

## Policy

<b>Policy Title</b>	Remote and Flexible Work
<b>Policy Holder</b>	Executive Director, Organizational Effectiveness
<b>Policy Approver(s)</b>	Senior Team
<b>Related Policies</b>	Acceptable Use of IT Policy Health and Safety Policy Sick Leave Policy
<b>Related Procedures</b>	Remote and Flexible Work Procedure
<b>Appendices</b>	Appendix 1 – Remote Work Assessment Form Appendix 2 – Sample Remote Work Agreement Appendix 3 – Remote Workspace – Self Assessment Form
<b>Storage Location</b>	Website - <a href="https://www.confederationcollege.ca/policies-and-procedures">https://www.confederationcollege.ca/policies-and-procedures</a>
<b>Effective Date</b>	2022-05-30
<b>Next Review Date</b>	2023-05-30

### Purpose

Confederation is committed to creating opportunities that promote employee well-being and engagement, advance the ability for employees to work productively to achieve institutional goals and objectives and create a culture of performance and care. By implementing a remote working arrangement policy, Confederation hopes to achieve the following benefits:

- Increase our ability to attract and retain top talent
- Improve employee satisfaction
- Use physical space effectively
- Improve employee well-being, health and work-life balance
- Support Confederation’s Sustainability Plan and reduce the College’s environmental footprint

### Scope

This policy addresses the circumstances of employees working from home, or from a designated alternative remote worksite that is not the College campus workplace, which is generally referred to as remote working, teleworking, or telecommuting. While remote working is a form of flexible working arrangements, this policy does not cover other forms of flexible working arrangements such as:

- Flex time
- Reduced work week

- Job sharing
- Occasionally working from home due to other circumstances

This policy and related supporting documents outline the broad expectations for the College and employees around remote work including:

- Types of remote working arrangements
- Terms of participation and eligibility requirements
- Accountability and evaluation
- Guidelines and requirements – which include: legal rights and obligations, security and confidentiality, work performance and other related conditions.

## Definitions

### **A workplace**

Any place where an employee is engaged in work for their employer. This includes locations where work is being performed outdoors, on third-party premises or from the employee's home.

### **Flexible Working Arrangements**

Flexible working arrangements are changes to an employee's terms and conditions of employment that may include, but are not limited to: flex time, compressed work week, reduced work week, job sharing, and remote working.

### **Remote worker**

An employee who works outside the traditional office on a consistent basis or for a defined period of time.

### **Remote working**

A work arrangement in which some, or all, of the work is performed from home or another approved off-site location usually with the aid of technology such as a telephone, laptop computer, desktop computer, business communication resources and other technology tools.

### **Remote Working Arrangement**

Approved arrangement for the employee to carry out defined duties from the employee's home-based worksite or other approved remote worksite during agreed hours on an ongoing basis or for a specified period of time, the terms of which are set out in a 'Remote Working Agreement' entered into between the College and the employee, and if the employee is unionized, the Union.

### **Working hours**

Are defined in the individual employee's contract and may vary depending on role. Core working hours of the College generally fall between 8:00 am – 6:00 pm on weekdays.

## Governing Laws and Regulations

[The Health Protection and Promotion Act of Ontario](#)

[The Ontario Human Rights Code](#)

[The Ontario Occupational Health and Safety Act](#)

## Policy Statements

The policy is intended to enable and support the development of appropriate and well-managed remote working arrangements. The ultimate decision regarding whether an individual or group will be permitted to work remotely rests solely with the College. All remote work arrangements require management

approval and must adhere to applicable legislation, regulations, common law obligation and collective agreements (where applicable). The policy is not intended to override or supersede any of the foregoing. The policy is also not intended to confer any right to any individual or group to work remotely.

The policy is intended to promote fairness, due process and the well-being of all Confederation employees while recognizing and addressing the many considerations involved in administering remote working arrangements. Safety and well-being of employees is of paramount importance. Alignment with Confederation’s corporate Strategic Plan and operational planning is also vital to achieving a successful and sustainable approach to remote working.

