TELEWORK ELIGIBILITY CHECKLIST

This checklist will assist in determining whether telework is appropriate. If the answer to any of the following questions is “no,” it is suggested that telework is not an appropriate option.

1. The employee is self-motivated and responsible. ______ Yes ______ No

2. The employee is able to work independently. ______ Yes ______ No

3. The employee is familiar with the job requirements. ______ Yes ______ No

4. Many of the employee’s duties may be performed remotely. ______ Yes ______ No

5. The employee is aware of the agency’s procedures. ______ Yes ______ No

6. The employee meets standards in his/her current position. ______ Yes ______ No

7. The employee is an effective communicator. ______ Yes ______ No

8. The employee is not currently serving a probationary period. ______ Yes ______ No

9. The employee has not been disciplined in the last year. ______ Yes ______ No

10. The supervisor is committed to discussing expectations of the telework day with the employee. ______ Yes ______ No

11. The supervisor is committed to reviewing the employee’s completed work during the employee’s next work day in the office. ______ Yes ______ No

12. The supervisor is committed to making periodic contact with the employee during the telework day. ______ Yes ______ No

13. The supervisor is willing to send the completed Telework Work Plan to the Agency Personnel Office within one week of the telework day. ______ Yes ______ No
TELEWORK PROGRAM

TELEWORKING AGREEMENT

This Agreement, entered into effective __________, is between _________________________

Date                                                                Name of Employee

(“Employee”), an employee of ____________________ (“Agency”), within the State Personnel

Agency

Management System. This Teleworking Agreement (“Agreement”) establishes the respective

obligations of the parties under the State of Maryland’s Telework Program.

The Employee and the Agency, intending to be legally bound, agree as follows:

**SCOPE OF AGREEMENT**

Other than those duties and obligations expressly imposed on Employee under this Agreement, the duties, obligations, responsibilities and conditions of Employee’s employment with the Agency remain unchanged.

The term “Remote Work Site” shall mean a work site other than the Employee’s Main Work Site. The Remote Work Site shall mean any remote office location approved by the Agency for the purpose of teleworking.

The term “Main Work Site” shall mean Employee’s usual and customary Agency work address or other location as approved by Employee’s supervisor.

The term “Telework” means to work at least four days a month at a Remote Work Site to produce specific deliverables as stated in a Telework Work Plan.

The term “Telework Work Plan” shall mean a specific set of defined work expectations to be met each time Employee works at a Remote Work Site for the purpose of teleworking.

The term “workspace” shall mean the area within the Main or Remote Work Site, which has been designated as Employee’s work area.
This Agreement shall be construed, interpreted, and enforced according to the laws of the State of Maryland.

**ELIGIBILITY REQUIREMENTS**

There exists no right to telework. Eligibility for a telework assignment must include a determination by the supervisor that Employee holds a position that has been identified by the supervisor as suitable for teleworking.

Employee must have successfully completed Employee’s probationary period, and have received at least a “satisfactory” performance evaluation on the most recent performance appraisal immediately preceding the request to telework. Telework privileges may be revoked if Employee fails to maintain at least an overall “satisfactory” rating on successive performance evaluations during the period of time that Employee is approved to be a teleworker.

**DURATION OF AGREEMENT**

This Agreement shall become effective as of the date first written above, and shall remain in full force and effect for one year from the date of signing this Agreement. The Agreement may be renewed annually or at any time at the discretion of the Agency.

**TERMINATION OF AGREEMENT**

Employee agrees that participation as a teleworker is voluntary and is available only as long as Employee is deemed eligible at the Agency’s sole discretion. Either party may terminate Employee’s participation as a teleworker, with or without cause, upon written notice thereof, to the other.

The Agency will not be held responsible for costs, damages or losses resulting from cessation of Employee’s participation as a teleworker.

This Agreement is not a contract of employment and may not be construed as one.

**COMPENSATION AND LEAVE**

While teleworking, Employee agrees to obtain supervisory approval in advance before performing overtime or compensatory work and before taking leave. Working overtime or compensatory time without such approval may result in termination of the teleworking privilege and/or other appropriate action.

**STANDARDS OF CONDUCT**

Employee agrees to be bound by all applicable State personnel laws, regulations, policies, and procedures while working at the Remote Work Site.
Violation of the foregoing may result in disciplinary action and the termination of the teleworking privilege.

**USE OF EQUIPMENT**

The Agency, at its sole discretion, may choose to purchase equipment and related supplies for use by Employee while teleworking or to permit the use of Employee-owned equipment. The decision as to the type, nature, function and/or quality of electronic hardware (including, but not limited to, computers, video display terminals, printers, data processors and other terminal equipment), computer software, data and telecommunications equipment (*i.e.*, telephone lines) shall rest entirely with the Agency. The decision to remove or discontinue use of such equipment, data and/or software shall rest entirely with the Agency. Equipment purchased by the Agency for use by Employee shall remain the property of the Agency.

