



DEPARTMENT OF THE ARMY
U.S. ARMY INSTALLATION MANAGEMENT COMMAND
HEADQUARTERS, UNITED STATES ARMY GARRISON WEST POINT
681 HARDEE PLACE
WEST POINT, NY 10996-1514

IMML-ZA

11 July 2016

U.S. ARMY GARRISON WEST POINT POLICY #5

SUBJECT: Administration of Civilian Overtime (OT), Compensatory Time (CT) and Holiday Pay

1. PURPOSE. This memorandum sets forth guidance governing the financial administration of OT, CT and holiday pay for United States Army Garrison West Point (USAG WP) Civilian personnel, including who can approve OT and CT in USAG WP.

2. APPLICABILITY. This memorandum applies to all Appropriated Fund (AF) USAG WP activities.

3. REFERENCES.

a. Publications:

(1) DOD 7000.14-R, Volume 8, Civilian Pay Policy and Procedures, dated 1 July 2014.

(2) Title 5, Code of Federal Regulations, Section 550.1403, Pay Administration, dated 6 January 2014.

(3) IMCOM Regulation 690-610, Chapter 4, Managing Overtime (OT) and Compensatory Time (CT), dated 15 May 2014.

b. Forms:

(1) OPM Form 71, Leave or Approved Absence Form.

(2) IMCOM Form 1-H, Request, Authorization and Report of Overtime, dated March 2014.

4. GUIDANCE.

a. All OT and CT requests must be approved in advance by the Deputy to the Garrison Commander (DGC) except for emergencies, reimbursable support and requirements to fill unscheduled shift work vacancy in DPW/DES 24-hour operations. Reimbursable support must be approved in advance by the paying organization.

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b. OT and CT requests must have concurrence by the organization Director/Deputy Director prior to being sent to the DGC for approval. This will be done by having the Director or Deputy Director sign as the requestor, or by them forwarding request via email to the DGC.

c. Programmed OT and CT should be scheduled and approved at least 24 hours in advance.

d. Other than the exceptions mentioned in paragraph 4a above, do not notify employees that OT or CT is approved until receiving DGC approval in writing.

e. OT and CT records are subject to being inspected on a no-notice basis at least annually.

f. All organizations will ensure that an OT manager is appointed, who is responsible to the director to ensure all OT and CT paperwork and records are properly completed and maintained on file.

g. The use of OT is to be held to a minimum. It is the responsibility of activity directors and supervisors to ensure OT is limited to essential needs, directly related to the support of the mission, for emergencies, or as a result of health and safety issues. OT must be limited to cases of real necessity or where substantial savings can be clearly demonstrated on an individual basis.

h. Scheduled OT will be kept to a minimum through the use of careful workload planning. Such planning will include positive action to reduce the need for continuous OT by adjusting hours of work, use of CT when appropriate and disapproval of leave during periods when OT is worked.

i. CT for travel may be credited to employees who perform official travel that cannot be financially reimbursed.

(1) The travel must be officially authorized, that is, travel must be for work purposes and must be approved by an authorized official.

(2) The travel includes only the time actually spent traveling between the official duty station and a temporary duty station or between two temporary duty stations.

(3) The employee must not be compensated in any other way (i.e., normal duty time, OT).

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j. An eligible employee who performs official travel may request CT for travel for time spent in a travel status away from the duty station if the travel time is not otherwise compensable as defined in 5 CFR 550.1403.

k. CT for travel must be used within 26 pay periods and does not convert to paid time. Any CT for travel not used within 26 pay periods after being earned will be forfeited.

l. All approved written authority for OT, CT, or holiday work must be documented, justified, and maintained in accordance with (IAW) requirements stated in DOD 7000.14-R, Financial Management Regulation, Vol. 8, Civilian Pay Policy and Procedures.

m. Payments for services performed on OT are subject to limitations imposed by the funds allocated to Activity Directors. Employees who perform work on a holiday must be paid holiday pay and cannot receive CT. Managers must determine prior to authorizing holiday pay that sufficient funds are available.

5. RESPONSIBILITIES.

a. Activity Directors (AD) and Supervisors will:

(1) Avoid OT usage whenever possible by planning and scheduling workload in coordination with other organizations, as required.

