



State of New Jersey
DEPARTMENT OF MILITARY AND VETERANS AFFAIRS
POST OFFICE BOX 340
TRENTON, NEW JERSEY 08625-0340

CHRIS CHRISTIE
Governor
Commander-in-Chief

☆
MICHAEL L. CUNNIFF
Brigadier General
The Adjutant General

DEPARTMENTAL DIRECTIVE
NO. 230.7*

23 March 2016

**DMAVA EMPLOYEE PARTICIPATION
IN PHYSICAL FITNESS PROGRAMS**

1. PURPOSE: The purpose of this Directive is to establish the policies and procedures necessary to implement the Department of Military and Veterans Affairs (DMAVA) Physical Fitness Program for State employees.

2. APPLICABILITY: The Physical Fitness Program applies to all **DMAVA full-time State employees**, to include those at the New Jersey Army and Air National Guard bases and armories.

3. DEFINITIONS:

a. Exercise Period: The period of time provided by the Department to the employee for the purpose of participating in a physical fitness exercise program. The time required for the employee to change clothing and/or shower shall be a part of the ½-hour exercise period.

b. Worksite: The location where a public employee is assigned to work.

4. OBJECTIVE: The objective of this Directive is to promote a healthy working environment by allowing full-time State employees of this Department to take advantage of the DMAVA Employee Physical Fitness Program.

5. RESPONSIBILITIES:

a. Participation by employees will be strictly voluntary and is considered a privilege. Authority for the individual to participate may be revoked at any time. State employees will review a copy of this Directive so that they may become familiar with its contents.

b. Employees who participate in the Physical Fitness Program will not create incidental overtime or compensatory time and will not be eligible for State Workers' Compensation.

** This Departmental Directive supersedes DMAVA Interoffice Memorandum, Subject: Letter of Instruction (LOI) – Physical Fitness Program, dated 15 December 2006.*

- c. Directors/Supervisors are responsible for implementing and monitoring their respective employees' participation
- d. All Directors/Supervisors will make every effort to permit individuals to participate in the program and will consider employee participation when developing work schedules.
- e. The mission of the Department is paramount. The immediate Director/Supervisor, based on job requirements, without written notification may suspend participation for any eligible individual on any scheduled physical fitness day. Recall to the worksite may also occur at any time during the physical fitness period.

6. PHYSICAL FITNESS MONITOR (PFM): The following individuals are appointed as Physical Fitness Monitors (PFM) for various worksites and may delegate PFM responsibilities. The PFM will act as a liaison between the facility and the Director, Human Resources Division, or direct supervisor, on matters involving this program.

- a. DMAVA Headquarters, Eggert Crossing Road: Manager, Human Resources Division.
- b. Veterans Memorial Homes: Respective Chief Executive Officer.
- c. BG William C. Doyle Veterans Memorial Cemetery: Director.
- d. Transitional Housing, Veterans Haven: Superintendent.
- e. Veterans Services Offices: Respective Veterans Services Officer.
- f. Army National Guard Facilities: Respective Station Commander's Representative
- g. Air National Guard Facilities: Respective Base Civil Engineer.
- h. Joint Training and Training Developmental Center (J2TDC): Commandant.
- i. National Guard Training Center: Superintendent.
- j. Homeland Security Center of Excellence: Deputy Director.
- k. Youth ChalleNGe Academy: Director.

7. PROCEDURES:

- a. Locations: All physical fitness activities will occur in the immediate area of, or on the grounds of, the normal work site to which the participating individual is assigned. **ALL EXERCISE ACTIVITIES MUST BEGIN AND END AT THE WORKSITE.**
- b. Authorized Exercise Activities and Schedules: In order to reduce the risk of injury to participating employees, the following procedures will be strictly adhered to with safety being of utmost importance. Use of any and all equipment and/or participation in any exercise is at the employee's own risk.

(1) Exercise activities and equipment authorized under this program are walking, running, jogging, treadmill, stationary bicycle, flexibility program, aerobic exercise, and resistance training equipment to include Nautilus, Universal, Nordic Track, and free-weights.

(2) Competitive sports, which include, but are not limited to, baseball, football, golf, tennis, basketball, wrestling, etc., are strictly prohibited.

