



# CALIFORNIA STATE UNIVERSITY, BAKERSFIELD

## Office of Human Resources

### Telecommuting Policy and Guidelines *for Employees Not Represented by CSUEU*

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#### **I. PURPOSE**

The purpose of this policy is to define the telecommuting program for California State University, Bakersfield (the University) and the guidelines and rules under which it will operate. This policy applies to all telecommuting activities for employees of the University not represented by CSUEU and is authorized by California Government Code sections 14200-14203. All managers and telecommuters should be familiar with the contents of this policy.

The University supports the use of a telecommuting work option for home offices in positions whose job duties can be performed away from campus. This policy recognizes the benefits to the University available through a planned and managed telecommuting program.

By definition, telecommuting is working in a space specifically set aside as an office in an employee's residence (home office). 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 that a proper work environment is maintained (e.g. dependent care arrangements are made so as not to interfere with the work, personal disruptions such as non-business telephone calls, and visitors are kept to a minimum, etc.). Failure to maintain a proper work environment provides cause for an employee's immediate termination from this program.

Telecommuting opportunities are based upon program requirements as determined by the appropriate Cabinet Officer.

#### **II. EMPLOYEE SELECTION**

Telecommuting is only feasible for those job duties that can be performed away from the main office. Participation shall be based on specific, written, work related criteria established by the employee's appropriate administrator. The written Telecommuter's Agreement shall contain the work schedule, Work Performance Expectations, and duration of the agreement. Such selection criteria for telecommuting candidates may include such factors as; employee past work performance with a history of reliable and responsible discharge of work duties; employee ability to provide alternative work space and necessary, appropriate equipment; the feasibility to perform job duties in whole or in part, away from the campus office; and a full understanding of the operations of the organization. The appropriate Cabinet Officer must approve all proposed employee selections and work schedules. Employee participation in home office telecommuting is voluntary and at the discretion of the appropriate administrator with final approval of the area Cabinet Officer.

#### **III. PROCEDURES**

##### **a. Work Schedule**

Telecommuters shall maintain regular contact with supervisors and co-workers. Home office telecommuters may be required to spend a minimum number of days per week in the main office, except under unusual conditions approved in advance by the appropriate administrator.

University operational needs take precedence over telecommute schedules. The employee will forgo telecommuting if needed in the office or elsewhere on the regularly scheduled telecommute day. All telecommuting work schedules are discretionary to management and require prior management approval. The work schedule shall be consistent with the operational



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needs of the employee's work group and the provisions of the employee's collective bargaining agreement. As with any work schedule, temporary telecommuting assignments or changes in work schedules may be made at management's discretion to meet management needs or to accommodate employee's appropriate needs and in compliance with the appropriate collective bargaining agreement.

#### **b. Pay, Attendance, and Leave**

All pay and leave will be based on the employee's official CSUB position. The employee's time and attendance will be recorded as if performing official duties at the campus.

Employees must obtain supervisory approval before taking leave in accordance with established department procedures. The employee agrees to follow established procedures for requesting and obtaining approval of leave. If an employee is sick and unable to work in their telecommuting location, they are required to report those absences when they are unable to work as they would in a normal office setting.

For non-exempt employees: overtime shall be authorized in advance by management in accordance with the provisions of the employee's collective bargaining agreement. An employee working overtime approved in advance will be compensated in accordance with applicable laws and rules. The employee understands that failing to obtain proper approval for overtime work may result in the telecommuting agreement being canceled.

#### **c. Employee Requirements**

As with all State employees, telecommuters are expected to adhere to all the rules and regulations in the State Administrative Manual, and all University policies and procedures, including those pertaining to security and confidentiality for university infrastructure and documents on the computer, its data and information, and any other information handled in the course of work. Telecommuters shall comply with computer software licensing agreements, University policy and federal laws, including copyright and patent laws. Products, documents and other records used and/or developed while working under a telecommuting agreement will remain the property of, and be available to, the University.

#### **d. Equipment Needs and Cost Factors**

As appropriate, telecommuters will require a computer with a modem or similar means to communicate with people and access the information needed to perform their responsibilities. It is essential that the equipment used at the home office be compatible with the main office equipment. The use of a laptop computer may be considered. An employee's own equipment may be used. A telephone is also an essential requirement so that the employee may stay in contact with the University. Voice and data communications may be handled through the employee's residential phone, if volume is not heavy.

