



KERN COUNTY PROBATION DEPARTMENT

Policies And Procedures

TITLE: Alternative Work Schedule Program			Article: 1305.03
APPROVED: TR Merickel, Chief Probation Officer			
EFFECTIVE: August 2018	REVIEWED: August 2018	REVISED: August 2018	UPDATED: August 2018

POLICY

The basic rules/conditions of the program are as follows:

1. This is a voluntary program. No employee shall be required to participate. Managers or employees assigned to single employee stations or unique caseload assignments may be ineligible to participate in the Alternative Work Schedule Program. Any eligible employee must demonstrate a satisfactory level of performance in his/her assigned position.

When an eligible employee who is working their normal schedule chooses to participate in the Alternative Work Schedule Program, he/she must submit a written request **two pay periods** prior to the beginning of the pay period in which the requested schedule is to start (see example following this policy). The decision to grant or deny a request will be determined by the current operational needs of the department. A request is not deemed granted until it receives final authorization from the Chief Probation Officer.

Once an employee decides to participate in the Alternative Work Schedule Program and subsequently chooses to withdraw from the program, he/she must submit a written notification **ten (10) working days** prior to the beginning of the next pay period of their intent to withdraw and return to their normal 8-hours per day, five days per week, work schedule. An employee who withdraws must wait a minimum of six months before deciding to participate again.

2. In order to ensure adequate workload and/or client service coverage, supervisors and managers have the authority and responsibility to modify and/or revoke participation in the Alternative Work Schedule Program. Department seniority will be considered to determine any and all requests.
3. The "9/80" program consists of eight 9-hour work days and one 8-hour work day per pay period. The 9/80 work week begins four hours after the standard start time of your shift on the eight hour work day and ends 168 hours later.
4. Overtime compensation will be awarded per respective MOU.
5. Every participant in the program is required to take at least a half hour lunch period each work day.
6. For scheduling purposes, it is important when scheduling the "9/80" program, the 8-hour work day be scheduled opposite the week in which the day off occurs. For example, if a

staff person is scheduled to be off on Friday in the second week of the pay period, the one 8-hour work day needs to be scheduled on the same day of the first week of the pay period.

7. Staff will not be permitted to trade or switch his/her scheduled day off.
8. Situations and/or conditions not covered by these basic rules should be resolved through discussion with the immediate supervisor. For specific working hours re: Holidays pay, regular working days, etc., staff should consult their applicable Memorandum of Understanding for guidance. Appeals are submitted through the chain of command.
9. All staff that choose to participate in the Alternative Work Schedule, must sign and submit the Alternative Work Schedule Program agreement, wherein they will agree that failure to abide by the Alternative Schedule policy/protocols may result in employee removal from the program. Additionally, should it become necessary to ensure adequate workload and/or client services coverage, the Director reserves the right to modify and/or revoke participation in the program.



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TITLE: **Alternative Work Schedule Request and Agreement** Form: E-1

DATE: _____

TO: _____
Supervisor's Name, Title

FROM: _____
Employee Name, Title

SUBJECT: Request for Alternative Work Schedule

I request consideration for the alternative work schedule outlined below:

9/80 work schedule

My scheduled work hours will be from _____ to _____ with alternate _____ off.

Lunch: _____ to _____. 8 hour work day: _____ to _____.

Enter from matrix: _____ A, B, C, D _____ 1, 2, 3, 4, 5 _____ (a), (b), (c), (d), (e), (f), (g)

8-hour work day schedule

My scheduled work hours will be from _____ to _____.

Lunch: _____ to _____.

Enter from matrix: _____ I, II, III, IV, V, VI, VII

I acknowledge that I have received and read the basic Alternative Work Schedule Program rules/conditions regarding my participation in the program. I agree to abide by the basic rules of the program and understand that should I fail to abide by these rules or should it become necessary in order to ensure adequate workload and/or client services coverage, my supervisor reserves the right to modify and/or revoke my participation in the program.

Employee Signature: _____ Date _____

Supervisor's Signature: _____ Date _____

Division Director Signature: _____ Date _____

Deputy Chief Signature: _____ Date _____

APPROVED **DENIED**

Chief Probation Officer Signature: _____ Date _____

To be completed by HR Staff:

Effective Date: _____