



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF LABOR RELATIONS
CHARGE OF PROHIBITED PRACTICE
M.G.L. c.150E

DO NOT WRITE IN THIS SPACE

Case No.	Date Filed
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INSTRUCTIONS: Answer all applicable questions. Failing to provide information may result in the dismissal of the charge.

Note: Pursuant to 456 CMR 15.04, the DLR will not issue a complaint unless the charging party has complied with the applicable provisions of M.G.L. c.150E, §§13 and 14.

1. Employer Trial Court of Massachusetts	2. Representative to contact Eamonn Gill, Esq.	4. Telephone Number 617-742-8575
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3. Address (street and No., city/town, state, and ZIP code) 2 Center Plaza, Suite 540, Boston, MA 02108	5. Fax Number
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6. Employee Organization (if any): OPEIU, Local 6	7. Representative to contact Steven Fonseca, Esq.	9. Telephone Number 617-338-1976
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8. Address (street and No., city/town, state, and ZIP code) 150 Wood Road, Braintree, MA 02184	10. Fax Number
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11. This charge is filed against (check one)

Employer
 Employee Organization

12. The above named employer or employee organization has engaged or is engaging in a prohibited practice within the meaning of Massachusetts General Law, Chapter 150E, Section(s) (enter all appropriate sections/subsections)

10(a)(1) and (5)

Failing to specify an appropriate section/subsection may result in the dismissal of the charge.

13. Summary of basis of Charge (be specific as to names, dates, addresses, etc.)

Office and Professional Employees International Union, AFL-CIO, Local 6, ("the Union") is the exclusive bargaining representative of clerical and administrative staff employed by the Trial Court of Massachusetts ("the Trial Court").

On or about October 24, 2022, the Trial Court informed the Union that it intended to institute a mandatory program that would require bargaining unit members to disclose their vaccination status (with regard to COVID-19) by November 4, 2022. This program had previously been voluntary; the decision to make the program mandatory was taken without providing the Union sufficient notice or opportunity to bargain over this condition of employment. Therefore, the Trial Court has violated MGL Ch. 150E 10(a)(5), and derivatively, 10(a)(1).

By these and other acts, the party complained of has interfered with, restrained, and/or coerced rights guaranteed by the Law.

14. (a) Is there a collective bargaining agreement that may apply to the conduct that is alleged to have violated the Law? Yes No

(b) If you checked "Yes" in question 14(a), please list all of the clauses alleged to apply and attach a copy of each.

(c) Is there a grievance concerning this matter pending? Yes No

15. Without limiting your rights to later amend your remedial request, please explain what remedy you seek. Include the amount of any financial remedy to which you claim entitlement.

Cease and desist, bargain in good faith, and make whole all affected employees

16. Have you attempted to settle this case? Yes No
If not, why not?

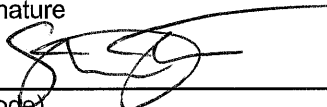
Note: The DLR may decline to issue a complaint unless reasonable settlement efforts have been made by the charging party. 456 CMR 15.04(1).

INFORMATION ON CHARGING PARTY

17. Name OPEIU, Local 6	18. Representative to contact Steven Fonseca (Attorney)	20. Telephone Number 617-338-1976
19. Address (street and No., city/town, state, and ZIP code) 150 Wood Road, Braintree, MA 02184		21. Fax Number
22. The Charging Party is an: <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Employee Organization <input type="checkbox"/> Employer		


DECLARATION

I have read the above charge of prohibited practice and swear under the pains and penalties of perjury that the information contained in it is true and complete to the best of my knowledge and belief.

Name (print) Steven Fonseca	Signature 	Title (if any) Attorney
Address (street and no., city/town, state, and ZIP code) Feinberg, Dumont & Brennan, 177 Milk Street, Boston, MA 02109		Telephone Number 617-338-1976

CERTIFICATE OF SERVICE

I hereby certify that I have served a copy of this Charge of Prohibited Practice on the following representative of the opposing party.

Name Eamonn Gill	Address (street and no., city/town, state, and ZIP code) 2 Center Plaza, Suite 540, Boston, MA 02108	Telephone Number 617-742-8575
Method of Service <input type="checkbox"/> In hand <input type="checkbox"/> First Class Mail <input checked="" type="checkbox"/> Other (specify): Email		
Signature of Person making Certification 		Telephone Number 617-338-1976