State provided equipment is to be used only by the telecommuting employee. The equipment must be protected against damage and may be used for University work only. University-owned equipment will be serviced and maintained by the University. Employees must have all state property that is removed from their University workplace documented in accordance with the University Equipment Checkout Policy.



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#### **e. Maintenance, Repair, and Replacement**

Maintenance and repair of State owned equipment issued to telecommuters, as described on the Equipment Checklist for Telecommuters” form, would be the responsibility of the University. Replacement of State owned equipment, which is stolen or destroyed, would be the responsibility of the telecommuter. Replacement cost will be the responsibility of the telecommuter. In the event of equipment malfunction, the telecommuter must notify his/her supervisor immediately. If repairs will take some time, the employee may be asked to report to the main office until the equipment is usable. Repairs to State equipment that result from employee negligence, recklessness or intent to damage, may be the responsibility of the employee. Repairs to telecommuter owned equipment would be the responsibility of the employee. The employee shall release the University from any and all liability resulting from the use of his/her own equipment.

#### **f. Health and Safety**

Telecommuting employees are responsible for designating one area in their house as the work site which shall be approved by their supervisor for ensuring that their home work site complies with health and safety requirements and must so certify as part of their “Telecommuter’s Agreement.” A “Telecommuter’s Safety Checklist” must be completed and signed by the employee before telecommuting privileges are granted. The University may deny an employee the opportunity to telecommute or may rescind a telecommuting agreement based on safety considerations or the needs of the University at any time. If an employee incurs an injury while telecommuting, worker’s compensation law and rules apply. Employees must immediately notify their supervisors and complete all necessary and/or university-requested documents regarding the injury.

“Telecommuting” is defined as the actions directly related to working in the home approved work site, and does not include actions that the telecommuter may take during break periods from working. These non-covered actions would include all actions that the employee would not be able to perform in his/her regular office, or which are directly related to the operation of the home. Examples of such non-covered actions include caring for children, domestic tasks, yard work, checking mail, retrieving the newspaper, etc.

#### **g. Employee Rights**

If employees have questions or concerns regarding this program or their participation in this program, they may contact the Office of Human Resources.

#### **h. Performance Standards and Evaluation**

Performance standards and employee accountability for quantity and quality of their work will not change due to participation in the telecommuting program. As in "regular" office assignments, supervisors and employees must discuss and understand what is expected to be produced during telecommuting and when it is due. Supervisors and employees must also arrange when/how to make contact with each other on telecommuting day(s). The evaluation of the employee's job performance will be based on established standards. Performance must remain in the category of "Satisfactory" or above to remain in the Telecommuting Program.



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#### **IV. TERMINATION OF PARTICIPATION**

Because participation in telecommuting is a bilateral voluntary agreement, the University may change, alter, or terminate an individual employee's participation in the program without cause, at any time, for any reason. Notice will be provided in accordance with the appropriate contract provisions. Termination of the employees' participation for cause may be immediate and does not require advance written notice. The appropriate administrator will make arrangements for the employee to begin working at the main office as quickly as possible. The employee may also request to terminate participation. Upon termination of the telecommuting agreement, the employee agrees to immediately return all University property.

#### **V. TELECOMMUTER'S AGREEMENT AND SUPERVISOR'S CHECKLIST**

The Telecommuter's Agreement documents the mandatory policies in effect and supercedes any other agreements between the supervisor and the telecommuter. This must be signed by both parties prior to the start of telecommuting and must be reviewed and renewed at least annually to ensure that these guidelines for participating in the program are in compliance and well understood. This agreement, its attachments and any revisions are not contracts or promises of employment. Nothing in this Agreement guarantees employment for any specific term.

#### **VI. RENEWAL OF TELECOMMUTING AGREEMENTS**

Each telecommuter's agreement should be discussed and renewed annually, whenever there is a major job change, or whenever the telecommuter or manager changes positions. Because telecommuting was selected as a feasible work option based on a combination of job characteristics, employee characteristics, and manager characteristics, a change in any one of these elements will also require a review of the telecommuting arrangement. Telecommuting is a work arrangement between an individual employee and his or her manager. The employee has no automatic right to telecommute nor continue participation in the program.

