

**Policy & Procedure Manual**

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**OFF DUTY HOURS AT THE WORKSITE – HR-III-10**

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**POLICY:**

All employees who are present at the worksite are expected to be engaged in the performance of their assigned duties. Employees who are not assigned to work are not to be spending time at the worksite, except for legitimate purposes which have been approved of or acknowledged by the Supervisor, as appropriate, such as spending time with people supported; or participating in recognized functions such as birthday or Christmas parties.

Employees who request to spend time at the worksite outside of their scheduled hours of work do so on a voluntary basis, even though their presence is approved of/acknowledged by the Supervisor, and as such will not receive compensation. Whatever the purpose, employees not assigned to work will avoid distracting the staff on duty from their responsibilities.

Where an employee is assigned by a Supervisor to work hours in addition to his/her scheduled hours of work, the Supervisor will communicate to the employee the specific hours of work which are approved, and these hours will be subject to compensation at the appropriate rate of pay, as per the Collective Agreement or OPTIONS policy on overtime as appropriate.

**PURPOSE:**

1. To ensure a healthy and productive work environment in order to prevent accidents and injuries.
2. To ensure that needs of people supported are met.

**PROCEDURE:**

1. Upon arrival at the worksite, any employee who is not on duty will communicate his/her presence to the staff who is on duty, and the reason for their being there.
2. Any employee who has no legitimate reason to be at the worksite, (as identified above) or who presents a distraction will be asked to leave by the employee on duty.

**PROCEDURE (continued):**

3. The Supervisor/Supervisor-On-Call is available if there are questions as to the legitimacy of the employee's presence, or if assistance is required.

**RECOMMENDED BY:** Director, Human Resources

**APPENDICES: 0**

**OPERATIONAL ACCOUNTABILITY:** Administration, Finance, Human Resources, Community Services (all)

**ORIGINAL POLICY DATE:** April 1993

**AUTHORIZED BY:** Executive Director

**SIGNATURE:**

A handwritten signature in black ink, appearing to be 'A. J. ...', written over a horizontal line.