

MODIFIED WORK WEEK GUIDELINES - CUPE LOCAL 951

A. Collective Agreement Language

Section C - Modified Work Schedules

- 18.06 The University and the Union will institute, on a trial basis, a modified work schedule in areas where it is agreed that such a schedule may be of mutual benefit. Such trial period will not be subject to the limitations of Article 18 (18.01 and 18.03).
- (a) A proposal to implement a trial period may be initiated by employees and/or the department head, and must be forwarded to the Director of Human Resources for review and subsequent consultation with the Union. The review of a proposal will include consideration of the views of both the employees and the department head.
 - (b) Where, after a trial period in an area, it has been agreed by the parties that a modified work schedule has not resulted in bona fide operational difficulties (including additional costs), such schedule may be instituted in that area on terms approved by the parties and will not be subject to the limitations of Article 18 (18.01 and 18.03).
 - (c) Other than anticipated temporary changes to a modified work schedule, there may be no change in an approved schedule unless bona fide operational difficulties occur, in which case the University agrees to provide the Union with not less than three (3) months notice prior to cancellation of the schedule.

B. General Guidelines

1. Only full-time employees may participate in modified work-week programs.
2. Normally there must be at least three support staff in a department before implementation of a modified work-week program will be considered.
3. Statutory holidays, vacation days, sick days and personal leave days are recorded as seven (7) hour days. Only time actually worked is counted towards earning modified days.
4. Additional time worked on modified days is not considered overtime.
5. Lunch hours may only be reduced to one half hour when an employee is making up time not accrued for statutory holidays, sick leave, etc. Reduced lunch breaks can not be regularly scheduled as part of the modified work week program.
6. When an employee is sick for half a day (3 1/2 hours), they must have worked four (4) hours in order to accumulate modified time.
7. If an employee is absent less than two hours due to medical appointments or illness it is recorded as a full day worked, including the modified time.

C. Application Guidelines

Any application to establish a modified work-week program within a work unit requires agreement of the parties to the collective agreement (the University and the Union). Applications must meet the following terms:

C. Application Guidelines

1. There must be a 12 month trial period.
2. An evaluation of the trial period will be completed within one month of the end date of the trial period. The evaluation will compare the trial period with the preceding 12 month period.
3. If the evaluation supports a continuation of the modified work-week program it will commence on the first of the month following acceptance of the evaluation by both parties.
4. The responsibility for timekeeping rests with the department establishing the modified work-week. Employees will track their accumulated hours on a monthly time sheet.

5. Once the trial period begins there should be no alterations to the schedule except where it is found that production levels are inadequate. If alterations are required the manager should consult with the Executive Director of Human Resources.
6. During the trial period the modified hours will be connected to positions. Newly appointed employees will maintain the schedule for the position vacated.
7. Employees will not be required, as a result of the modified work-week, to take on the duties of a higher payband to maintain production.

D. Procedures for Implementing Modified Work Weeks

Step 1 (Initiating)

- A. In a memo to the Executive Director, Human Resources, the Department Head or employees request a modified work-week.
- B. The Executive Director, Human Resources replies with a copy of the current guidelines to be considered in establishing the modified work-week. This will include a request for approval from the appropriate Dean/Director with an outline of benefits perceived for the University.
- C. The Dean/Director replies with a letter of recommendation.

Step 2 (Union Approval)

- D. The Executive Director, Human Resources advises the Union of the specific request and asks for their approval of the trial period.
- E. Letter of approval received from the Union.

Step 3 (Trial Period)

- F. The Human Resources office replies to the department approving the request for the trial period and outlining procedures to be followed.

Step 4 (Final Approval)

- G. At the end of the 1 year trial period the department is asked to document whether or not the trial period was successful. At this time the Department Head may recommend that the modified work-week continue or give reasons why it should be discontinued. The employees affected should also either co-sign the recommendation or attach their comments.
- H. The Executive Director, Human Resources, on receipt of documents, will contact the Union and either ask for their approval to continue the modified work-week as requested by the Department or advise that the Department Head has recommended discontinuing the schedule.
- I. The Department is notified whether or not they may continue with modified work weeks.

MONTHLY TIME RECORD FOR EMPLOYEES ON MODIFIED WORK WEEK

DEPARTMENT _____ MONTH _____

EMPLOYEE'S NAME _____ MODIFIED SCHEDULE _____

HOURS OF WORK _____ LUNCH PERIOD _____
(lunch break must be one hour)

REGULAR DAYS OFF _____ MODIFIED DAY OFF _____

TOTAL ABSENCES THIS MONTH: SICK _____ VACATION _____ OTHER _____
(Please see codes on reverse)

Please note that employees will earn hours toward their modified days off only on days that they actually work. In other words, on statutory holidays, or when an employee is absent due to illness, vacation, personal leave, etc., these days will be considered as 7 hour days. Modified hours may not be accumulated to be taken at a later time, but must be taken as soon as possible after they are earned.

DATE	HOURS WORKED	HOURS EARNED TOWARD MODIFIED DAY OFF	TOTAL ACCUMULATED MODIFIED HOURS	COMMENTS
Balance Forward				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
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31				

Employees are asked to complete one of these sheets each month and hand in to supervisor at the end of the month. Any accumulated modified hours should be transferred to the new month. Please ensure that these sheets are kept in your department to support an audit.