

PERSONNEL COMMITTEE AGENDA  
Monday, July 10, 2017 – 7:20 p.m.  
(or immediately following previously scheduled meeting)  
Lincoln Center – 1519 Water Street

[A quorum of the City Council may attend this meeting]

Discussion and possible action on:

1. Amendment to Administrative Policy 2.05 – Position Reclassifications.
2. Amendment to Administrative Policy 3.01- Standard Benefits (Income Continuation).
3. Adjournment.

Any person who has special needs while attending this meeting or needs agenda materials for this meeting should contact the City Clerk as soon as possible to ensure a reasonable accommodation can be made. The City Clerk can be reached by telephone at (715) 346-1560, or by mail at 1515 Strongs Avenue, Stevens Point, WI 54481.

Copies of the ordinances, resolutions, reports and minutes of the committee meetings are on file at the office of the City Clerk for inspection during normal business hours from 7:30 A.M. to 4:00 P.M.

July 3, 2017

MEMORANDUM

TO: Personnel Committee Members  
FROM: Lisa Jakusz  
RE: July, 2017 Personnel Committee Agenda

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The first agenda item was referred back to the Personnel Committee at the June Council Meeting. Modifications suggested by Alderman Shorr at the City Council meeting were incorporated into the draft language, per Mayor Wiza's direction.

I reached out to peers from other communities and asked if their Reclassification Policy allows for an appeal process and if so, who hears the appeal. Below are the responses I received.

RECLASSIFICATION APPEAL

<u>Community</u>	<u>Yes</u>	<u>No</u>	<u>Other</u>
Neenah	X		Consultant
Oconto	X		Only for Original Study
West Allis	X		Consultant
LaCrosse	X		Consultant
Monroe County		X	
Marathon County		X	
Oneida County	X		Personnel Committee
Outagamie County		X	
Fond du Lac	X		Consultant
Portage County		X	
DePere		X	
Janesville	X		City Manager
Dodge County		X	
Calumet County		X	

In addition to providing their response to the question, a few included in their reply that the goal in their community was to take politics out of the decision making and ensure consistency and fairness in the process. City Council members (and County Board members – as several Counties replied as well) turn over periodically and many times don't have knowledge or expertise in compensation plans and may not be familiar with the current plan, its history and its on-going administration.

Also included in the packet is Alderperson Johnson's suggested version of an update to this policy. Alderperson Johnson has included excerpts from the WI Human Resource Handbook – Chapter 370. I have included their definition of "Reclassifications" in its entirety along with the paragraphs that discuss "Analyzing a Reclassification or Reallocation Request" [note: I've only included the paragraphs relating to Reclassification Request]

The second item on the agenda is a modification to the eligibility timeline for participation in the Income Continuation Insurance (ICI) benefit. This is due to a change at the State level. I have included in the packet a draft of the modified policy.

Please feel free to contact me with any questions or concerns.

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\*\* CITY OF STEVENS POINT \*\*  
ADMINISTRATIVE POLICY

Policy Title: Position Reclassifications

Policy No. 2.05

Date of Issuance: December 18, 1989

Revision Date: April 18, 2016

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Description: The purpose of this policy is to explain the procedure for submission and review of job reclassification requests for positions covered under the City's pay plan, **which depend upon** ~~the "same level of work" is not a basis for reclassification, but rather new~~ **permanent assignment of** work of a higher level of responsibility ~~shall be demonstrated.~~

Department reorganizations are not a part of this process.

1. A request for reclassification may be initiated by (1) the employee, with department head approval; (2) the supervisor or department head; or (3) the Personnel Committee in the following manner.

A. Requests are to be submitted to the City Human Resource Manager. A list of positions seeking a reclassification will be provided to the Personnel Committee after a request is submitted to Personnel.

B. All requests for reclassification must be supported with a substantial **and permanent** change in job duties and responsibility since the last review of the position. Requests will include: an updated job description, organizational chart for the appropriate work unit, a recommended pay grade, an indication of other positions performing comparable work, and a completed Classification Review Request Form. The immediate supervisor and Department Head must complete and sign the "review" page of the form.

~~To be considered for reclassification, changes in job duties should be stable and typically should have been in effect for a least six (6) months preceding the reclassification request so that it is clear that the changes that exist are likely to remain in effect.~~ To ensure that any reclassifications are made on the basis of changes in job duties that are stable and long lasting, in some cases, they may be held under review for as long as six (6) months if there is uncertainty about the permanence of the change of duties. *Re-draft of language in this section provided by Alderman Shorr*

C. ~~Reclassification review and recommendation will be completed by the City Human Resource Manager within 120 days of receiving the request.~~ **Following an internal review by the Human Resource Manager to ensure that all required documentation has been submitted, a job evaluation will be conducted by the salary plan consultant. If**

**reclassification is appropriate, the consultant will recommend a grade assignment for the position. The consultant may request further information from the Human Resource Manager and may suggest that other positions affected by the reclassification be reviewed as well.**

- D. ~~Final recommendations, including fiscal impact, will be presented to a Review Committee comprised of the Mayor, Comptroller/Treasurer, Personnel Committee Chairperson, Human Resource Manager and affected Department Head for consideration. Those **Reclassification requests and fiscal impact for those awarded** by the ~~Review Committee salary plan consultant~~ will be presented to the Personnel Committee for consideration.~~
- E. Approved reclassifications will be effective the first pay period after council approval unless otherwise stipulated by the City Council.

