

Louisiana Community and Technical College System Internal Policy

Title: Telecommuting

Authority: Board Action	Original Adoption: February 7, 2017
	Effective Date: February 7, 2017
	Last Revision: Initial

Purpose:

The Louisiana Community & Technical College System (LCTCS) considers telecommuting to be a viable alternative work arrangement in cases where individual, job and supervisor characteristics are best suited to such an arrangement. Telecommuting allows employees to work at home, on the road or in a satellite location for all or part of their defined work week. Telecommuting is a work alternative that may be appropriate for some employees and some jobs. It is not an entitlement; it is not a company-wide benefit; it must serve the best interest of the System; and it in no way changes the terms and conditions of employment.

Telecommuting Terms and Conditions:

Any telecommuting arrangement between LCTCS and its employees must be requested and approved using the LCTCS Telecommuting Agreement form. The Agreement must be approved by the immediate Supervisor, the Department Head and the Appointing Authority. The employee's participation as a telecommuter is voluntarily and is available as long as the employee is deemed eligible at the discretion of the LCTCS. Telecommuting at an alternate work location is not an entitlement or benefit of employment. Either party may cancel the employee's voluntary participation as a telecommuter, with or without cause, preferably with 30 days' notice given by the telecommuter or LCTCS. The LCTCS will not be responsible for costs, damages, or losses resulting from cessation of participation as a telecommuter.

The LCTCS reserves the right to monitor work product and inspect alternate work sites. Prior to approval by LCTCS of the telecommuting agreement, LCTCS staff should inspect the area to be used as the employee's home office/work area. If that is not feasible, staff may request that the employee provide photos of the area that the employee plans to use as his or her home office/work area. The LCTCS may monitor email, electronic review of work performed, conduct unannounced visits or inspections during normal business hours and/or any other method used to adequately document and judge the work product and performance of the telecommuter.

Environment

Consistent with the organization's expectations of information security for employees working at the office, telecommuting employees will be expected to ensure the protection of proprietary company and student information accessible from their home office. Steps include use of locked file cabinets and desks, regular password maintenance, and any other steps appropriate for the job and the environment. The employee agrees to establish an appropriate work environment within his or her home for work purposes.

Important considerations when setting up the telecommuting workspace are:

- The work area should be quiet and free of distractions.
- Lighting should be adequate without glare.
- Your desk should be adequate and designed to safely accommodate the equipment that you must use such as a computer, printer, fax, etc.
- Have a comfortable chair with adequate back support
- Equipment that is used must be available for your exclusive use while telecommuting and must be compatible with the equipment used at the primary work site.
- Each employee must make arrangements with his/her supervisor regarding the use of state equipment at the telecommuting site, but in no event may the use of such equipment impede access to such equipment, nor change ownership of such equipment.

LCTCS will not be responsible for costs associated with initial setup of the employee's home office such as remodeling, furniture or lighting, nor for repairs or modifications to the home office space. Injuries sustained by the employee while at his or her home-work location and in conjunction with his or her regular work duties are normally covered by the employer's workers' compensation policy. Telecommuting employees are responsible for notifying the employer of such injuries in accordance with LCTCS safety and workers' compensation procedures. The employee is liable for any injuries sustained by visitors to his or her worksite.

Travel

Expenses for required travel, to include airfare (and related) and lodging, will be submitted to the System. Pre-approval and expense reimbursement will be regulated by and follow System travel authorization and reimbursement procedures. All travel shall be in compliance with State of Louisiana, Office of State Travel, PPM49 guidelines. All travel requires prior approval by the Appointing Authority.

Equipment

LCTCS may provide equipment to support the work of its telecommuters. Equipment supplied by the organization will be maintained by the organization. Equipment supplied by the employee, if deemed appropriate and pre-approved by the organization, will be maintained by the employee. LCTCS is not responsible for insuring employee owned equipment and accepts no responsibility for damage or repairs to this equipment. LCTCS reserves the right to make determinations as to appropriate equipment, subject to change at any time. Equipment supplied by the organization is to be used for business purposes only. The telecommuter will be required to sign an inventory of all office property and agrees to take appropriate action to protect the items from damage or theft. Upon termination of employment, all LCTCS property will be returned to the LCTCS, unless other arrangements have been made.

System Access

The telecommuter will be granted data access in a manner appropriate to the position held and in compliance with all regulatory requirements governing privacy. The telecommuter will take any and all steps necessary to maintain data security per System procedures.

Supplies

LCTCS will supply the employee with appropriate office supplies (pens, paper, etc.) for successful completion of job responsibilities. LCTCS will also reimburse the employee for all other business-related expenses agreed upon such as phone calls and shipping costs that are reasonably incurred with job responsibilities.

Working Conditions

As the change of venue from on-site to off-site will limit face-to-face interaction with System personnel, the employee will make every reasonable effort to leverage technology to facilitate regular, appropriate communication. The telecommuter will communicate at a level consistent with employees working at the office or in a manner and frequency that seems appropriate for the job and the individuals involved. The employee and manager will agree on the manner and frequency of communication. The employee agrees to be accessible by phone or electronic means within a reasonable time period during the agreed-on work schedule. The employee will focus on work output and completion of objectives rather than on time-based performance. However, it is agreed upon that the employee will be generally available to communicate during the staff working hours of the System office and be available as agreed upon and as possible "on-call" during hours/days the System Office is closed. The telecommuter's working hours will be defined by his or her supervisor, keeping in mind that System Office hours are 8 am – 5:00 pm Central Standard Time.