#### **VII. TAX/EXPENSE IMPLICATIONS**

Any and all tax implications of utilizing a home office deduction are the responsibility of the employee. The University 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 employee will be reimbursed for authorized expenses incurred while conducting official duties at the Telecommuting location, including business calls, paper and other supplies.



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### TELECOMMUTER'S AGREEMENT

Both the manager and the telecommuter understand that home-based telecommuting is a voluntary option exercised by both parties and can be discontinued by either party for any reason at any time.

The initial trial period for this agreement shall begin \_\_\_\_\_ and terminate on or before \_\_\_\_\_. If the agreement is not revoked or terminated prior to \_\_\_\_\_ then, the telecommute agreement shall continue beginning \_\_\_\_\_ and terminate on or before \_\_\_\_\_ provided the total duration is no longer than one year. Upon expiration of the effective time period, the agreement must be renewed prior to continued participation in the University's telecommuting program.

The "Work Performance Expectations" form outlines the job duty and responsibility expectations of the telecommute assignment. By signing this agreement the employee understands and agrees to satisfactorily meet the performance expectations as identified on the "Work Performance Expectations" form.

California State University, Bakersfield (the University) would provide the following business-related expenses:

1. \_\_\_\_\_ (i.e. charges for business related long distance telephone calls, office materials, etc.)
2. \_\_\_\_\_
3. \_\_\_\_\_
4. Maintenance and repairs to State owned equipment for damage not due to employee's negligence, recklessness or intent.

Any expense claims will be submitted with appropriate receipts, bills, or other verification of the expense.

Telecommute days are scheduled and will not be substituted without advance approval of the manager.

If applicable, campus office days and campus office hours will be \_\_\_\_\_ (days) \_\_\_\_\_ (hours).

Home office days will be \_\_\_\_\_ (days) General home office hours will be \_\_\_\_\_ (hours).

Location of home office will be \_\_\_\_\_ (describe physical location within home).

The supervisor must approve use of vacation, CTO, or other leave credits in advance. For non-exempt employees, overtime to be worked must be approved in advance by the supervisor. For exempt employees, the manager must approve hours of availability.

Telecommuting is not a substitute for dependent care, and employees must make regular dependent care arrangements.

The employee has read and understands the University's telecommuting policies and guidelines and agrees to abide by those policies.

The telecommuter shall carry out the steps needed for information security in the home office setting, and has read the University's security requirements and procedures. The telecommuter agrees to check with her/his supervisor when security matters are at issue.

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This agreement, its attachments and any revisions are not contracts or promises of employment. Nothing in this Agreement guarantees employment for any specific term.

\_\_\_\_\_  
Employee's Name (Print Name)

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Name (Print Name)

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cabinet Officer Name (Print Name)

\_\_\_\_\_  
Cabinet Officer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
AVP Human Resources (Print Name)

\_\_\_\_\_  
AVP Human Resources Signature

\_\_\_\_\_  
Date



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**TELECOMMUTER'S AGREEMENT  
WORK PERFORMANCE EXPECTATIONS**

The following is a list of work performance expectations as part of the identified employee's Telecommuting Agreement:

(Employee Name) \_\_\_\_\_ agrees to perform the following work expectations in a satisfactory manner for the period of this telecommuting agreement from the effective date of \_\_\_\_\_ to the ending date of \_\_\_\_\_. These work performance expectations shall be attached to and/or incorporated into the employee's job description and shall be used in assessing the employee's job performance for the appropriate review period.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

\_\_\_\_\_  
Employee's Name (Print Name)

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Name (Print Name)

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date



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**EQUIPMENT CHECKLIST FOR TELECOMMUTERS**

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Employee Name: \_\_\_\_\_

As a result of the telecommuter agreement with the employee identified above, the University provides the following equipment:

<b>Equipment Description</b>	<b>Estimated Cost</b>

It is understood that the replacement of State owned equipment and its associated costs, which is stolen or destroyed, may be the responsibility of the employee identified above as the telecommuter.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date





# CALIFORNIA STATE UNIVERSITY, BAKERSFIELD

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### HOME SAFETY CHECKLIST FOR TELECOMMUTERS

Employees who work at home must keep their home offices in a businesslike manner, and as clean and free from hazards as their regular University office, in order to minimize the chance of accidents. The home must be in compliance with all building codes and must be free of hazardous materials. Telecommuting employees are responsible for ensuring their homes comply with these health and safety requirements.

