



The Episcopal Diocese of Olympia

The Episcopal Church in Western Washington

www.ecww.org

Flexible Workplace Plan and Agreement Form

This document is intended to ensure that both the supervisor and the employee have a clear, shared understanding of this voluntary flexible workplace/telework arrangement. Each arrangement is unique depending on the needs of the position, the supervisor, and the employee. *Update this worksheet as necessary before signatures are applied.*

This agreement sets forth the conditions for the arrangement. This agreement does not change the basic terms and conditions of employment. Employee remains subject to the same employment policies and procedures set forth in the Office of the Bishop Personal Manual. This agreement may be modified by the Diocese of Olympia at its sole discretion and there may be times when an employee is required to spend more time than planned in the diocesan office upon supervisor's request. Employee's salary, job responsibilities and benefits do not change because of participation in this flexible workplace arrangement. Employee's time and attendance will be recorded as performing official duties at the primary business location.

Unless otherwise specified in this document, either the employee or the employer may end a voluntary flexible workplace arrangement by providing two weeks' written notice. This provision does not apply to flexible workplace arrangements made through the disability accommodation process. Employer-required flexible workplace arrangements may only be ended with the employer's written approval.

Employee Flexible Workplace Information:

| | |
|------------------------------|---|
| Employee name: | |
| Job Title: | |
| Department: | |
| Supervisor: | |
| Type of arrangement | <i>Regular</i> <i>Occasional</i> |
| Arrangement effective dates: | Start date: End date (<i>leave blank if not applicable</i>): |
| Review dates: | Initial review: Periodic reviews: Annual review: |

Job Duties & Expectations

The general expectation for a flexible workplace arrangement is that the employee will continue to effectively accomplish regular job duties, regardless of work location. If there are flexible workplace-specific job duties and/or expectations, specify them in the space below, or enter N/A. flexible workplace-specific job duties and/or expectations may include: *Reporting requirements (log of hours per day); Crossover Work hours to remain available for calls from co-workers and supervisors; frequency to check voice mail, text and email; Required breaks (for non-exempt employees); Meeting attendance via technology; In-person attendance requirements, etc.*

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| Flexible workplace specific job duties and/or expectations: | |
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Work Schedule

Non-exempt: a minimum of 40% of weekly work hours will be in the diocesan office, with a maximum of 60% of weekly work hours accomplished off site. Exempt: up to 100% of weekly work hours may be accomplished off-site. *(Examples – full time non-exempt employee working 40 hours/week: identify 16 hours/week under “Office” and 24 hours/week under “off-site”; half-time employee working 20 hours/week: identify 8 hours/week under “Office” and 12 hours/week under “off-site.”)*

| | | | | | | | |
|--------------------------|------------------------------------|-------------------------------------|---------------------------------------|--------------------------------------|------------------------------------|--------------------------------------|------------------------------------|
| In office work schedule: | Monday <input type="checkbox"/> | Tuesday <input type="checkbox"/> | Wednesday <input type="checkbox"/> | Thursday <input type="checkbox"/> | Friday <input type="checkbox"/> | Saturday <input type="checkbox"/> | Sunday <input type="checkbox"/> |
| Work period office days: | From _____ to _____ | | | | | | |

| | | | | | | | |
|----------------------------|------------------------------------|-------------------------------------|---------------------------------------|--------------------------------------|------------------------------------|--------------------------------------|------------------------------------|
| Off-site schedule: | Monday <input type="checkbox"/> | Tuesday <input type="checkbox"/> | Wednesday <input type="checkbox"/> | Thursday <input type="checkbox"/> | Friday <input type="checkbox"/> | Saturday <input type="checkbox"/> | Sunday <input type="checkbox"/> |
| Work period off-site days: | From _____ to _____ | | | | | | |

Arrangement Modification

If either employee or supervisor needs to modify or end the arrangement, record how that change will be communicated and how much advance notice will be required. An email or phone call may be sufficient for short-term or unexpected schedule changes. However, some jobs may require more notice. Specify any details about changes to the arrangement. All employee-proposed changes are subject to the same approval process as initiation of the arrangement.

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| How to make changes to the arrangement: | |
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Staff Day

Specify if the team has identified a staff day when all members of the team will be together in person and available at Diocesan House.

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| Staff day is: | |
|---------------|--|

Resource Team support

Specify how employee will interact with the Resource Team regarding things such as reimbursements processing, mail, hosting of onsite meetings when the employee is offsite, etc.

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| Resource team interactions: | |
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Communications

Specify a chain of command for communications essential withing the team and across departments. Include clear process for notification of absences, dealing with technical issues, and other team related communications.

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| Communications details: | |
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Equipment and technology access

Specify any equipment or technology access needed to work remotely and whether it will be employee or employer provided. Review all policies on the use of diocesan-owned equipment, including while working remotely, as well as policies on using employee-owned equipment as outlined in the Office of the Bishop personnel manual.

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| Employee equipment needs: | |
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Additional details

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| Add any other information applicable to this arrangement: | |
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Employee signature _____ Date _____

Supervisor signature _____ Date _____

Canon to the Ordinary signature _____ Date _____

Bishop signature (if required) _____ Date _____