

2828 Capital Blvd. PO Box 40911 Olympia, WA 98504-0911

# STATE OF WASHINGTON PERSONNEL APPEALS BOARD

(360) 586-1481 FAX (360) 753-0139

June 24, 1996

Michael South Washington Public Employees Association 401 W. Main Suite B Walla Walla, WA 99362

RE: Tina Duvall v. Department of Corrections, Reduction in Salary Appeal,

Case No. RED-95-0063

Dear Mr. South:

Enclosed is a copy of the order of the Personnel Appeals Board in the above-referenced matter. The order was entered by the Board on June 24, 1996.

Sincerely,

Kenneth J. Latsch

Executive Secretary

KJL:tmp Enclosure

cc: Tina Duvall

Geoff Boodell, AAG Jennie Adkins, PO

1 BEFORE THE PERSONNEL APPEALS BOARD STATE OF WASHINGTON 2 3 Case No. RED-95-0063 Appellant, 4 MOTION AND 5 ORDER OF DISMISSAL 6 ORRECTIONS. 7 Respondent. 8 9 The Appellant hereby notifies the Personnel Appeals Board that he/she wishes to withdraw the above-entitled appeal. 10 11 12 ellant/Attorney/Representative 13 This matter came on regularly before the Personnel Appeals 14 Board on the consideration of the request of the Appellant to 15 withdraw his/her appeal. The Board having reviewed the files and records herein, being fully advised in the premises, and it 16 appearing to the Board that the Appellant has requested to 17 withdraw his/her appeal, now enters the following: 18 NOW, THEREFORE, IT IS HEREBY ORDERED that the Appellant's 19 request to withdraw his/her appeal is granted and the appeal is 20 dismissed. DATED this 24th day of \_\_\_\_ 21 WASHINGTON STATE PERSONNEL APPEALS BOARD 22 Noa Kennolels 23 24 25

(s]/mtdspab/s-dlak al(/4-12-93)

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**WPEA** 

## The Washington Public Employees Association • 1-800-544-WPEA

Headquarters • 124 10th Ave SW Olympia WA 98501 • (360) 943-1121 FAX (360) 357-7627 Toll Free (800) 544-9732 Monroe Office • 20014 Hwy 2-E • Unit C Monroe WA 98272 • (360) 794-0733 FAX (360) 794-6986 Toll Free (800) 794-9732 Walla Walla Office • 401 W Main • Suite B Walla Walla WA 99962 • (509) 529-8632

FAX 5000 525-5487 | Toll Free (800) 529-9752

JUN 1 9 1996

TO:

Kenneth Latsch, Executive Secretary

Personnel Appeals Board

2828 Capitol Blvd. PO Box 40911

Olympia, WA 98505-0911

FROM:

Michael South, WPEA Area Rep

401 W. Main, Suite B Walla Walla, WA 99362

DATE:

June 17, 1996

RE:

Duvall v. DOC Case No. RED-95-0063

Enclosed please find a motion and order of dismissal regarding the above referenced matter.

cc:

Tina Duall

File

(dh/mik/jun96/61796/latsch)

#### CERTIFICATE OF SERVICE

I certify that I served a cop record on 5-1-96 as follows his document on all parties or their counsel of

XX US Mail Postage Prepaid

Tina Duvall Michael South, WPEA RECEIVEN

1	I certify under penalty of perjury under the the foregoing is true and correct.	laws of the	State of Washin	ngton that
2	Dated: 5-1-96 at Olympia, WA.	•		

the foregoing is true and correct. Dated: 5-1-96 at Olympia, WA

MAY 0 2 1996

**PERSONNEL** APPEALS BOARD

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25 26 TINA DUVALL.

Appellant,

DEPARTMENT OF CORRECTIONS.

Respondent.

NO. RED 95-0063

NOTICE OF SUBSTITUTION OF COUNSEL

KENNETH LATSCH, Executive Secretary, Personnel Appeals Board;

AND: TINA DUVALL, Appellant;

AND: MICHAEL SOUTH, Area Representative, Wash. Public Employees Assn.

PLEASE TAKE NOTICE that GEOFFREY M. BOODELL, Assistant Attorney General, has been substituted as counsel for STEWART A. JOHNSTON, Assistant Attorney General, and will hereafter represent the Respondent in this matter.

BEFORE THE PERSONNEL APPEALS BOARD STATE OF WASHINGTON

DATED this 29 day of April, 1996.

