



POLICY: HR-III-44
DEPARTMENT: Human Resources
CATEGORY: Working Conditions
EFFECTIVE DATE: February 2017
SUPERSEDES VERSION DATED: August 2009
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Policy & Procedure Manual

REQUESTS FOR DAYS OFF AND EXCHANGE OF SHIFTS – HR-III-44

POLICY:

It is recognized by the agency that all staff may require time off and that staff have personal needs that may, on occasion, conflict with their scheduled hours of work. Staff have an opportunity to plan ahead to address these conflicts and need for time off by reviewing their rotation and/or their proposed/posted or known work schedule, and requesting amendments/days off as required.

NOTE:

1. While every effort will be made to accommodate employee needs, not all requests may be approved.
2. For bargaining unit employees – requests for specific days off or requests to exchange a shift after posting, with another employee in the same location, will be submitted in accordance with the Collective Agreement.

PURPOSE:

1. To ensure that staffing is available to meet the needs of people receiving services.
2. To maintain operational efficiency.
3. To allow staff to request changes in their rotation and/or work schedule in order to accommodate their personal needs.

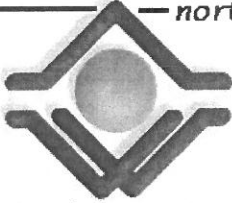
Definition: - BARGAINING UNIT EMPLOYEES:

Rotation: A schedule for Supervisors and employees that is a guideline only and is subject to change.

Schedule: A timetable for projected work assignments posted by the Supervisor, developed from a rotation dictated by the needs of consumers, budgetary constraints and staff requests.

Definition: NON-UNION EMPLOYEES:

Work Schedule: A schedule for proposed work days and hours required to complete job specific tasks and assignments, dictated by the needs of people receiving services, the organization, budgeting constraints and staff requests.



PROCEDURE:

1. BARGAINING UNIT EMPLOYEES

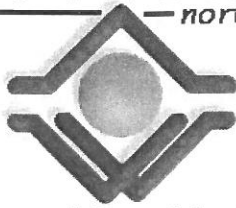
Bargaining Unit Employees must check their specific collective agreement language for specific requirements when requesting days off and exchange of shifts.

A. Requests for Specific Days Off:

1. Requests for specific days off, e.g. vacation days, lieu days, are to be submitted in writing to the employees supervisor on a "Request For Days Off and Exchange of Shifts" form in advance of the requested day off as outlined in the Collective Agreement.
2. Requests for specific days off received less than seven days in advance of the day off, or as otherwise specified, shall not be considered.
3. It is the responsibility of the Supervisor to determine replacement staff need. If replacement staff have been identified, the Supervisor will notify the Scheduling Clerk of the changes in the schedule.
4. The scheduling software system will be updated with any approved changes by designated personnel.

B. Exchange of Shifts:

1. "Requests for change in posted time schedules must be submitted in writing and co-signed by an employee willing to exchange days off with the employee in the same classification requesting the change. Any such change in a scheduled shift initiated by the employee and approved by the employer shall not result in overtime payment ..." Refer to specific Collective Agreement language.
2. The employee originating the request must complete a form "Request for Days Off and Exchange of Shifts" stating the exact date(s) and shifts to be exchanged. All employees involved in the exchange must sign the form before the request can be processed.
3. The signed form shall be submitted to the appropriate Supervisor for approval. The Supervisor will determine if approval can be granted.



Note: OPTIONS will not adjust scheduled hours as a result of any loss or gain in hours of work on approved exchange of shifts.

4. The Supervisor will retain the original request and forward a copy to each of the employees as well as to the Scheduling Clerk to update the master schedules. The Supervisor will also ensure correct coding in the scheduling software system.

Note:

1. **Prior to Posting** - Requests for changes in a rotation in the majority of cases can be planned for and should be submitted prior to the posting of schedules.
2. **After Posting** - Requests for exchange of shifts after posting can cause substantial delay in being able to confirm coverage for absences and requests for leave, thus prolonging "pending coverage" conditions.

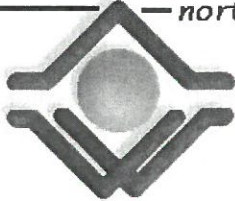
Processing of exchange of shifts delays approval of staff requests for specific days off.

It is expected that requests for exchange of shifts submitted after posting will be for unexpected or unforeseen circumstances.

2. NON-UNION EMPLOYEES

1. Many Non-Union employees will in general, work Monday to Friday during the office hours set by Administration. Variations will occur, depending on the needs of people receiving services, the functional requirements, work tasks and assignments to be completed, and as approved by the Supervisor/Manager /Director of the department.
2. Requests for specific days off are to be submitted in writing to the employee's immediate Supervisor/Director with as much advance notice as possible. This may be done using the attached appendix "Request for Days Off", or in the form of a memo/email directed to the Supervisor/Manager/Director. All requests will be responded to in writing within a reasonable period of time.
3. Short notice requests for time off must be made by speaking directly with an employee's Supervisor/Manager/Director.
4. The scheduling software system will be updated with any approved changes by designated personnel.
5. Exchange of shifts is not applicable to Non-Union employees.

OPTIONS
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Personal Support Services

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RECOMMENDED BY: Director, Human Resources

APPENDICES: 1

OPERATIONAL ACCOUNTABILITY: Administration, Finance, Human Resources, Personal Support Services Administration, Personal Support Services, Community Resource Team

ORIGINAL POLICY DATE: November 1997

AUTHORIZED BY: Executive Director

SIGNATURE: _____

A handwritten signature in blue ink is written over a horizontal line. The signature is cursive and appears to be 'A. [unclear]'.

- OPTIONS northwest -
Request for Days off and Exchange of Shifts

Employee Section

Name: _____

Date: _____

Classification: _____

Area: _____

Request (including reasons):

Days off

Employee Signature: _____

Exchange of shifts - *Bargaining Unit Employees Only*

I understand that, in accordance with the collective agreement, any such change in a scheduled shift shall not result in overtime payment. I agree that any loss or gain in hour of work resulting from an exchange of shift will not require the Employer to adjust the scheduled hours as a result of such request.

Employee's Signature

Employee's Signature

Supervisor Section

Date Received by Supervisor: _____

Approved

Not Approved

Pending Coverage

Comments:

Supervisor's Signature: _____

Date: _____

Director/Manager (if applicable)

Comments:

Approved

Not Approved

Director of Department/Designate Signature: _____

Date: _____