviewing injured parties and witnesses; and completing and distributing necessary injury compensation forms in the event of an accident.

If the local Injury Compensation Office releases any reports, the on-site trainer will make the report available to the trainee as a reference.
WEEK 12

PROCESS MANAGEMENT
UNIT 5

PROCESS MANAGEMENT

TERMINAL OBJECTIVE:
Process Management is taught in a condensed 3-day course. In this 4-hour session, we will only “skim the surface” by focusing on key concepts. We do not expect you to walk away with everything you need to know to apply this methodology.

ENABLING OBJECTIVE:
At the end of this module, participants will:

• understand the customer-supplier model and the importance of customer feedback.
• understand the value of flowcharts and be able to identify key components of flowcharts.
• understand how to identify or develop indicators based on customer requirements.
• understand how control charts are used to show us the performance of our processes over time and to indicate when our processes are out of control.
• understand the difference between process stability and process capability.
• understand how Process Management can be applied to work processes for continuous improvement.
INTRODUCTION

Process Management is a control tool (or methodology) used by managers and workgroups to ensure that the outputs of their key work processes are predictable (stable) and are capable of meeting customer requirements. Process Management is used daily by frontline managers/supervisors and their workgroups.
DEFINITION OF PROCESS:

A PROCESS is a repetitive and systematic series of actions or operations whereby an input is used to achieve an outcome, which is a product or the achievement of a defined goal.

To expand upon this definition:

- Repetitive Actions are performed in more or less the same fashion on a recurring basis (at least monthly).
- Actions or Operations are clearly observable and definable.
- Inputs and Outcomes can take many forms, from a set of instructions to producing molten steel. A process takes a measurable input and transforms it through change, addition, or subtraction, into a measurable outcome.

CUSTOMER/SUPPLIER MODEL:

- Suppliers provide inputs to the process.
- Customers receive the outputs of the process.
- Processes should add value while transforming an input to an output.
- Dialogues should occur between customers and suppliers about requirements and how to improve (feedback).

**POSTAL WORK PROCESSES:**

- Customer Requirements
- Enabling Processes
- Core Processes
- Feedback
- Selling/Marketing
- Collections/Accepting/Inducting
- Sorting and Distribution
- Transporting
- Delivering
- Customer Satisfaction
We serve our customers through an interlocking chain of processes; these processes, which move the mail, are known as core processes. The core processes are supported by the underlying enabling processes.

Examples of enabling processes: accounting, hiring, maintaining of automation. Enabling processes belong to our “support functions”: finance, human resources, information systems, etc.
A **FLOWCHART** is a graphic representation of a process. It shows how the work process activities are sequenced from step to step in order to produce an output.

**Why use flowcharts?**
- To describe how activities are being done.
- To identify how, when, and where to measure a process.
- To investigate where problems might occur.
- To identify where modifications might best be made or to aid in the design of a new process.
- To help all process participants understand their part of the process and how it fits into the big picture.
- To aid in training new employees.

### LOAN APPLICATION PROCESS (MATRIX FLOWCHART)

<table>
<thead>
<tr>
<th>Step</th>
<th>Who (Customer)</th>
<th>Loan Officer</th>
<th>Administrative Assistant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td>Send application form</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step 2</td>
<td>Review form</td>
<td></td>
<td>Fix form</td>
</tr>
<tr>
<td></td>
<td>OK?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step 3</td>
<td>Receive form</td>
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</tr>
</tbody>
</table>
The matrix flowcharts that we use for Process Management are different from most flowcharts. We indicate areas of responsibility ("who") across the top and elapsed time or steps along the left column.

FLOWCHARTING SYMBOLS:

- Shows the start or end of the process
- Represents an activity
- Indicates the main direction of flow from one activity to the next
- Signifies a decision
- Symbolizes the continuation of a flowchart
- Represents the location of a result or process indicator
- Represents input from an outside source such as a supplier
FIRST GROUP EXERCISE:

Identify Customer Requirements

Purpose: To identify customer requirements for your assigned processes.

Agenda:
- Two participants in each group will play the role of customers of your process.
- One member of the group will write on the ripchart as the “customers” tell the rest of the group their requirements.

Limit: 10 minutes.

Three key questions to be used when developing a dialogue with customers:
- What do you need from me?
- What do you do with what I give you?
- Are there any gaps between what I give you and what you need?
The Process Management methodology gives us a set of criteria to validate the requirements communicated by our customers.

**RUMBA Criteria:** Is this requirement...

- **Reasonable?** That is, can we meet the requirement (it does not violate company procedures, etc.)?
- **Understandable?** Has the customer verified that we understand what they require from us?
- **Measurable?** Are we able to objectively measure the degree or frequency of meeting this requirement?
- **Believable?** Will employees agree to strive for that level of achievement?
- **Achievable?** Is the desired performance level theoretically possible?

We use the Customer Requirements Matrix to list our customers and their requirements and to determine which requirements meet the RUMBA criteria. (We may need to negotiate with the customer in order for a requirement to meet the criteria.) When we can answer “yes” to all five elements, that requirement is considered a **Customer Valid Requirement**.

**CUSTOMER REQUIREMENTS MATRIX**

<table>
<thead>
<tr>
<th>Customer</th>
<th>Perceived Requirement</th>
<th>R (Y/N)</th>
<th>U (Y/N)</th>
<th>M (Y/N)</th>
<th>B (Y/N)</th>
<th>A (Y/N)</th>
<th>Valid Requirement (Y/N)</th>
<th>Prioritize</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>
INDICATORS:

How do you know if you are meeting your customers’ needs? To speak with facts about whether or not your processes are doing a good job requires knowing how to measure a good job. That is where indicators come in.

In this context, an indicator is defined as a measure of how well our process is operating.

- Indicators are used to monitor both the effectiveness of a part of the work process (process indicators) - and -
- the quality of the output of the process (result indicators).

All indicators should have these characteristics:

- **Measurable:** They can be expressed quantitatively (in frequency, sizes, time, dollars, etc.)
- **Verifiable:** They are observable and auditable. Different observers of the process should be able to agree on the results obtained from measuring the process.
- **Cost Effective:** Whenever possible, data for indicators will be obtained from existing sources and information systems. The benefits gained from using an indicator should exceed the costs associated with tracking it.
SECOND GROUP EXERCISE:

Validate Customer Requirements

Purpose: To validate customer requirements and to develop indicators from one requirement.

Agenda:
- Using the RUMBA criteria, validate at least one customer requirement (must answer yes to all criteria).
- For one validated requirement, develop or identify one result and/or one process indicator (means of measurement).
- Be prepared to explain how and where (within the process) measurements should be made.
- One or two group members should prepare to present your process to the entire group.

Limit: 25 minutes.
CONTROL CHARTS:

- Line graphs with statistically calculated limits.
- Show performance of our process over time.
- Show the variation of our process.
- Provide an “alarm system” to prompt investigation of causes (special cause variation or cessation of random variation).
- There are different types of control charts, depending on the types of data and sample sizes.

Control charts enable us to effectively measure our processes so that we may better serve our customers. We do this by:

- reducing cycle time
- reducing costs
- increasing outputs, etc.

Using control charts enables us to manage with facts.

We use Process Management and control charts because it makes good business sense, not because it is “nice to do.”
VARIATION, STABILITY AND CAPABILITY:

- All processes are subject to variation (we expect it). Variation inherent to the process is called common cause variation.
- When something external to the process affects the process, this is called special (or assignable) cause variation.

In our Loan Application Process example, a delay in processing caused by customer errors (on the application) would be considered common cause variation. On the other hand, a delay caused by a fire in the loan office would be considered special cause variation.

Variation

Common Cause
(natural/inherent)

Special Cause
(assignable/imposed)

Control charts show us when our process requires investigation (when it is out of control). A related methodology, Quality Improvement Story, enables us to understand where and why, and to improve our process.

We use control charts to measure process stability. (Stable is the same as “in control”).

- Points outside of the control limits indicate an unstable process.
- Certain patterns in the data points enable us to determine that the process is not operating with random variation. This is another sign of process instability.

Stability equals consistency of our processes.
When a process is unstable, we must first stabilize the process before addressing issues of capability.
PROCESS ROAD MAP:

Identify

- Identify and Select Top-Priority Process

Document

- Document Top-Priority Process

- Identify Customer and Supplier Requirements

Measure

- Develop Indicators and Build Process Management System

Assess

- Implement the Process Management System

- Is process stable?
  - Y: Identify and remove special cause variation
  - N: N

- Is process capable?
  - Y: Investigate common cause variation and change or redesign the process
  - N: N

Standardize and Replicate

A = Improving Process Stability
B = Improving Process Capability
When a process is stable, the distribution of data appears as a bell curve. This is what is known as a normal distribution.

![Normal Distribution](image)

**Capability** is the ability of our process to meet customer specifications. We use histograms as a tool to measure process capability. (Histograms will not be covered in this session.)

