

<b>CITY OF APPLETON PERSONNEL POLICY</b>	<b>Telecommuting Policy</b>	
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POLICY SOURCE: Human Resources Department	AUDIENCE: <del>All employees</del> <b>Non-represented employees</b>	TOTAL PAGES: 5
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### I. PURPOSE

Telecommuting is an arrangement in which an employee may work at a place different than the traditional workplace, typically their home, for the benefit of the employees and the organizational needs of the City of Appleton.

### II. POLICY

Telecommuting arrangements may vary for individuals or positions. The determination as to whether any particular position, assignment or employee is a good fit for telecommuting is at the sole discretion of the City.

- ~~Telecommuting is not an entitlement of any employee. and it is not grievable under any collective bargaining agreement.~~
- The employee agrees to work at the Official Work Location or Telecommuting Location, and not from another unapproved site.
- It is the employee's responsibility to communicate any issues or concerns regarding the telecommuting arrangement with his/her supervisor as soon as possible.
- Telecommuting employees must comply with all City policies. Failure to comply with this policy or other City policies may result in discipline up to and including discharge.

Management retains the right to modify the telecommuting agreement and to remove the employee from the arrangement for any reason ~~at all~~. With proper notice, the employee may stop participating in the telecommuting arrangement at any time.

For purposes of Library administered systems and networks, Library Administration and Network Services serve the review and approval functions of Human Resources and **Information Technology Services** as listed below. Library rules and procedures are subject to review and approval by Human Resources, **Information Technology Services** and the City Attorney.

### III. DISCUSSION

Employees who wish to engage in a telecommuting arrangement must meet the following criteria:

1. A minimum of 6 months of continuous employment.
- ~~2. An Excellent or Good sick leave rating over the past 2 years.~~
- ~~3.~~ **2.** A history of reliable and responsible completion of work duties at a performance level that meets or exceeds expectations.

- 4.3. Employee must demonstrate a history of and maintain regular, punctual and predictable attendance.
- 5.4. Employee must provide broad band internet access at their own expense.
- 6.5. Employee must utilize a City owned computer.

In the event that an individual meets the above mentioned criteria and wishes to engage in a telecommuting arrangement, the position and adaptability of the person will be evaluated to determine if both are suitable to telecommute.

#### IV. PROCEDURES:

Managers should take into account the following when considering an employee for telecommuting:

- Face-to-face communication is not a daily requirement of the position and communication can be effectively accomplished over the telephone, e-mail, ~~or~~ via mail, **or other appropriate means.**
- The individual already works in a self-directed role and produces clearly defined output and work products or the work activities are measurable.
- The employee must be self-motivated, self-disciplined, self-directed with the ability to establish, manage, communicate, and collaboratively determine priorities.
- The employee must clearly demonstrate skills in planning, organizing, managing time, and meeting clear standards and objectives.
- The employee must maintain regular, punctual and predictable attendance.
- The employee must maintain an above average performance level.
- The employee can maintain a safe and ergonomically sound home office free from distractions.
- Risk Management and/or **Information** Technology ~~Services~~ may complete an onsite inspection of the designated work area.

The employee agrees to be available during their scheduled work hours for communication through phone, ~~voice mail, cell phone or e-mail~~, **in-person or other appropriate communication tools (text or skype)**. Employee initiated schedule changes must be approved by their supervisor.

The employee agrees that City representatives may make on-site visits to the telecommuting site during established work hours and that such visits may be made without notice.

The ~~telecommuter~~ **employee** will try to schedule any off-site business meetings on telecommuting days in order to maximize the time they are available at the Official Work Location. On occasion, it may be possible for employees to teleconference into the meetings that are scheduled on telecommuting workdays.

The employee will meet with the supervisor according to procedures previously agreed upon to receive assignments and to review completed work as necessary. The evaluation of the employee's job performance will be based on established standards and the employee's performance must meet or exceed expectations to ~~remain a telecommuter~~ **continue to telecommute.**

All records, papers, and correspondence done at the telecommuting location are considered the City's business and may be subject to open records disclosure.

The employee will apply safeguards to protect records from unauthorized disclosure or damage.

The employee agrees to maintain all information which is protected by federal or state regulations in a confidential manner. Phone contacts involving such information will be conducted in a private area. Passwords and protected entry codes to the City's software will be kept confidential. The employee agrees that family members and others will not have access to protected information at any time.

### **Home Office Requirements:**

Employees wishing to telecommute must have safe and adequate work space to work from home. Following are criteria that must be met for home office safety requirements:

- The temperature, noise, ventilation and lighting levels of the dedicated office area must be adequate for maintaining normal levels of job performance.
- File cabinet doors and drawers are arranged so they do not open into walkways.
- Phone lines, electrical cords and other extension wires are secured.
- Aisles, corners and doorways in the work area are free of obstructions.

In addition to meeting safety requirements in the home office, a telecommuting workstation must be ergonomically suited for the employee. Employees will be responsible for ensuring they maintain the following ergonomic guidelines while working from home:

- Chair should be adjusted so feet are flat on floor or footrest and legs are vertical to ground.
- Computer monitor should be directly centered in front of the user. User should not have to look up, down, left or right for better viewing. Additionally, the monitor should be at a comfortable viewing distance.
- Use good posture when keyboarding. Elbows should be at a 90 degree angle. Wrists should be level with the keyboard.

### **Equipment:**

The City reserves the right to make the determination as to the appropriate equipment which is subject to change at any time. Equipment needs may be periodically assessed by the **Information Technology Services** Department to ensure that the individual is equipped for telecommuting based on the needs of the position. The City may provide necessary computer and telephone equipment for a fully functional real and virtual office for telecommuting employees.

