

Transmitted via Email: brandon.w.lee@k12.hi.us

To: Brandon W. Lee, Labor Relations, DOE



HAWAII STATE TEACHERS ASSOCIATION  
VOLUNTARY LABOR ARBITRATION RULES  
DEMAND FOR ARBITRATION

CERTIFIED MAIL NO. 7018 0040 0000 1593 7410

Date: October 1, 2021

To: Department of Education  
P.O. Box 2360  
Honolulu, HI 96804

The undersigned, a party to an Arbitration Agreement contained in the collective bargaining agreement dated July 1, 2021, which agreement provides as follows:

If a claim made by the Association or teacher has not been satisfactorily resolved, the Association may present a request for arbitration of the grievance within ten (10) days after receipt of the decision.

Hereby demands arbitration thereunder.

The employer responded to this matter on September 30, 2021, indicating they would take “no further action on this matter.” The employer’s response can only be interpreted as a refusal to follow and comply with the terms of the collective bargaining agreement.

GRIEVANT: **HSTA**  
**All Worksites**  
**(HSTA Grievance #O-22-05)**

NATURE OF DISPUTE:

**The Department of Education directed all employees to be tested every week for COVID-19 or provide proof of COVID-19 vaccination by August 30, 2021, without impact bargaining of implementation. Those employees who remain unvaccinated have been required to seek medical examination for evidence of a negative COVID-19 test at their own expense. The implementation of the Attestation of COVID-19 Testing or Vaccination program violates the HSTA Collective Bargaining Agreement.**

REMEDY SOUGHT:

- 1. Require the Employer to properly consult and meaningfully bargain with the Union prior to the implementation of any directive, policy or mandate, including the Attestation of COVID-19 testing or Vaccination program;**
- 2. Refrain from any and all retaliatory action against the grievants for filing this grievance;**
- 3. Provide the weekly COVID-19 tests for employees free of charge;**
- 3. Make grievants whole, to include but not limited to, any compensation or leave lost or out of pocket expenses incurred as a result of or related to the Employer’s directive, policy or mandate.**

You are hereby requested that a representative of the Department of Education meet with a representative of the Association to select an arbitrator as provided for in Article V, Section I.

Signed

Title: Deputy Executive Director  
Address: 1200 Ala Kapuna Street  
Honolulu, HI 96819  
Phone: 833-2711