If our process is stable and capable, we may use Process Management to reduce the variability of our process and to continuously improve our process to better meet the present and future needs of our customers.
UNIT 5

PROCESS MANAGEMENT

KEY POINTS:

Key concepts of process management:

• Know your customer
• Understand your customer’s requirements
• Find out how to measure your process to better serve your customer
Appendix A

Simplified Flowcharts for Breakouts (PALs):

1. Selling/Marketing
2. Collecting
3. Processing: Mail Handler/Clerk (Plant)
4. Transporting
5. Delivering: Mail Handler/Clerk (Delivery Unit)
6. Delivering: Carrier (Delivery Unit)
7. Delivering: Carrier
### SELLING/MARKETING

**P.O. Window Service**

<table>
<thead>
<tr>
<th>Step</th>
<th>CUSTOMER</th>
<th>WINDOW CLERK/REP</th>
<th>SUPERVISOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>INITIATE</td>
<td>GOES TO THE POST OFFICE</td>
<td>GREETS CUSTOMER - INQUIRES OF NEED(S)</td>
<td></td>
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<tr>
<td></td>
<td>CAN REP HANDLE?</td>
<td></td>
<td>REFER TO SUPERVISOR</td>
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<tr>
<td></td>
<td>YES</td>
<td>SUGGESTS PRODUCTS/SERVICES</td>
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<td></td>
<td>NO</td>
<td>REFER TO SUPERVISOR</td>
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<tr>
<td>PROBLEM SOLVING</td>
<td>RESOLVED?</td>
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<td>REFER TO SUPERVISOR</td>
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<td>YES</td>
<td>PROVIDE PRODUCT/SERVICE - RECEIVE PAYMENT (if required) - THANK CUSTOMER</td>
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<td></td>
<td>NO</td>
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<tr>
<td>FINALIZE</td>
<td>- RECEIVE PRODUCT/SERVICE - PAY FOR PROD/SVC (if required)</td>
<td>CUSTOMER LEAVES</td>
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### COLLECTING

<table>
<thead>
<tr>
<th>STEP</th>
<th>WHO</th>
<th>CUSTOMER</th>
<th>CARRIER</th>
<th>MAIL HANDLER/CLERK (DEL. UNIT)</th>
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<tbody>
<tr>
<td></td>
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<td>DEPOSITS MAIL IN COLLECTION BOX</td>
<td>TRAVELS TO COLLECTION PT</td>
<td>COLLECTS MAIL</td>
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<tr>
<td>COLLECT</td>
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<td>COLLECTS MAIL</td>
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<td>READY TO RETURN?</td>
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<td>No</td>
<td>WAIT</td>
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<td>COLLECTS MAIL</td>
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</table>

- **WAIT**
- **Yes**
- **No**
PROCESSING: MAIL HANDLER/CLERK

Plant

<table>
<thead>
<tr>
<th>WHO</th>
<th>MAIL HANDLER/CLERK</th>
<th>DELIVERY UNIT</th>
<th>TRANS. (MVS)</th>
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<tbody>
<tr>
<td>PROCESS</td>
<td>RECEIVES MAIL</td>
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<tr>
<td></td>
<td>SEPARATES MAIL - CANCELS MAIL - STAGES FOR PICK-UP</td>
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<tr>
<td></td>
<td>PICKS UP MAIL FOR PROCESSING</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>- WEIGHS MAIL (If required) - LOADS MAIL - CULLS MAIL (If required) - SORTS MAIL - SWEEPS - LABELS &amp; ACT TAGS (If required)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>READY FOR DISPATCH?</td>
<td>No</td>
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<tr>
<td>Yes</td>
<td>PLACES PLACARD ON CONTAINER</td>
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<td>DEL. UNIT AT PLANT?</td>
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<td>DELIVERS TO DELIVERY UNIT</td>
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<td>TRANSPORT</td>
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<td>DRIVES TO DEL. UNIT</td>
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</tbody>
</table>

RECEIVES MAIL

MAIL HANDLER/CLERK

DELIVERY UNIT

TRANS. (MVS)
TRANSPORTING (MVS)

<table>
<thead>
<tr>
<th>WHO / STEP</th>
<th>PLANT</th>
<th>DRIVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>DISPATCH</td>
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<td></td>
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<tr>
<td>DISPATCHES MAIL</td>
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<tr>
<td>DISPATCHES TO ANOTHER PLANT?</td>
<td>No</td>
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<tr>
<td></td>
<td>Yes</td>
<td>TRANSPORTS TO PLANT</td>
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<tr>
<td></td>
<td>Yes</td>
<td>TRANSPORTS TO AMC</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>TRANSPORTS TO BMC</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>TRANSPORTS TO DEL. UNIT</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>DISPATCHES TO AMC</td>
</tr>
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<td></td>
<td>No</td>
<td>DISPATCHES TO BMC</td>
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<td></td>
<td>No</td>
<td>DISPATCHES TO AMC</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>TRANSPORTS TO DEL. UNIT</td>
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</table>

UNLOADS THE TRUCK

TRANSPORTS TO PLANT

TRANSPORTS TO BMC

TRANSPORTS TO AMC

TRANSPORTS TO DEL. UNIT
DELIVERING: MAIL HANDLER/CLERK
Delivery Unit

<table>
<thead>
<tr>
<th>WHO</th>
<th>P.O.B. CUSTOMER</th>
<th>MAIL HANDLER/CLERK</th>
<th>CARRIER</th>
</tr>
</thead>
<tbody>
<tr>
<td>RECEIVE</td>
<td><strong>RECEIVES MAIL</strong>&lt;br&gt;<strong>CHECKS FOR MISSENT/DPS-NEEDED MAIL</strong></td>
<td><strong>READY FOR SORT?</strong>&lt;br&gt;Yes: <strong>SORTS MAIL</strong></td>
<td><strong>RETURNS TO PLANT</strong></td>
</tr>
<tr>
<td>PREPARE</td>
<td><strong>FOR CUSTOMER PICK-UP OR PO Box?</strong>&lt;br&gt;Yes: <strong>STAGES FOR BOXES</strong>&lt;br&gt; <strong>DISTRIBUTES FOR PICK UP</strong></td>
<td><strong>DISTRIBUTES TO CARRIER ROUTES</strong></td>
<td><strong>RECEIVES MAIL</strong></td>
</tr>
<tr>
<td>DELIVER</td>
<td><strong>RECEIVES MAIL</strong></td>
<td><strong>DELIVERS MAIL</strong></td>
<td></td>
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</table>

- DELIVERING: MAIL HANDLER/CLERK
- DELIVER PREPARE RECEIVE
DELIVERING: CARRIER

Street

<table>
<thead>
<tr>
<th>CARRIER</th>
<th>CUSTOMER</th>
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</thead>
<tbody>
<tr>
<td>LOAD/ TRAVEL</td>
<td></td>
</tr>
<tr>
<td>WHO</td>
<td></td>
</tr>
<tr>
<td>STEP</td>
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<td>LOAD</td>
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<td>TRAVEL</td>
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<td>CARRIER</td>
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<tr>
<td>TRAVELS TO DELIVERY POINT</td>
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<td>ANY ACCOUNTABLE MAIL?</td>
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<tr>
<td>ANY PARCELS?</td>
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<td>Delivers Mail</td>
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<tr>
<td>ATTEMPT TO CONTACT CUSTOMER</td>
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<td>CUSTOMER REACHED?</td>
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<td></td>
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<tr>
<td>LEAVE A NOTICE FOR CUSTOMER TO PICK UP</td>
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<td></td>
</tr>
<tr>
<td>DELIVER ACCOUNTABLE MAIL/PARCELS</td>
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</tr>
<tr>
<td>RECEIVES NOTICE</td>
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<tr>
<td>RECEIVES REGULAR MAIL</td>
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WEEK 12

QUALITY IMPROVEMENT STORY
UNIT 6

QUALITY IMPROVEMENT STORY

TERMINAL OBJECTIVE:
The Quality Improvement, or QI, Story is taught in a condensed 3-day course. In this 3-hour session, we will only introduce you to the key concepts. We do not expect you to walk away with everything you need to know to apply this methodology.

ENABLING OBJECTIVE:
At the end of this module, participants will:

• Understand the connection between Process Management and the Quality Improvement Story.

• Understand the flow and logic of the seven steps of the Quality Improvement Story.

• Understand how the Quality Improvement Story can be applied to work processes for continuous improvement.

• Understand how replication of Quality Improvement stories will enable others in our organization to benefit from our investment.
INTRODUCTION

Let’s begin the session by reviewing the key concepts of Process Management.

- Who is my customer?
- What does that customer need from me?
- How do I know if I’m “delivering”?

A **process** is a repetitive and systematic series of actions or operations whereby an input is used to achieve an outcome, which is a product or the achievement of a defined goal.

“Repetitive actions” occur at least monthly.

If we use Process Management, we will understand how our process is performing. Once we know how it is performing and wish to improve it, we need the Quality Improvement, or QI, Story methodology. The QI Story gives us a *specific series of actions* to make improvements to our process.
THE SEVEN STEPS

1. Reason for Improvement
2. Current Situation
3. Analysis
4. Countermeasures
5. Results
6. Standardization
7. Future Plans
Here is why we use the QI Story:

- It is systematic and logical.
- It is a standard template, so that we are all using the same process, which we only need to learn one time.
- This standard template facilitates replication of Quality Improvement Stories.
- And like the Process Management System, it provides a means of communication between the workteam and the rest of the people involved in the work process.

This methodology is intended for use by cross-functional workteams. And in order for individuals to work effectively together as a group, it is extremely helpful for them to receive training in group dynamics and for leaders, in team leadership.
STEP 1: 
Reason For Improvement

Outcome...

To identify a “Theme”
(Problem Area) and the reason for working on it.

In Step One, the team identifies a Reason for Improvement or Theme. Sometimes a team is sponsored because of a particular area of concern; this area of concern would be reflected in the Theme. Frequently, this “Theme” is assigned to the team by local leadership.

When the team has completed Step One, they should have a Theme and an Indicator, or means of measurement, for the Theme.

Note: Numerous tools and techniques are used in the QI Story methodology and we will not be reviewing all of them in this module.
In Step Two, the team describes the Current Situation. In other words, what is the current performance in the area of focus or Theme?

The team looks at data related to the Theme. They then stratify that data in order to focus on an area of significant impact. By breaking the problem down in various ways, the team should be able to identify one area of significance.

The team then crafts a Problem Statement describing the Theme and the area of significance within the Theme.

