

COUNTY OF YOLO

ADMINISTRATIVE POLICY MANUAL

CHAPTER: III PERSONNEL ADMINISTRATION

SECTION: 3-13 TELECOMMUTING POLICY

DATE: FEBRUARY 6, 2001

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A. PURPOSE

The purpose of this policy is to establish guidelines and criteria for a telecommuting program for employees of the County of Yolo.

B. POLICY STATEMENT

Telecommuting is defined for the purposes of this policy as an employee working from a remote site other than their primary work location, such as a designated satellite work center or at home, on a regular, on-going basis.

With the adoption of Trip Reduction Ordinance No. 1152, the County of Yolo committed to offer telecommuting to employees as one method to reduce home-to-work trips so that a reduction in air quality degradation and traffic congestion can be achieved.

Additional anticipated benefits of telecommuting include increased productivity as a result of reduced interruptions to work flow, improved employee morale by addressing work schedule flexibility and individual life style considerations, and enhanced ability to recruit and retain valuable employees.

C. POLICY

1. Telecommuting is a voluntary arrangement between the supervisor, the employee, and the department. It is not an entitlement or employee benefit. Either party for any reason may terminate the arrangement at any time with or without cause so long as it does not unlawfully discriminate or otherwise violate any other County policy adopted by the Board of Supervisors. No provisions of this Telecommuting Policy or any telecommuting arrangement shall be subject to the grievance procedure.
2. It is recognized that telecommuting is not a viable option for every County department and every County employee in every job classification. Employees interested in telecommuting must meet the following identified criteria for eligibility:
 - a) Be a regular, full-time employee having successfully passed his/her probationary period;
 - b) Completed a minimum of one year in the area of current responsibility, or at the discretion of the department head;
 - c) Received a rating of at least Meets Standards on his/her most recent performance evaluation;
 - d) Demonstrated ability to work independently, and ability to develop and successfully meet job-related measurable goals and objectives; and
 - e) Current job requirements do not necessitate a full-time presence on the premises or "in-person" contact with other departmental staff and/or the public.
3. Employees shall request to telecommute by completing a Yolo County Employee Telecommuting Application form attached to this policy as Exhibit A. The application and approval process shall be as follows:
 - a) Employee must submit a written request to his/her immediate supervisor which contains the following information:

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- i) Employee name and classification;
 - ii) Number of days/hours per week requesting to telecommute;
 - iii) Description of the work to be conducted at the remote site; and
 - iv) List of County equipment and/or services needed in order to telecommute.
- b) Supervisor shall consider and evaluate the request in accordance with the provisions of Section 2 above and shall make one of the following recommendations:
- i) approval of the application as requested by employee;
 - ii) approval of the application with modifications noted; or
 - iii) denial of the application with reason(s) noted.

If approval of the application is recommended, with or without modifications, the supervisor shall also indicate the budget impact, if any, for County supplied equipment and/or services.

- c) The employee request to telecommute and the supervisor's recommendation shall be forwarded to the department head for review and acceptance or denial of the supervisor's recommendations. The department head may require that the employee request and the supervisor recommendation be routed to a designated manager prior to being forwarded to the department head for final consideration. The department head may also approve the application with additional modifications to the employee request.
- d) The department head shall forward a copy of the employee application for telecommuting to its respective Human Resources Analyst for review to ensure organizational consistency. Human Resources reserves the right to request modifications to the telecommuting arrangement between the employee and the department.

4. Telecommuter's Terms and Conditions

- a) Each employee authorized to telecommute shall complete the Yolo County Telecommuter's Terms and Conditions attached as Exhibit B.
- b) The Telecommuter's Terms and Conditions shall be discussed between the employee and the supervisor at the time the arrangement is made and entered into and shall be reviewed or renewed at least annually, whenever there is a major job change (such as a promotion), or whenever the telecommuter or supervisor changes positions. Because telecommuting was selected as a feasible work option based on a combination of job characteristics, employee characteristics, and supervisor characteristics, a change in any one of these elements may require a review of the Telecommuter's Terms and Conditions.
- c) Telecommuting is a work arrangement between an individual employee and the employee's supervisor and department head. The telecommuter has no absolute right to telecommute. A supervisor or department head has no authority to require an employee to telecommute. A telecommuting arrangement may be terminated when it is not in the best interests of the department, the employee or both.