CHRISTINE O. GREGOIRE

Attorney General

GEOFFREY M. BOODELL Assistant Attorney General

WSBA No. 22200

Attorney for Respondent

## **CERTIFICATE OF SERVICE** his document on all parties or their counsel I certify that I served a cop of record on April 8, 1996 RECEIVED Tina Duvall X US Mail Postage Prepaid Michael South ABC/Legal Messenger State Campus Delivery \_ Hand delivered by APR 0 9 1996 to I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. PERSONNEL Dated: April 8, 1996 at Olympia, WA. APPEALS BOARD Shurony 3 5 BEFORE THE PERSONNEL APPEALS BOARD STATE OF WASHINGTON TINA DUVALL, NO. RED-95-0063 Appellant, NOTICE OF SUBSTITUTION 8 OF COUNSEL ٧. 9 DEPARTMENT OF CORRECTIONS, 10 Respondent. 11 12 KENNETH LATSCH, Executive Secretary, Personnel Appeals Board; TO: 13 AND: TINA DUVALL, Appellant; MICHAEL SOUTH, Area Representative, Washington Public Employees Assn. 14 PLEASE TAKE NOTICE that STEWART A. JOHNSTON, Assistant Attorney General, 15 has been substituted as counsel for LYNN WISE, Assistant Attorney General, and will 16 hereafter represent the Respondent in this matter. 17 day of April, 1996. DATED this 18 CHRISTINE O. GREGOIRE 19 Attorney General

STEWART A. JOHNSTON Assistant Attorney General

WSBA No. 8774

Attorney for Respondent

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### CERTIFICATE OF SERVICE I certify that I served a cophis document on all parties or their counsel of record on December 11. i as follows: X US Mail Postage Prepaid Tina Duvall Michael South, WPEA RECEIVED ABC/Legal Messenger \_\_ State Campus Delivery Hand delivered by 1 DEC 1 3 1995 I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. Dated: December 11, 1995 at Olympia, WA. PERSONNEL APPEALS BOARD 3 4 BEFORE THE PERSONNEL APPEALS BOARD STATE OF WASHINGTON 5 TINA DUVALL, NO. RED-95-0063 6 Appellant, NOTICE OF APPEARANCE 7 ٧. 8 DEPARTMENT OF CORRECTIONS, 9 Respondent. 10 11 TO: KENNETH LATSCH, Executive Secretary, Personnel Appeals Board; TINA DUVALL, Appellant; 12 MICHAEL SOUTH, Area Representative, Washington Public Employees Association. 13 PLEASE TAKE NOTICE that the Respondent, Department of Corrections, without 14 waiving objection as to the sufficiency of service of process or jurisdiction of this Board, does 15 hereby enter its appearance in the above-entitled action, by and through its attorneys, 16 CHRISTINE O. GREGOIRE, Attorney General, and LYNN WISE, Assistant Attorney 17 General, and requests that all further pleadings herein be served upon said Respondent at the 18 Office of the Attorney General at the address given below. 19 day of December, 1995. DATED this 20

CHRISTINE O. GREGOIRE Attorney General

Assistant Attorney General WSBA No. 21654

Attorney for Respondent

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2828 Capitol Blvd. PO Box 40911 Olympia, WA 98504-0911

## STATE OF WASHINGTON PERSONNEL APPEALS BOARD

(360) 586-1481 FAX (360) 753-0139

November 15, 1995

Michael South Area Representative 401 W. Main, Suite B Walla Walla, WA 99362

RE:

Tina Duvall v. Department of Corrections, Reduction in Salary Appeal,

Case No.: RED-95-0063

Dear Mr. South:

This letter is to acknowledge receipt of the above entitled appeal by the Personnel Appeals Board on November 9, 1995.

Sincerely,

Kenneth J. Latsch

**Executive Secretary** 

KJL:tmp

cc:

Tina Duvall Linda A. Dalton, AAG

Jennie Adkins, PO

## APPEAL FORM

RECEIVED

WASHINGTON STATE PERSONNEL APPEALS BOARD

2828 Capitol Boulevard

PH: SCAN 321-1481

(206) 586-1481

APPEALS BOARD

P.O. Box 40911 Olympia, WA 98504-0911 FAX: (206) 753-0139

This form will help you provide necessary information to the Fersonnel Appeals Board when you file an appeal. You are not required to use this form; however, appeals must be filed in accordance with the requirements set forth in Chapter 358-20 WAC.

If the space on the form is insufficient or if you wish to provide additional information, you may attach additional pages.

