

Policy & Procedure Manual

FLEXIBLE WORK ARRANGEMENT- HR-V-15

POLICY:

All permanent non-union full-time employees will have the opportunity to request a flexible work arrangement, where conditions are met, as outlined in this policy.

PURPOSE:

OPTIONS NORTHWEST understands that some employees may require a flexible work schedule to help promote work/life balance. Flexible work schedules will be evaluated for employees who meet all eligibility requirements to ensure operational requirements are met and allow the Agency to meet its demands. OPTIONS NORTHWEST is committed to providing employees with flexible work hours in accordance with all applicable employment standards legislation.

PROCEDURE:

A Non-union employee who has completed twelve consecutive months of continuous employment in their current position with OPTIONS NORTHWEST may request a change to their work schedule.

Requests must be made using the flexible work arrangements request form and include the employee's name, the requested details, the date the change will take place, and its duration if applicable. Regardless of an employee's ability to meet all eligibility requirements, it may not be possible to accommodate all requests for flexible work arrangements.

Requests for changes made for reasons due to a workplace injury will be handled as per the HR-XI-27 Workplace Accommodation Policy and should be directed to the Health & Safety Coordinator. Some departments may be unable to offer flexible work arrangements for some positions or during certain times of the year.

Refusal of Request

Reasons for refusal may include, ****but not be limited to****, one or more of the following reasons:

- The Agency would incur additional costs as a result of the requested change;
- The flexible work arrangement would negatively affect the quality or quantity of work, the ability to meet employee and/or individual's needs, or any other aspect of performance;
- The Agency would be unable to re-organize the work among existing employees or would require the Agency to recruit additional employees to accommodate the arrangement; and
- There would be insufficient work available to the employee if the request was granted.

Cancelation / Withdrawal of Flexible Work Arrangement

OPTIONS NORTHWEST has the right to cancel or withdraw the flexible work arrangement regardless of if the request is a trial period or permanent. The Supervisor or Manager must give the employee a minimum of 7 days' notice and the employee must return to their regular scheduled rotation at the beginning of a work week.

Employees that cancel or withdraw from the Flexible Work Arrangement must return to their regular scheduled rotation at the beginning of a work week.

Recordkeeping

OPTIONS NORTHWEST will ensure that appropriate records of hours worked, pay, and other essential employment information are maintained in accordance with all applicable employment standards legislation.

Non-Union Benefits

PAID HOLIDAYS

All paid holidays the employee is entitled to per the HR-V-1 Paid Absence from Work Full Time Employees policy will be compensated at 7.5 hours regardless of the employees agreed upon flexible work arrangement.

POLICY: HR-V-15
DEPARTMENT: Human Resources
CATEGORY: Non-Union Benefit Program
EFFECTIVE DATE: January 2024
SUPERSEDES VERSION DATED: n/a
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RECOMMENDED BY: Executive Director

APPENDICES: 0

OPERATIONAL ACCOUNTABILITY: Administration, Human Resources, Community Services Administration

ORIGINAL POLICY DATE: January 2024

AUTHORIZED BY: Executive Director

SIGNATURE:

A handwritten signature in black ink, appearing to be 'L. P. H.', is written over a horizontal line.



Flexible Work Arrangements Request Form

Intent

This form is intended for use in conjunction with the OPTIONS NORTHWEST flexible work arrangements policy. Employees who have completed Twelve consecutive months of continuous employment with the Agency in their current position and wish to request a change to their terms and conditions of employment may fill in this form and submit it to their immediate supervisor. Responses will be made to the employee in writing within 30 days of submission.

Employee Request

Please fill in the section below listing the changes requested for employment conditions. Where information is not relevant, please insert "N/A." Management will then review this form and meet with the employee to determine whether the request can be supported.

Employee Information	
Employee Name	
Title	
Department	
Immediate Supervisor	
Condition	Requested Change
Number of hours required to work	
Work schedule (Sunday to Saturday)	
Work location	
Requested start date of change	
Duration of requested change	<input type="checkbox"/> Trial Period (<i>Temporary 3-month duration</i>): Time Period: _____ <input type="checkbox"/> Permanent (<i>once reassessment completed with supervisors' recommendation</i>)
Reassessment Date (<i>to be scheduled by supervisor</i>)	

Explanation for Flexible Work Arrangements request (required)

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Supervisor Recommendation

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I have read and understand the company's policy on flexible work arrangements. I understand that the flexible work arrangement requested above may not be granted at all or in full, and if an alternate proposal is returned to me, I will carefully consider the terms OPTIONS NORTHWEST has responded with.

Employee signature: _____

Date submitted: _____

Employer Response

OPTIONS NORTHWEST will review the request and determine the feasibility of the request. This completed form must be returned to the employee within 30 days of the date submitted.

Request has been:

- Approved
- Granted in part
- Alternative proposal
- Denied

If the request has been denied, please view the attachment providing the reasons for denial.

If the request is granted in part or an alternative change has been proposed, please see the attachment explaining why OPTIONS NORTHWEST has denied a portion of the request along with an alternative that could be approved. Please respond by indicating whether the proposed alterations will be accepted or denied.

***A request can only be approved as submitted. Denial of a request, partially or in whole, requires a written response with a reason for denying said request.*

Signature: _____

Date: _____