Step Two also includes setting a Target for Improvement.
PARETO & PAL

The team stratifies the data in Step Two through the use of Pareto diagrams.

In order to become more familiar with stratification and Pareto analysis, we will complete a group exercise. You should refer to the instructions on Pareto construction (page 8) while doing the exercise.

* Exercise

To construct a Pareto Chart

✔ Team 1 will construct a Pareto chart for the number of years of service of the driver (5 categories).
✔ Team 2 will construct a Pareto chart for the six different days of the week (6 categories).
✔ Team 3 will construct a Pareto chart for the number of hours worked by the driver on the day of the accident (5 categories).
✔ Data is in your book.
✔ All teams will answer
  - Is there a Pareto pattern?
  - What do you suggest for further investigation?

20 minutes To construct the Pareto Chart
5 minutes For team spokespersons
25 minutes Total
The Rollins Performance Cluster experienced a sharp increase in Motor Vehicle Accidents in Quarter 4. The Safety Improvement Team decided to analyze the accidents in order to try to find a significant pattern. They developed a checksheet to record the accidents by the day of the week on which the accident occurred and the number of years of service of the driver.

They also wanted to capture information about how many hours the driver had worked on the day of the accident, prior to being involved in the accident. They achieved this by coding each of the accidents recorded as follows:

**Hours Worked:**

- \( \leq 2 \text{ hours} = A \)
- \( 2:01 - 4 = B \)
- \( 4:01 - 6 = C \)
- \( 6:01 - 8 = D \)
- \( 8:01 + = E \)

The results of recording this data gave the following:

<table>
<thead>
<tr>
<th>Years of Service ⇒</th>
<th>≤ 6</th>
<th>6/1 - 12</th>
<th>12/1 - 18</th>
<th>18/1 - 24</th>
<th>24 +</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>A D D</td>
<td>C D D E</td>
<td>E</td>
<td>E</td>
<td>D E</td>
</tr>
<tr>
<td>Tuesday</td>
<td>B C E</td>
<td>D E</td>
<td>D</td>
<td>D</td>
<td>B</td>
</tr>
<tr>
<td>Wednesday</td>
<td>D</td>
<td>A D</td>
<td>B C D E</td>
<td>B C</td>
<td>C</td>
</tr>
<tr>
<td>Thursday</td>
<td>B E</td>
<td>E</td>
<td>C E</td>
<td>D D</td>
<td>D</td>
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<tr>
<td>Friday</td>
<td>D E</td>
<td>E</td>
<td>C E</td>
<td>D E</td>
<td></td>
</tr>
<tr>
<td>Saturday</td>
<td>A E</td>
<td>D E</td>
<td>E E</td>
<td></td>
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</tr>
</tbody>
</table>
How is a Pareto Chart constructed?

1. Identify data to be analyzed, such as defects.

2. Select the categories to be used (defects by shift, location, type) and sort your data into categories. For instance, how many defects related to shift, location, and type.

3. If possible, further stratify the data; for instance, “shift” may be broken down into “day,” “night” and “graveyard”.

4. Draw two vertical axes and a horizontal axis to make the graph, arranging the bars in decreasing frequency from the left.

5. If there is a category called “other,” it is always shown as the last bar on the right in the Pareto, no matter how large it is. This is because it is composed of several items, each of which is smaller than the smallest item listed individually.

6. Verify the following:
   a. Bars touching
   b. Left axis for actual data
   c. Right axis for % of total
   d. Cumulative

Flowchart: Pareto Analysis

- Data
  - Define Categories
  - Sort Data
  - Make Pareto Chart
  - Significant % of Data In One or Two Categories?
    - Yes
      - Pareto Pattern
    - No
      - Reconsider Categories
STEP 3

*Step 3: Analysis*

Identify and verify the Root Causes of the problem

**Key Activities**

- Cause-and Effect analysis
- Actionable root causes
- Probable greatest impact
- Verify root causes with data

Step Three is where the team identifies potential root causes of the problem. This is done through Cause and Effect Analysis.

Cause and Effect diagrams, also known as Fishbone diagrams, help a team to organize their collective knowledge and experience about the problem. The team illustrates this by showing “chains of logic” for causes of the problem. The team seeks to identify the underlying, or root, causes of the problem.

Once the team has identified potential root causes, they must use data to verify that the potential root causes really are causing the problem.
Cause-and-Effect Diagram

- Also called Fishbone or Ishikawa
- Find out why by identifying Root Causes

Cause-and-Effect Diagram

Effect

Problem Statement

Cancel and Separate Mail
- Bar codes unable to be read correctly
- Bar code area on letter is contaminated
- Cancellation mark offset too far
- Cancellation equipment out of adjustment

Place, Date, Time, Init., and Route to Dispatch
- Mail routed to incorrect station
- Employee switched routes
- Employee unfamiliar with routes
- Employee poorly trained in routes

Load, Sort, Sweep and Label
- Bar code incorrectly sprayed on letter
- Reading equipment computed wrong bar code
- Directory used by reading equipment out of date
- No consistent process to ensure directory is timely updated
- Bar code caused multiple loops
- Loading did not recognize item as looping
- No process to highlight wrong bar code items in stations.

83% of all 1st class “stamped” mail delivery delay customer complaints involving delivery greater than 10 days contained bar codes.

= Potential Root Cause
**STEPS 4 thru 7**

In Step Four, Countermeasures, the team must identify and select countermeasures to reduce the effect of the problem. In this step, the team also has to weigh projected costs against projected benefits of their countermeasures. Action planning is done once countermeasures have been selected, and the countermeasure, or countermeasures, are implemented.

In Step Five, Results, the team is able to see whether or not their countermeasures have been effective in reducing the root causes. If so, the overall problem, or effect, should be reduced as well. If not, additional countermeasures may be implemented.

In Step Six, Standardization, the root cause or causes has/have been reduced. The team must now standardize the countermeasures, so that they become part of the way in which business is done. This step, although it sounds simple, usually requires significant effort. Training may need to be developed, service talks may need to be written, and visits to different operations may be necessary-- to ensure that everyone understands the new way of doing things. In addition, Standard Operating Procedures (SOPs) and work process flowcharts may have to be re-written or modified.

In Step Seven, the team reviews the story, addresses any remaining issues and evaluates their own effectiveness. This is when the team looks not only at the content, but also at the team’s process. The team should ask questions such as “What did we do well?” and “What would we do differently next time?”
REVIEW/QUESTIONS?

Remember that Process Management answers these questions:

- Who is my customer?
- What does that customer need from me?
- How do I know if I’m “delivering”?

Process Management helps us to monitor our processes, focusing on what is important to customers. And the QI Story enables us to make improvements to those processes. By using these continuous improvement methodologies, we can reduce cycle time and costs, and/or improve service and outputs. This translates to better service, increased revenue and greater sustainability for our organization.
ASSUMING RESPONSIBILITY
FOR SUPERVISION

WEEK 12 — ON-THE-JOB ASSIGNMENT

FUNCTIONAL INTERCHANGE OCCURS THIS WEEK

A. Trainees in the Customer Services tract will complete an extensive written report on Distribution Operations and trainees in Distribution Operations will complete same for Customer Services. The report should include:

- What each functional area can do to enhance the other.
- Identify experiences that had a positive impact on you.
- State what knowledge was gained from the experience.
- Identify problem areas.
- Outline an approach to implement possible corrective actions to problem areas.

B. The completed report will be presented to the trainee’s coach and on-site trainer at their next meeting.

On-site trainer and coach will provide feedback to the trainee on the merits of their report.
WEEK 13

MANAGING NEW EMPLOYEES
UNIT 7

MANAGING NEW EMPLOYEES

TERMINAL OBJECTIVE:

Upon completion of this unit, the participant will be able to describe his/her responsibilities in supervising and evaluating new employees.

ENABLING OBJECTIVES:

Trainees will be able to:

• Describe how evaluations are completed for probationary employees.
• Explain the importance of new employee evaluations.
• Define what to look for in a new employee.
• Relate how to properly train and orient new employees.
Standards of performance are helpful in defining the level of performance expected of a satisfactory employee.

- **Quality of Work** - Is this clerk continuously mis-sorting mail, or this Mailhandler putting the right mail on the wrong truck?

- **Quantity of Work** - Is this carrier continuously requesting overtime, or having excessive curtailed or delayed mail, or does this clerk constantly have full-bin alarms sounding behind LSM when sweeping, etc.?

- **Manner of Performance**.

**Critical Items in Performance Evaluations:**

- **Timeliness**;

- **Documentation**, supervisor’s personal notes;

- **Attendance records**, PS Form 3972;

- **Driving observation records** for carriers;

- **Copies of customer complaints**, etc.
UNIT 7

MANAGING NEW EMPLOYEES

KEY POINTS:

• Evaluate all of your employees objectively, focusing on observable job-related criteria.

• If performance is unsatisfactory, let the employee know specifically what needs improvement and provide constructive advice.

• Complete and submit PS Form 1750 in a timely manner when evaluating new employees.

• Keep thorough, secure documentation on employees to be evaluated.
WEEK 13

LEAVE CONTROL
UNIT 8

LEAVE CONTROL

TERMINAL OBJECTIVE:

Upon completion of this unit, the participant will be able to state and explain the differences between the major types of leave, and how to administer leave control, including all forms and procedures.