To assist in assessing the overall safety of your home office, please answer the following questions by placing a checkmark in the appropriate column. "No" answers must be resolved prior to approving any telecommuting arrangements.

#### **YES N/A NO**

- Are all steps/stairs clear of objects, which could cause a person to trip?
- Do all steps/stairs have a firmly anchored handrail?
- Are all stairways well lighted?
- Are stair coverings securely anchored?
- Do you have a safe step stool with a handrail for reaching high shelves?
- Are all scatter rugs skid-proof, and do they lay flat?
- Are all carpets securely anchored?
- Are all entrance ways, exits, halls and walks well lighted?
- Are all walks, porches and doorways kept clear of obstacles?
- Are all hard-surfaced floors clean, are spills wiped up immediately?
- Is non-skid wax used on all polished floors?
- Is proper footwear worn to prevent slips, trips, falls and other fall injuries?
- Are lamp, extension, and telephone cords placed out of traffic areas?
- Are all chairs, tables and desks safe to use and ergonomically correct?
- Are all electric receptacles of the three-prong, grounded type?
- Are all bathroom, kitchen, and outdoor circuits protected by a ground fault circuit interrupter?
- Do you know how to shut off the electrical, water and gas sources to your home?
- Are all fuses of correct amperage?
- Are fuses or circuit breakers labeled to identify outlets and appliances they protect?
- Does your home work site have adequate electrical power in all areas to safely operate all your electrical appliances?
- Do all light switches work correctly?
- Do all wall switches and outlets have safe coverplates?
- Are all appliance and extension cords in good condition?
- Is the ground prong still on all electric plugs as originally equipped?
- Are all electrical appliances Underwriters Laboratories (UL) approved? (Check both the appliance and the cord).
- Are small electrical appliances such as hair dryers, shavers, electric knives, coffee pots, etc. unplugged when not in use?
- If smoking is permitted in your home, do you provide deep, wide-rimmed ashtrays and prohibit smoking in bed or while lying down?
- Is the furnace, chimney and smoke pipe cleaned and serviced yearly?
- Are areas around the furnace clear of boxes and other combustible materials?
- Does the fireplace function properly and is it adequately screened?



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**HOME SAFETY CHECKLIST FOR TELECOMMUTERS**

**YES N/A NO**

- Is the space around the hot water heater clear of combustibile materials?
- Does the hot water heater have a pressure and temperature relief valve?
- Is the hot water temperature 120 degrees or less to prevent burns? (It may need to be set at 140 degrees for the dishwasher to wash dishes properly.)
- Are portable electric fans and heaters adequately screened to prevent contact with the fan blades or heating elements?
- Are portable heaters in good condition, is adequate ventilation provided, and is it positioned in a safe location away from flammable materials?
- Have you developed and practiced a fire escape plan for your work site?
- Are smoke and/or fire detectors installed in the house and at least one per floor?
- Are the smoke and/or fire detectors tested monthly?
- Do you have a charged ABC fire extinguisher of at least the 2-1/2 pound size conveniently located in your home?
- Do you have plenty of wall outlets for lamps and appliances?
- Do you check power cords and have them replaced if they're damaged?
- Are extension cords the right capacity for the tools or appliances you're using?
- Do you keep a flashlight handy for emergencies?
- Do you avoid running electrical cords under carpeting or hanging them from nails?
- Are all sliding glass doors and other glass doors fitted with non-breakable glass?
- Do sliding glass doors have some type of figure or design on the glass to help you see them when they are closed?
- Do all doors close and latch properly?
- Are all exterior doors secured with a deadbolt for security purposes?
- Do all windows close and latch securely?
- Is a well-stocked first aid kit available for emergencies?
- Do you have emergency numbers posted by all telephones?
- Do you locate portable stoves and heaters where they won't get knocked over? Do you keep them at least three feet from furnishings and flammable materials?
- Do you keep paint, paint thinner, pesticides and gasoline stored outside of the home work site and away from heat and other ignition sources?
- Is mildew controlled through adequate air circulation and humidity control?
- Are you reasonably certain that your home is free of radon, formaldehyde and other toxic gases?
- Do you get help lifting heavy objects or job materials?

I have reviewed the above and marked the questions accordingly. I agree that all applicable areas are in compliance.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date