



## Office of the City Auditor Policies and Procedures

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**Number:** 7.7.3

**Title:** Work at Home

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**Original Date:**
**Revision Date:**
**Approved by:**

10/13/2000

08/30/2001

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### I. Policy

- A. The Office of the City Auditor (OCA) will provide the opportunity for employees to work at home when appropriate in the context of project and Office needs and when a physical deliverable can be produced from the work. Staff members are encouraged to take advantage of this opportunity but must obtain prior written approval, utilizing the attached form.
- B. Work-at-Home will not be authorized as a substitute for ordinary sick and vacation leave. However, Work-at-Home may be used as an element of a light duty plan for catastrophic sick leave or other exceptional conditions.

### II. Purpose

This policy establishes parameters under which audit staff may make arrangements to work from home (or an alternate worksite).

### III. Definitions

None

### IV. Procedures/ Responsibilities

- A. Employees must request approval from their ACA/DCA/CA to work at home. Work-at-home time may be taken in full-day or half-day segments.
- B. The attached form will be completed by the staff member and submitted for review and approval at least one day prior to the requested telecommuting period with approval/denial to be communicated the same day the request is received.

- C. To facilitate communication and coordination with other team members, hours of availability of staff working off-site should be agreed upon at the time the request is approved. These hours and contact number should be posted on the OCA sign-out board.
- D. Using Part 1 of the attached form, employees will specify the work to be done and the specific products to be delivered upon their return to the office. Staff members are accountable for delivering these products or communicating with their ACA/DCA/CA why they were not accomplished.
- E. ACA/DCA/CA and the employee will complete part 2 of the form upon the employee's return to the office acknowledging that the expected product was delivered, or stating the action taken if the agreed upon work is not complete. If unforeseen circumstances prevented the work from being completed, the employee and ACA/DCA/CA will also note the nature of the circumstances.
- F. Staff should record work-at-home hours using the TLC code on their timesheet. The staff member will attach the completed Approval Form (Part 2) to his or her weekly timesheet.
- G. The HR Assistant will maintain a file of completed Work-at-Home forms for each employee, as a means of reviewing prior performance.
- H. Employees may forfeit their eligibility to work at home for the remainder of the fiscal year after the second time they fail to produce the agreed upon outputs.

**OCA WORK-AT-HOME APPROVAL FORM (Part 1)**

Name:

Date:

Home phone number:

E-mail address:

Proposed Work-at-Home Date:

Planned work hours (note on sign-out board):

Description of work to be done at home/offsite:

Specific Products to be provided upon return to the office:

ACA/DCA/CA Approval:\_\_\_\_\_

Date:\_\_\_\_\_

Comments:

**OCA WORK-AT-HOME APPROVAL FORM (Part 2)**

Work accomplished and delivered: Yes \_\_\_\_\_ No \_\_\_\_\_

Comments (to be entered by employee and/or supervisor):

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Work Approved by:

ACA/DCA/CA \_\_\_\_\_

Date \_\_\_\_\_

Specify action taken if product not delivered:

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ACA/DCA/CA \_\_\_\_\_

Date \_\_\_\_\_