Alternative Work Agreement
The Ohio State University’s Wexner Medical Center (OSUWMC)
Information Technology Department (IT)

Definitions:
1. **Telecommuting:** The practice of working from a remote location, usually a home office, by electronically linking to OSUWMC infrastructure.
2. **Varied/Fixed Schedules:** A fixed non-standard schedule that enables a staff member to vary their total daily hours per day to meet the basic work week requirements. The frequency of adjusting the work week schedule must be kept to a minimum to maintain normal operations.
3. **Compressed Schedules:** Fixed work schedule that enables a full-time employee to complete the basic work week requirements in less than 5 business days.
4. **Flexible Schedule Arrangement:** Flexible work schedule that permits some flexibility within the days/hours of the basic work week. Due to the nature of supporting applications at the medical center, specific documentation should be agreed upon regarding availability during flex time. This should include availability expectations for on-site and off-site time.
   a. **These arrangements aren’t intended to serve as a permanent schedule change. To pursue a permanent schedule change, staff should talk with their managers.**
5. **Basic Work Week:** The days and hours within an administrative workweek that make up the employee’s regular schedule. In IT Applications, the typical basic work week days are Monday-Friday.

Eligibility Criteria:
1. Staff must have been an employee with the University for a minimum of 1 year and have a hospital performance evaluation on file.
2. Staff must receive an Achieves/Meets or higher on most recent performance evaluation. Supervisors and above are not eligible to use the Alternative Work agreements at this time.
3. Both Staff and Manager agree that the Alternative Work option(s) is appropriate and will not negatively impact staff, manager, team, peers or customers.
4. Compressed schedules are only available to full-time employees.

General Expectations:
1. Alternative Work options are not an employee benefit intended to be available to the entire IT Department or to other departments at this time. As such, no OSUWMC employee is entitled to, or guaranteed the opportunity to engage in such agreement.
2. Staff’s salary, job responsibilities, and benefits will not change due to participation in this program.
3. Staff agrees to comply with all existing job requirements now in effect in the office.
4. Staff’s total number of work hours is not expected to change during the program.
   a. Nonexempt (hourly) staff members will be responsible for providing information for their weekly time sheet according to standard OSUWMC policy. In the event that the Staff expects to work more than the standard number of hours, this must be discussed and approved in advance by their manager, just as any overtime scheduling would normally have to be approved. The OSUWMC On-call Policy 02-31 will govern any time deemed as On-call.
   b. Exempt (salaried) staff members are not required to complete a weekly time sheet.
5. Staff’s daily/weekly work schedule is subject to renegotiation at any time. Schedule changes can be made at the discretion of the manager.
6. Staff is required to have a conversation with and obtain approval from their manager before beginning any Alternative Work Arrangement.
7. There may be times when Staff will be requested to come into the office on a telecommuting or flex day. The staff member is expected to be able to reach their office location within their normal commute time. OSUWMC Managers will try to minimize these unplanned events.

8. There may be weeks when Staff are required to spend more time than planned (up to the full five days) in the office. There may days when these days fall on a “flex” day. (Examples include upgrades, updates, live events or other support/on-call needs.)

9. Staff and Managers will work together to accommodate benefit time use surrounding days/weeks where Alternative work arrangements are in place.
   a. During a University holiday weeks – regular schedules will apply.
   b. During weeks/days when staff has requested benefit time, staff and manager will agree on how to accommodate.
      i. The easiest solution for these planned events is to apply regular schedules during weeks when benefit time is used.