PRINT OR TYPE — SIGN ON PAGE 2
PART I. APPELLANT IDENTIFICATION .
NAME: Duvall Tina
(Last name, first name, middle initial)
HOE ADDRESS: 1319 Shelton Road
(Number and street)
Walla Walla, WA 99362
(City, state and ZIP code)
PHONE NUMBERS: SCAN: Off-SCAN: (509) 5?5-3610
HOME: (Include area code) (509) 522-5484
EMPLOYING AGENCY: Washington State Penitentiary
Name of agency or agencies that took action you are appealing:
PART II. REPRESENTATIVE'S NAME, ADDRESS AND TELEPHONE NUMBER:
WPEA Michael South, Area Rep.
401 W. Main, Suite B
Walla Walla, Wa. 99362 509-529-8632
An Appellant may authorize a representative to act in his/her behalf.
The Board must be notified of any change in representation.
PART III. TYPE OF APPEAL
Check one of the following to indicate the type of appeal you are filing:
a. Disciplinary: (check applicable action(s)). Dismissal,Suspension,Demotion,Reduction in Pay.
b. Disability Separation
c. Merit System Rule or State Civil Service Law Violation
(complete PART IV. of this form)
d. Reduction in Force (complete PART IV. of this form)
e. Allocation (position classification)
(complete PART V. of this form)
f. Declaratory Ruling (see WAC 358-20-050)

PART IV. FOR RULE VIOLATION OR REDUCTION-IN-FORCE APPEALS ONLY	
What Merit System Rule(s) or State Civil Service Law(s) do you believe were violated?	
Explain the particular circumstances of the alleged violation	
How were you adversely affected by the alleged violation?	
What remedy are you requesting in this case?	
PART V. FOR ALLOCATION APPEALS ONLY	
Has there been a review of your allocation request by the Director of Personnel or designee?Yes orNo	<b>:</b>
If so, by whom?	
What is your present classification?	
To which class do you think your position should be allocated?	
SIGNATURE OF APPELLANT OR REPRESENTATIVE  DATE SIGNED  11-9-95	
I declare under penalty of perjury under the laws of the State of Washington that on 11-9-95 I deposited in the mails of the United States a properly stamped and addressed envelope	•
directed to the addressees of this document containing a copy of this document.    Stamman	

## **DEPARTMENT OF CORRECTIONS**

#### WASHINGTON STATE PENITENTIARY

P O Box 520 • Walla Walla, Washington 99362

September 26, 1995

PERSONAL SERVICE

Tina Duvall 1319 Shelton Road Walla Walla, WA. 99362

Ms. Duvall:

This is official notification that you will be reduced in pay within your present class of Licensed Practical Nurse 2, Range 39, Step I, \$2508 per month to Range 39, Step G, \$2393 per month effective at the beginning of your shift on October 16, 1995 through the end of your shift on January 15, 1996, inclusive.

This disciplinary action is taken pursuant to the Civil Service Law of Washington State, Chapter 41.06 RCW, and the Merit System Rules, Title 356 WAC (MSR), and Section 356-34-010 (1), (a) (Neglect of Duty), (i) (Willful Violation of the published employing agency or department of personnel rules or regulations), and 356-34-020 (Reduction in Salary - Demotion).

You neglected your duty, and willfully violated agency policy when on June 26, 1995, Nancy Hartzell, your supervisor, became aware that you had falsified a medical certificate. Specifically, you failed to submit a medical certificate for your absences on June 18 and 20, 1995 as required in accordance with WAC 356-18-070 (2), and Division Directive 830.150 Employee Medical Verification After being reminded by your supervisor, Requirements Process. Nancy Hartzell, to submit a medical certificate for your absences, you submitted to her as authentic, a photocopy of a medical certificate previously given to you by Dr. Joseph Meyer which you had knowingly and deliberately altered to cover your absences on June 18 & 20, 1995.

A meeting was held on July 25, 1995 to discuss the incident. Present at the meeting in addition to yourself was: John Lambert, Acting Superintendent; Craig Hamada, Personnel Officer; and Earl Linn, your Union Representative. During the meeting and in your written response, you admitted altering the dates on your medical certificate and submitting a copy to your supervisor Nancy Hartzell. A copy of the Employee Conduct Report (ECR) describing this incident in more detail is attached hereto and incorporated by this reference (Attachment 1).

Duvall, Tina Page Two September 26, 1995

By your actions, you violated the following agency policies:

- 1. DOC Policy 801.001, Ethics, which states in part:
  - "... Department employees are expected to maintain high professional and ethical standards at all times."
- 2. DOC Employee Handbook, Code of Ethics, which states:
  - "High moral and ethical standards among correctional employees are essential for the success of the department's programs. The Department of Corrections subscribes to a code of unfailing honesty, respect for dignity and individuality of human beings, and a commitment to professional and compassionate

service."

On October 5, 1993, you signed an Acknowledgement of Receipt of DOC Employee Handbook indicating that you received and agreed to become familiar with and have a thorough knowledge and understanding of the contents.

