



PSCINST 5330.1  
MAR - 5 2010

COAST GUARD PERSONNEL SERVICE CENTER INSTRUCTION 5330.1

Subj: PERSONNEL SERVICE CENTER TELEWORK PROGRAM

- Ref:
- (a) Coast Guard Telecommuting Program, COMDTINST 12630.1
  - (b) Management of Electronic Mail, COMDTINST 5270.1D
  - (c) Classified Information Management Program, COMDTINST M5510.23
  - (d) Operations Security (OPSEC) Program, COMDTINST M5510.24
  - (e) Freedom of Information and Privacy Acts Manual, COMDTINST M5260.3
  - (f) Information and Life Cycle Management Manual, COMDTINST 5212.12A
  - (g) Protecting Federal Records From Unauthorized Removal, COMDTINST 5212.2

1. PURPOSE. This instruction establishes procedures, policy, and guidance regarding the Telework Program for CG PSC. CG PSC field units may use this instruction as a reference in developing their local guidance.
2. ACTION. PSC division/staff chiefs must ensure compliance with the provisions of this instruction.
3. DIRECTIVES AFFECTED. None.
4. DISCUSSION. The Coast Guard's telework program is a broad management tool that offers employees a voluntary opportunity to work at an alternative site, such as the employee's home, a satellite facility, or a mobile office at least one day every two weeks. Teleworking is distinct from occasional work-at-home days for special or short-term projects. It is a way of further empowering employees to get the job done.
5. POLICY.
  - a. Telework participants must meet the requirements of reference (a) to be eligible for the program. Teleworking is a management tool and not an employee entitlement. The opportunity to telework is offered only with the understanding that

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the teleworking location is a workspace and the time is exclusively for work.

- b. The Coast Guard will not pay for any Internet Service Provider (ISP) or on-line services associated with teleworking.
- c. Neither employee workload nor supervisory responsibilities are mitigated by any teleworking arrangement.
- d. Agreement to take part in this voluntary program implies consent to be audited to verify individual compliance with the terms of the teleworking program.
- e. The employee's official duty station will continue to be the official office location, not the alternative work site.
- f. Supervisors have the authority to approve, disapprove, or retract a previously-approved telework agreement for one of their members. For the purposes of this instruction, a supervisor is consistent with the supervisor noted in the civilian performance appraisal, officer evaluation report, or enlisted support form. Nothing in this instruction must be construed as limiting a supervisor's ability to authorize an occasional work-at-home day.
- g. An individual telework agreement may be canceled at any time by the employee.
- h. No employee must be assigned to a teleworking schedule involuntarily or required to remain in one involuntarily.
- i. Entitlement to locality-based comparability pay, special salary rates, travel and other allowances, and relocation expenses shall be based on the official duty station.
- j. Regardless of the option, users are reminded that auto-forwarding e-mail over the Internet or to an external internet address is prohibited by Coast Guard policy in accordance with reference (b).

5. RESPONSIBILITIES.

- a. CG PSC-HR&A is designated as the telework coordinator for CG PSC.
- b. CG PSC-BOPS-c will provide approved personnel with instructions required to establish remote access to the Coast Guard network.

6. FUNDING. Any costs associated with remote access, such as establishing new accounts or repairs/replacements of a CAC-RAS will be funded by the sponsoring division/staff.

7. INFORMATION MANAGEMENT. Coast Guard information shall be appropriately protected at all times. When conducting Coast Guard business, any records, regardless of

how they are produced, are considered government property and shall be handled and protected in accordance with references (c) thru (g).

