



## EMPLOYMENT POLICY MANUAL

<b>Subject:</b> Employee Suggestions	<b>Approval Date:</b> June 17, 2013	<b>By-Law No.</b> 1785-13
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### 3.41 EMPLOYEE SUGGESTIONS

The Municipality of Red Lake promotes employees of the Municipality to recommend suggestions on how to improve the workplace that will be a benefit to the Municipality and its residents.

#### 1. EMPLOYEE SUGGESTION FORM

The Employee Suggestion Form shall be completed by the employee complete with name and signature. This will assist the Municipality in following up with the employee after the suggestion is forwarded to their supervisor.

#### 2. EMPLOYEE SUGGESTION MANAGEMENT FORM

The Employee Suggestion Management Form shall be completed by the employee's supervisor and forwarded to the CAO. If the suggestion is approved by the Municipality, the employee that completed the Employee Suggestion Form will receive recognition for their suggestion. The supervisor shall follow-up with the employee once this form has been completed.

#### 3. RECOGNITION

Once the suggestion is approved by the Municipality the employee will receive recognition in the form of a commemorative gift and/or municipal promotional souvenir. Furthermore, a record of their suggestion and its implementation will be placed on record in their personnel file.

#### 4. IMPLEMENTATION OF THE SUGGESTION

The suggested recommendation will be implemented by the Department Supervisor once approved by the CAO. If the suggestion requires funds that are not in the budget the suggestion must be taken to the Finance.



# Municipality of Red Lake - Employee Suggestion Form

## Identification

<b>Employee Name:</b>	<b>Date:</b>
<b>Position/Title:</b>	<b>Dept:</b>

## Suggestion

Please write your suggestion, how it will improve the workplace, any perceived value to the residents, and any concern that must be addressed (lost time, misallocation of resources, lost revenue, quality control, efficiency, morale, etc.).

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## Resources Required

If Required, please explain the support required to meet the needs of your suggestion. Please include an estimate for any required labor, materials, capital, equipment, or other resources.

Labour:
Materials:
Equipment:
Capital:
Other Resources (Please specify):
Total Estimated Cost:

## Desired Benefit

Please explain the anticipated benefit to the Municipality:

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Total Estimated Financial Benefit to Municipality:

## Planning

Please outline the necessary steps and the individuals/departments that should be involved to ensure the success of the suggestion.

- 1.
- 2.
- 3.
- 4.

Total Estimated Time to Completion:

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Municipality of Red Lake - Employee Suggestion Management Form

### FOR MANAGEMENT USE

<b>Supervisor Name:</b>	<b>Title:</b>
<b>Date Received:</b>	<b>Follow-up Date With Employee:</b>

Suggestion Value (Please explain pros and cons in detail):

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Possible Benefit to Municipality:

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Estimated Cost to Municipality:

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Is this suggestion cost-efficient and related to the Municipal Strategic Plan (Please explain in detail)

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Suggestion Priority (1= Low, 5 = High)    1       2       3       4       5

Recommended Course of Action:

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<b>Suggested employee recognition / reward:</b>	
<b>Supervisor Signature:</b>	<b>Date:</b>
<b>CAO Signature</b>	<b>Date:</b>

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