

Teleworking is a voluntary, alternative work arrangement available for Edmonds College employees. This usually means working at home from 1-3 times a week on an on-going basis. Teleworking can also be more informal, such as periodically working from home for a short-term project or on the road during business travel. Other informal, short-term arrangements may be made for employees on family or medical leave, to the extent possible for the employee and the College, and with the consent of the employee's health care provider, if appropriate.

Teleworking does not change the basic terms, expectations, and conditions of employment with the College. It is a work alternative, rather than a reward, and is intended to enhance productivity, creativity, employee satisfaction and/or reduce operating costs. The Designated Alternative Worksite Agreement may not be permanent and may be modified or terminated if it is determined that the College and/or employee needs are not being met. All teleworking arrangements are made on a case-by case-basis, focusing on the business needs of the College's operations and the College's mission and goals.

Telework Feasibility Review

Employee and supervisor should work through the following assessment before approving a telework plan.

Eligibility Criteria

- Must be a permanent employee of the College
- Must have successfully completed probationary period (unless a waiver has been secured)
- Must be approved on a case-by-case basis depending upon job function, customer service, supervisory duties, and other job related considerations.

Work Product Assessment

Use the current job description and performance criteria in completing this part of the assessment.

Evaluating/monitoring work product

- Is there an adequate method of evaluating productivity?
 - Can tasks be clearly defined?
 - Can clear objectives be set?
 - Can specific time frames be established?
- How will the work be measured?
 - Employees must be able to account for work done while teleworking. Supervisors are encouraged to have employees use the Telework Log that is available on the HR website for this purpose. The log is not required by HR, but is a resource for supervisors and employees to measure work.

Job Duties and Responsibilities

- Which aspects of the employee's work are unpredictable and need immediate attention?
- How will these situations be handled when the employee is teleworking?

In Person Contact

- What amount of face-to-face communication is needed to perform assignments?
- What is the impact of the employee's not being available for in-person communication with clients and co-workers?

Communication

- What impact, if any, will teleworking have on timely communication with clients?
- What impact, if any, will teleworking have on timely communication between employee and other staff?

Impact on Work Unit

What, if any, office activities need to be reorganized in order to facilitate the teleworking arrangement?

- Duties of other staff
- Workflow (mail, phone, and email messages)
- Meetings

Telework Schedule

Based on the above analysis, what is a reasonable amount of time for teleworking?

Considerations

- Length of commitment — temporary or long term
- Number of days/week
- Days of week that would be least disruptive to organization
- Variability of schedule

Resource Needs Assessment for Home or Alternate Worksite**Worksite**

Use the Designated Alternative Worksite Checklist to complete this part of the assessment.

Next Steps:

- Complete the Designated Alternative Worksite Checklist
- Complete Teleworking Application
- Complete Worksite Agreement
- Develop a plan for implementing any modification of internal operations or procedures that need to be in place prior to initiating the teleworking assignment
- Forward to Human Resources for review and approval

LAST NAME _____ FIRST NAME _____

PHONE NUMBER _____

TELEWORK REQUEST INITIATED BY EMPLOYEE SUPERVISOR

TYPE OF TELEWORK REQUESTED (CHECK ONE) ONGOING PERIODIC

PROPOSED START DATE _____

PROPOSED TELEWORKING SCHEDULE

IN OFFICE REGULAR FLEXIBLE

CORE HOURS _____

DAYS MON TUE WED THU FRI

DESCRIBE THE TYPE OF WORK YOU PROPOSE TO DO AT HOME

SCHEDULE _____

AT ALTERNATIVE SITE REGULAR FLEXIBLE

DAYS MON TUE WED THU FRI

SCHEDULE _____

SUPERVISOR SIGNATURE _____ DATE _____

APPROVED DISAPPROVED APPROVED WITH THE FOLLOWING RECOMMENDATIONS

HUMAN RESOURCES SIGNATURE _____ DATE _____

APPROVED DISAPPROVED APPROVED WITH THE FOLLOWING RECOMMENDATIONS

RETURN COMPLETED FORM TO HUMAN RESOURCES

LAST NAME _____ FIRST NAME _____

THIS AGREEMENT is entered into by and between the above named employee, an employee of Edmonds College (“Employee”), and Edmonds College District 23, an agency of the State of Washington (“College”), whose principal place of business is 20000 68th Avenue West, Lynnwood, Washington 98036-5999.

A. Voluntary Participation

The Employee has successfully completed the probationary period (or a waiver of that requirement has been approved) and voluntarily agrees to work at the College-approved Designated Alternative Worksite (“Alternative Site”), defined below in Section D, and to follow all applicable policies and procedures. The Employee recognizes that the teleworking arrangement is not an employee entitlement but an additional method the College may approve to accomplish the College’s work.