Specific Activities: During this unit, the participant will:

1. List and explain the various types of leave and appropriate steps for administering each type of leave.

2. Differentiate between scheduled and unscheduled leave.

3. Complete PS Forms 3971 and 3972; and explain the data required in all areas of the forms.

4. Differentiate between FMLA covered absences from regular absences.

ENABLING OBJECTIVES:

Participant will be able to:

1. Explain how proper leave control can reduce unscheduled absences.
2. Describe how to administer the USPS leave program on an equitable basis.
3. Maintain a proper Form 3972.
4. Record leave in accordance with the F-21 and F-22.
5. Discuss the Family Medical Leave Act as it applies to postal employees and supervisors.
Effective Leave Control

The U.S. Postal Service's organizational responsibilities for administering the leave control program include:

- Administering the leave program on an equitable basis and to be fair and consistent.
- Inform employees of leave balances via the earnings statement or pay stub.
- Approve or disapprove requests for leave made on PS Form 3971.
- Record leave in accordance with handbooks F-21, *Time and Attendance*, and F-22, *PSDS Time and Attendance*. These handbooks stipulate the proper codes to be used to record/ process leave.
- Control unscheduled absences.
- Recognize conditions covered by the Family and Medical Leave Act (FMLA).

The employees also have responsibilities in the leave process, some of which include:

- Request leave by completing PS Form 3971; it should be properly completed with all necessary information.
- Obtain approval of PS Form 3971 before taking leave except in emergency cases. This lets you, the supervisor, plan for coverage.
- Avoid unnecessary forfeiture of annual leave. (Craft employees can carry over 440 hours from one year to the next, while supervisors/EAS employees can carry over 560 hours.) Anything in excess of the maximum allowance is forfeited or lost. The union agreements and Postal regulations make no provisions for exceptions.
Keep assigned schedules up-to-date and avoid unscheduled absences; be punctual and regular in attendance.

Provide administratively acceptable evidence for absences when required. We will define “administratively acceptable evidence” later.

Your supervisory responsibilities regarding the leave program include:

1. Controlling unscheduled absences. They are disruptive to your operation, and if unchecked, can lower employee morale.

2. Inform employees of USPS leave regulations and local leave procedures. Never assume the employees know USPS policy if you haven’t personally told them. Make certain that all parties know what is expected of them.

3. Maintain and review PS Forms 3971, Request for or Notification of Absence and 3972, Absence Analysis.

4. Determine if the reason for the absence is a condition covered by FMLA. When the absence is for a covered condition, “FMLA” must be written in the PS Form 3971 approval block and a Notice for Employees Requesting Leave for Conditions Covered by the Family and Medical Leave Policies, Publication 71, must be given to the employee.
Define the following terms:

- **Annual Leave**
  
  __________________________________________
  __________________________________________
  __________________________________________

- **Sick Leave**
  
  __________________________________________
  __________________________________________
  __________________________________________

- **Restricted Sick Leave**
  
  __________________________________________
  __________________________________________
  __________________________________________

- **LWOP**
  
  __________________________________________
  __________________________________________
  __________________________________________

- **Court Leave**
  
  __________________________________________
  __________________________________________
  __________________________________________
• Military Leave

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• Blood Donor Leave

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________________________________________

• Family Leave

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________________________________________
________________________________________
Attendance Control
An unscheduled absence is defined as: "An absence from work which is not requested and approved in advance." (ELM 511.41)

Exercise: Scheduled vs. unscheduled absences.

Situation A
An employee scheduled to report for duty at 0700 calls his supervisor at 0600 and requests annual leave for personal business. The supervisor reviews the operation and after considering other relevant factors, determines that he can approve leave, operating without the services of the employee on that day. He approves the request.

1. Is this a scheduled or unscheduled absence?
2. Why?
3. Did a PS Form 3971 need to be submitted in advance?

Situation B
An employee scheduled to report for duty at 0700 calls his supervisor at 0600 and informs him that he is unable to report for duty because of illness and is requesting sick leave.

1. Is this a scheduled or unscheduled absence?
2. Why?
3. When does a supervisor approve or disapprove this sick leave request?
Situation C

Because mail volume is light, a supervisor asks her clerks who are on their regular scheduled workday, if any of them would like to go home early -- using annual leave or leave without pay. Two clerks take 2 hours annual leave with the supervisor's approval.

1. Are these scheduled or unscheduled absences?

2. Why?

Situation D

An employee scheduled to report for duty at 0700 calls his supervisor at 0630 and states that he will be late due to car problems. He reports at 0800. After a discussion with the employee, the supervisor approved 1 hour of annual leave.

1. Is this a scheduled or unscheduled absence?

2. Why?

Situation E

An employee requests 2 hours sick leave to attend a dental appointment 2 days from now. The supervisor approves the request and notes it on the schedule.

1. Is this a scheduled or unscheduled absence?

2. Why?
Regardless of who initiates the PS Form 3971, a few basic procedures apply:

1. The form must be completely filled out, and,

2. It must be legible. Supervisors should encourage employees to print all entries except for signatures.

**USPS Responsibilities to the Leave Program:**

- Administer Leave Program on Equitable Basis
- Inform Employees of Leave Balance (via earnings statement)
- Approve or Disapprove Requests for Leave
- Record Leave in Accordance with F-21 and F-22
- Control Unscheduled Absences
- Recognize Conditions Covered by FMLA
UNIT 8

LEAVE CONTROL

KEY POINTS:

• Proper Leave Control can reduce Unscheduled Absences.

• All types of leave must have a PS Form 3971 completed.

• Family and Medical Leave Act allows up to 12 weeks absence per leave year for covered conditions.

• Must note “FMLA” on PS Form 3971 for any absence that qualifies as Family and Medical Leave.

• Employees cannot be disciplined for taking FMLA leave. 80 hours of LWOP usage reduces employees' advanced leave balances.
Appendix: LEAVE CONTROL

NOTICE FOR EMPLOYEES REQUESTING LEAVE FOR CONDITIONS COVERED BY THE FAMILY AND MEDICAL LEAVE POLICIES

I. Qualifying Conditions

The Postal Service Family and Medical Leave policies provide that employees meeting the eligibility requirements must be allowed to take time off for up to 12 workweeks in a leave year for the following conditions:

1. Because of the birth of a son or daughter (including prenatal care), or to care for such son or daughter. Entitlement for this condition expires 1 year after the birth.

2. Because of the placement of a son or daughter with you for adoption or foster care. Entitlement for this condition expires 1 year after the placement.

3. In order to care for your spouse, son, daughter, or parent who has a serious health condition. Also, in order to care for those who have a serious health condition and who stand in the position of a son or daughter to you or who stood in the position of a parent to you when you were a child.

4. Because of a serious health condition that makes you unable to perform the functions of your position

II. Eligibility

To be covered by these policies, you must have been employed by the Postal Service for a total of at least 1 year and must have worked a minimum of 1,250 hours during the 12-month period before the date your absence begins.

III. Type of Leave

Time off taken under these policies is counted toward the 12 workweeks allowed by the Family and Medical Leave Act; however, this is not a separate type of leave, but is charged to annual leave, sick leave, and/or LWOP in accordance with current leave policies. Note that sick leave is available only for your own health condition and can not be used to care for others.
IV. Documentation

Supporting documentation is required for your leave request to receive final approval.

- For conditions (1) or (2), you must provide the birth or placement date.

- For condition (3), you must provide documentation from the health care provider stating the date the serious health condition began, probable duration of the condition, and appropriate medical facts. You must also provide documentation of when you are needed to provide the care or psychological support.

- For condition (4), you must provide documentation from the health care provider stating the date the serious health condition began, probable duration of the condition, and appropriate medical facts.

- If the time off requested is to care for someone other than a biological parent or child, appropriate explanation of the relationship may be required.

Supporting information that is not provided at the time the leave is requested must be provided within 15 days, unless this is not practical under the circumstances. If the Postal Service questions the adequacy of a medical certification, a second or third opinion may be required and the Postal Service will pay for these opinions.

If the absence is due to your own health condition and exceeds 21 calendar days, you must submit evidence of your ability to return to work before you will be allowed to return. Also, during your absence, you must keep your supervisor informed of your intentions to return to work and status changes that could affect your ability to return. Failure to provide information can result in the denial of family and medical leave under these policies.

V. Benefits

Health Insurance - To continue your health insurance during your absence, you must pay the "employee portion" of the premiums. This will continue to be withheld from your salary while you are in a pay status. If the salary for a pay period does not cover the full employee portion, you will be required to make the payment. If this occurs, you will be advised of the procedures for payment.

Life Insurance - Your basic life insurance is free and will continue. If you are in a LWOP status for more than a year, this coverage is discontinued; however, you will have the option to convert to an individual policy. If you have optional life insurance
coverage, it continues. Your premium payments will continue to be withheld from your pay check. If you are in a non-pay status, your optional insurance coverage continues without cost for up to 12 months. Thereafter you can convert this coverage to an individual policy.

**Flexible Spending Accounts (FSAs)** - If you participate in the FSA program, see your employee brochure for the terms and conditions of continuing coverage during leave without pay.

**VI. Return to Duty**

At the end of your leave, you will be returned to the same position you held when the absence began (or a position equivalent to it), provided you are able to perform the functions of the position and would have held that position at the time you returned if you had not taken the time off.
LEAVE, MILITARY (ELM 517)

CLARIFICATION OF ISSUES

The following addresses frequently recurring questions/issues regarding the administration of leave for service to the National Guard and Reserves (numbering is as in the ELM):

517.1 GENERAL

The term "military leave" applies to only those periods of absence for military duty for which an employee receives pay under the military time allowance provisions of 517.5. Any part of an absence for military duty which is charged to annual leave or LWOP is not "military leave".

The term is used incorrectly in certain instances in 517; therefore, until these errors are corrected in a future ELM, administer 517 consistent with the above definition.

517.22 RETURN FROM DUTY

Employees are not required to furnish military orders until they return from military duty. However, as with all absences (511.23), using Form 3971 they are required to provide reasonable advance notice of absence for military duty, when possible, in order that arrangements can be timely made for their replacement, if necessary.