Preventative maintenance and repair of equipment used by Employee is the responsibility of the owner of the equipment. In the case of equipment malfunction, regardless of ownership, Employee must notify his or her supervisor in a timely fashion. In addition, in the event of Agency-owned equipment failure or malfunction, Employee agrees to notify the supervisor in a timely fashion in order to affect immediate repair or replacement of such equipment. Depending on assigned duties, Employee may be required to report to the Main Work Site or another agreed upon Remote Work Site until the equipment is useable. Any change in Employee’s Remote Work Site that involves the relocation of installed equipment owned by the Agency must be discussed in advance with Employee’s supervisor to ensure the equipment is handled properly.

Employee agrees to take all reasonable precautions, including but not limited to, scanning all computer equipment and software for viruses prior to use, installation and/or transmission, to prevent the transmission of viruses, unauthorized software or code to any computer owned by the Agency or onto the Agency’s Network System.

Employee agrees that use of equipment, software, data, supplies and furniture, provided by the Agency for use at the remote work site, is limited to authorized persons and for purposes related to work. Employee may be required to make restitution pursuant to State Personnel and Pensions Article, Section 11-107(c), for failure to exercise reasonable care of Agency-owned equipment, software, data, supplies or furniture, which results in damage or loss.

In the event that the Agency prevails in legal action to regain possession of Agency-owned equipment, software data and/or supplies, Employee agrees to pay all costs incurred by the Agency, including reasonable attorney’s fees.

Employee is responsible for installation, operational costs, service, and maintenance of any Employee-owned equipment used. The Agency does not assume liability for loss, damage or normal wear and tear of Employee-owned equipment.
The Agency reserves the right to install, modify or remove software, internet connections, or other computer systems modification(s) installed by the Agency on Employee’s personal equipment. Software utilized by Employee at the Remote Work Site in the normal course of Agency business will comply with all licensing and copyright laws.

**WORKSPACE**

Employee agrees to designate a workspace within Employee’s Remote Work Site for placement and/or installation of equipment. The Agency must approve the site chosen as Employee’s designated workspace. The workspace must be adequate for performance of Employee’s official duties. Employee shall maintain this workspace in a safe condition, free from hazards and other dangers to Employee and/or damage to equipment.

**INSPECTIONS**

Employee agrees that the Agency may make scheduled or unscheduled on-site visits to the Remote Work Site in order to verify that Employee is teleworking as scheduled, to assess Remote Work Site safety, and for the purpose of maintaining, repairing, inspecting or retrieving Agency-owned equipment, software, data, or supplies. The Agency will make inspections only during Employee’s scheduled telework hours.

**TELEWORK SCHEDULE AND WORK STATUS**

Employee agrees that Employee’s telework schedule will be as designated in the Telework Schedule form attached to the Agreement. (Attachment 1) Employee’s supervisor must agree to any changes to Employee's Telework Schedule in advance. Employee agrees to maintain contact with the Employee’s Main Work Site as specified in the Work Performance Section of this Agreement.

Employee agrees to perform only official duties and to refrain from conducting personal business while on work status at the Remote Work Site. Personal business includes, but is not limited to, caring for dependents or making home repairs.

Employee may telework up to three days in a pay period unless additional days are permitted by Employee’s supervisor.

Employee must provide a contact number where Employee may be reached at all times while teleworking.

Employee must regularly check voicemails and respond to messages and emails at least hourly while teleworking.
Employee must supply specific deliverables as detailed in the Telework Work Plan no later than the next regularly scheduled work day at the Employee’s Main Work Site. (Attachment 2)

**WORK PERFORMANCE**

A Telework Work Plan must be established by Employee’s supervisor before each telework day.

Each telework day, Employee must complete a Telework Work Plan worksheet, detailing the work performed hourly. This worksheet must be submitted to the supervisor upon Employee’s next work day. The Employee is required to code the Employee’s timesheet to reflect telework by selecting “Remote Work Location” in the drop down menu and choosing “Remote Work Location – Teleworking”. Additionally, the Employee shall provide a brief description of the work performed in the “Comments” section of the timesheet.

Employee is required to maintain regular contact with the supervisor and office staff each telework day, be available to accept calls, return calls promptly, and be accessible by email and telephone.

Employee understands that failure to complete work assigned and/or failure to maintain the required contact with Employee’s supervisor and office staff may result in the termination of the telework privilege as well as adverse action, including disciplinary action. Declining work performance may result in termination of this Agreement.