## Classification Review Request Form

Your Name: _____
Your Supervisor's Name: _____
Your Division: _____
Your Department: _____
Your Current Classification: _____

My job has changed since the Pay Plan Study

Requested Classification: \_\_\_\_\_

Please specify why you believe the requested grade is more appropriate for your position than the current classification. Relate duties you perform to the grade for the requested classification:

Use additional sheets if necessary

_____	_____
Employee Signature / Typed Name	Date

**Employee:** Complete and forward this form to your immediate supervisor for review and comment. Your supervisor will review your request, make comments and forward to your department head. Your department head will review your request, make comments as appropriate and then forward it to the Personnel Department. Reclassification Requests must include the immediate supervisor and department head comments and signatures.

## Immediate Supervisor Comments

- I agree with the employee's review request.
- I disagree with the employee's review request.

Reason/comment:

\_\_\_\_\_  
Immediate Supervisor Signature / Typed Name

\_\_\_\_\_  
Date

**Immediate Supervisor:** Complete and forward this form to your Department Head. The Department Head will review this request and make changes as appropriate. Please note that all appeals must be forwarded to the department head.

## Department Head or Designee Comments

- I agree with the employee's review request.
- I disagree with the employee's review request.

Reason/comment:

\_\_\_\_\_  
Department Head Signature / Typed Name

\_\_\_\_\_  
Date

**Department Head:** Complete and forward this form to the Employee Resources Department. The Employee Resources Department will review this request and make changes as appropriate. Please note that all review requests must be filed with the Personnel Department.

## **Lisa Jakusz**

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**From:** Meleesa Johnson <aldermeleesajohnson@gmail.com>  
**Sent:** Tuesday, July 04, 2017 7:35 AM  
**To:** Lisa Jakusz; Jeremy Slowinski  
**Subject:** Personnel agenda  
**Attachments:** Reclass suggested changes-MDJ version June 2016.docx

Hello Lisa & Jeremy:

I completely forgot to send along the suggested changes to the reclass policy. Here it is for consideration at Monday's meeting.

Best regards,  
Meleesa

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**Meleesa Johnson**  
**Aldersperson-5th District of Stevens Point**  
**President-Common Council**  
**Vice-chair-Finance Committee**  
**UW Green Bay 2017 Earth Caretaker**  
**715-343-1624**  
**1703 Division Street**  
**Stevens Point, WI 54481**



Alderperson Johnson's  
Version (proposed)

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**\*\* CITY OF STEVENS POINT \*\***  
**ADMINISTRATIVE POLICY**

Policy Title: Position Reclassifications

Policy No. 2.05

Date of Issuance: December 18, 1989

Revision Date: April 18, 2016

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Description: The purpose of this policy is to explain the procedure for submission and review of job reclassification requests for positions covered under the City's pay plan. ~~More of the "same level of work" is not a basis for reclassification, but rather new work of a higher level of responsibility shall be demonstrated.~~

Definition:

Reclassification: The assignment of a filled position to a different class by the director, manager or supervisor based upon a logical and gradual change to the duties or responsibilities of a position or the attainment of specified education or experience by the incumbent. (WI Human Resource Handbook-Chapter 370)

Department reorganizations are not a part of this process.

1. A request for reclassification may be initiated by (1) the employee, with department head approval; (2) the supervisor or department head; or (3) the Personnel Committee in the following manner.
  - A. Requests are to be submitted to the City Human Resource Manager. A list of positions seeking a reclassification will be provided to the Personnel Committee after a request is submitted to Personnel.
  - B. All requests for reclassification must be supported with a substantial change in job duties and responsibility since the last review of the position. Requests will include: an updated job description, organizational chart for the appropriate work unit, a recommended pay grade, an indication of other positions performing comparable work, and a completed Classification Review Request Form. The immediate supervisor and Department Head must complete and sign the "review" page of the form.
  - C. Reclassification review and recommendation will be completed by the City Human Resource Manager within 120 days of receiving the request.
  - ~~D. Final~~ All recommendations, both approved and denied requests, including fiscal impact, will be presented to a Review Committee comprised of the Mayor, Comptroller/Treasurer, Personnel Committee Chairperson, Human Resource Manager and affected Department Head for consideration. Those approved by the Review Committee will be presented to the Personnel Committee for consideration.