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5. Management Rights
- a) Approval of telecommuting requests shall be made at the sole discretion of the supervisor and the department head and will take into consideration the number of days per week in which an individual has requested to telecommute, the requirements of the current job, the number of individuals telecommuting within the work group, and department needs and requirements. An employee must forgo telecommuting whenever notified he/she is needed in the office on a regularly scheduled telecommute day.
 - b) Telecommuting opportunities are based upon program requirements as determined by the supervisor and the department head. Therefore, employees previously participating in a telecommuting assignment are not assured of a telecommuting assignment when returning from a leave of absence or after a job transfer.
 - c) The supervisor and the department head reserve the right to review and/or terminate the individual Telecommuter's Terms and Conditions at any time with or without cause so long as it does not unlawfully discriminate or otherwise violate any other County policy adopted by the Board of Supervisors. Proposed modifications to the Telecommuter's Terms and Conditions shall be discussed between the employee and the supervisor.
 - d) The County reserves the right to review, modify and/or terminate the Telecommuting Policy at any time with or without cause.
 - e) Exercise of these management rights shall not be grievable.
6. Except as set forth in this policy or as agreed to in the individual "Telecommuter's Terms and Conditions," employee rights provided for in the employee's collective bargaining agreement are not affected by participation in a telecommuting program and shall continue to apply.
7. The employee and the supervisor shall determine an appropriate means for reporting work assignments that are completed while telecommuting. One method for reporting work assignments may be completion of the "Telecommuter's Daily Report," a sample of which is attached as Exhibit C. Supervisors shall be responsible for maintaining program evaluation and measurement information for each telecommuting employee. Program evaluation and measurement information may be requested by Human Resources on a periodic basis.
8. Telecommute days are scheduled and will not be substituted without advance approval of the supervisor. Use of sick leave on a scheduled telecommute day must be reported to the supervisor prior to the employee's scheduled hours, or as soon as possible after it is determined sick leave is needed. Use of vacation, floating holiday and other leaves must be approved in writing, in advance, by the supervisor. Overtime, shift differential, and/or other premium pays are not authorized unless approved in writing, in advance, by the supervisor.

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9. As with all County employees, telecommuting employees are expected to adhere to all rules and regulations of the County and the department regarding security and confidentiality of data and information handled in the course of work. The telecommuter will take all precautions necessary to secure County information and equipment at his/her home work location, and will prevent unauthorized access to any County system or information.
10. Telecommuting employees shall comply with the County e-Mail and Internet Usage policies which address permissible uses, prohibited uses, and access and disclosure. Telecommuters shall have no expectation of privacy when using these systems.
11. Designated Home Office Space
 - a) An individual is required to have a designated space within their home, as their home office. This space should provide for privacy and reduction of outside distractions.
 - b) The opportunity to participate in a home telecommute program is offered only with the understanding that it is the responsibility of the employee to ensure a proper work environment is maintained. Failure to maintain a proper work environment, as determined by the County (Attachment A), may provide a reason to terminate the telecommuting arrangement.
 - c) In no event shall customers be served "in-person" at the Telecommuter's place of residence. County shall not be held liable for injuries to third parties and/or members of the employee's family on employee's premises. The County is not liable for damage to the employee's real property.
 - d) A clear understanding of tax implications relating to the home work space is the sole responsibility of the employee. The County of Yolo does not provide or offer tax advice. Employees are encouraged to consult a tax advisor.
12. County Provided Equipment
 - a) Any County supplied equipment is to be used for County purposes only. Employees who discontinue telecommuting at either their own or the department's request, resign, or otherwise terminate employment with the County are required to return such assets upon termination. Failure to return any County supplied equipment will lead to the initiation of collection activities for the value of that property and may lead to disciplinary action.
 - b) Maintenance, repair, and replacement of County owned equipment issued to telecommuters would be the responsibility of the issuing department. In the event of equipment malfunction, the telecommuter must notify his/her supervisor immediately. Repairs to telecommuter owned equipment would be the responsibility of the employee. If repairs will take some time, the telecommuter may be asked to report as directed until the equipment is usable.
 - c) If authorized, the County shall provide for the installation of a dedicated telephone line at the employee's home. The department should contact Yolo County Telecommunications to initiate the work order request. Any telephone charges will be paid directly by the department.