This policy covers the typical conditions under which remote working arrangements would be considered. It covers multiple types of remote working situations including situations wherein critical incidents have occurred requiring mandatory remote working, such the COVID-19 pandemic and Confederation’s response as directed by Public Health officials. This policy is intended for use outside of any world-wide pandemic situation or national emergency.<sup>1</sup>

### Non-Compliance

Failure to comply with the provisions of this policy or any related policies may result in the nullification of any remote working agreement.

### Revision History

Version	Change	Author	Date of Change
Original		Jeannine Verdenik	2022-05-30

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<sup>1</sup> This policy was initially drafted in 2021, during the COVID-19 pandemic. While this situation has informed considerations and guidelines, this policy is ONLY relevant and active from the date of approval.

## Appendix 1 – Remote Work Assessment Form

### REMOTE WORK ASSESSMENT FORM

*Instructions: This form is to be completed by the supervisor/manager in consultation with the employee. Sections G and H are to be signed off by the supervisor and employee, respectively. Append this form to the Remote Work Agreement.*

**Date:** Click or tap to enter a date.

A. Employee Details:	
Assessment Date: Click or tap to enter a date.	Employee ID #: Click or tap here to enter text.
Employee First Name: Click or tap here to enter text.	Manager First Name: Click or tap here to enter text.
Employee Last Name: Click or tap here to enter text.	Manager Last Name: Click or tap here to enter text.
Employee Job Title: Click or tap here to enter text.	Manager Job Title: Click or tap here to enter text.
Division: Click or tap here to enter text.	Department/Unit: Click or tap here to enter text.
Employee Group:	Bargaining Agent:

B. Type of Remote Work Arrangement Requested:			
Indicate the type of remote working arrangement being considered. Review types listed under 2.0 of the Remote and Flexible Work Procedure.			
Time limited	<input type="checkbox"/>	Permanently remote	<input type="checkbox"/>
Critical Situation	<input type="checkbox"/>		

<b>C. Work Assessment (Completed by Direct Supervisor):</b> Check all boxes that apply.			
Job has a high level of autonomy and minimal requirements for face-to-face interactions	<input type="checkbox"/>	Job does not strictly require full-time in-person contact/customer service to support core functions of the College	<input type="checkbox"/>
Job requires reading, writing, research, working with data, or talking on the phone	<input type="checkbox"/>	Job does not rely upon specific equipment or supplies which require on-site working	<input type="checkbox"/>
Job can be done off-site without disruption to flows of work and communication	<input type="checkbox"/>	Job works with classified documents and remote working introduces a risk	<input type="checkbox"/>
Job is specifically contracted or developed to be executed remotely	<input type="checkbox"/>	Job has compliance requirements that cannot be effectively met in a remote working arrangement	<input type="checkbox"/>
Job can be executed with minimal disruption to student or employee services	<input type="checkbox"/>	Employee is in good standing (no disciplinary)	<input type="checkbox"/>
Job can be performed remotely in a similar manner as if it were being performed on campus	<input type="checkbox"/>	The employee competently demonstrates the competencies, knowledge and skills required to perform the job remotely	<input type="checkbox"/>
Job has clearly defined and measurable outputs/outcomes	<input type="checkbox"/>	Managing the employee's performance can be effectively done in the remote setting	<input type="checkbox"/>

State any other work characteristics that promote remote working:  
Click or tap here to enter text.

<b>D. Workplace Safety Assessment:</b> Confirm the employee has completed the Remote Workstation – Self-Assessment Safety Checklist, and indicate the date completed		
Specifics	Date	
The employee has provided a response plan in case of an emergency		<input type="checkbox"/>

The employee has indicated satisfactory working conditions		<input type="checkbox"/>
The employee has indicated satisfactory fire safety conditions		<input type="checkbox"/>
The employee has indicated satisfactory ergonomics conditions and have completed the ergonomic self-assessment		<input type="checkbox"/>
The employee has indicated satisfactory personal safety conditions		<input type="checkbox"/>
Indicate any concerns or supports the employee will require to achieve workspace safety: Click or tap here to enter text.		
Indicate any supports that Confederation will provide: Click or tap here to enter text.		