**SUPPLIES**

Employee agrees to obtain from the Main Work Site all supplies needed for work at the Remote Work Site. The Employee understands and agrees that out-of-pocket expenses for supplies regularly available at the Main Work Site will not be reimbursed unless prior approval is obtained from the supervisor.

**REIMBURSEMENT**

Employee agrees that the Agency will not be responsible for operating costs, home maintenance, or any other incidental cost (e.g., utilities, telephone, insurance) whatsoever, associated with the use of Employee’s residence or computer equipment. The Agency will reimburse Employee for expenses authorized by Employee’s supervisor and incurred while conducting business for the Agency. Employee further understands that it is Employee’s responsibility to determine any tax implications of maintaining a Remote Work Site in Employee’s home.

**LIABILITY FOR INJURIES**

It is understood that Employee is covered under the Maryland Workers’ Compensation law if injured in the course of actually performing official duties at the
Remote Work Site during work hours. Employee agrees to notify Employee’s supervisor immediately of any accident or injury that occurs at the Remote Work Site and to complete any required forms. The Agency agrees to investigate such a report in accordance with existing policies.

Employee understands that the Agency will not be liable for damages to Employee’s personal or real property while Employee is working at the Remote Work Site, except to the extent required by Maryland law.

**SECURITY OF CONFIDENTIAL INFORMATION**

Employee agrees that all Agency-owned data, software, equipment, and supplies must be properly protected and secured. Agency-owned data, software, equipment, and supplies must not be used to create Employee-owned software or personal data. Employee will comply with all Agency policies and instructions regarding security of confidential information. Any software, products or data created as a result of work-related activities are owned by the Agency and must be produced in the approved format and medium.

Employee agrees to protect Agency records from unauthorized disclosure or damage and will comply with all legal requirements regarding confidentiality or disclosure of Agency information.

**OTHER ACTION**

Nothing in this Agreement precludes the Agency from taking any appropriate action against Employee if Employee fails to comply with the provisions of this Agreement.

**MISCELLANEOUS CONDITIONS**

Employee agrees to participate in all studies, inquiries, reports or analyses relating to teleworking for the Agency and understands that such studies and reports may be public information. The release of such information shall be consistent with existing laws or regulations regarding public information.
TELEWORK ACKNOWLEDGEMENT

By my signature below, I affirm that I have read and understand this Agreement, and agree to be bound by its terms as a condition of participation in the Telework Program.

_________________________________  __________________
Employee                                                       Date

By my signature below, I affirm that, as Employee’s supervisor, I have reviewed this Agreement with Employee and will assume responsibility as the Agency’s representative for ensuring that all terms and conditions are met.

_________________________________  __________________
Supervisor                                                       Date
STATE TELEWORK PROGRAM

Telework Program Evaluation Form

Instructions: The information requested on this form will be used to help the Maryland Department of Budget and Management (DBM) evaluate the effectiveness of the State Telework Program.

- This form is to be completed at the time of the initial telework agreement and at anytime there is a change in the information below.
- Telework Coordinators are responsible for collecting Telework Program Evaluation forms from all of their agency’s teleworkers and submitting them to the State Telework Program Coordinator within 30 days of any initial agreement or change in information.

Reporting Period (month/year): ______________________

1. Name of Teleworker: ________________________________________________
   First   MI   Last

2. Department Name:____________________________________________________

3. Work Site Location (city/state): ________________________________________

4. Number of miles between your home and work site location (one way):
   _______________________ Avg. Miles Per Gallon: __________

5. How do you usually commute on non-telework days:
   _____ Drive Alone    _____ Carpool/Vanpool    _____ Transit (bus or rail)    _____Bike/Walk

6. Do you normally commute through any of the following corridors on non-telework days (check as many as apply):
   _____ Washington Beltway (495) _____ Baltimore Beltway (695) _____Baltimore/Washington Parkway (295)
   _____ I-270     _____ I-95     _____ I-83

7. Telework activity for the current reporting period:

<table>
<thead>
<tr>
<th>Telework Site</th>
<th>Location (City/State)</th>
<th>Number of Days Teleworked per Month</th>
<th>Average Number of Hours per Workday</th>
<th>Total Number of Miles From Home to Telework Site (one-way)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOME</td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>TELEWORK CENTER</td>
<td></td>
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<td></td>
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<tr>
<td>SATELLITE OFFICE</td>
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</tr>
<tr>
<td>OTHER</td>
<td></td>
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</tr>
</tbody>
</table>
TELEWORK SCHEDULE

The following telework schedule is agreed upon in support of the Teleworking Agreement between ______________________ and ____________________

Name of Employee

Agency

on __________.