8. TELEWORK SITES. Supervisors may allow their employees to telework from home or an approved teleworking site. A list of established teleworking sites in the Washington, D.C. metro area can be found at <http://www.telework.gov/>.
9. PROCEDURES.
  - a. Interested personnel should review the program requirements of reference (a) to determine if the program is appropriate.
  - b. Personnel meeting the requirements and wishing to telework should identify an appropriate teleworking site, consider how they will meet their work responsibilities, and submit a request to their supervisor.
  - c. The supervisor and the teleworker must execute a written agreement using enclosure (1). A copy of the signed agreement must be forwarded to CG PSC-HR&A. If applicable, a copy of any cancelled agreements must also be forwarded to CG PSC-HR&A.
10. SUPPORT.
  - a. Remote access assistance is available from TISCOM, OSC from at 1 (800) 821-7081 or <http://cgweb.tiscom.uscg.mil/SUPPORT/remtacc.htm>.
  - b. Only Government-owned portable workstations will be supported for the teleworking program.
11. ENVIRONMENTAL ASPECT AND IMPACT CONSIDERATIONS. Environmental considerations were examined in the development of this directive and have been determined to be not applicable.
12. FORMS/REPORTS. None.



D. A. NEPTUN

Enclosures: (1) Telework Agreement

**U.S. Coast Guard and Employee Telecommuting Agreement**

**Approval for Alternative Work Site**

**Name:** \_\_\_\_\_

**Organization/Office:** \_\_\_\_\_

**Current Duty Station:** \_\_\_\_\_

**Geographical Location:** \_\_\_\_\_

**Approved Alternative Work Place:** \_\_\_\_\_

**Geographical Location:** \_\_\_\_\_

**Voluntary Participation**

I voluntarily agree to work at the approved alternative work site indicated above and agree to follow all applicable policies and procedures. I recognize this arrangement is not an employee benefit but an additional method the agency may approve to accomplish work.

**Official Duty Station**

For Coast Guard, the telecommuter's official duty station is the main office. Working at an alternative work site is not a basis for changing my salary or benefits.

**Official Duties**

I shall perform official duties only at the official duty station or U.S. Coast Guard-approved alternate work site and will not conduct personal business, such as caring for dependents or making home repairs, while in official duty status at the alternate work site.

**Work Schedule and Tour of Duty**

Enclosure (2) to COMDTINST 12630.1

Unless the U.S. Coast Guard and I agree otherwise, the number of hours I am scheduled to work remains the same. My official tour of duty will be: (specify days, hours, and location such as official duty station or alternative work site). I further understand I am expected to report for work at my official duty station at least one day a week. I am also expected to attend all required staff meetings at my official duty station.

### **Time and Attendance**

My timekeeper will have a copy of my schedule. My supervisor will certify biweekly the time and attendance for hours worked at the official duty station and alternative work site. (Note: the organization may require me to complete a self-certification form.)

### **Leave**

I shall follow established office procedures for requesting and obtaining approval of leave.

### **Overtime (Not Applicable for Military Members)**

As a civilian, I agree to work overtime only if my supervisor so orders and approves in advance. Working overtime without such approval may result in terminating the telecommuting privilege and/or other appropriate action.

### **Equipment and Supplies**

I shall protect any U.S. Coast Guard-owned equipment and use it only for official purposes. The agency will install, service, and maintain U.S. Coast Guard-owned equipment. I shall install, service, and maintain any personal equipment I use. The U.S. Coast Guard will provide and/or reimburse me for all necessary office supplies and business-related long distance telephone calls. The U.S. Coast Guard agrees to provide this equipment: (specify equipment here, if applicable)

### **Security**

I will comply with U.S. Coast Guard security policies and protect all U.S. Coast Guard resources, including U.S. Coast Guard data and information, at the alternate work site.

### **Liability**

The U.S. Coast Guard is not liable for damages to my personal or real property while I work at the approved alternate work site except to the extent the Federal Tort Claims Act or the Military Personnel and Civilian Employees Claims Act hold the U.S. Coast Guard, as a Government agency, liable.

**Work Area**

I shall provide a furnished work area adequate for performing official duties.

**Work Site Inspection**

I agree to permit the U.S. Coast Guard to inspect my alternate work site during normal working hours to ensure proper maintenance of U.S. Coast Guard-owned property and conformity to safety standards. (I will complete a self-certification safety checklist for an at-home work site.)