With consideration to location-based events outside of the employee's control (i.e. hurricanes), the employee will make all reasonable attempts to provide advance notice of probable communication outages and engage appropriate alternative protocols that facilitate the continuance of projects. In the event of a scheduled or unforeseen circumstance that requires the employee to be individually unavailable, the employee will request annual or sick leave, as appropriate, using established System procedures.

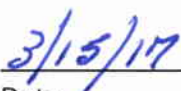
Evaluation

Evaluation of telecommuter performance will be consistent with that received by employees working at the System Office in both content and frequency focusing on work output and completion of objectives, as well as time-based performance.

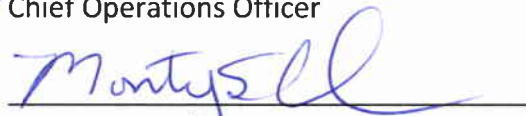
AUTHORIZING SIGNATURES:



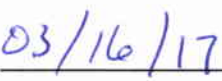
Joseph F. Marin
Chief Operations Officer



Date



Dr. Monty Sullivan
System President



Date

Louisiana Community & Technical College System

Telecommuting Agreement

EMPLOYEE NAME (Last, First, M.I.)

EMPLOYEE ID NUMBER

JOB TITLE

PRIMARY WORK LOCATION

1. The following work locations and schedules are requested in support of the Telecommuting Agreement:

Workplace or Primary Work Site	Telecommuting Location or Alternate Work Site
Department:	Designated Area:
Address:	Address:
Phone Number(s):	Phone Number(s):
E-mail Address:	E-mail Address:

Work Schedules - Indicate Hours and Location (T =Telecommute or S = System Office)

WEEK #1	Work Hours	Lunch Period	Location (T or S)	WEEK #2	Work Hours	Lunch Period	Location (T or S)
Monday				Monday			
Tuesday				Tuesday			
Wednesday				Wednesday			
Thursday				Thursday			
Friday				Friday			
Saturday				Saturday			
Sunday				Sunday			

Time and attendance will be tracked in the same manner as at the primary work site.

2. LCTCS assets to be used at the employee's residence or other approved alternate work location.
(check applicable items and provide Property Control tag and/or serial numbers where applicable)

	Asset Name	State Tag Number	Serial Number
<input type="checkbox"/>	Laptop/Surface		
<input type="checkbox"/>	Monitor		
<input type="checkbox"/>	CPU		
<input type="checkbox"/>	Keyboard		
<input type="checkbox"/>	Mouse		
<input type="checkbox"/>	Docking Station		
<input type="checkbox"/>	Power Strip		
<input type="checkbox"/>	Cell Phone/Blackberry		

<input type="checkbox"/>	In-house Phone		
<input type="checkbox"/>	Printer		
<input type="checkbox"/>	Router		
<input type="checkbox"/>	Broad Band Access		
<input type="checkbox"/>	Other (List)		

3. LCTCS or other information systems and software to be accessed from employee's residence or alternate work site:

4. Job duties/tasks to be performed away from primary work site; specify any assigned job duties that cannot be performed away from the primary work site: (additional pages may be attached if necessary)

5. Describe manner and frequency of communication, availability for telephone, e-mail contact, fax, etc.:

6. Describe how productivity will be monitored or list the performance indicators that will be evaluated:

7. Additional Comments:

APPROVAL OF TELECOMMUTING REQUEST

As a condition of this telecommuting agreement, I acknowledge and agree to allow the LCTCS to engage in the monitoring of my e-mail, electronic review of my work, unannounced visits or inspections at my alternate work site during normal business hours, and/or any other method used to adequately document and judge my work product and performance.

Employee's participation as a telecommuter is voluntary and is available only as long as Employee is deemed eligible at the discretion of the LCTCS. Telecommuting at an alternate work location is not an entitlement or benefit of employment. Either party may cancel Employee's voluntary participation as a telecommuter, with or without cause, upon reasonable notice thereof, in writing, to the other. The LCTCS will not be held responsible for costs, damages, or losses resulting from cessation of participation as a telecommuter. This agreement is not a contract of employment and may not be construed as one.

I have read and understand this Agreement and the Telecommuting Policy and agree to abide by and operate in accordance with the terms and conditions described. I agree that the sole purpose of this agreement is to regulate telecommuting and that it does not constitute an employment contract or an amendment to any existing contract and may be cancelled at any time. I agree that, among other things, I am responsible for adhering to any agreed-upon work schedule, furnishing and maintaining my alternate work site in a safe manner, employing appropriate security measures, proper maintenance of LCTCS equipment, damages to LCTCS equipment resulting from gross negligence, damages or loss to my personal equipment, cost of local phone calls, and protecting LCTCS and state assets, information and systems.

Telecommuting Agreement Effective Date: _____

Employee's Signature

Date

Supervisor's Signature

Date

Department Head's Signature

Date

Appointing Authority Signature

Date

A copy of the Telecommuting Work Agreement must be provided to the employee and the LCTCS Office of Human Resources. Any subsequent revisions to the agreement must also be provided to these parties.