A copy of a schedule of military drills and/or other recurring military duty is considered notice of all events referenced in the schedule. Even so, for time keeping purposes, an employee must complete and submit a Form 3971 prior to each period of military duty.

Note: Failure to give reasonable notice is NOT a basis for denying permission to be absent for military duty, but MAY be a basis for disciplinary action for failure to follow instructions if the employee, himself, received reasonable notice of required military duty.
517.3 **Policy**

Absences for service to the National Guard and Reserves are approved for any employee who is a member of either organization, whether the employee is eligible for military leave or not.

**Note:** Military retirees are occasionally required to report for military duty for short intervals for various purposes, usually administrative in nature. The provisions of 517 also apply in these instances.

517.51 **General ALLOWANCE**

The military leave of up to 15 calendar days per FY for eligible full-time employees and up to 80 hours per FY for eligible part-time employees is for any covered military duty other than law enforcement (see 517.12 for coverage).

**Note:** 517.51 DOES NOT APPLY TO EMPLOYEES IN THE DC GUARD (see 517.54).

517.53 **Law Enforcement ALLOWANCE**

Additional military leave of up to 22 workdays (176 hours) per FY for eligible full-time employees and up to 160 hours per FY for eligible part-time employees is granted to provide military aid to enforce the law of their state, DC, Puerto Rico, Canal Zone, or US Territory. Law enforcement leave is not granted for enforcement of federal law or in support of a federal agency, regardless of the employee's specific duties.

For the purposes of this provision, law enforcement means engagement in the suppression of: riots, violent assembly, looting, civil disorder, and the like. Such additional military leave is granted only when an employee's military orders (or other official documentation by the employee's Guard or Reserve unit) specify he was engaged in one or more of the activities referenced above for the particular period(s) of military duty. It is not granted when an employee's military orders simply indicate the employee was ordered to duty "for law enforcement purposes", "to enforce the law", "for state emergency active duty", etc., and do not specify his duties while serving the military were one or more of those referenced above. It is also not granted when military orders specify types of duty other than those referenced above.

Examples of duties not considered law enforcement for the purposes of ELM 517.53 include, but are not limited to: fire fighting, flood control, routine crowd control, traffic direction, clean-up following natural disasters, providing transportation...
and/or other services to persons engaged in law enforcement or other activities, eradication of controlled substances, and the like.

(As information, 5 USC 6323, which provides law enforcement leave for federal employees, is not applicable to postal employees, for whom ELM 517 is therefore controlling.)

517.54 SPECIAL EXCEPTION--DC NATIONAL GUARD

"Members of the National Guard of the District of Columbia are granted military leave for all days (no limit) of parade encampment."

Members of the DC Guard are granted military leave for all absences on scheduled workdays for which military orders specify parade duty.

For the purpose of this provision, "encampment" refers to annual training, which normally is scheduled for periods of a week or longer, rather than for a day or so here and there, and for groups rather than for individuals. Encampment does not include routine periodic drills, attendance at special schools, tournaments, or special assignments. Accordingly, military leave is granted members of the DC Guard for encampment only when military orders specify the employee is ordered for annual training, for a continuous period of at least a week (5 consecutive days), with a unit (his own or another in lieu thereof). In such cases, military leave is granted for all scheduled workdays falling within the period of annual training regardless of duration.

(As information, 25 Stat. 779, which provides unlimited military leave for parade and encampment for federal employees who are members of the DC Guard does not apply to postal employees, for whom ELM 517.54 is therefore controlling.)

517.63 LEAVE CHARGE FOR NON-WORKDAYS

"Non-workdays falling within a period of absence on military leave are charged against the 15 calendar days of military leave allowed during a fiscal year, but non-workdays falling at the beginning and end of the training period are not charged." The beginning and end of a training period are the first and last days of the continuous period of military duty as established by an employee’s military orders, i.e., not by the type(s) of leave to which the absence is charged.

Example: An employee with Saturday and Sunday as non-workdays is called for military duty beginning on a Monday and ending on Friday of the following week, and the employee elects to charge that Monday through the first Friday to annual
leave. Nevertheless because the Saturday and Sunday following that Friday fall between the beginning and ending dates of the period of military duty, they are charged against the employee’s military leave allowance.

Two or more periods of military duty are considered one continuous period, unless the employee is available for postal duty on the days between the periods of military duty.

Non-workdays are not charged against the 22 workdays allowed for law enforcement duty.

517.7 CONFLICT WITH WORK SCHEDULE

Subject to the provisions of ELM 517.71, employees are allowed to trade workdays and non-workdays with other employees to avoid conflict between regular, recurring weekly, biweekly, or monthly military training meetings and scheduled work requirements. Employees are not allowed to trade work schedules because of other types of military training or duty, including annual training.

For purposes of this provision, a conflict exists when a day of such military duty falls on an employee’s scheduled workday, and by trading with others the employee may change a workday to a non-workday to avoid the conflict. However, a non-workday coinciding with a day of such military duty is not a conflict and may not be changed to a workday.

Questions regarding the administration of military or other forms of leave should be directed to Ellen Snyder at PEN (202) 268-4208.
PS Form 3971.

<table>
<thead>
<tr>
<th>Employee's Name (Last, First, M.I.)</th>
<th>Social Security No.</th>
<th>Date Submitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>2.</td>
<td>6.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Installation (for PM leave, show city, state &amp; ZIP)</th>
<th>Pay Loc #</th>
<th>D/A Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.</td>
<td>4.</td>
<td>5.</td>
</tr>
</tbody>
</table>

Blocks 1 through 5 Employee's Name; Social Security Number; Installation; Pay Location Number and Designated Activity Code: These elements must be completed. Do not abbreviate the entries and/or omit any information; i.e., employee's name is to be entered completely.

Block 6, Date Submitted: It is very important that this date be accurate. If the form is used by a supervisor to record a "call-in", this block indicates the date upon which the call was received. Otherwise, it normally reflects the date the form was presented to management by an employee requesting leave.

<table>
<thead>
<tr>
<th>No of Hours Requested</th>
<th>From Hour</th>
<th>Thru Hour</th>
<th>Approved in Advance</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.</td>
<td>8.</td>
<td>9.</td>
<td>No</td>
</tr>
</tbody>
</table>

Block 7, Number of Hours Requested: The supervisor must make sure that the number of hours (or fraction of hours) requested accurately reflects the hours of absence.

Block 8, From/Thru Entries: The entries in these blocks should accurately reflect the period of absence. A common error is the failure to record when an absence ended. Although a PS Form 3971 can accommodate 4 weeks of leave, it is suggested that a PS Form 3971 be completed for each pay period in which leave is being taken.

<table>
<thead>
<tr>
<th>Time of Call or Request</th>
<th>Scheduled Reporting Time</th>
<th>Employee Can Be Reached At (If Needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.</td>
<td>10.</td>
<td>11.</td>
</tr>
</tbody>
</table>
Blocks 9-11, Time of Call or Request; Scheduled Reporting Time; Employee Can be Reached At: These elements of the PS Form 3971 should be completed at the time of a call-in. It is important that supervisors note when an employee has failed to provide timely notification of an absence. The scheduled reporting time should be requested from the employee (if it is not otherwise known) and recorded. As was previously discussed, supervisors may have reason to contact an employee during the course of an absence. Accordingly, a telephone number where the employee can be contacted should be obtained at the time of the call and recorded on the PS Form 3971.

Type of Absence

Block 12, Type of Absence: This area of the form reflects the category of leave requested by the employee. OTHER: This leave includes all those listed on the reverse of PS Form 3971. Supervisors should carefully note the type of leave which has been requested. In certain instances it may be necessary to return the Form 3971 to the employee for correction. This most commonly occurs in cases where the absence can be authorized, but the employee has requested the wrong category of leave. Note that a check mark in the sick leave space requires further action on the reverse of the form (see block 22). In PSDS offices, supervisors must ensure that LWOP requests are properly categorized.
Block 13, Documentation: This block is to make sure that certain additional documentation where necessary has been provided. This section requires no action by individual employees, and is for Official use only.

<table>
<thead>
<tr>
<th>Documentation (for Official Use Only)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ For C. of Pay Leave (CA 1 on File)</td>
</tr>
<tr>
<td>☐ For Advanced Sick Leave (1221 on File)</td>
</tr>
<tr>
<td>☐ For Military Leave (Orders Reviewed)</td>
</tr>
<tr>
<td>☐ For court Leave (Summons Reviewed)</td>
</tr>
<tr>
<td>☐ For Higher Level (1723 on File)</td>
</tr>
<tr>
<td>☐ Scheme Training (Testing, Qualifying--Memo on File)</td>
</tr>
</tbody>
</table>

Block 14, Revised Schedule: In certain instances, a full-time or part-time regular employee may be required or permitted to extend his work schedule to accommodate an absence of 30 minutes or less. Schedules can be revised under the following conditions:

- Tardiness

Note: The Begin Work/Lunch-Out/Lunch-In/End Work entries of Revised Schedule is only used only when an employee's tour is extended because of tardiness of 30 minutes or less. It is never used when the employee's schedule is changed for his personal convenience. F-21 Exhibit 120f
Block 15, Remarks: This block is for use by the employee or the supervisor to provide explanatory notes regarding the absence. Due to Privacy Act restrictions, medical information may not be recorded in this section. If a supervisor receives a Form 3971 that contains medical information, the form should be returned to the employee for re-submission.

Block 16, Employee's Signature and Date: The Form 3971 is not complete until it is signed and dated by the employee requesting leave. Completion of the form is voluntary and employees cannot be forced to complete or sign the form. However, said leave may not be approved in any case when the employee refuses to sign or complete the form.

