

ADMINISTRATIVE ORDER NO. 67

Repealed By

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An Administrative Order creating the following Human Resources Policy for the City of Billings: Employment Anti-Discrimination Practices dated November 2002.

Dated this 2nd day of December, 2002



DENNIS M. TAYLOR
CITY ADMINISTRATOR

EMPLOYMENT

ANTI-DISCRIMINATION

PRACTICES

This policy supersedes all previous policies and/or handbooks published by the City of Billings. Negotiated labor contracts that conflict with this policy will take precedence to the applicable extent.

Purpose

The City of Billings believes that equal opportunity in employment is a moral and legal obligation. The City of Billings is committed to providing equal opportunity for women, minorities, veterans, and persons with disabilities in employment. The City of Billings is further committed to upholding the multiple federal and state laws that prohibit discrimination on the basis of race, sex, age, religion, national origin, marital status, color, creed, disability (physical and mental), and veteran status.

Policy

It is the policy of the City of Billings to recruit and select persons for appointment and employment, and to train, advance, promote, and transfer such persons on the basis of individual capability, potential, or contribution to the programs and goals of the City.

Each department head, supervisor and employee of the City of Billings is responsible for conducting appointment and employment activities in support of and in compliance with this policy.

The City of Billings respects, supports, and observes the laws, directives and regulations of the state and federal government that prohibit discrimination.

A climate of equal opportunity that nurtures and supports the fullest contributions of each employee is essential "to provide our community with an excellent quality of life by delivering cost effective public service." Creating and sustaining this climate is the responsibility of all who work for the City. Leadership is expected to reinforce these principles.

Human Resources is responsible for assembling employment and enrollment data and implementing new diversity efforts. Human Resources, in coordination with others, may investigate individual complaints and concerns.

This policy is related to all phases of employment including but not limited to: recruitment, selection, testing, employment, placement, layoff, promotion, demotion, transfers, discipline, termination, pay rates, and training. This policy does not preclude discrimination based on bona fide occupational qualifications or other recognized exceptions under the law.

The City of Billings also believes in making reasonable accommodations as needed to enable qualified disabled employees and applicants to satisfactorily perform the essential duties of City jobs, except where the accommodations would impose an undue hardship on the City.

All applicants for employment with the City of Billings will be recruited from the reasonable labor market and evaluated on each person's individual qualifications and abilities. All City of Billings employees shall be afforded equal employment opportunities during their terms of employment and are guaranteed protection against retaliation for exercising any legal or administrative procedures to secure rights to equal employment opportunities or testifying on behalf of someone else doing so.

All supervisory personnel are responsible for, and shall be committed to, achieving and promoting equal employment opportunity with the City of Billings.

This policy also relates to the use of all facilities and participation in all City-sponsored employee activities. It is the responsibility of each supervisor of the City to insure affirmative implementation of this policy so as to avoid any discrimination in employment practices. In addition, each employee has a responsibility not to discriminate and to report instances of discrimination by others.

If an employee believes he/she is being subjected to any of these forms of harassment, he/she must bring this to the attention of the immediate supervisor or other functionally related management person or Human Resources. The very nature of harassment makes it impossible to detect unless the person being harassed registers his/her discontent and/or reports the offensive conduct.

Discrimination Complaint Process

If a City employee or other individual believes he/she has been discriminated against on the basis of race, creed, national origin, color, sex, religion, physical or mental disability, marital status or age, the individual may take action submitting the complaint to the Human Resources.

The complaint may also be submitted to any of the following levels:

1. Immediate Supervisor and/or Superintendent and/or Division Head

2. Department Head
3. Human Resources
4. City Administrator
5. State of Montana Human Rights Commission within 180 calendar days of alleged action or incident.

Complete confidentiality may be requested and will be complied with to the extent possible legally.

An individual is encouraged to first discuss their complaint with their immediate supervisor or Division/Department Head, in an effort to settle the issue at the lowest possible level. Discussions should occur within 10 days of the incident.

If the complaint is not resolved at the Departmental level, a written complaint (see attached form) shall be filed with the Human Resources within 30 days of the incident. Human Resources will investigate, with the goal of concluding the investigation within 45 days of the receipt of the complaint.

If the City of Billings cannot resolve the complaint, the complainant shall be notified of all appeal rights.

Should the complainant decide not to pursue the complaint, a signed withdrawal statement shall be obtained.

Last Updated: November 2002
Next Scheduled Review: November 2003

**CITY OF BILLINGS
DISCRIMINATION / HARASSMENT COMPLAINT AND
INVESTIGATION FORM**

For Office Use Only

Date Complaint Received: _____

TO BE COMPLETED BY COMPLAINANT:

LAST NAME

FIRST NAME

MIDDLE NAME

ADDRESS

CITY

ST.

ZIP

WORK PHONE

HOME PHONE

POSITION: _____

DEPARTMENT: _____

BASIS OF COMPLAINT (Check appropriate box(s)):

Race ☐ Color ☐ National Origin ☐ Sex ☐ Age ☐ Disability ☐

Creed ☐ Religion ☐ Marital Status ☐

DETAILED STATEMENT OF THE COMPLAINT:

[illegible]

Witnesses (Use additional sheets if necessary):

Home Phone: () _____

Work Phone: () _____

Address: _____
City State Zip