(3) The Department will provide no additional equipment other than that which is currently available. Each individual is responsible for proper use and safe handling of the provided equipment in addition to maintaining and securing any and all personal items/equipment.

(4) The Department authorizes a maximum of thirty (30) minutes per day, three (3) days per week, for physical fitness activities. A daily maximum of ½ hour is established for scheduled physical fitness. These ½ hour periods can be used as follows:

- (a) Taken in combination of the employee's ½ hour allocated lunch period.
- (b) Taken in individual thirty (30) minute blocks at the start of or the end of the day, or immediately before or after lunch.

(5) No additional time is authorized to the employee in order to shower and/or change.

(6) At no time is a participant permitted to combine the two (2) authorized 15-minute breaks with the physical fitness time.

(7) The privilege to participate may be revoked permanently or for a specified period upon receipt of written notification from a Director/Supervisor. No written notification is required for intermittent interruptions due to mission needs.

8. ADMINISTRATIVE CONTROLS:

- a. Everyone is encouraged to have a physical screening examination by a physician prior to participating in this or any physical fitness program.
- b. Individuals are encouraged to participate on a regular basis in order to obtain the maximum benefits of the program.
- c. **Employees must sign out from their respective worksite prior to participation. They must return to the worksite upon completion of the activity and sign in utilizing the approved Physical Training Log (Attachment 1). Use of the log form is MANDATORY to protect the individual and the Department. The form will be available at a designated location for each worksite.**
- d. The PFM is responsible to ensure participation complies with this program.
- e. Initial membership in the Fitness Program requires each participant to complete and sign an "Acknowledgement Certificate" (Attachment 2) and signed by his or her supervisor. The Human Resources Office/Division will retain certificates for all participating employees and confirm participation with all PFMs.

9. Questions pertaining to this Directive should be directed to the Human Resources Division, Attn: Mr. Robert Hoyd at (609) 530-6885, or by email robert.hoyd@dmava.nj.gov.

The proponent of this directive is the Human Resources Division.
Users are invited to submit comments and suggested improvements
directly to NJDMAVA, ATTN: HRD, PO Box 340, Trenton, NJ 08625-0340.

OFFICIAL:

MICHAEL L. CUNNIFF
Brigadier General, NJANG
The Adjutant General



DAVID S. SNEDEKER
Chief Information Officer
Director, Information and
Administrative Services Division

DISTRIBUTION: A, B, C, D, E, F

NEW JERSEY DEPARTMENT OF MILITARY AND VETERANS AFFAIRS

**STATE EMPLOYEE PHYSICAL FITNESS PROGRAM
ACKNOWLEDGEMENT CERTIFICATE**

1. This certificate acknowledges my participation in the DMAVA Employee Physical Fitness Program. I certify that I have read and understand the contents of Departmental Directive 230.7.
2. I understand that my participation in the program is a revocable privilege. I further understand that if I abuse the program, then I will be restricted from further participation in the program.
3. I will conduct my exercise program in the immediate area or on the grounds of my worksite as determined by the Director of Human Resources, my direct supervisor, Facility Physical Fitness Monitor or designee. Participation will be approved in consideration of the Department's needs. Exercise sessions will begin and end at the worksite. I will sign out prior to starting the session and sign in at the end of each session, and I understand that I am subject to recall to the worksite at any time during the session.
4. I understand that my participation in this program is strictly voluntary. Use of any and all equipment and participation in any exercise is at my own risk and I am under no obligation to actively participate in the physical fitness program.
5. This acknowledgement certificate will be retained on file by the Human Resources Division/Office.
6. I certify that I have been encouraged to have a physical screening examination by my private physician prior to participating in the DMAVA Physical Fitness Program. I understand that should I sustain an injury while voluntarily participating in the program that I will be ineligible for State Workers' Compensation. (Ref. N.J.S.A. 34:15-7)
7. I am aware that I may be restricted from participation in the DMAVA State Employees' Physical Fitness Program.
8. I am aware that my participation in the DMAVA State Employees' Physical Fitness Program will not create incidental overtime or compensatory time on a Physical Fitness day.
9. In view of the foregoing, my participation in the DMAVA State Employees' Physical Fitness Program is hereby acknowledged.

Print/Type Individual's Name

Title

Worksite

Employee's Signature & Date

Supervisor's Signature & Date

CF: HRD
Supervisor