



Reference: 20181011-7306
File no.: 3/3/1/1/1/OFFICIAL WORKING HOURS
Enquiries: I Carolus

Circular: 0038/2018

Expiry date: None

To: Deputy Directors-General, Chief Directors, Directors, Chief Education Specialists, Deputy Directors and Recognised Employee Parties

Short summary: *Staggered working hours for office-based employees who observe normal working hours.*

Subject: Approval of amended staggered working hours for office-based employees who observe normal working hours

1. Taking into consideration the service delivery needs of the Western Cape Education Department (WCED), as well as the needs of the community and users of services, I am pleased to inform you that the WCED has amended the hours of the staggered working hours policy. This means that an employee may negotiate with the supervisor his/her own working hours whilst still completing a 40-hour work week. This revision was triggered by the increasing congestion of access and egress to and from the Cape Town city bowl during peak traffic hours and the poor state of public transport, especially that offered by Metrorail. It will allow employees to get into and leave the city with greater ease.
2. The policy provides for office-based employees of the WCED who observe normal working hours or staggered working hours to be allowed to amend their current choice with effect from 01 November 2018 in accordance with the following principles and measures:
 - 2.1 The starting time may not be earlier than 06:30 and the closing time not later than 16:30.
 - 2.2 The core time is set at 08:00 till 15:30 (seven hours and 30 minutes). During this core period, with the exception of the lunch break, all employees should be on duty.
 - 2.3 A lunch break of 30 minutes from 12:30 to 13:00/13:30, subject to a total of eight hours (excluding lunch breaks) being worked daily.
 - 2.4 The normal working hours of the WCED remain at 07:30 to 16:00 with lunch time from 12:30 to 13:00. For any exception to this, employees will have to make arrangements by completing the attached form (Annexure A).

- 2.5 The authority to approve individual requests for deviation from the normal working hours is delegated to Directors of the various components in the WCED and decisions should be based on the operational requirements attached to the job and the unit.
 - 2.6 Agreed upon working times will remain in force until approval for change has been received, after a minimum period of six months.
 - 2.7 The prescripts in respect of remunerated overtime will remain unchanged. This means that an officer's overtime period will commence immediately after completion of eight hours service rendered on a week day.
 - 2.8 Copies of forms where deviation of normal hours has been approved, must be submitted to the Chief Directorate: People Management Practices, Subdirectorate: Head Office for record purposes.
 - 2.9 Employees must ensure that they swipe their access cards when entering the building to commence work and swipe again when leaving the building at closing time.
 - 2.10 Staff must be behind their desks during the elected timeslots.
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3. Staff members are called upon to ensure that they adhere to the working hours that have been approved. The amendment to this policy is a trial and will be reviewed after twelve months.

SIGNED: BK SCHREUDER

HEAD: EDUCATION

DATE: 2018-10-23

WESTERN CAPE EDUCATION DEPARTMENT

I, _____ Persal No. _____
hereby apply for approval to work the following office hours, with effect from
..... on the conditions provided for in the relevant circular. My
total working time will be 8 hours per day excluding lunch break.

Please tick the appropriate box with an “X”

From 06:30 to 15:00

From 07:00 to 15:30

From 07:30 to 16:00

From 08:00 to 16:30

From _____ to _____ (observing core time) with an extended lunch
time of 60 minutes. Lunch time to be taken from _____ to _____ .

The motivation for my request is as follows:

I realise that staggered office hours is a privilege that may be changed or withdrawn at any time. I further undertake to comply with the times that I have indicated on this form.

SIGNATURE:.....

DATE:.....

REQUEST APPROVED / NOT APPROVED

SMS MEMBER:.....

DATE:.....