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- d) The approving department shall provide necessary office supplies.
 - e) There shall be no expense reimbursements provided to telecommuting employees. For example, the County is not responsible for the payment of utilities (heat, electricity, etc.), home maintenance costs, or any other telecommuting related expenses. This does not affect employee expense reimbursements relating to travel, training, or materials purchased at the direction of the supervisor.
13. Home offices must be clean and free of obstructions. The home must be in compliance with all building codes. The employee shall not store, keep or use any hazardous materials in the designated work area except in strict compliance with all applicable laws and regulations. Telecommuting employees are responsible for ensuring their homes comply with these health and safety requirements and to certify as such as part of their "Telecommuter's Terms and Conditions." The supervisor or department head may deny an employee the opportunity to telecommute or may rescind a telecommuting arrangement based on a suspected lack of safety or hazardous materials in the designated home office space. The County may also have the designated home office space inspected from time to time as deemed appropriate to ensure compliance with health and safety requirements. Inspections will be made upon reasonable advance notice and will be conducted by a County-designated representative. Failure to make or keep an inspection appointment may be reason to terminate a telecommuting agreement.
14. If an employee incurs a work-related injury while telecommuting, worker's compensation law and rules apply. An employee must notify his/her supervisor immediately and complete all necessary and/or County requested documents regarding the injury.

EXHIBIT A



**YOLO COUNTY
EMPLOYEE TELECOMMUTING APPLICATION**

Instructions: *In order to be considered for telecommuting, this application must be filled out in its entirety. This application will be evaluated based on the number of days/hours per week an individual has requested to telecommute, the requirements of the applicant's current job, the number of individuals telecommuting within the work group, and department needs and requirements.*

TO BE COMPLETED BY EMPLOYEE

Name: _____ Department: _____

Job Title: _____ Telephone Number: _____

Proposed Schedule: Mon Tues Wed Thurs Fri

Hours Telecommuting: _____ _____ _____ _____ _____

Total Number of Telecommuting Hours Requested Per Week: _____

Description of Work Conducted while Telecommuting:

County Equipment and/or Services Required:

- | | | |
|-----------------------------------|---|---|
| <input type="checkbox"/> Computer | <input type="checkbox"/> Telephone Line | <input type="checkbox"/> Software |
| <input type="checkbox"/> Printer | <input type="checkbox"/> Cell Phone | <input type="checkbox"/> Internet Service |
| <input type="checkbox"/> Pager | <input type="checkbox"/> IT Technical Support | <input type="checkbox"/> Other: _____ |

I understand that telecommuting is a voluntary arrangement between the supervisor, the department, and the employee, and is not an entitlement or employee benefit. It may be terminated for any reason, at any time, by any party, with or without cause, and is not subject to the grievance procedure. I have read and will comply with all telecommuting policy and guidelines if approved for telecommuting.

