



The Central Chamber of PIFSA

Presents

Disciplinary & Grievance Codes and Procedures

COURSE OBJECTIVES:

It is anticipated that this course will benefit managers, foreman and others directly involved in issues relating to employee relationships, as most labour disputes occur on the shop floor, and only comes to senior management's attention once the damage has been done.

More importantly, the wide powers given to the CCMA have resulted in extremely expensive settlements should procedures not have been followed.

DURATION:

Starting Date: 22 February 2010
18 August 2010
Duration: 1 day
Time: 08:30 – 16:30

COURSE CONTENTS:

Grievance Procedures

- What is a grievance?
- Major causes of grievance
- The role of management in grievance handling
- Draft grievance form
- Requirements of a good grievance procedure
- Guidelines on grievance procedure
- The role of the employee in grievance handling

Disciplinary Procedures

- Management and the need to discipline
- Employees duties to a Company
- Draft forms
- Testing fairness
- Developments on a managers right to discipline
- Discipline guidelines
- Checklists for the Chairman of a disciplinary hearing
- Conclusion
- The course will also include simulated role plays, and case studies
- An overview of the Basic Conditions of Employment Act applicable to disciplinary procedures
- An Overview of the Labour Relations Act applicable to disciplinary procedures

COST:

R1425 (Incl VAT) per delegate (PIFSA Members)

The cost includes a Light lunch, tea & coffee and Course notes

Please note that, in order to provide intensive exposure of participants, the number is limited to 10 delegates per course.

VENUE:

The Braids, Unit D, Ground Floor
113-115 Bowling Ave, Gallo Manor

ENROLMENT:

For any further information please contact Renell van Rooyen at the Central Chamber office on 011 287 1167 or renelvr@pifsa.org. For enrolment please complete the Enrolment form and fax it to Renell on 086 508 1350 or 011 287 1178.



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COURSE ENROLMENT FORM

Course Name _____

Course Commencement Date _____

COMPANY DETAILS

Company Name _____

Contact Person _____

Company VAT Reg. No _____

Company Order No _____

Telephone No _____ Fax No _____

Postal Address _____

Postal Code _____

Email Address: _____

DELEGATES DETAILS (Please attach a copy of each delegate ID)

Surname	Initials	ID Number											

PAYMENT DETAILS (Please fax proof of payment to 086 508 1350 OR 011 287 1178)

Please select relevant block: PIFSA Member Non-Member

For Office Use Only: Member R _____ Non-Member R _____

Payment will be made by: Cheque (No: _____) EFT/direct deposit

TERMS AND CONDITIONS

I, _____ being the delegate / employer of the afore-mentioned learner(s) take full responsibility for the payment of any tuition fees, which accrue, from any training rendered to the above learner(s).

Signature of Employer



Company Stamp (If applicable)