Block 17, Signature of Person Recording Absence and Date: Entries in block 17 and block 18 may be made by the same person. It is critical to the success of any attendance improvement plan that supervisors receive the actual notification of an intended absence. In certain circumstances (especially in the case of absences scheduled and approved in advance) persons other than the immediate supervisor may do the actual record keeping. In this situation, the person actually recording the absence is to sign and date the form in block 18.

Block 18, Signature of Supervisor and Date Notified: See Comments under block 18 above.

Block 19, Approved/Disapproved: This block must be completed by the supervisor with the authority to approve leave requests for the particular unit. Normally, it should be the same supervisor who completes block 20. If an employee requests leave and the absence was unauthorized, the disapproved block is to be checked. In these situations, the REMARKS block of the Form 3971 is to be annotated to reflect AWOL and the employee is to be advised accordingly. If a request for leave is disapproved, the supervisor must give reason for the
disapproval in the space available in block 19. If for some reason the supervisor disapproves the request for annual leave and grants an alternate type of leave, the disapproved block is checked and the reason for the disapproval is noted in block 19.

**Signature of Supervisor & Date**

20.

**Block 20, Signature of Supervisor:** The supervisor signing the form will often be the same supervisor who signed block 19 and may also have signed block 18. The date of this signature is important, and should reflect the date that a final determination was made concerning the leave request.

**Block 21, Scheduled/Unscheduled:** The supervisor taking final management action on the leave request must indicate if the absence was scheduled or unscheduled for each day covered by the PS Form 3971.

**During This Absence, I was incapacitated for Duty by:**

- ☐ Sickness
- ☐ On the Job Injury
- ☐ Off The Job Injury
- ☐ Pregnancy & Confinement
- ☐ Caring for, or Exposed To A Contagious Disease
- ☐ Undergoing Medical Dental or Optical Examination Or Treatment
Block 22, During this Absence I was Incapacitated For Duty By:
If an employee has checked the "SICK" block on the front of the form, an entry must also be made in this item to show the nature of the incapacity. No medical information should be recorded on the Form 3971.
Exercise: Completion of PS Form 3971

Group 1:
Complete the appropriate items on a PS Form 3971 for the following situation.

It is 07:05 on the morning of the second Friday of the pay period 13. You are the supervisor in a Home Town Post Office Pay Location 425. The mail is heavy. You have approved no leave for the day, yet one of your clerks, Alvin J. Jones (SS# 998-77-6654), has not reported for duty as scheduled at 07:00. He is a Full-time Regular.

Group 2:
Complete the appropriate items on a PS Form 3971 for the following situation.

On the first Tuesday of pay period 9, the timekeeper walks up to you and hands you a PS Form 3971. This form states that Clerk Clem Lentz had telephoned at 06:30 A.M., requesting emergency annual leave for the entire day. The pipes in his basement have burst, and the basement is flooded. Although he expects a plumber by 08:30, he needs to move furniture to avoid further damage. He stated that he fully expects to report as scheduled tomorrow. The scheduled reporting time is 7:00 A.M.
Complete This PS Form 3971 for employee Alvin J. Jones:

### U.S. Postal Service

**REQUEST FOR OR NOTIFICATION OF ABSENCE**

<table>
<thead>
<tr>
<th>Employee's Name (Last, First, M.I.)</th>
<th>Social Security No.</th>
<th>Date Submitted</th>
<th>No. of Hours Requested</th>
<th>S ch</th>
<th>U Y E R</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Day</td>
</tr>
<tr>
<td>Installation (for PM leave, show city, state &amp; ZIP)</td>
<td>Pay Loc</td>
<td>D/A Code</td>
<td>From Date</td>
<td>Hour</td>
<td></td>
</tr>
<tr>
<td>Time of Call or Request</td>
<td>Scheduled Reporting Time</td>
<td>Employee Can Be Reached At (if needed)</td>
<td>Thru Date</td>
<td>Hour</td>
<td></td>
</tr>
</tbody>
</table>

**Type of Absence**
- [ ] Annual
- [ ] LWOP (See Reverse)
- [ ] Sick (See Reverse)
- [ ] Late
- [ ] Other

**Carrier** [ ] 701 Rule

**Documentation** (for Official Use Only)
- [ ] For C. of Pay Leave (CA1 on File)
- [ ] For Advanced Sick Leave (1221 on File)
- [ ] For Military Leave (Orders Reviewed)
- [ ] For Court Leave (Summons Reviewed)
- [ ] For Higher Level (1723 on File)
- [ ] Scheme Training Testing, Qualifying (Memo on File)

**Revised Schedule For (Date)**
- [ ] Yes
- [ ] No

**Scheduled Reporting Time**

**Employee Can Be Reached At (If needed)**
- [ ] No Call

**Carrier** [ ] 701 Rule

**Remarks** (Do Not Enter Medical Information)

- I understand that the annual leave authorized in excess of amount available to me during the leave year will be charged to LWOP.

**Employee's Signature & Date**

**Signature of Person Recording Absence & Date**

**Signature of Supervisor & Date Notified**

**Official Action on Application**
- [ ] Approved
- [ ] Disapproved (Give Reason)

**Leave Type Code** (See Reverse)

**Warning:** The furnishing of false information on this form may result in a fine of not more than $10,000 or imprisonment of not more than 5 years, or both. (18 U.S.C. 1001)

---

**PS Form 3971,** October 1988
Complete this PS Form 3971 for employee Clem Lentz:

U.S. Postal Service

REQUEST FOR OR NOTIFICATION OF ABSENCE

<table>
<thead>
<tr>
<th>Employee's Name (Last, First, M.I.)</th>
<th>Social Security No.</th>
<th>Date Submitted</th>
<th>No. of Hours Requested</th>
<th>Sch Use</th>
</tr>
</thead>
</table>

Installation (for PM leave, show city, state & ZIP) | Pay Loc | D/A Code | From Date | Hour |

| Time of Call or Request | Scheduled Reporting Time | Employee Can Be Reached At | No Call | Thru Date | Hour |

<table>
<thead>
<tr>
<th>Type of Absence</th>
<th>Carrier</th>
<th>Documentation (for Official Use Only)</th>
<th>Revised Schedule For</th>
<th>Approved in Advance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual</td>
<td>701 Rule</td>
<td>For C. of Pay Leave (CA1 on File)</td>
<td>(Date)</td>
<td>Yes No</td>
</tr>
<tr>
<td>LWOP (See Reverse)</td>
<td></td>
<td>For Advanced Sick Leave (1221 on File)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sick (See Reverse)</td>
<td></td>
<td>For Military Leave (Orders Reviewed)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Late</td>
<td>COP</td>
<td>For Court Leave (Summons Reviewed)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>For Higher Level (1723 on File)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Scheme Training Testing, Qualifying</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Memo on File)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Remarks (Do Not Enter Medical Information)

I understand that the annual leave authorized in excess of amount available to me during the leave year will be charged to LWOP.

Employee's Signature & Date | Signature of Person Recording Absence & Date | Signature of Supervisor & Date Notified |

Official Action on Application

<table>
<thead>
<tr>
<th>Approved</th>
<th>Disapproved (Give Reason)</th>
<th>Signature of Supervisor &amp; Date</th>
</tr>
</thead>
</table>

Leave Type Code (See Reverse)

Warning: The furnishing of false information on this form may result in a fine of not more than $10,000 or imprisonment of not more than 5 years, or both. (18 U.S.C. 1001)
**Exercise: Completion of PS Form 3972.**

USE THE FOLLOWING INFORMATION TO COMPLETE THE PS FORM 3972 ON THE FOLLOWING TWO PAGES:

**Background Information:**

<table>
<thead>
<tr>
<th>Name</th>
<th>I.B. Gone</th>
</tr>
</thead>
<tbody>
<tr>
<td>SS#</td>
<td>012-34-5678</td>
</tr>
<tr>
<td>N/S Days</td>
<td>Thursday/Friday</td>
</tr>
<tr>
<td>Tour</td>
<td>0600-1430</td>
</tr>
<tr>
<td>Holidays</td>
<td>Christmas 12/25</td>
</tr>
<tr>
<td></td>
<td>New Year's Day 1/1</td>
</tr>
<tr>
<td></td>
<td>M.L. King Day 1/20</td>
</tr>
<tr>
<td></td>
<td>President's Day 2/17</td>
</tr>
<tr>
<td></td>
<td>Memorial Day 5/25</td>
</tr>
<tr>
<td></td>
<td>July 4 7/4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Type of Leave</th>
<th>Amount of time</th>
<th>Supervisor Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/23</td>
<td>Late (A/L)</td>
<td>.10</td>
<td>Approved</td>
</tr>
<tr>
<td>12/29-31</td>
<td>Sick</td>
<td>24.00</td>
<td>Approved</td>
</tr>
<tr>
<td>1/26</td>
<td>Late (A/L)</td>
<td>.14</td>
<td>Approved/Discussion</td>
</tr>
<tr>
<td>2/05</td>
<td>Sick</td>
<td>8.00</td>
<td>Approved/Discussion</td>
</tr>
<tr>
<td>2/12</td>
<td>Sick</td>
<td>8.00</td>
<td>Approved</td>
</tr>
<tr>
<td>2/15-16</td>
<td>Sick</td>
<td>16.00</td>
<td></td>
</tr>
<tr>
<td>3/17</td>
<td>Late (A/L)</td>
<td>.30</td>
<td></td>
</tr>
<tr>
<td>3/24</td>
<td>Late (A/L)</td>
<td>.15</td>
<td></td>
</tr>
<tr>
<td>3/28</td>
<td>Emergency A/L</td>
<td>8.00</td>
<td>Approved with Evidence</td>
</tr>
<tr>
<td>4/04-06</td>
<td>Sick</td>
<td>24.00</td>
<td></td>
</tr>
<tr>
<td>4/20</td>
<td>Late (A/L)</td>
<td>.10</td>
<td></td>
</tr>
<tr>
<td>5/26</td>
<td>Late (A/L)</td>
<td>.10</td>
<td></td>
</tr>
<tr>
<td>6/03</td>
<td>Sick</td>
<td>8.00</td>
<td></td>
</tr>
<tr>
<td>6/08-10</td>
<td>Sick</td>
<td>24.00</td>
<td></td>
</tr>
<tr>
<td>7/01</td>
<td>Sick</td>
<td>8.00</td>
<td></td>
</tr>
<tr>
<td>7/05</td>
<td>A/L</td>
<td>8.00</td>
<td>Approved in Advance</td>
</tr>
<tr>
<td>7/06</td>
<td>Sick</td>
<td>8.00</td>
<td></td>
</tr>
<tr>
<td>7/12</td>
<td>Late (A/L)</td>
<td>.12</td>
<td></td>
</tr>
</tbody>
</table>