Signature: _____

Date: _____

TO BE COMPLETED BY SUPERVISOR

I have verified the following with regard to the above-named employee:

- Is a regular, full-time employee who has successfully passed his/her probationary period.
- Has completed a minimum of one year in the current area of responsibility.
- Received a rating of at least Meets Standards on his/her most recent performance evaluation.
- Past work performance demonstrates the ability to work independently.
Comments: _____
- Is able to develop and successfully meet job-related measurable goals and objectives.
Comments: _____
- Current job requirements do not necessitate a full-time presence on the premises or "in-person" contact with the public or other departmental staff.
Comments: _____

Supervisor's Comments: (Attach additional sheets if necessary)

Budget Impact: _____

- Approval of application as requested by employee
- Approval of application with modifications noted in "Comments" above
- Denial of application for telecommuting (see "Comments" above)

Signature: _____ Date: _____

TO BE COMPLETED BY DEPARTMENT HEAD

Department Head's Comments: (Attach additional sheets if necessary)

- Approval of application as submitted by supervisor
- Approval of application with modifications noted in "Comments" above
- Denial of application for telecommuting (see "Comments" above)

Signature: _____ Date: _____

FOR HUMAN RESOURCES USE ONLY

Comments: _____

Signature: _____ Date: _____

EXHIBIT B

TELECOMMUTER'S TERMS AND CONDITIONS

1. This telecommuting arrangement shall be effective (start date) through (end date) .
2. The employee, (Employee name) , will telecommute on the following schedule:

<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thurs</u>	<u>Fri</u>
_____	_____	_____	_____	_____

3. Telecommute days are scheduled and will not be substituted without advance approval of the supervisor. Use of sick leave on a scheduled telecommute day must be reported to the supervisor prior to the employee's scheduled hours, or as soon as possible after it is determined sick leave is needed. Use of vacation, floating holiday and other leaves must be approved in writing, in advance, by the supervisor. Overtime, shift differential, and/or other premium pays are not authorized unless approved in writing, in advance, by the supervisor.
4. The employee will perform the following work at the telecommuting site:

5. Reports on telecommuting work assignments shall be reported to the employee's supervisor in the following manner and frequency:

6. In addition to expendable office supplies provided by the County, the following County equipment and/or services shall be loaned to the employee for use in telecommuting:

<u>Equipment</u>	<u>Brand Name</u>	<u>Serial Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other: _____

Employee agrees to maintain the above equipment in operating condition; to operate it safely; and to return the equipment to the supervisor if employee discontinues telecommuting at either his/her own or the department's request, resigns, or otherwise terminates employment with the County. Failure to return any County supplied equipment will lead to the initiation of collection activities for the value of that property and may lead to disciplinary action.

No telecommuting related expense reimbursements shall be made to telecommuting employees.

7. The employee shall be provide and be responsible for the use, maintenance, and repair of the following equipment for use in telecommuting:

8. Employee will telecommute from the following designated workstation (describe exact location in home):

A "Telecommuting Safety Checklist," Attachment A has been completed and is made a part of this Agreement. Employee certifies that the home office must be clean and free of obstructions. The home must be in compliance with all building codes. The employee shall not store, keep or use any hazardous materials in the designated work area except in strict compliance with all applicable laws and regulations. The supervisor or department head may deny an employee the opportunity to telecommute or may rescind a telecommuting arrangement based on a suspected lack of safety or hazardous materials in the designated home office space. The County may also have the designated home office space inspected from time to time as deemed appropriate to ensure compliance with health and safety requirements. Inspections will be made upon reasonable advance notice and will be conducted by a County-designated representative. Failure to make or keep an inspection appointment may be reason to terminate a telecommuting agreement.

9. Employee agrees to report any occupational injury or illness to his/her supervisor immediately and complete all necessary and/or County requested documents regarding the injury.
10. Employee shall be available pursuant to the following methods and schedule (e.g., by telephone during all scheduled telecommute hours):

Employee agrees to call the department office to obtain his/her messages or Voice Mail at least _____ times per telecommuting day.

11. Employee must attend the following meetings/events at the regular work site:

Office needs take precedence over telecommute days. Employee must forgo telecommuting if needed in the office on a regularly scheduled telecommute day.

12. Employee shall comply with the County e-Mail and Internet Usage policies which address permissible uses, prohibited uses, and access and disclosure. Employee shall have no expectation of privacy when using these systems.
13. It is the responsibility of the telecommuter to maintain the confidentiality policies of the Department, and to protect County assets, information and information systems at the remote work location.