**Alternative Work Site Costs**

The U.S. Coast Guard will not pay operating costs associated with using my home as an alternate work site (e.g., home maintenance and insurance) except for authorized home telecommunication costs. However, I do not relinquish any entitlement to reimbursement for authorized expenses incurred while conducting business for the U.S. Coast Guard, as provided for by statute and implementing regulations.

**Injury Compensation (Check the Applicable Paragraph)**

\_\_\_ As a *civilian member*, I am covered under the Federal Employee's Compensation Act (appropriated fund employee) or Longshore & Harbor Workers' Act (NAF employee) if injured while I actually perform official duties at my official duty station or alternate work site. I agree to notify my supervisor immediately of any accident or injury that occurs at the alternate work site; the supervisor will investigate my report immediately.

\_\_\_ As a *military member*, I am covered under 10 USC 1201 if injured while I actually perform official duties at my official duty station or alternate work site. I agree to notify my supervisor immediately of any accident or injury that occurs at the alternate work site. The supervisor will investigate my report immediately.

**Work Assignments**

I shall complete all assigned work according to procedures my supervisor and I mutually agree to and according to guidelines and standards in my performance plan.

**Performance**

To work at an alternate work site, my most recent performance ratings must be at least "Proficient" or equivalent. My supervisor may require me to report regular progress to assist in judging performance. A decline in performance may be grounds to cancel the telecommuting agreement.

Enclosure (2) to COMDTINST 12630.1

**Disclosure**

I shall protect U.S. Coast Guard and Government records from unauthorized disclosure or damage and will comply with requirements of the Privacy and Freedom of Information Act Manual, COMDTINST M5260 (series). I will not store, gain access to, or use classified information at a home work site.

**Standards of Conduct**

I understand the United States Coast Guard standards of conduct continue to apply to me while I work at my telecommuting site(s) in accordance with COMDINST M5370.8 (series).

**Cancellation**

After appropriate notice to my supervisor, I may resume working my regular schedule at my official duty station. After appropriate notice to me, the U.S. Coast Guard may instruct me to resume working my regular schedule at my official duty station, if my performance declines, the project fails to benefit organizational needs, the need for in-office interaction between me and my coworkers or customers arises, or for other work-related reasons. The U.S. Coast Guard will follow any applicable administrative or negotiated telecommuting procedures.

**Other Action**

Nothing in this agreement precludes the U.S. Coast Guard from taking any appropriate disciplinary or adverse action against me if I fail to comply with the provisions of this agreement.

**Employee's Signature and Date:** \_\_\_\_\_

**Supervisor's Signature and Date:** \_\_\_\_\_

**Cancellation Date**

If this agreement is canceled please indicate date of cancellation below:

**Cancellation Date:** \_\_\_\_\_

**Employee's Acknowledgment and Date:** \_\_\_\_\_

**Supervisor's Signature and Date:** \_\_\_\_\_

**SUMMARY INFORMATION**

Check the description that applies:

Telecommuting Arrangement

1 day per 2 weeks

More than 1 day per 2 weeks

Occasionally  
(i.e., project nature)

Position or Billet Type:

Civilian:  Appropriated Fund  
(NAF)

Non-Appropriated Fund

Military:  Active Duty

Reserve

*Please send a copy of the agreement and enclosures to your supervisor, and retain a copy for your records.*

*Please send a copy of this summary information sheet to your telecommuting coordinator.*

**U.S. COAST GUARD  
SELF-CERTIFICATION SAFETY CHECKLIST FOR  
TELECOMMUTERS WORKING AT HOME**

**Name:** \_\_\_\_\_

**Organization/Office:** \_\_\_\_\_

**Geographical Location:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

*This checklist assesses the overall safety of the home work site. Each participant should read, complete, sign, and date the self-certification safety checklist.*

Address of home work site location:

\_\_\_\_\_

\_\_\_\_\_

Describe the designated home work area:

\_\_\_\_\_

**A. WORKPLACE ENVIRONMENT**

1. Are temperature, noise, ventilation, and lighting levels adequate to maintain your normal level of job performance? \_\_Yes      \_\_No
  