B. Trial Period

Employee and College agree that the supervisor will evaluate, in writing, the effectiveness of the arrangement during an initial three (3) month trial period before continuing the arrangement.

C. Job Responsibilities

The Employee and College agree that a teleworking arrangement is not a basis for changing the employee’s basic terms, expectations and conditions of employment including but not limited to salary and benefits.

D. Duty Station and Designated Alternative Worksite

College and the Employee agree that the Employee’s official duty station is specified as indicate duty station for regular office and that the Employee’s approved Alternative Site is to specify street and number, city, and state.

E. Work Area

The employee agrees to provide and maintain a work area adequate for performance of official duties as demonstrated by an approved Worksite Checklist.

F. Alternative Worksite Inspection

The employee agrees to permit the college to inspect the Alternative Site with a minimum of 24 hours notice during the Employee’s normal working hours to ensure a safe and healthful work environment.

G. Alternative Site Costs

The Employee understands that the College will not be responsible for any operating costs associated with the employee using his or her home as an Alternative Site; for example, home maintenance, insurance, or utilities expenses. The Employee understands he or she does not relinquish any entitlement to reimbursement for authorized expenses incurred while conducting business for the College, as provided for by statute and regulations.

H. Official Duties

Unless otherwise instructed, the Employee agrees to perform official duties only at the regular office or College-approved Alternative Site. The Employee agrees not to conduct personal business during agreed core hours at the Alternative Site, such as caring for dependents, performing household duties, or making home repairs.

I. Work Schedule

College and the Employee agree the Employee's official work schedule will be as specified in the Teleworking Application. Changes to the schedule will be approved by the supervisor and a superceding form forwarded to the Human Resources Office. The Employee acknowledges that there may be times when the Employee will be requested to come into the office on teleworking days when the nature of the work department's workload requires it. It is the Employee's responsibility to come into the office as requested during these times.

J. Time and Attendance

The College agrees to ensure a copy of the Employee's work schedule is placed in the Employee's personnel file.

K. Leave

The Employee agrees to follow established office procedures for requesting and obtaining approval of leave. The College's normal leave policies will apply to the Employee's work hours completed both at the regular Duty Station and the Alternative Site.

L. Overtime

Unless exempt from the overtime requirements of the Fair Labor Standards Act, The Employee agrees to work overtime only with advance approval by the supervisor. The Employee understands that overtime work without such approval is not compensated and may result in termination of the teleworking privilege and/or other appropriate action. If approved, overtime is to be documented in writing and submitted according to current College regulations.

M. Work Assignments/Performance

The Employee agrees to complete all assigned work according to procedures mutually agreed upon by the Employee and the supervisor and according to the guidelines and standards specified in the Employee's performance plan. The Employee agrees to provide regular reports if required by the supervisor to help judge performance. The Employee understands that a decline in performance may be grounds for canceling the teleworking arrangement.

N. Equipment/Supplies

The Employee agrees to protect any College-owned equipment and to use the equipment only for official purposes. Use of such equipment by household members or anyone else is prohibited. The College agrees to install, service, and maintain any State-owned equipment issued to the teleworking employee. The Employee agrees to install, service, and maintain any personal equipment used. Any equipment provided to the Employee must be returned upon request by the College, upon resignation or termination of the Employee, or if the Teleworking Program is discontinued by either the Employee or College. The College agrees to provide the Employee with all office supplies necessary to complete the assigned work tasks. (Attach addendum of College-owned equipment issued to the Employee under the terms of this Agreement.)

O. Security

If the Employee is using College-owned equipment; (laptop computer, desk top, computer, printer, etc.) this equipment must be properly maintained and protected from damage or theft. This may include ensuring that electrical outlets are properly grounded and computer equipment protected with a power surge protector. The employee is responsible for the proper use of college-owned equipment and supplies. Further, the employee assumes responsibility for the loss of college-provided equipment and damage that results from negligent use or handling.

P. Liability

The employee understands that the College will not be liable for damages to the Employee's personal or real property while the Employee is working at the approved Alternative Site. Any damage to State-owned equipment not due to normal wear and tear is the responsibility of the Employee.

Q. Injury Compensation

The Employee understands that State Worker's Compensation liability is limited to injuries directly resulting from your work and only if the injury occurs at the Employee's designated Alternative Site or regular Duty Station. Any claims will be handled by the College's Human Resources Office according to current Workers Compensation claims procedures. The employee agrees to notify the supervisor immediately of any accident or injury that occurs at the Alternative Site and to complete any forms required by the College and State of Washington. The supervisor agrees to investigate such a report immediately.