A copy of DOC Policy 801.001, Page two of the DOC Employee Handbook, and the Acknowledge of Receipt of DOC Handbook are attached hereto and incorporated by this reference. (Attachments 2 through 4 respectively)

As a DOC employee, you have a duty and responsibility to be honest and forthright in all dealings with the agency. You neglected that duty and violated agency policy when you knowingly altered an existing physicians medical certificate and presented it to your supervisor as the requested medical certificate. Further, as a Licensed Practical Nurse you have a professional obligation to maintain a high standard of ethical behavior within the health care profession. You violated a nurses ethical standard by falsifying a physicians written medical certificate which is usually entrusted to you for direction. By your actions, your reputation as a credible, trustworthy employee has been considerably diminished.

As an explanation for your behavior, you stated that you were coerced to such actions by your supervisor's repeated requests to produce a medical certificate due to the medical verification requirement. I find this explanation questionable because you were placed on Medical Verification (requiring you to provide a medical certificate for absences due to illness of yourself or a family member) on March 1, 1995, and upon a 90 day review it was extend for another 90 days. The medical certificate requirement had been in effect for several months and therefore should not have been any added pressure to comply with the requirement for your absences on June 18 & 20, 1995. Copies of your Medical Verification

Duvall, Tina Page Three September 26, 1995

Requirement Letter and Medical Verification Review Form are attached hereto and incorporated by this reference (Attachments 5 and 6).

Based on the serious nature of your actions, I believe that this disciplinary action is warranted. You hereby forewarned that future performance problems/errors/omissions may lead to further corrective /disciplinary action, up to and including dismissal.

Under the provision of WAC 358-20-010 and 358-20-040, you have the right to appeal this action to the Personnel Appeals Board. Your appeal must be filed in writing at the Office of the Executive Secretary, Personnel Appeals Board, 2828 Capitol Boulevard, Olympia, Washington 98501 within thirty days of the effective date stated in the first paragraph of this letter.

You also have the right to file a grievance under the provisions of Article 10 of the Collective Bargaining Agreement between the State of Washington, Department of Corrections and the Washington Public Employees Association for the Institutions Bargaining Unit (effective date June 25, 1993). The WAC's, Department of Corrections policies, and Collective Bargaining Agreement are available for your review upon request.

Tonal we

Tana Wood Superintendent

Attachments (6)

cc: Tom Rolfs, Director, Division of Prisons
Jennie Adkins, Director, Division of Human Resources
Linda Dalton, Assistant Attorney General
Bobbi Collins, Area Personnel Manager
Sherry Hartford, Personnel Officer
Personnel File

### APPEAL FORM

#ASHINGTON STATE PERSONNEL APPEALS BOARD 2828 Capitol Boulevard PH: SCAN 321-1481 p. O. Box 40911 (206) 586-1481 Olympia, WA 98504-0911 FAX: (206) 753-0139
P. O. Box 40911 (205) 586-1481
Olympia, NA 98504-0911 FAX: (206) 753-0139
This form will help you provide necessary information to the Personnel Appeals Board when you file an appeal. You are not required to use this form; however, appeals must be filed in accordance with the requirements set forth in Chapter 358-20 WAC.
If the space on the form is insufficient or if you wish to provide additional information, you may attach additional pages.
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(Last name, first name, middle initial)
HOME ADDRESS: 1319 Shelton Pond
HCME ADDRESS: 1319 Shelton Road (Number and street)
Walla Walla, WA 99362
(City, state and ZIP code)
PHONE NUMBERS: SCAN: Off-SCAN: (509) 525-3610
HOME: (Include area code) (509) 522-5484
EMPLOYING AGENCY: Washington State: Penitentiary
Name of agency or agencies that took action you are appealing:
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Michael South, Area Rep.
401 W. Main, Suite B Walla Walla, Wa. 99362 509-529-8632
An Appellant may authorize a representative to act in his/her behalf.
The Board must be notified of any change in representation
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Check one of the following to indicate the type of appeal you are filing:
a. Disciplinary: (check applicable action(s))
b. Disability Separation
c. Merit System Rule or State Civil Service Law Violation (complete PART IV. of this form)
d. Reduction in Force
e. Allocation (position classification)
(complete PART V. of this form)
f. Declaratory Ruling (see WAC 358-20-050)

P IV. FOR RULE VIOLATIO	N OR REDUCTION-IN-FORCE APPEALS ONLY
What Merit System Rule( violated?	s) or State Civil Service Law(s) do you believe were
Explain the particular of	circumstances of the alleged violation
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How were you adversely a	iffected by the alleged violation?
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What remedy are you requ	esting in this caser
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V. FOR ALLOCATION APPE	EALS ONLY
Has there been a review of	of your allocation request by the Director of Person
designee? Yes or N	
If so, by whom?	
What is your present clas	sification?
To which class do you this	nk your position should be allocated?
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I anclare under penalty of perjury under the laws of the State of Washington that on 11-9-95
I doposited in the mails of the United States a property stamped and addressed envelope directed to the addresses of this document containing a copy of this document.