SUBJECT: EXERCISE POLICY

RATIONALE: The purpose of this policy is to promote the general physical and emotional well being of the Department’s employees by establishing an opportunity for employees to participate in a physical fitness exercise program which will:

a. Improve the overall physical health and well-being of employees
b. Encourage a personal commitment among employees to adopt healthy activities as a permanent lifestyle
c. Help reduce stress and the risk of cardiovascular disease factors in employees
d. Improve productivity in the workplace, which will benefit both the Department and the employees
e. Promote employee job satisfaction, and
f. Attract and retain quality employees.

POLICIES

A. The Department offers eligible employees the option of using 30 compensated minutes per day on scheduled work days, during scheduled work hours for up to three days per week to participate in this physical fitness exercise program.

B. Only full time employees receiving benefits and in good performance standing are eligible to participate in an exercise program under this policy.

C. Participation in the exercise program is neither an employee right nor a guaranteed benefit.

D. Exercise time must be pre-approved by the employee’s immediate supervisor to ensure that normal Department operations will be maintained. This time is expressly for any appropriate physical fitness or aerobic exercise (strengthens heart and lungs accomplished by raising heart and breathing rates). It is not intended in any way to provide extra time for personal matters other than physical fitness exercise that consists of 30 consecutive minutes.

E. Approval to participate in this exercise program shall be documented in the Utah Performance Management system.

F. Employees, with the approval of their supervisor, may use the 30 minutes in conjunction with their lunch and/or break time.

G. Authorization to participate in this program may be revoked if the provisions of the program are violated or if it interferes with the employee’s ability to accomplish work assignments.

H. Exercise time is not cumulative (that is, unused exercise time not used during the week cannot be carried over into any subsequent day or week).

I. To ensure the Department does not incur unnecessary overtime costs, participation in this program shall be suspended on weeks when an employee is required to work overtime.
J. Workload demands may cause this program to be suspended either for a specific period of time or indefinitely.

K. Employees participating in this program do so at their own risk. The Department is not responsible for any and all injuries, illnesses, and other consequences suffered by the employee while participating in this program.

L. Injuries or illnesses occurring to employees during exercise time may be submitted to the Workers’ Compensation Fund for a determination of coverage as an on-the-job injury.

M. Employees are encouraged to consult with their personal physician to ensure they are physically capable of participating in this exercise program.

N. Exercise during work time that is a bona fide job requirement is not subject to this policy.

**PROCEDURES**

A. An employee requests approval from the supervisor to participate in this program. Supervisors may grant approval if normal operations are maintained, there are no safety concerns and customers are adequately served. Supervisors may approve fewer than three days based on the impact to the services provided for the specific area and/or the performance of the employee.

B. An employee approved to participate in this program completes the “Department of Human Services Employee Fitness Agreement” and secures the signature of the supervisor.

C. The supervisor will document the approval to participate in this exercise program in the Utah Performance Management system.

D. An employee approved for participation in this program records exercise time as hours worked on the State of Utah Bi-Weekly electronic or paper time sheet.

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Ann Silverberg Williamson, Executive Director
Department of Human Services
DEPARTMENT OF HUMAN SERVICES

Employee Fitness Agreement

THIS AGREEMENT is made and entered into by and between the Department of Human Services (hereinafter “Department”), and _____________________________ (hereinafter “Employee”).

WHEREAS, the Department has established an Exercise Policy emphasizing exercise for the benefit of its employees, and

WHEREAS, the Employee has voluntarily decided to participate in a physical fitness exercise program,

NOW THEREFORE, in consideration of the premises and mutual covenants contained herein, the parties agree as follows:

Employee agrees to participate in an exercise activity up to three times a week, for a period not less than one year beginning the day this form is signed. This time is expressly for any appropriate physical fitness or aerobic exercise (strengthens heart and lungs accomplished by raising heart and breathing rates). It is not intended in any way to provide extra time for personal matters other than physical fitness exercise that consists of 30 consecutive minutes. The days and times in which the undersigned employee participates in aerobic or physical fitness is approved by his/her supervisor in advance.

Participation in the exercise program is neither an employee right nor a guaranteed benefit. The supervisor may approve temporary or permanent changes to the exercise schedule agreement as needed.

1. Department will allow Employee a maximum of 30 minutes of exercise release time per day during up to three times a week to engage in an exercise program. The 30 minutes must be taken during the employee’s scheduled work hours if pre-approved by the supervisor. The agreed upon time for the exercise activity shall be a fixed schedule and shall not change unless approved by the supervisor. The agreed upon schedule will not interfere with normal work requirements nor will participation in this program be allowed on weeks when an employee is required to work overtime.

2. If the Employee is unable to continue with the said exercise program due to injury, illness, or other reason agreed to by the supervisor, Employee may terminate this agreement at any time by submitting a written statement to his/her immediate supervisor.

4. Employee’s immediate supervisor may also terminate this agreement at any time for any reason by notifying Employee in writing.

Dated this ______________________ day of ________________________________, 20_____.

__________________________________  __________________________________
Supervisor  Employee