E. The recommendations of the Review Committee, including both approved and denied requests, shall be presented to the Personnel Committee. The Personnel Committee will act upon the request after considering the information and recommendations of the Review Committee.

E.D. Approved reclassification will be effective the first pay period after council approval unless otherwise stipulated by the City Council.

## ***Classification Review Request Form***

Your Name: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_

Your Division: \_\_\_\_\_

Your Department: \_\_\_\_\_

Your Current Classification: \_\_\_\_\_

My job has changed since the Pay Plan Study

Requested Classification: \_\_\_\_\_

Please specify why you believe the requested grade is more appropriate for your position than the current classification. Relate duties you perform to the grade for the requested classification:

Use additional sheets if necessary

\_\_\_\_\_  
Employee Signature / Typed Name

\_\_\_\_\_  
Date

**Employee:** Complete and forward this form to your immediate supervisor for review and comment. Your supervisor will review your request, make comments and forward to your department head. Your department head will review your request, make comments as appropriate and then forward it to the Personnel Department. Reclassification Requests must include the immediate supervisor and department head comments and signatures.

**Immediate Supervisor Comments**

- I agree with the employee's review request.
- I disagree with the employee's review request.

Reason/comment:

\_\_\_\_\_  
Immediate Supervisor Signature / Typed Name

\_\_\_\_\_  
Date

**Immediate Supervisor:** Complete and forward this form to your Department Head. The Department Head will review this request and make changes as appropriate. Please note that all appeals must be forwarded to the department head.

**Department Head or Designee Comments**

- I agree with the employee's review request.
- I disagree with the employee's review request.

Reason/comment:

\_\_\_\_\_  
Department Head Signature / Typed Name

\_\_\_\_\_  
Date

**Department Head:** Complete and forward this form to the Employee Resources Department. The Employee Resources Department will review this request and make changes as appropriate. Please note that all review requests must be filed with the Personnel Department.

**Sec. 370.010 Introduction**

Reclassification is a personnel transaction used to allocate or assign a filled position to a different classification ("class") when the position has experienced logical and gradual changes to the point where a different classification becomes more appropriate or when the incumbent has attained the specified education or experience required in a formally defined progression series.

**Sec. 370.060 Analyzing a Reclassification or Reallocation Request**

Positions are classified, reclassified, or reallocated. Employees may be regraded at the time a position is reclassified or reallocated. Such factors as an employee's current pay rate, length of service, special training or experience not required for the work of the classification, or quality of performance do not justify a classification action, nor does volume of work unless it significantly affects the complexity and/or responsibility level of the position in question.

Outside offers of employment or salary increases granted to other employees are not adequate reasons for reclassifying positions. Reclassification is a personnel transaction used to allocate (i.e., assign) a filled position to a different classification when the position has experienced logical and gradual changes to the point where a different classification becomes more appropriate or when the incumbent has attained the specified education or experience required in a formally defined progression series.

Reclassification is the exception rather than the norm for most positions in classified civil service unless the position is in a designated progression series. This is due to the fact that most positions in state service are classified at either the objective or advanced level and movement to the advanced level frequently requires competition.

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**\*\* CITY OF STEVENS POINT \*\***  
**ADMINISTRATIVE POLICY**

Policy Title: Standard Benefits

Policy No. 3.01

Date of Issuance: December 18, 1989

Revision Date: 2-90, 5-90, 10-93, 8-03, 3-07, 9-08, 3-10, 6-13, 11-13, 2-14, 7-14, 11-14,  
12-14, 1-15, 2-15, 9-15, 10-15, 12-16, 1-

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Description: This policy covers all benefits in which employees are eligible to participate. Benefits include State Retirement, Federal Social Security, Health Insurance, Life Insurance, Worker's Compensation and Deferred Compensation. Benefits are administered by the City Personnel Office.

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Income Continuation

~~After being employed by the City for six months, or having participated under the Wisconsin Retirement System prior to being hired by the City of a period of six (6) months, employees are eligible to participate in the Income Continuation Insurance Plan administered by the Department of Employee Trust Funds. Newly hired Wisconsin Retirement eligible employees are immediately eligible for participation in the Income Continuation Insurance Program. They must enroll within 30 days of their date of hire.~~ The City pays the premium for a six month (180 day) waiting period for each employee choosing to participate. An employee may shorten the waiting period, if they choose, to 120 days, 90 days, 60 days or 30 days, by paying the additional premium required.

- A. The benefits payable are up to 75% of gross salary payable at the end of the month after exhaustion of your selected waiting period. Disability benefits can continue for the length of your disability, however benefits cease at normal retirement age.
- B. If you become disabled the premiums are waived effective the first of the month following the date benefits eligibility begins. The waiver is effective for as long as you continue to be eligible to receive benefits.