

APPLICATION FOR FORMAL HOMEWORKING

Part 1 - Employee Information:

Name:	
Division:	
Grade:	
Office telephone no:	
Home Address:	
Post Code:	
Home telephone no:	
Name of line manager:	
Grade:	
Office telephone no:	

Part 2 - Background Information:

What is/are the reason(s) for the application?	
Do you have any disabilities that are relevant to this application? Do you currently have reasonable adjustments made to your work or working area?	
Are there any issues that might restrict homeworking, such as lease restrictions?	
Do you have any care responsibilities at home? If yes, please summarise the arrangements you have made for these to be carried out while you are working. Please include any back-up arrangements you have made, e.g. if a childminder is sick, if a carer cannot visit, etc.	

APPLICATION FOR FORMAL HOMEWORKING

Part 3 - The Job:

<p>How is the job carried out? Consider the amount of time the job requires the employee to be:</p> <ul style="list-style-type: none">• Working alone at a desk, on a PC, telephone contact, scheduled meetings, etc• Contact needed with other employees, customers and• stakeholders, face to face, telephone or e-mail.	
<p>Which of your duties could be carried out at home? How much of your working week do these take up?</p>	
<p>Which of your duties can <u>only</u> be carried out on WG premises? Eg access to files, incoming/outgoing mail. How much of your working week do these take up?</p>	
<p>Will you need any specific equipment at home?</p>	
<p>Will home working affect other members of your household?</p>	

APPLICATION FOR FORMAL HOMEWORKING

Part 4 - The Manager's Role

Have you discussed how you will oversee the employee's performance? What have you agreed?	
Have you discussed and agreed where the employee will be, how you can get in touch with them, and when they will need to come into the office (or their hub)? Please provide details	
How will you make sure that they continue to feel part of the team and are kept up to date? How will information be provided to the homeworker? How will you ensure that the employee is included in team meetings, updates, training and development activities and opportunities for promotion or alternative work, without requiring frequent attendance at an office??	
Have you discussed any issues that might affect the employee working away from the office? What have you agreed to overcome these?	
Are there any business needs that will be affected by this application? What have you agreed to overcome these?	
Do you believe that the employee understands all the issues involved in homeworking and will be able to perform effectively? If not, explain your reasons.	

APPLICATION FOR FORMAL HOMEWORKING

Part 5 - The Employee

Are you, self-motivated, and able to cope with minimal social contact?	
Will you be able to balance work with domestic responsibilities? Will you be able to devote full attention to their work? (Although there may be some flexibility over when the work is done, homeworking should not be carried out at the same time as another task, e.g. caring for a family member).	
What information on keeping work and other responsibilities (to include any caring responsibilities) separate during time working at home will be provided (where relevant)	
How will you ensure a healthy work life balance?	
Can you demonstrate an awareness of your obligations under health and safety legislation?	
Are you willing to attend meetings, courses, etc. when required?	
If you are a line manager, how will continue to undertake your line management duties?	
Are there any other considerations in relation to the suitability or otherwise to a homeworking agreement?	

APPLICATION FOR FORMAL HOMEWORKING

Part 6 – Health and Safety

The home must provide a safe and healthy working environment. Adequate consideration must be given to all health and safety requirements, whether it is a formal or an informal homeworking arrangement. Applicants must have read the Health and Safety guidance and completed the appropriate online training modules.

Please indicate the position of all furniture, equipment, windows, doors, electricity and telephone/broadband points.

Where in the home will you work?	
Will this room/space only be used for work, or will it be used by others? If so, when?	
Is there enough room for a suitable work surface/desk, storage and chair, and enough space to get in and out of the work area easily?	
Will this space and equipment be secure, and will the work remain confidential?	
Is the likely noise level within the home environment conducive to work?	
Is the employee likely to be disturbed by other occupants? If yes, what measures could be taken to minimise the distraction?	
Detail any other considerations in relation to the suitability of the home environment to a homeworking arrangement. Consider any potential Health and Safety risks or hazards.	

APPLICATION FOR FORMAL HOMEWORKING

Health and Safety team approval? Yes / no
If no then please state reasons

H & S team member name

Signed

Date

APPLICATION FOR FORMAL HOMEWORKING

PART 7 - SUMMARY AND RECOMMENDATION

Having considered the issues within this document, the following recommendation is made to the Deputy Director:

Either:

I recommend that a formal homeworking arrangement be adopted for this employee.

OR

A formal homeworking arrangement is not recommended for this employee because:

(please give reasons for any recommendation not to approve formal homeworking)

Name of line manager

Signed

Date:

Declaration by employee:

I confirm that I have discussed and agreed the contents of this form with my line manager. I confirm that the information documented on this form is correct to the best of my knowledge. I have read and understood the Homeworking Policy and guidelines.

Name of employee

Signed:

Date:

Deputy Director's decision:

I approve/do not approve* the application for a formal/informal* homeworking arrangement. (*delete as appropriate)

Name of Deputy Director:

Signed:

Date:

The line manager and employee should retain a copy of this form

APPLICATION FOR FORMAL HOMEWORKING

Annex C

HOMEWORKING AGREEMENT

This AGREEMENT is made the day of

BETWEEN the Welsh Government (“the Employer”) and (insert name of employee) (“the Employee”).

IT IS AGREED that the existing contract of employment between the above named Employer and Employee contained in the letter of appointment dated will continue under the same terms and conditions contained in the said contract except that:

The terms and conditions for homeworkers contained in the WG's Homeworking Policy and as amended from time to time will apply. Amendments will be notified to the Employee.

The Employee's place of employment shall be (specify place) for days in the working week. For the remaining days of the working week the employee's place of work will be that specified in the letter of appointment on

The Employee will attend at (present hub office) on (attendance dates) (Do not include this provision if only working at home for part of the week).

If the Employee has childcare responsibilities or is responsible for the care of a dependent family member, that employee will make a written statement outlining their care plans for the dependant person during those working hours which are to be undertaken at home. This statement will be set out as a schedule to this agreement and signed by the Employer and by the Employee.

This agreement revokes all previous homeworking agreements.

Signed by(Deputy Director)

On behalf of the Employer

Signed by

The Employee

APPLICATION FOR FORMAL HOMEWORKING

Annex D

ARRANGEMENTS FOR UNDERTAKING CARING RESPONSIBILITIES

(Complete and delete as appropriate).

I have care of child(ren) aged
and/or
I have care of (a) dependent member(s) of my family.

My arrangements for care of those for whom I have a caring responsibility during my agreed working hours which are to be undertaken from home are as follows:

I will follow and observe the care plan outlined in this statement and will inform my employer of any change in my caring responsibilities.

Signed (Employee)

Agreed on behalf of the Employer by

Date