The City's **Information Technology Services** Department can supply the following equipment for approved telecommuters:

City laptop pre-loaded with required programs

VoIP capable phone that connects to internal phone system

Printer, if required for the job

Set up of the telecommuting account (VPN)

Instructions and training on how to get connected to the internal network

The costs related to the equipment, installation and maintenance may be the responsibility of the requesting department.

Employees must make arrangements regarding the use of the City's equipment in their remote office. The **Information Technology Services** Department requires at least one (1) week advance notice and the Department Director's approval for any equipment set up for telecommuting. Also, the Technology Services Department has the authority to determine for employees who

work at multiple locations whether it will provide a single laptop which is transported between locations rather than maintaining a workstation at each location.

In no event shall the use of the City's equipment change the ownership of or impede the City's access to the equipment. All equipment and materials provided by the City shall remain the City's property. The employee agrees to return all City owned furniture, equipment and supplies in proper working condition and agrees to take financial responsibility for missing and/or broken items upon the termination of the telecommuting arrangement or termination from employment. If the employee's own home equipment such as personal cell phone or home phone is used, it will be at the employee's expense. Special supplies not normally provided by the City (ink cartridges, toner, etc) may be the employee's responsibility. Expenses for supplies normally available in the office may or may not be reimbursed depending on the circumstances.

Equipment provided by the City must not be used for purposes other than City business and must be kept be in a secure location and protected against damage and unauthorized use.

City owned equipment will be serviced and maintained by the City. Equipment provided by the employee will be at no cost to the City and will be maintained by the employee. The City is not liable for repairing or replacing your own equipment if it breaks while performing work for the City.

If equipment requires repair or replacement where it is impossible for the employee to work at the remote location, the employee may be temporarily assigned to another location or may suffer loss of pay for hours not worked. Any lost hours may be made up within the confines of the Fair Labor Standards Act ~~and/or~~; the departmental policies ~~or any collective bargaining agreement~~.

The City will not be responsible for operating costs, home maintenance, or any other incidental costs (e.g. utilities) associated with the use of the employee's residence. The City is not responsible for insuring ~~your~~ **any personal** equipment in ~~your~~ **the employee's** remote office. The ~~telecommuter-employee~~ understands that he or she is responsible for any tax and insurance from this arrangement and for conforming to any local zoning regulations.

### **Liability:**

The City will not be liable for damages to the employee's property resulting from participation in the telecommuting program. By participating in the telecommuting arrangement, the employee agrees to hold the City harmless against any and all claims including injuries to others at the telecommuting location.

If an employee is injured while working at home, the employee should follow the City's established procedures for reporting on-the-job injuries.

### **Employment Laws:**

Telecommuting employees will be held to the same employment law standards as employees in the traditional office. (~~Non-~~**Exempt** employees will continue to be required to complete timesheet records.) They will adhere to normal work schedules and will have to obtain prior management approval for any change to their normal work schedule (including overtime).

### **Time Off:**

Telecommuting employees agree to follow established procedures for requesting and obtaining approval of leave, including Paid Time Off. In the event that a telecommuting employee is ill, he or she must follow the City's ~~Sick Leave~~ **Attendance** Policy.

**Child/Elder Care:**

Telecommuting is not an alternative for child care or elder care and the telecommuter agrees to make regular dependent care arrangements during telecommuting periods.

Employees must not use work hours for any other purposes than City business related duties.

**~~Sick Leave:~~**

**PTO**

Telecommuting may be used as a temporary arrangement in lieu of ~~sick or other leave~~ **paid time off** at the Department Director's and Human Resources Director's discretion.

**Miscellaneous:**

Occasionally a telecommuting employee's presence may be required in the traditional office for meetings or other purposes and it is the responsibility of the employee to be present when requested. In most cases the employee will be notified in advance of the requirement, however, advanced notification may not be feasible in some cases.

The telecommuting employee understands that they may be required to forfeit the use of a personal office or work station in favor of a shared arrangement to maximize the City's office space needs.

**CITY OF APPLETON  
Telecommuting Request Form**

Employee Name:	
Current Position:	
Start date of telecommuting:	
End date of telecommuting:	
Reason for telecommuting:	
Address of employee, <b>phone number</b> & specific area employee will work from:	

The employee's telecommuting work schedule will be:

Telecommuting Days:	Mon	Tue	Wed	Thu	Fri
Telecommuting Time:	Start Time:		Finish Time:		
Breaks (if applicable):					
Total Telecommuting Hours Per Day:					

Will the employee perform the duties of their current position?    Yes                      No  
 If no, which duties will the employee perform? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*This agreement is subject to the terms and conditions stated in the City of Appleton Telecommuting Policy, a copy of which has already been made available to the employee. I have read and understand both the City of Appleton Telecommuting Policy and this agreement. I agree to abide by and operate in accordance with the terms and conditions outlined in both documents. I agree that the sole purpose of this agreement is to regulate telecommuting and it neither constitutes an employment contract nor an amendment to any existing contract. I understand that this agreement may be terminated at any time.*

*If the reason for the telecommuting request is due to a medical condition, documentation must be attached to this form supporting this request. Furthermore, the employee agrees to operate within any work restrictions they might have as a result of their own medical condition.*

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

**Supervisor approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Department Head approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**HR Director approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_

***\*if request is approved, a copy needs to be sent to the Information Technology Services Director***