2. Are all stairs with four or more steps equipped with handrails? \_\_Yes      \_\_No
  
3. Does the electrical system conform to appropriate local building codes? \_\_Yes      \_\_No
  
4. Are aisles, doorways, and comers free of obstructions to permit visibility and movement? \_\_Yes      \_\_No

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- 5. Are file cabinets and storage closets arranged so drawers and doors do not open into walkways?  Yes  No
- 6. Do chairs have any loose casters (wheels) and are chair legs sturdy?  Yes  No
- 7. Are the phone lines, electrical cords, and extension wires secured under a desk or along a baseboard?  Yes  No
- 8. Is the office space neat, clear, and free of excessive amounts of combustibles?  Yes  No
- 9. Are floor surfaces (including carpets) clean, dry, level, and free of worn or frayed seams?  Yes  No
- 10. Is there enough light to read?  Yes  No
- 11. Is the residence equipped with working smoke detectors?  Yes  No

COMPUTER WORKSTATION (IF APPLICABLE)

- 12. Is your chair adjustable?  Yes  No
- 13. Does a back rest support your back adequately?  Yes  No
- 14. Is your computer monitor at eye level?  Yes  No
- 15. When keying, are your forearms close to parallel with the floor? Are your wrists fairly straight?

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please attach a copy of this list to your Telecommuting Agreement and retain a copy for your records.*

**U.S. COAST GUARD SELF-CERTIFICATION  
SECURITY AUDIT CHECKLIST FOR  
TELECOMMUTERS WORKING AT HOME**

**Name:** \_\_\_\_\_  
**Organization/Office/Location:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_

*This checklist assesses the overall ability to protect U.S. Coast Guard data and information processed, stored, or transmitted or received at the home work site. Each participant shall read, complete, sign, and date the security audit checklist.*

Home work site location:

**PHYSICAL SECURITY**

1. Do all doors and windows have adequate locking devices? \_\_Yes      \_\_No
  
2. Is there a lockable file cabinet or container available to store floppy disks, removable hard disks, and documents? \_\_Yes      \_\_No

**HARDWARE SECURITY**

1. Is the computer hardware positioned so unauthorized persons cannot see the screen? \_\_Yes      \_\_No
  
2. Are there adequate environmental controls to protect the hardware from extreme temperatures and humidity? \_\_Yes      \_\_No
  
3. Does the computer have either a keyboard or power supply locking device? \_\_Yes      \_\_No

**DATA SECURITY**

1. Are the computer and removable media (e.g., floppy disks, CD-ROMs, backup tapes) adequately protected

Enclosure (4) to COMDTINST 12630.1

- from unauthorized access (e.g., friends, relatives, roommates, etc.)?  Yes  No
2. When remotely accessing other systems, is your user password encrypted?  Yes  No
3. Can others gain access to the computer from other systems (e.g., via Internet, dial-up, etc.)?  Yes  No

**USER SECURITY**

1. Have you received adequate Automated Information Systems (AIS) security awareness and training?  Yes  No
2. Have you signed an AIS user responsibility acknowledgment form?  Yes  No
3. Do you possess an adequate working knowledge of how your computer transmits and receives data?  Yes  No
4. Do you possess an adequate working knowledge of what data needs to be protected when you transmit or receive?  Yes  No
5. Do you possess an adequate working knowledge on properly storing and handling storage media (e.g., floppy disks, CD-ROMs, backup tapes, etc.)?  Yes  No
6. Are you familiar with computer virus detection and eradication procedures?  Yes  No

**SYSTEM INFORMATION**

1. What is the operating system? \_\_\_\_\_
2. What is the microcomputer make and model? \_\_\_\_\_

3. If remote access will be used to access U.S. Coast Guard systems:

What is the modem speed?

Is the modem internal or external?

What communications software is installed?

4. If you have Internet access, with what firm is the account?

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please attach a copy of this list to your Telecommuting Agreement, send a copy to your ADP System Security Officer (ADPSSO) and retain a copy for your records.*