CERTIFICATION

I understand that telecommuting is a voluntary arrangement between the supervisor, the department, and the employee, and is not an entitlement or employee benefit. It may be terminated for any reason, at any time, by any party, with or without cause, and is not subject to the grievance procedure. I certify that I have read the Telecommuting Policy and these Telecommuting Terms and Conditions, that I understand their contents, and that I will abide by their terms.

Employee Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

Dept. Head Signature: _____

Date: _____

TELECOMMUTING SAFETY CHECKLIST

The following checklist must be completed by the telecommuter and attached to the Telecommuter's Agreement.

Home offices must be clean and free of obstructions. The home must be in compliance with all building codes. The employee shall not store, keep or use any hazardous materials in the designated work area except in strict compliance with all applicable laws and regulations. Telecommuting employees are responsible for ensuring their homes comply with these health and safety requirements and to certify as such as part of their "Telecommuter's Terms and Conditions." The supervisor or department head may deny an employee the opportunity to telecommute or may rescind a telecommuting arrangement based on a suspected lack of safety or hazardous materials in the designated home office space. The County may also have the designated home office space inspected from time to time as deemed appropriate to ensure compliance with health and safety requirements. Inspections will be made upon reasonable advance notice and will be conducted by a County-designated representative. Failure to make or keep an inspection appointment may be reason to terminate a telecommuting agreement.

WORK SPACE

- Telecommuter has a separate, clearly defined work space that is kept clean and orderly, and is not used for other purposes.
- The work area is adequately illuminated with lighting directed toward the side or behind the line of vision, not in front or above it.
- Exits are free of obstructions.
- Supplies and equipment (both departmental and employee-owned) are in good condition.
- The work area is well ventilated and heated.
- Storage is organized to minimize risks of fire and spontaneous combustion.
- All extension cords have a grounding conductor.
- Exposed or frayed wiring and cords are repaired or replaced immediately upon detection.
- Electrical enclosures (switches, outlets, receptacles, and junction boxes) have tight fitting covers or plates.
- Surge protectors are used for computers, fax machine, and printers.
- Heavy items are securely placed on sturdy stands close to walls.
- Computer components are kept out of direct sunlight and away from heaters.

EMERGENCY PREPAREDNESS

- Emergency phone numbers (nearest hospital, fire department, and police department) are posted in home work site.
- A first aid kit is easily accessible and periodically inspected and replenished as needed.
- There is an accessible, portable fire extinguisher which is rated for A, B and C (paper, liquid, and electrical) fires. Extinguisher is serviced on an annual basis.
- Smoke detectors are installed and batteries are checked.

ERGONOMICS

- Desk, chair, PC, and other equipment are of appropriate design and arranged so that:
- Neck and shoulders are not stooped to view the task.
- There are no pressure points on any part of the body (wrists, forearms, back of legs).
- There is no glare on the terminal screen.
- Work can be performed without eye strain.
- There is no strain on any part of the body.

WORKPLACE SAFETY AND SECURITY

- Provided with a copy of Administrative Policy 3-9 - Drug & Alcohol Policy and Testing Procedure
- Provided with a copy of Administrative Policy 3-11 – Workplace Security and Safety Policy

COMMENTS:

EMPLOYEE CERTIFICATION

I understand that I may be denied the opportunity to telecommute, or may have my telecommuting agreement rescinded, based on suspected lack of safety or hazardous materials in the designated home office space. Further, I will adhere to any and all County policies relating to employee safety and security.

Date of Inspection: _____ Employee Signature: _____

SUPERVISOR APPROVAL

I have reviewed the safety checklist and have discussed safety expectations with the telecommuter.

Supervisor Signature: _____ Date: _____

EXHIBIT C

- SAMPLE -
TELECOMMUTER'S DAILY REPORT

Name: _____ Date: _____ Hours: _____

NO.	TASK	PROJECT	TIME
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

TOTAL:

Describe benefits of working at home on this day:

Describe difficulties encountered and proposed solutions:

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____