R. Confidential Materials

Confidential materials will not be taken home by the Employee unless proper security measures are provided for at home and only with the prior approval of the Employee's supervisor. Disposal of confidential materials is to be completed only at the College's facilities. The Employee agrees to protect College records from unauthorized disclosure or damage and will comply with requirements of the Privacy Act of 1974, 5U.S.C. 552a.

S. Cancellation

The College agrees to allow the Employee resume his or her regular schedule at the regular Duty Station after the Employee provides written notice to the supervisor. The Employee understands that the College may cancel the teleworking arrangement or discontinue the Teleworking Program at any time at the sole discretion of the College and instruct the Employee to resume working at the regular Duty Station. If the Employee chooses not to return to the regular Duty Station, The College will consider this to be a voluntary resignation and it will be treated as such under the College's standard policies. The College agrees to follow any applicable administrative or negotiated procedures.

T. Other Action

Nothing in this agreement precludes the College from taking any appropriate disciplinary or adverse action against an employee who fails to comply with the provisions of this agreement.

EMPLOYEE SIGNATURE _____ **DATE** _____

SUPERVISOR SIGNATURE _____ **DATE** _____

HUMAN RESOURCES SIGNATURE _____ **DATE** _____

Distribution:

Original: Employee Personnel File
Copies: Employee
Supervisor

The following checklist is designed to assess the overall safety of your alternative worksite. Please read and complete the self-certification safety checklist. Upon completion, you and your supervisor should sign and date the checklist in the spaces provided. The checklist must be attached to the application and approved by Human Resources.

LAST NAME _____ FIRST NAME _____

DEPARTMENT _____

ALTERNATIVE WORKSITE LOCATION (SPECIFIC ADDRESS) _____

PLEASE DESCRIBE THE ALTERNATIVE WORKSITE:

Workplace Environment

Do you have a separate dedicated (or restricted access) work area? YES NO

Are temperature, noise, ventilation, and lighting levels adequate for maintaining your normal level of job performance? YES NO

Are all stairs with four or more steps equipped with handrails? YES NO

Are all circuit breakers and/or fuses in the electrical panel labeled as to intended service? YES NO

Do circuit breakers clearly indicate if they are in the open or closed position? YES NO

Is all electrical equipment free of recognized hazards that would cause physical harm (frayed wires, bare conductors, loose wires, flexible wires running through walls, exposed wires to the ceiling)? YES NO

Will the building's electrical system permit the grounding of electrical equipment? YES NO

Are aisles, doorways and corners free of obstructions to permit visibility and movement? YES NO

Are file cabinets and storage closets arranged so drawers and doors do not open into walkways? YES NO

Do chairs have any loose casters (wheels)? YES NO

Are the rungs and legs of the chairs sturdy? YES NO

Are the phone lines, electrical cords, and extension wires secured under a desk or alongside a baseboard?

YES NO

Is the office space neat, clean, and free of excessive amounts of combustibles?

YES NO

Is the site serviced by a smoke alarm and does it contain a fire extinguisher?

YES NO

Are floor surfaces clean, dry, level, and free of worn or frayed seams?

YES NO

Are carpets well secured to the floor and free of frayed or worn seams?

YES NO

Is there enough light for reading?

YES NO

Computer Workstation

Is your chair adjustable?

YES NO

Do you know how to adjust your chair?

YES NO

Is your back adequately supported by a backrest?

YES NO

Are your feet on the floor or fully supported by a footrest?

YES NO

Are you satisfied with the placement of your monitor and keyboard?

YES NO

Is it easy to read the text on your screen?

YES NO

Do you need a document holder?

YES NO

Do you have enough legroom at your desk?

YES NO

Is the screen free from noticeable glare?

YES NO

Is the top of the screen eye level?

YES NO

Is there space to rest the arms while not keying?

YES NO

When keying, are your forearms close to parallel with the floor?

YES NO

Are your wrists fairly straight when keying?

YES NO

Does your desk have enough space on it for working materials?

YES NO

Do you have storage space nearby for work files and materials?

YES NO

Is your desk at a comfortable work height?

YES NO

Is your desk sturdy enough to safely support a computer?

YES NO

Hardware/Software

Do you have high speed internet access? (DSL, Cable Modem, ISDN)

YES NO

If not, do you have a modem and an Internet Service Provider with a local access number?

YES NO

If necessary for your work, do you have a Virtual Private Network (VPN) configured for accessing college resources?

YES NO

Does your work require access to the HP3000 system?

YES NO

Do you have a modern web browser? (Internet Explorer 5.0 or later, Google Chrome)

YES NO

Do you have Citrix?

YES NO

Do you have a printer?

YES NO

EMPLOYEE SIGNATURE _____ DATE _____

SUPERVISOR SIGNATURE _____ DATE _____

APPROVED DISAPPROVED APPROVED WITH THE FOLLOWING RECOMMENDATIONS

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