**ABSENCE ANALYSIS**
### Leave Year 1992

**Instructions**

Using the codes below, and the hours involved, post current and previous quarters. Precede code with the letter "U" when absence is recorded as unscheduled- 
on Form 3971. Pre additional quarters if circumstances warrant. This form may also be used on an ongoing basis. On the reverse of this form, the 
employee’s supervisor records attendance-related actions; e.g., review of attendance, commendations, restricted sick leave, Letters of Warning, suspensions, etc.

<table>
<thead>
<tr>
<th>Absent from Schedule OT</th>
<th>AOT*</th>
<th>Court Leave</th>
<th>CL</th>
<th>Military Leave</th>
<th>ML</th>
</tr>
</thead>
<tbody>
<tr>
<td>Absent Without Leave</td>
<td>AWOL*</td>
<td>Emergency AL</td>
<td>EAL*</td>
<td>Sick Leave</td>
<td>SL</td>
</tr>
<tr>
<td>Annual Leave</td>
<td>AL</td>
<td>Holiday Leave</td>
<td>H</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Leave in Lieu of SL</td>
<td>SAL*</td>
<td>Late Reporting</td>
<td>L*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative Leave</td>
<td>ADL</td>
<td>Leave Without Pay</td>
<td>LWOP*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Continuation of Pay</td>
<td>COP*</td>
<td>LWOP in Lieu of SL</td>
<td>SWOP*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note: These are not separate leave categories, but a distinc-
tion is made for the purpose of analysis.*

<table>
<thead>
<tr>
<th>Pay Period</th>
<th>Week 1</th>
<th>Week 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sat</td>
<td>Sun</td>
</tr>
<tr>
<td></td>
<td>Mon</td>
<td>Tue</td>
</tr>
<tr>
<td></td>
<td>Wed</td>
<td>Thur</td>
</tr>
<tr>
<td></td>
<td>Fri</td>
<td>Sat</td>
</tr>
<tr>
<td></td>
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<td>Fri</td>
</tr>
<tr>
<td></td>
<td>H</td>
<td></td>
</tr>
<tr>
<td>No.</td>
<td>From (Date)</td>
<td>To (Date)</td>
</tr>
<tr>
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PS Form 3972, September 1991
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**Attendance Related Actions & Dates (See Instruction)**

- **Reviewing Supervisor’s Comments, Signature & Date**

|------|------|-------|-------|-----|------|------|------|-------|------|------|------|

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Use this space for analysis of the PS Form 3972 you completed.

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ASSUMING RESPONSIBILITY FOR SUPERVISION

WEEK 13

ON-THE-JOB ASSIGNMENT

A. Prepare a five to eight minute service talk to employees regarding the established goals and objectives of the trainee’s assigned branch or operation. Overall unit goals should be presented, the same period last year figures and current status of the goals. The trainee will present to the on-site trainer suggestions in order to meet the established goals and objectives, if appropriate.

B. Review approximately 15-20 PS Form 3972’s, Absence Analysis. Upon review, the trainee will meet with the on-site trainer and discuss each employee’s attendance record and identify what actions should be implemented.

C. Review and complete PS Forms 1017-A, Time Disallowance Report, and PS Forms 1017-B, Unauthorized Overtime Report. Ensure that you obtain remarks from employees relative to unauthorized overtime or time disallowance.

D. Randomly review PS forms 3971, Request For Or Notification Of Absence, from previous accounting period for correct completion. Present findings to on-site trainer. If appropriate, record PS Form 3971, Request For Or Notification Of Absence data onto PS Form 3972, Absence Analysis.

E. Review PS Form 1750, Employee Probationary Period Report, complete form with on-site trainers approval. If there are no new employees at the unit, the trainee should still know how to complete this form.
On-site trainer will evaluate trainee’s knowledge and understanding of completed assignments.

Optional Assignments to Support Classroom Instruction-Week 13.

A. Solicit employee input for their ideas and recommendations to achieve goals, based on the trainees’ service talk.

B. Research data pertaining to violence in the workplace, i.e. trends, statistics, etc., either in the trainee’s current work unit or in the facility as a whole. Bring any findings to the next week’s class.
WEEK 14

WORKPLACE VIOLENCE AWARENESS
UNIT 9

WORKPLACE VIOLENCE AWARENESS

This unit is the national USPS Training Program Workplace Violence Awareness, Course No. 21558.00. Your local facilitator for this program will present this unit.
ASSUMING RESPONSIBILITY FOR SUPERVISION

WEEK 14

ON-THE-JOB ASSIGNMENT

Document potential conflict situations in the workplace encountered during the on-site portion of the training program. Present written recommendations for alleviating these situations to the on-site trainer.
WEEK 15

GIVING AND RECEIVING FEEDBACK
UNIT 10

GIVING AND RECEIVING FEEDBACK

TERMINAL OBJECTIVES:

Upon completion of this unit the student will be able to demonstrate the proper technique for giving effective feedback.

ENABLING OBJECTIVES:

The student will be able to:

• Define feedback
• List five Do’s and Don’ts for giving effective feedback
• Use a feedback model in role-play scenarios
• Discuss key guidelines for giving feedback effectively
GIVING AND RECEIVING FEEDBACK

FEEDBACK SCENARIOS:

1. You observe an apparently healthy individual in a crowded supermarket parking lot, pull into a parking space designated as “handicapped only,” jump out of the car and dash into the store.
   Your impression/interpretation
   ____________________________________________
   ____________________________________________

   Your response
   ____________________________________________
   ____________________________________________

2. The same individual is now just ahead of you in the “eight items or less” express checkout, with seventeen items.
   Your impression/interpretation
   ____________________________________________
   ____________________________________________

   Your response
   ____________________________________________
3. Your teenage son or daughter is talking on the family telephone, and has been on the phone for the past 50 minutes.

Your impression/interpretation

________________________________________________________________________

________________________________________________________________________

Your response

________________________________________________________________________

________________________________________________________________________

4. You’ve been on the telephone with a customer for 15 minutes, during which time you observe two of your employees carrying on a conversation at the water fountain.

Your impression/interpretation

________________________________________________________________________

________________________________________________________________________

Your response

________________________________________________________________________
5. Your spouse/significant other has presented you with a beautiful and very expensive shirt or blouse for your anniversary, but it's too large (and your anniversary was four days ago).

You impression/interpretation

________________________________________________________________________

________________________________________________________________________

Your response

________________________________________________________________________

________________________________________________________________________

6. A probationary employee has clocked in three to five minutes after scheduled reporting time on four occasions during the last two weeks.

Your impression/interpretation

________________________________________________________________________

________________________________________________________________________

Your response

________________________________________________________________________

________________________________________________________________________
7. A fellow employee, upon learning of your selection as Associate Supervisor, approaches you in the hall and wipes your nose with a tissue, remarking, “looks like you’ve got a little brown there!”

Your impression/interpretation

________________________________________________________________________

________________________________________________________________________

Your response

________________________________________________________________________

________________________________________________________________________

8. Last week your neighbor’s dog visited your yard three times, and never failed to leave a “gift.”

Your impression/interpretation

________________________________________________________________________

________________________________________________________________________

Your response

________________________________________________________________________

________________________________________________________________________
9. You were surprised when a previously marginal employee volunteered to become a Safety Captain. He/she has initiated several innovative campaigns that have generated a high level of “safety consciousness”.

Your impression/interpretation
_____________________________________________
_____________________________________________

Your response
_____________________________________________
_____________________________________________

10. Your child has apparently discovered the opposite sex, and has subsequently displayed a marked improvement in the clothing and hygiene departments.