(2) Ensure CT or OT is posted to the Time and Attendance (TA) record only after the time has been worked. Precertification of CT or OT is not authorized. When submission of the TA is required before the end of the pay period, CT and OT worked after certification of the record must be resubmitted on a corrected record and certified by the same official who certified the original TA record.

(3) Determine the need for supervisory coverage of personnel working OT, CT or holiday time. Maintain reasonable assurance that employees are on duty during the time period they are scheduled to work and make a determination of reasonableness of work output for time spent. OT approved for alternate worksites will be closely monitored. Ensure time is properly documented on the TA records.

(4) Review all OT and CT requests.

(5) Ensure that adequate justification is provided in the "NATURE OF DUTIES AND JUSTIFICATION FOR OVERTIME" block of IMCOM Form 1-H, dated March 2014, Request, Authorization, and Report of Overtime (Encl 1).

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(6) Monitor OT usage and evaluate the feasibility of engaging in alternative means of accomplishing work.

(7) Ensure review and inspection of timekeeping practices at least once a year to ensure supervisor and timekeepers are properly trained in the administration of OT, TA responsibilities, procedure and reporting and validate that personnel are aware of their responsibilities.

(8) Review OT records provided by the Resource Management Office Civilian Pay representative.

(9) Verify that TA records containing entries for OT earned, CT earned or taken, and holiday time worked by employees are substantiated by " block of IMCOM Form 1-H, dated March 2014, Request, Authorization, and Report of Overtime (Encl 1) or OPM Form 71 (Request for leave or Approved Absence).

b. Internal Review and Audit Compliance Office will bi-annually review OT usage and documentation per directorate for the purpose of determining whether this guidance, DOD 7000.14-R, and applicable internal control processes are implemented in an effective manner.

c. Resource Management Office will:

(1) Provide monthly OT status report to the Command and ADs depicting the cost of OT, CT and holiday pay for the period. This status report will be briefed at Senior Programming and Budgeting Committee meetings.

(2) Inform the Command Group of trends. ADs may be asked to explain abnormalities to the Garrison Commander.

(3) Require ADs, as part of the Internal Control Program, to conduct an annual internal control review of OT use and documentation. The Assessable Unit Manager will certify that all OT was approved IAW regulation and guidance found in this policy memorandum and that internal controls were tested (Encl 2).

(4) Provide annual training on OT and CT procedures to organizational OT managers and TA keepers.

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6. EXPIRATION. This memorandum is effective until superseded or rescinded.

2 Encls

1. Sample DA Form 5172-R
2. Internal Control – TA Checklist


ANDREW S. HANSON
COL, SF
Commanding

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Internal Control Evaluation Checklist – Time and Attendance Reporting

Office Performing Evaluation: _____

Individual Performing Evaluation: _____

Date Evaluated: _____

Signature: _____

1. Function: The function addressed in this evaluation is Time and Attendance reporting.

2. Purpose: To assist [organization name] _____ in evaluating key internal controls over time and attendance. This is not intended to cover all controls.

3. Instructions: Answers must be based upon the actual testing of key internal controls (e.g., document analysis, direct observation, sampling, simulation, other). Answers which indicate deficiencies must be explained and corrective action indicated in supporting documentation. These internal controls must be evaluation eat least once every five years. Certification that this evaluation has been conducted must be accomplished on DA Form 11-2-R (Management Control Evaluation Certification Statement).

4. Test Questions:

a. Time and Attendance Reporting – Timekeepers

Are all approved exceptions to the employee's normal tour of duty timely and accurately reported?

_____ Yes _____ No

Have employees verified the accuracy of their current pay period's time and attendance, along with adjustments or corrections to prior pay periods occurring after the certification of the time and attendance?

_____ Yes _____ No

Are all entries for overtime and compensatory time earned approved, and are total hours earned verified before certification?

_____ Yes _____ No

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Is an employee's time and attendance data recorded by the close of the current pay period?

Yes No

Do approved documents exist to support an employee's time and attendance data, i.e., leave slips?

Yes No

Are the time and attendance files properly maintained?

Yes No

Does the timekeeper monitor and correct, as required, employees' time and attendance data by the end of each pay period and before certification?