Date

Main Work Site Address:  ______________________________

Telephone No.:   ______________________________

Remote Work Site Address:  ______________________________

Telephone No.:   ______________________________

**Work Hours/Location**

<table>
<thead>
<tr>
<th>DAY</th>
<th>HOURS</th>
<th>M – Main, R – Remote</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wednesday</td>
<td>______</td>
<td>____________</td>
</tr>
<tr>
<td>Thursday</td>
<td>______</td>
<td>____________</td>
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<tr>
<td>Friday</td>
<td>______</td>
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<td>Saturday</td>
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<tr>
<td>Monday</td>
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<td>____________</td>
</tr>
<tr>
<td>Tuesday</td>
<td>______</td>
<td>____________</td>
</tr>
<tr>
<td>Daily Lunch Break</td>
<td>______</td>
<td></td>
</tr>
</tbody>
</table>

Employee:   ________________________               Date:  _________________

Supervisor:  ________________________               Date:  _________________
Maryland’s Telework Program

Remote Work Site Self-Certification Checklist

Name: ______________________________ Administration: ______________________

Remote Work Address: __________________________________________________

Remote Work Phone: ________________________________

Supervisor: ________________________________

This checklist is designed to assess the overall safety of your remote workplace and to ensure that you have been properly prepared for teleworking. Upon completion, you should sign and return this form to your supervisor.

Describe the workspace in your remote workplace:

________________________________________________________________________
________________________________________________________________________

A. Work Space Environment

1. Is the work space free of potential hazards that could cause physical harm (frayed wires, bare conductors, loose wires, exposed wires to the ceiling, frayed or torn carpeting seams, uneven floor surfaces)? ___ Yes ___ No

2. Are electrical outlets grounded (3 pronged)? ___ Yes ___ No

3. Do chairs have any loose casters (wheels) ___ Yes ___ No; and are the rungs and legs of the chairs sturdy? ___ Yes ___ No

4. Are the phone lines, electrical cords, and extension wires secured? ___ Yes ___ No

5. Is the office space neat, clean, and free of obstructions and excessive amounts of combustibles? ___ Yes ___ No

6. Is there enough light for reading? ___ Yes ___ No

7. Is a fire extinguisher easily accessible from the office space? ___ Yes ___ No

8. Is there a working (test) smoke detector within hearing distance of the workspace? ___ Yes ___ No

9. Is the area free from distractions (i.e. children)? ___ Yes ___ No
Maryland’s Telework Program

Remote Work Site Self-Certification Checklist

B. Employee Orientation

1. Have you read the State of Maryland’s Teleworker’s Manual? ___ Yes ___ No

2. Have you been provided with a copy of your signed Agency Teleworking Agreement? ___ Yes ___ No

3. Have you discussed your work schedule with your supervisor? ___ Yes ___ No

4. Have you completed the Teleworker Work Plan? ____ Yes ____ No

5. If you have been issued agency equipment, have you been briefed on the care of the equipment? ___ Yes ___ No

6. Have you discussed your performance expectations with your supervisor? ___ Yes ___ No

7. Have you been provided with relevant telephone directories and electronic reports? ___ Yes ___ No

I certify that all information contained in this checklist is true and complete to the best of my knowledge. I authorize _______________________________ to inspect the remote work location provided I am given 24 hours notice of the inspection. I understand that any erroneous, misleading or fraudulent information is sufficient grounds for my preclusion from teleworking and/or disciplinary action.

_____________________________________ ___________________________
Teleworker Date

_____________________________________ ___________________________
Supervisor Date
GENERAL TELEWORK REQUIREMENTS

I ___________________________ certify that I understand and agree to adhere to each of the following requirements:

• To provide a home or remote work site telephone number where I may be reached at all times (cell phone numbers may not be substituted for a home or remote work site number unless Employee certifies that there is no land line within the home or remote work site.) Phone number: ______

• To respond to phone messages and emails at least hourly during each telework occasion.

• To call my supervisor at least twice during each telework occasion.

• To respond to calls from the main office within 15 minutes of the call.

• To provide the specific deliverables, as detailed below, to my supervisor on my next regularly scheduled workday in the office.

• To comply with all provisions of this Work Plan and acknowledge that failure to comply with these provisions will result in the termination of my participation in a teleworking arrangement, may negatively affect my performance rating, and may result in disciplinary action.

Teleworker’s Signature ___________________________ Date ______

Supervisor’s Signature ___________________________ Date ______

Agency Personnel Officer’s Signature ___________________________ Date ______

General Telework Requirements
DBM-OPSB
May 2013