

LEADER GUIDE TO ALTERNATIVE WORK ARRANGEMENTS

A few tools you need to manage the process

JULY, 2021

Your resource for our new way to work

As we move forward, leaders need to help guide and provide clarity to teams in regard to Alternative Work Arrangements. The documents within this guide are meant to provide a perspective on things to consider as well as the forms required to support Alternative Work Arrangements.

As a university, the *default approach* for each of our campuses is that staff will work on site. Alternative Work Arrangements will be permitted in specific instances, provided that they benefit the university and are approved by the relevant Senior Vice President.

Where to go with questions

Guidance for your Division comes from local senior management.

For any questions, please reach out to your divisional point of contact:

Office of the Provost – Anthony Rini

Office of the Chancellor – Amy Molway

Finance & Administration – Erica Machut (Finance & Admin.) / Chris Bracket (Facilities, Campus Planning, and Real Estate)

External Affairs – Sonya Cottam

Advancement – Caitlin Hahn

Office of General Counsel – Regi Minichello

For any questions regarding space and office requirements, please contact Jeannine Powers in Campus Planning. For cleaning and testing protocols visit the [Faculty and Staff FAQs page](#) on the university COVID-19 website.

THINGS TO CONSIDER

As you consider how Alternative Work Arrangements may further enable your work and the achievement of your organizational objectives, it's important to understand the impact and ensure you plan accordingly. Below are some suggestions on what to consider as you evaluate options:

How to assess if a *position* is viable for an Alternative Work Arrangement:

- How are the alternative arrangements of this position beneficial to the university and our stakeholders?
- Who are the position's key stakeholders?
- Are they students? Visitors? Staff?
- What is the volume of the interactions?
- How much direction does the position require from the leader?
- How much autonomy / decision making ability does the position have?
- Is the position a direct manager/supervisor of a team or position that is primarily on campus?
- Would alternative hours better support the needs of the community?

How to assess impact on the department:

- Will an alternative arrangement support departmental business objectives?
- Will an alternative arrangement affect the work outcomes of the team/department?
- Will the arrangements unduly burden those that remain on-site?
- Will the arrangements require the department to hire additional full-time, part-time, temp, or student support?

What will this require of your managers:

- Developing robust onboarding and training procedures
- Setting team norms
- Creating alternative platforms for engagement and communication
- Managing and assessing performance remotely
- Providing clarity on how office space will change (hoteling, location, availability, etc.)
- Mechanism for communicating team office hours and location(s) to stakeholders

ALTERNATIVE WORK ARRANGEMENT PROPOSAL FORM

Please use this form for each position under consideration. Feel free to include other documents to support your request. If you have questions on how to complete this form, please speak with your point of contact. You will need to submit this to your divisional point of contact for review/approval before implementing Alternative Work Arrangements.

Division /College: _____

Department: _____

Role(s) under consideration for an alternative work arrangement: _____

Number of individuals in this role: _____

Campus: _____

Office Location: _____

Exempt (salaried) or Non-Exempt (hourly) Position: _____

Proposed Schedule for individuals in role (fully remote or hybrid): _____

Proposed Start Date: _____

Proposed End Date (if known): _____

Name of person submitting request: _____

Please explain why this position is well-suited for an Alternative Work Arrangement:

How are you ensuring all relevant business needs can be met by allowing this Alternative Work Arrangement?

ALTERNATIVE WORK ARRANGEMENT EMPLOYEE ACKNOWLEDGEMENT

Employee Name: _____

Employee Title: _____

Division/College: _____

Department: _____

Manager Name: _____

Type of Alternative Work Arrangement (fully remote or hybrid): _____

Proposed Start Date: _____

Proposed work schedule (days and hours/on and off-site): _____

Alternative work location contact information (cell phone and address):

Is this the employee's residence (yes or no)? _____

REMOTE WORK GUIDELINES AND EMPLOYEE ACKNOWLEDGMENT

These guidelines provide information regarding expectations when an employee is permitted to work from home or other location away from campus. Please know that these Alternative Work Arrangements are intended to only impact your work location; they are not intended to change the terms and conditions of your employment relationship (or employment contract, where applicable) with the university. If you have questions, please speak with your direct manager/supervisor.

Basic Expectations

1. All duties, obligations, responsibilities to Northeastern University remain unchanged by the alternative work arrangement. All job requirements and performance goals must continue to be met and employees must be available during the assigned business hours for all meetings and communications. It is expected that employees will maintain high standards for work and productivity while working remote.

2. All timekeeping and/or reporting requirements, as well as lunch and break policies, as applicable, will continue to apply. Overtime hours, if applicable, must be approved by your manager in accordance with standard policy.
3. Employees are required to provide their direct manager/supervisor with a phone number where they can be reached during business hours, and must notify their leader immediately of any situation or circumstance that affects their health, safety or welfare, or of any accidents or injuries suffered while working remotely.
4. Employees must continue to adhere to all university policies and procedures while working remote, including but not limited to policies concerning standards of conduct and performance, as well as information technology and acceptable use policies. For specific policy information, please visit the [Policies | Northeastern University Policies](#) site for detailed policies.
5. Employees are expected to maintain a safe and secure work environment, and to take steps to assure that suitable workspace is available that can be kept private to avoid exposure of university information to household members, guests or others who may enter the home.
6. All use of Northeastern University provided equipment and supplies located in any remote work site are for employees only, for business purposes.
7. Tax and other legal implications for the business use of the employee's work site are based on IRS and state and local government restrictions (***or other appropriate government restrictions as dictated by Country/Provincial regulations for our global network employees***).

All applicable taxes (including state and federal income tax and Social Security taxes) will be withheld in accordance with applicable guidelines based on employment at Northeastern University. Employees understand that they are responsible for tax consequences and other legal implications that may occur, including local zoning restrictions.

EMPLOYEE ACKNOWLEDGEMENT

I have read and understand these guidelines and agree to comply with all expectations and requirements outlined above. I represent that my alternative worksite complies with all safety, privacy, and other requirements of the university.

I understand and agree that my failure to comply with the requirements set forth above could result in the termination of my alternative work arrangement, and furthermore, I understand that this

arrangement does not give me any contractual entitlement to remote work, and that the university may change or withdraw this arrangement at any time.

Employee Signature: _____ Date: _____

ADDITIONAL COMMENTS:

APPROVALS:

Manager Signature/Date Signed:

_____ Date: _____