



## Remote Work Agreement

A remote work agreement must always be drawn up in writing if regular and/or recurring remote work lasts for at least one week. All remote work arrangements must be discussed with and approved by your direct supervisor. A remote work agreement is not required for accommodation under Human Rights Legislation.

<b>Employee Name:</b>	
<b>Position:</b>	
<b>APSEA Designated Work Location Address:</b>	
<b>Direct Supervisor:</b>	
<b>Remote Work Location Address:</b>	
<b>Remote Work Arrangement Dates and Details</b>	<p>The arrangement cannot be longer than 12 months.</p> <p>The Remote Work Agreement is valid for a fixed term (indicate dates):</p> <p>Details (e.g. once a week, x days per month, etc):</p> <p>The employee and their direct supervisor must always agree on remote workdays together in advance.</p> <p>In person attendance at the APSEA Centre or APSEA designated work location may be required for the purpose of face-to-face meetings or professional learning, retrieving equipment, and other APSEA property in the event of an employee's illness, end of employment or any other purpose as identified by their direct supervisor.</p>
<b>Working Hours</b>	
<b>Termination of the Remote Work Agreement</b>	Remote work arrangements can be terminated by the employee with a period of notice of 7 days. Remote work arrangements can be terminated at any time at the discretion of the employer provided a plan, with reasonable timelines, for the employee's

	return to the APSEA designated work location has been put in place.
<b>Terms and Conditions of Employment</b>	In cases where the employee is a member of a bargaining unit, the terms and conditions of employment are determined according to the applicable collective agreement. In addition, the Remote Work Policy and Remote Work Procedure are to be followed when in a remote work arrangement.  *The Remote Work Safety Checklist is to be completed and submitted with each Remote Work Agreement (see below).
<b>Communication, Monitoring and Reporting</b>	The remote work arrangement must not negatively impact an employee's reachability, communication, and progression of work.
<b>Work Equipment</b>	The employee has the following APSEA provided equipment at their remote work location (please list):
<b>Reimbursement of Costs</b>	Subject to APSEA Remote Work Arrangements Policy, Remote Work Arrangements Procedure, Travel Policy, and Travel Procedure.
<b>Obligations Related to Remote Work</b>	The employee's work-related obligations are the same for remote work as for work done at the APSEA designated work location.
<b>Other Regulations</b>	The APSEA Remote Work Arrangements Policy, Remote Work Arrangements Procedure, APSEA Acceptable Use of Computers, Email and Internet Policy shall be followed as part of this agreement.



## Remote Worksite Safety Checklist

The remote work location should provide an equivalent level of health, safety, and security that an employee would receive at an APSEA designated work location. Employees working in a remote work location should assess their individual work area for existing or potential problems.

This assessment checklist includes:

- Emergency Procedures
- Electrical Safety
- Office Ergonomics
- Work Environment

If you have other health and safety concerns or require help using this checklist, please contact your direct supervisor.

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### Emergency Procedures

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|----|---|-----|----|
| 1. | I know the APSEA emergency contact numbers when I am in my remote work location.                              | Yes | No |
| 2. | Emergency phone numbers (hospital, fire department, police department) are posted at my remote work location. | Yes | No |
| 3. | I have an emergency evacuation route in place.  | Yes | No |
| 4. | A regular check-in schedule has been established with my direct supervisor.                                   | Yes | No |
| 5. | I have provided my direct supervisor with emergency contact information.                                      | Yes | No |
| 6. | Basic first aid supplies are readily available.   | Yes | No |
| 7. | There is a smoke detector located in my remote work location area that is fully functioning.                  | Yes | No |

- |     |  |     |    |
|-----|--|-----|----|
| 8.  | (If I have fuel burning appliances) There is a carbon monoxide detector located in my remote work location that is fully functioning.  | N/A |    |
|     |  | Yes | No |
| 9.  | There is a fire extinguisher located in my remote work location area that is functioning.  | Yes | No |
| 10. | I am aware that all incidents must be immediately reported to my direct supervisor and an <b>Accident-Incident-Near Miss Report</b> (available on the APSEA Website – Staff Portal) must be completed. | Yes | No |

### Electrical Safety

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|----|--|-----|----|
| 1. | I have adequate surge protection in place with all electrical equipment.   | Yes | No |
| 2. | Outlets are not overloaded.  | Yes | No |
| 3. | Power bars are used in place of extension cords where possible. If extension cords are used, they are CSA approved and grounded by three prongs. | Yes | No |
| 4. | All electrical cords are in good condition and working properly.   | Yes | No |
| 5. | All electrical cords are neatly secured, out of the way, and anchored when possible.   | Yes | No |
| 6. | There is sufficient ventilation room available around all electrical equipment.  | Yes | No |
| 7. | Any electrical panels in the remote work location are properly covered and easily accessible.  | Yes | No |
| 8. | Any electrical enclosures (switches, outlets, receptacles, junction boxes) have tight-fitting covers or plates.                                  | Yes | No |

### **Office Ergonomics**

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|--|------------|-----------|
| 1. Desk, chair, computer, and other equipment are of appropriate design and arranged to eliminate strain on all parts of the body.                                   | <b>Yes</b> | <b>No</b> |
| 2. I make efforts to work in a neutral and supportive position with proper posture.  | <b>Yes</b> | <b>No</b> |
| 3. I take frequent mini breaks at my desk and regular work breaks away from my desk.   | <b>Yes</b> | <b>No</b> |
| 4. I stretch throughout the day.   | <b>Yes</b> | <b>No</b> |
| 5. I am aware that it is my responsibility to be aware of recommended office ergonomics, and to direct any questions or concerns to my immediate supervisor/manager. | <b>Yes</b> | <b>No</b> |
| 6. There is sufficient lighting in my workspace.   | <b>Yes</b> | <b>No</b> |
| 7. Supplies are stored in a manner that does not require awkward body positioning or lifting.  | <b>Yes</b> | <b>No</b> |

### **Work Environment**

- |   |            |           |
|---|------------|-----------|
| 1. The remote work location has a clearly defined workspace that is kept clean and orderly. | <b>Yes</b> | <b>No</b> |
| 2. Supplies and equipment (both departmental and employee-owned) are in good condition.     | <b>Yes</b> | <b>No</b> |
| 3. All lighting is working properly and is sufficient for my needs.                         | <b>Yes</b> | <b>No</b> |
| 4. The area is well ventilated and heated.  | <b>Yes</b> | <b>No</b> |
| 5. Exits are free of obstructions.  | <b>Yes</b> | <b>No</b> |
| 6. Storage is organized to minimize risks of fire.  | <b>Yes</b> | <b>No</b> |

- |    |  |            |           |
|----|--|------------|-----------|
| 7. | Heavy items are securely placed on sturdy stands close to walls.           | <b>Yes</b> | <b>No</b> |
| 8. | Computer components are kept out of direct sunlight and away from heaters. | <b>Yes</b> | <b>No</b> |
| 9. | Computer components are kept off the floor and safe from water damage.     | <b>Yes</b> | <b>No</b> |

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Employee's Signature

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Date

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Direct Supervisor's Signature

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Date

The signed agreement will be forwarded to Human Resources and stored in the employee's personnel file.

**Rev: July 2024**