



BIRCH HILLS COUNTY POLICY & PROCEDURES MANUAL EMERGENCY SERVICES

POLICY TITLE: Discipline Policy

Page 1 of 1

Date Adopted by Council / Motion Number: *APRIL 13, 2011*

PURPOSE:

The purpose of this Policy is to ensure a fair and consistent measure of discipline is followed for the Department.

POLICY

This policy applies to all members of Birch Hills County Fire Departments. Discipline is to be used when necessary to improve a person's performance when other methods fail. Although discipline is viewed as punitive in nature, it should never be applied for any reason other than to improve performance of a volunteer fire fighter.

If discipline is warranted, Supervisors will continue working with a volunteer fire fighter to improve performance, achieve success and correct the behavior which caused disciplinary action to be necessary.

PROCEDURE:

1.0 Oral Reprimand:

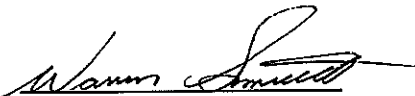
- i) If an oral reprimand is given, a copy of the Discipline Form (Appendix A) shall be placed on the fire fighters personnel file after the Supervisor (Fire Chief or Commanding Officer) meets and discusses the problem with the fire fighter.
- ii) The fire fighter will be given a copy of all documentation for the incident and will sign for it.

2.0 Written Warning:

- i) A written warning shall be given with two Supervisors signing the Discipline Form (Appendix B).
- ii) The fire fighter will be given a copy of all documentation for the incident and will sign for all documentation.

3.0 Termination:

- i) Supervisors shall recommend to Manager of Emergency Services that termination be considered if the fire fighter consistently has failed to correct his/her performance and behaviour problems despite previous discipline action being taken. Supervisors must have sufficient written documentation to proceed.
- ii) The fire fighter will be given a copy of all documentation relating to the termination and will be requested to sign for it. All Birch Hills County equipment will be returned upon termination documentation signing.


REEVE


C.A.O

**BIRCH HILLS COUNTY FIRE DEPARTMENT
SUPERVISOR'S DISCIPLINE REPORT**

This form is to be used by the Birch Hills County Fire Department for disciplinary action and must be signed by appropriate supervisors.

Notice Date: _____ Time: _____ a.m.
p.m.
Fire Fighter: _____ Job Title: _____
Immediate Supervisor: _____ Dept: _____

ACTION TO BE TAKEN:

- Oral Reprimand Date: _____ Time: _____ a.m.
p.m.
Incident Discussed _____

- Written Warning Date: _____
Date(s): _____
- Termination

IMMEDIATE SUPERVISOR'S DESCRIPTION OF INCIDENT

Statement of events (include date, time, location, mitigating circumstances, aggravating circumstances, etc.) This disciplinary action was taken for the following reason(s):

Attach any letters related to discipline. Additional pages may be attached as required but are to be signed, dated and marked confidential.

Immediate Supervisor: _____ Date: _____
Next Level Supervisor: _____ Date: _____
Deputy Fire Chief _____ Date: _____