**E. Equipment and Resources: \*\*\* The College is not responsible for the provision of any furnishings including but not limited to desks, chairs and file cabinets. \*\*\***

List all equipment and resources the employee will need to use in the execution of the job (include software, hardware, etc.):	Provided by Employee	Provided by Confederation
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>

**F. Accommodation Assessment:**

*Note: If this request for remote working was initiated by the employee and is part of a request for an accommodation, indicate 'Yes' below. No further documentation is required as Accommodation is managed via a different process. The employee should contact:*

**Elise Demeo**  
**Senior Manager, Human Resources & Labour Relations**  
**807-475-6145**  
**Email: edemeo@confederationcollege.ca**

**Is this remote working arrangement part of an accommodation request?**

 Yes  No 
**G. Employee Attestations:**

I have read and agree to adhere to the following policies: <input type="checkbox"/> Acceptable Use Policy <input type="checkbox"/> Health and Safety Policy <input type="checkbox"/> Sick Leave	<input type="checkbox"/>	I understand my commitments and the commitments of Confederation College related to health and safety in the remote workspace:	<input type="checkbox"/>
I understand my commitments and the commitments of Confederation related to the equipment and resources I use in my remote workspace:	<input type="checkbox"/>	I have read and understand the expectations on me as laid out in the Remote and Flexible Work Policy:	<input type="checkbox"/>
Employee Name (PRINT): Click or tap here to enter text.		Employee Signature: Click or tap here to enter text.	
Date: Click or tap to enter a date.			
The Union consents to the foregoing arrangements:			
Union Representative (PRINT):		Union Representative Signature	
Date:			

**H. Manager Attestations:**

I have completed all required assessments and have met with the employee to ensure the employee understands the requirements for remote working:	
Manager Name (Print): Click or tap here to enter text.	Manager Name (Print): Click or tap here to enter text.
Date: Click or tap to enter a date.	

## Appendix 2 – Sample Remote Work Agreement

[Date]  
Employee Name  
Employee Title  
Department/Faculty

Dear [Employee Name]:

### Re: Remote/Flexible Work Agreement

This letter confirms your recent discussions with your supervisor and your written request received on [Date] for approval to work remotely.

Upon review of the **Remote Work Assessment Form** (completed with your supervisor) and the **Remote Workspace Self-Assessment Checklist** (completed by you), your request for a remote working arrangement, effective [Date to Date] inclusive, is approved, subject to the following terms and conditions:

### Remote and Flexible Work Agreement Details

The type of remote working arrangement you have been approved for is [state one of the four types described in the Policy]

### Term

Your remote work agreement will be in effect from [Date] until [Date], and may be renewed with the agreement of your supervisor, [Supervisor name].

Consistent with the conditions of the Remote and Flexible Work Policy, your arrangement is subject to periodic review, and may be terminated sooner at the sole discretion of Confederation College.

### Adherence to the Remote and Flexible Work Policy and the Guidelines hereto Appended:

You are required to comply with all conditions laid out in the Remote and Flexible Work Policy which and to commit to all the expectations and conditions outlined in the Remote and Flexible Work Procedure, which are summarized below.

### Hours of Work

Your current work hours remain in effect, and it is understood that you will work remotely on the following days/times:

[Day of week] to [day of week] weekly  
[start time] to [end time] daily

### Work Assignments

During your remote work arrangement, you will remain responsible for fulfilling all of your work commitments as outlined by your supervisor. You will ensure your overall productivity, progress and reporting on assignments.

[add any specific details of the work expectations and performance expectations]

### Remote Work Readiness

In advance of [date remote working arrangement commences], you must discuss with your supervisor all actions required to implement the supports outlined in the Remote Work Assessment Form, so that you will be ready to continue to work from the date your remote arrangement commences. This includes: expected work hours and work expectations, remote working duration, responsibilities for supplies, equipment and services, reimbursement, emergency contact information, overtime treatment, security, expected means of communication, and an incident reporting process as a minimum content requirement.