Your impression/interpretation
_____________________________________________
_____________________________________________

Your response
_____________________________________________
_____________________________________________
# GUIDELINES FOR EFFECTIVE FEEDBACK

<table>
<thead>
<tr>
<th><strong>DO:</strong></th>
<th><strong>DON'T:</strong></th>
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<tr>
<td>Be specific about the behavior.</td>
<td>Generalize or patronize. (“Great Job, gang.”)</td>
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<tr>
<td>Describe the behavior and its impact on you.</td>
<td>Ascribe motivation. (“You’re just trying to see how far you can push me.”)</td>
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<td>Clarify that feedback is based on your PERCEPTION of behavior.</td>
<td>Address personality, attitude, character traits, etc. (“Why are you so careless and irresponsible?”)</td>
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<tr>
<td>Provide feedback as soon as possible after the behavior.</td>
<td>“Store up feedback, for an annual performance review or “the last straw”. (“Over the past several months I’ve noticed some disturbing behavior.”)</td>
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<td>“Own” your own perceptions.</td>
<td>Be a self-appointed spokesperson for a group. (“Your fellow employees are saying... “)</td>
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<tr>
<td>Use factual, measurable data to support your perceptions.</td>
<td>Exaggerate, use sarcasm, or generalize. (“You argue and question my instructions constantly!”)</td>
</tr>
<tr>
<td>Remember that everyone’s perceptions differ.</td>
<td>Think or communicate in terms of who’s “right” or “wrong”. (“What’s the matter with you? You know better than that!”)</td>
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</table>
FEEDBACK EXERCISE

1. Why do you always have to take over the group?
   Should be:
   ____________________________________________
   ____________________________________________
   ____________________________________________

2. Okay, break it up! You’re being paid to work, not socialize?
   Should be:
   ____________________________________________
   ____________________________________________
   ____________________________________________

3. You must think you can wander in here any time you feel like it! Well, I can fix it so you don’t have to come in at all! How would that suit you?
   Should be:
   ____________________________________________
   ____________________________________________
   ____________________________________________
4. You know, a lot of your fellow employees are probably beginning to feel like you’re not doing your fair share of the work around here.

Should be:

__________________________________________

__________________________________________

__________________________________________

5. If you weren’t so busy worrying about what everyone else was doing, you might be able to get your own work done.

Should be:

__________________________________________

__________________________________________

__________________________________________

6. All your friends are? And I suppose if your little friends wanted to jump off a cliff, you’d want to jump too!

Should be:

__________________________________________

__________________________________________

__________________________________________
7. You did a great job today, gang! Thanks!

Should be:

__________________________________________
__________________________________________
__________________________________________

8. I’m really pleased in your change of attitude.

Should be:

__________________________________________
__________________________________________
__________________________________________
SITUATIONS:

1. Your employee has handed in several reports that are incomplete.
2. Your employee has arrived late for work four times in the past two weeks.
3. Your employee has picked a fight with another employee.
4. Your employee has arrived at work appearing to be under the influence of alcohol but is coherent.
5. Your employee has been seen off the floor during duty hours.
6. Your employee has been accused of leaving a messy work area.
7. Your employee has arrived at work dressed sloppily.
8. Your employee has made a sarcastic remark to you when you asked him to finish an assignment and move to another job.
9. Your employee reports to work and has body odor.
10. Your boss has accused you of being too easy on your employees.
11. Your boss has criticized you for maintaining a sloppy work area.
12. Your boss has accused you of not meeting safety standards.
13. Your boss has stated that your productivity is down.
14. You boss has criticized your work group as uncooperative.
15. Your boss has accused you of handing in incomplete reports.
16. Your boss has accused you of manipulating figures.
CRITERIA

Helpful feedback is:

**Descriptive**
It is descriptive rather than evaluative. By describing one’s reaction, it leaves the recipient free to use it or not. By avoiding evaluative language, it reduces the need for the individual to react defensively; i.e., “Susan, I want to be sure to hear you. Could you raise your voice a bit please?” This gives a different feel from the statement, “Susan, you talk too low.” The latter sounds condemning and puts all the responsibility on Susan. The former shares the situation between Susan and the speaker, and contains a complimentary rather than accusative note.

**Specific**
It is specific rather than general. To be told that one is “dominating” will probably not be as useful as to be told that “just now when we were deciding the issue, I felt forced to accept your arguments or face rebuttal from you.”

**Appropriate**
It takes into account the needs of both the receiver and giver of feedback. Feedback can be destructive when it serves only one’s own needs and fails to consider the needs of the person on the receiving end.

**Useable**
It is directed toward behavior which the receiver can do something about. Frustration is only increased when a person is reminded of some shortcoming over which he has no control.

**Requested**
It is solicited, rather than imposed. Feedback is most acceptable when the receiver has formulated the question which those observing can answer.

**Timely**
It is well-timed. In general, feedback is most useful when offered at the earliest opportunity after the given behavior (depending, of course, on the person’s readiness to hear it, support available from others, etc.).
Clear

It is checked to ensure clear communication. One way of ensuring clarity is to have the receiver try to rephrase the received feedback to see if it corresponds to what the sender had in mind.

Accurate

When feedback is given, both giver and receiver have the opportunity with others in the group to check the accuracy of the feedback. Is this one person’s impression or an impression shared by others? It is highly important to remember that not all members in the group see and read any behavior in the same way. We see what we are prepared to see. We are affected by the actor’s output combined with that which each of us brings to the encounter. Therefore, a statement that makes one person “boil” might amuse another. Therefore, it is more accurate to say, “Ralph, what you said is an inflammatory statement.” Categorical comments of that sort are more apt to be an inaccurate summary of the whole group’s reaction.

Trusted

A trusted, nonthreatening source helps to make feedback more palatable. “Daddy, you’re getting too fat!” from your 3-year-old daughter is more acceptable than from your boss.
GUIDELINES FOR RECEIVING FEEDBACK

**Recognize that feedback is perception, not reality.** Feedback is based on one’s interpretation of another’s behavior. It is a reflection of the impact of your behavior, not the intent. You are the only person capable of knowing the intentions or motives that drive your behavior.

**Use active listening to clarify the behavior and the feedback giver’s interpretations.** Ask questions to properly identify the behavior and the interpretations/impressions of the feedback giver. Paraphrase feedback statements objectively, in order to encourage feedback giver to elaborate on feelings and impressions.

**Try to separate the feedback from the feedback giver.** To the extent possible, try to analyze the feedback received independently of your feelings about the feedback giver and your previous relationship or experiences. Avoid the tendency to ascribe motive or intent to the feedback (“he/she’s just jealous”, “just trying to embarrass me”, “trying to butter me up”, etc.). Rather, examine the behavior and response, and ask yourself “could someone else have the same impression or reaction?”

**When in doubt, seek a “second opinion”.** If you’re in doubt about the “legitimacy” of a feedback observation, don’t hesitate to ask others how they perceive your behavior. However, in doing so, you need to avoid the appearance of putting others on the spot, fishing for compliments, etc. Also, don’t solicit others’ feedback in the presence of the original feedback giver. (For example, if someone in a group gives you feedback you don’t think is “valid”, don’t immediately ask others if they agree with the feedback, putting them in a position of having to “take sides”.)
Try to assume that feedback was intended to be constructive. Some people are much more skilled at giving feedback than others. To some, tact and diplomacy are natural talents, while others lack any sensitivity at all. However, if you can focus on the specifics of feedback you receive, and not on the manner in which the feedback was delivered, you can use the feedback itself for additional insight into yourself, and how your actions are perceived by others. Remember, all feedback is constructive if you can use it to improve your interactions with others.

Avoid responding with defensiveness or argument. Don’t assume that all feedback requires an immediate response. In fact, feedback is rarely useful or helpful until we’ve had some time to digest it. Allow yourself some time for contemplation and reflection. If you feel you absolutely have to respond to another’s feedback, thank the person for his feedback and tell him you will consider it.

Share feedback with others involved. If you receive positive feedback for an accomplishment of your work group, by all means share that feedback with the group. However, negative feedback should also be shared with the group responsible, in a performance review - problem solving forum. Don’t attempt to “protect” your work group from criticism, even if you believe it to be without validity. Everyone needs to know how they are perceived by others.

Follow through on what you’ve learned. We’ve all heard the expression “constructive criticism”. While we may sometimes question the feedback giver’s true motives, we can often determine the “constructiveness” of an observation by asking “do you have any suggestions for how I can improve?” If the feedback was genuinely intended to be constructive, you should receive some worthwhile input.
UNIT 10

GIVING AND RECEIVING FEEDBACK

KEY POINTS:

- Feedback is based on perception, not reality
- Feedback is the communication of how one’s behavior impacts or effects us
- Responsible feedback focuses on behavior, not motive or “attitude.”
- The intent of performance feedback is to help the individual recognize opportunities to improve, and to affirm or reinforce positive performance.
WEEK 15

TRANSITIONING TO SUPERVISION, PART 2
UNIT 11

TRANSITIONING TO SUPERVISION
PART 2

TERMINAL OBJECTIVE:

The trainee will better understand the attitudes, skills, values, and behaviors required for the transition to supervisor.

ENABLING OBJECTIVE:

The trainee will:

• Learn how others view his or her management style through the use of the DISC leadership style instrument.

• Determine what skills they have gained through this program, and what areas they need additional exposure to.

• Use the SBA to determine what they have learned about situational leadership.
Transitioning to Supervision--The Sequel

WHERE I AM NOW

ATTITUDE

WHERE I WANT TO BE

TRAINING PROGRAM

WHERE DO I WANT TO BE?

Where do I want to be in 1 year?

_____________________________________________

_____________________________________________

_____________________________________________

Where do I want to be in two years?

_____________________________________________

_____________________________________________

_____________________________________________

Where do I want to be in 5 years?

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_____________________________________________
FIVE KEY ATTITUDES

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UNIT 11

TRANSITIONING TO SUPERVISION, PART 2

KEY POINTS:

• Did this course meet its objectives?
• Did this course meet your needs as an Associate Supervisor?
• How have your attitudes, behaviors, and values changed since Day One?
ASSUMING RESPONSIBILITY FOR SUPERVISION

WEEK 15

ON-THE-JOB ASSIGNMENT

Reflect upon the Associate Supervisor Program and prepare a written critique of the program. The critique will include positive and negative elements of the program. The trainee will present the critique to the Program Coordinator on graduation day.

Target Accomplishments of the Program:

- Be able to analyze and interpret the MODS reports for their facility;
- Know how to take corrective action to improve performance;
- Know how to recognize good performance;
- Know which measures to implement for reductions of overtime, sick leave, customer complaints, and conflict;
- Understand how ODIS and EXFC scores are determined and what measures to implement to improve district scores.