10. Telecommuting Expectations:
   a. The percentage of work that employees are able to complete from home will be determined by IT Management. Depending on the position, employees will be allowed to telecommute up to a maximum of 80% of their weekly schedule but no less than 20%. This percentage may be re-evaluated throughout or after the pilot program to ensure that the needs of the organization are being met. In addition, you are required to have a conversation with your manager about your mandatory office day.
   b. OSUWMC will provide a laptop that is to be used for business purposes only. OSUWMC will also provide other job related devices that will allow the staff person to work from home (headsets, soft phone, and laptop). All of these items remain the property of OSUWMC and must be returned to OSUWMC upon request, in case of an extended illness, upon your resignation or termination, or if the telecommuting program ends. When they are to be returned, you agree to return them yourself or to allow OSUWMC to arrange to pick them up from your home. In addition, staff members must have a reliable high speed internet connection and the staff person is responsible for the expense of that line. Devices at your OSUWMC on-site work location will be shared devices.
   c. Office supplies as needed will be provided by OSUWMC; your out-of-pocket expenses for other supplies will not be reimbursed unless by prior approval of your manager. Also, OSUWMC will not reimburse you for travel expenses to and from the office on days when you come into the office, nor for any home-related expenses such as construction, renovations, heating/air conditioning, lighting, or electricity.
   d. The computer, modem, software, and any other equipment or supplies provided by OSUWMC are provided primarily for use on OSUWMC assignments. The equipment and software should not be used by other household members or anyone else. OSUWMC-owned software may not be duplicated except as formally authorized.
   e. The security of company property in your home is as important as it is in the office. You are expected to take reasonable precautions to protect the equipment from theft, damage, or misuse. You may want to contact your homeowner's insurance carrier to determine whether or not you need to purchase additional insurance.
   f. You will be expected to apply approved safeguards to protect confidential information, including patient information. Work performed at the home location is considered official Health System business. All records, papers, and correspondences will be safeguarded. You are expected to abide by all other OSUWMC policies and procedures regarding the safekeeping of confidential
information. Any costs or expenses of replacing or damages resulting from the modification disclosure or destruction of such data at the employee’s home will be borne by the employee when such modification, disclosure or destruction occurs through negligence or misconduct of the employee.

g. OSUWMC is interested in your health and safety while working at home just as it is while you work in the office. For this reason, you should maintain a separate, designated work area at home. OSUWMC has the right to visit your home work area to see if it meets company safety standards; such visits will be scheduled with at least 24 hours’ advance notice.

h. Any equipment provided should be placed where it is adequately supported and there is no danger of it falling. It should be connected to a properly grounded electrical outlet and all wires kept out of walkways. If you have any questions about the adequacy/safety of your home work area, please discuss this with your manager.

i. The expectation of this arrangement is that you will conduct yourself while at home as if you were at work. OSUWMC understands that distractions will happen in your home work environment. It is your obligation to take reasonable steps to ensure that these distractions do not hinder your performance, productivity, or customer service.

j. It will be your responsibility to determine any income tax implications of maintaining a home office area. OSUWMC will not provide tax guidance nor will the company assume any additional tax liabilities. You are encouraged to consult with a qualified tax professional to discuss income tax implications.

Accessibility Expectations:
1. Work hours/schedules will be agreed upon with manager. Documentation of weekly days/hours will be detailed in this arrangement. Staff should maintain appropriate information on their Outlook Calendar that supports their work schedule.
   a. Responsible for calendar, proper planning and coverage for meetings.
2. Staff will be available via soft phone, Jabber, pager and email during their telecommuting agreements.
3. Telecommuting or flex times/days are not considered “days off” from work. Monday-Friday is still considered normal business days in IT. If Staff plan to be unavailable (out of town), direct communication and coordination should occur at least 7 days prior to the flex time. Manager and Staff will then agree on an appropriate action to take, e.g. benefit time can be used.
4. Staff will demonstrate availability during the agreed upon hours/days and will do the following at beginning and end of work day to ensure availability:
   a. Email to manager with subject of
      i. Upon beginning of day
         1. Telecommuters: WFH Communicator Ready!
         2. Alternative Schedulers: FSA Communicator Ready!
      ii. At closure of day
         1. Telecommuters: WFH Communicator Day End!
         2. Alternative Schedulers: FSA Communicator End!
5. Staff will return pages, calls and emails as expected in the normal course of work.

Managers to complete this section and review with Staff
[Staff Name Here] is engaging in the following Alternative Work Option(s):
1. Telecommuting
   a. Document days/hours working here
2. Fixed/Varied Schedule
   a. Document days/hours of schedule here
3. Compressed Schedule
   a. Document days/hours of schedule here

[Manager Name Here] will meet with Staff monthly and will review the description of work, accessibility and productivity information from review month. [Insert tools here on how managers and staff can review this together] Suggested tools to aid in discussion:
   1. Clarity PMO Tool
   2. Project Review/Updates
   3. Planning/Calendaring discussions
   4. Expectations; description of work, accessibility, productivity information/measurement, etc.

[Manager Name] and [Staff Name] have reviewed this agreement together. By signing below, both parties have read and understand this agreement and accept its conditions.

________________________________DATE ______________
Staff Signature

________________________________DATE ______________
OSUWMC Manager