Note that any costs related to, furnishing (such as chairs, desks, filing cabinets, etc.) or maintaining (such as high-speed internet, electricity, heat, hydro, etc.) your workspace will not be reimbursed by



Confederation College and will be your responsibility. T2200 tax forms will not be issued as this is a voluntary arrangement and is not a condition of employment.

Elise Demeo  
Senior Manager, Human Resources and Labour Relations

[Signature]

[Date]

**Acknowledgement**

I understand and agree to all the above stipulated remote working arrangement terms and conditions as well as those outlined in the Remote and Flexible Work Policy and Procedure hereto attached.

[Employee Name]

[Employee Signature]

[Date]

Where the employee is represented by a Bargaining Agent (Remove if not applicable):

[Union Representative Name]

[Union Representative Signature]

**\*Attach copies of the Remote and Flexible Work Policy and Procedure and copies of all forms**

## Appendix 3 – Remote Workspace – Self-Assessment Checklist

### REMOTE WORKSPACE – SELF-ASSESSMENT CHECKLIST

This checklist is provided to assist employees in conducting a readiness assessment on their remote or home workspace as a pre-requisite for remote working arrangements. This assessment **MUST** be completed prior to the commencement of the remote working arrangement, and it forms part of the Remote Working Assessment. Once completed, this checklist must be forwarded to the employee’s direct supervisor.

**Date:** Click or tap to enter a date.

Employee and Supervisor/Manager Details	
Employee First Name: Click or tap here to enter text.	Employee Last Name: Click or tap here to enter text.
Manager First Name: Click or tap here to enter text.	Manager Last Name: Click or tap here to enter text.
Division: Click or tap here to enter text.	Department: Click or tap here to enter text.
Remote or Home Location Address: Click or tap here to enter text.	
Brief Description of Work: Click or tap here to enter text.	

WorkplaceConditions	Satisfactory	Not Satisfactory	Action Required
Designated workspace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Area is tidy and free of clutter and slip, trip and fall hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelving and cabinets are securely braced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No sharp edges on desks and cabinets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate number of electrical outlets (no overload risk)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power cords in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power bars plugged directly into the wall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical panel covered and readily accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receptacle plates in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exits are clear and unobstructed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stairs (if applicable) are clear and unobstructed and have a handrail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fire Safety	Satisfactory	Not Satisfactory	Action Required
A fire safety plan is known	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Functioning carbon monoxide detector (tested regularly) and within a reasonable proximity to the workspace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location is equipped with smoke detectors (tested regularly) and within a reasonable proximity to the workspace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ergonomics	Satisfactory	Not Satisfactory	Action Required
The workspace is well ventilated, temperature controlled, with adequate lighting and controlled noise levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keyboard, mouse and monitor (as applicable) are properly placed for optimal use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>The laptop/monitor is positioned so that the screen can be viewed without tilting your neck</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>The keyboard and mouse are placed so that wrists are kept in a natural position</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>The work surface is positioned 5 cm above elbow height for writing and reading paper documents</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The chair meets ergonomic requirements and is in good repair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Personal Safety	Satisfactory	Not Satisfactory	Action Required
The workspace or home is free from any risk of violence, harassment, or danger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Hazards: Indicate any hazards and assess them	Satisfactory	Not Satisfactory	Action Required
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Emergency Procedures
Detail the steps you would take in case of an emergency: Click or tap here to enter text.
Detail backup contact information- such as a secondary phone in case of an emergency: Click or tap here to enter text.

Employee Attestation:	
Employee Name (Print): Click or tap here to enter text.	Employee Signature: Click or tap here to enter text.
Date: Click or tap to enter a date.	

A copy of this Remote Workspace Self-Assessment Checklist, once completed and signed, will be retained by the supervisor and attached to the Remote Working Assessment Form in the employee's personnel file.

Once the remote work arrangement starts this form will be submitted by the employee monthly as a part of an overall health and safety program.