Yes No

Does the timekeeper send hard copy time and attendance corrections with appropriate signatures to the local customer service representative (CSR) when necessary?

Yes No

Has the time keeper taken all reasonable measures to safeguard employee data covered under the Privacy Act, and ensure that payroll records are not stored, even temporarily, on non-secure sites?

Yes No

b. Internal Control Evaluation – Time and Attendance Reporting – Certifiers

Is the record and approval of time and attendance performed timely and accurately as required by responsible individuals?

Yes No

Is all required supporting documentation available for audit purposes?

Yes No

Do individuals recording and approving time and attendance make every effort to correct errors in the pay period to which the changes apply?

Yes No

Does the supervisor maintain controls on employees' presence or absence daily, type of leave taken, overtime worked, etc., and personally observe that the time and attendance reports are properly posted?

Yes No

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Is overtime/compensatory time authorized and approved by the proper authority in advance?

Yes No

Do the certifying official and alternate certifying official(s) verify that supporting documentation for leave usage, overtime/compensatory time worked, and other entries on the time and attendance report is valid prior to certification?

Yes No

Are the employees' time, attendance, labor, productivity, and differential pay entries for each pay period validated as correct prior to certification by the employees; certifying official or alternate certifying official(s) at the end of each pay period?

Yes No

Are amended time and attendance reports certified by the certifying official or alternate certifying official(s)?

Yes No

Are manually amended and certified time and attendance reports delivered to the local customer service representative (CSR) payroll office?

Yes No

Does the certifier and alternate certifier(s) have access to approved documents that support the employee's time and attendance records prior to certification of those records?

Yes No

Does the certifier and alternate certifier(s) review and certify the accuracy of employees' time and attendance records in sufficient time to meet payroll deadlines?

Yes No

Has the certifier and alternate certifier(s) taken all reasonable measures to safeguard employee data covered under the Privacy Act and ensured that payroll records are not stored, even temporarily, on non-secure sites?

Yes No

REQUEST AUTHORIZATION AND REPORT OF OVERTIME AND COMPENSATORY TIME

Refer to IMCOM Regulation 690-610 for guidance to complete this form, proponent is G1

THRU (if applicable)

TO (Approving Official)

From (Office, Div, Branch, Section, Unit)

Director of Resource Management USA

Deputy to Garrison Commander USA

Director of Resource Management, Man

1. A sperate request for overtime shall be prepared in and original and two copies for each day in which overtime is to be worked. One copy will be retained until the approved/disapproved copy is returned.
2. Enter the name of the employee, grade and step, date work is to be performed, the clock hours of duty, number of overtime hours to be worked by each employee and the method of compensation.
3. The requested official shall sign the request and submit to the appropriate authorizing official. If the authorizing official concurs he/she shall sign the form and return a copy to the requesting office. The original will be forwarded to the ATAAPS timekeeper.

Authority requested for overtime beyond the regular tour of duty for the respective employee(s).

					METHOD OF COMPENSATION			
Employee Name (Last, First, MI.)	Grade & Step	Date work is to be performed	Duty Clock Hours	Number of hours requested	Overtime	Holiday	Comp Time	Travel Comp Time
Rogers, Steve	GS12/01	06 JUL 2016	0745-1830	2.00	2.00			
Stark, Tony	GS11/05	07 JUL 2016	0800-1745	1.00			1.00	
				Total Hours	2.00		1.00	

Note: Employees occupying wage grade positions may not be granted compensatory time, except for employees working alternate work schedules. Compensatory time cannot be granted for holiday work.

NATURE OF DUTIES AND JUSTIFICATION FOR OVERTIME:

(Enter a short description of the work to be performed and the reason why it must be performed by overtime)

OT/CE is request for a short fuse IMCOM tasker due on 08 JUL 2016.

NAME AND TITLE OF REQUESTOR

Peter A. Bianchi, USAG WP, Director, Resource Management

SIGNATURE OF REQUESTOR**DATE****NAME AND TITLE OF AUTHORIZING OFFICIAL**

Thomas H. Cowen Jr. Deputy to the Garrison Commander

SIGNATURE OF AUTHORIZING OFFICIAL**DATE****REMARKS**

Request prepared on: 01 JUL 2016
Pay Period Ending: 09 JUL 2016