

LOCAL PROVISIONS

Between:

SOUTHLAKE REGIONAL HEALTH CENTRE
(hereinafter referred to as "the Hospital")

And:

ONTARIO NURSES' ASSOCIATION
(hereinafter referred to as "the Union")

(Full-time and Part-time)

Expiry: March 31, 2014

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APPENDIX 3**SALARY SCHEDULE - FULL-TIME & PART- TIME**

		Effective April 1, 2011	Effective April 1, 2013
Registered Nurse	1 Year	29.36	30.17
Clinical Trials Nurse	2 Years	29.79	30.61
Discharge Plan. Nurse	3 Years	30.29	31.12
R.N. W/E Worker	4 Years	31.78	32.65
Research Nurse	5 Years	33.28	34.20
Electrophysiology Nurse	6 Years	35.15	36.12
Clinical Data Specialist	7 Years	37.04	38.06
Nurse Navigator	8 Years	38.94	40.01
Supportive Care Nurse	9 Years	41.70	42.85
	25 Years	42.44	43.61

A.05 Graduate nurses pending registration shall be paid \$60.00 per month less than the R.N. start rate set out above.

		Effective April 1, 2011	Effective April 1, 2013
Registered Nurse - First Assistant	1 Year	37.58	38.61
	2 Years	38.73	39.80
	3 Years	39.94	41.04
	4 Years	41.17	42.30
	5 Years	42.63	43.80
	6 Years	44.12	45.33
	7 Years	45.66	46.92
	8 Years	47.26	48.56
	9 Years	48.91	50.26
	25 Years	49.89	51.26

		Effective April 1, 2011	Effective April 1, 2013
Nurse Educator/Professional Practice Facilitator	1 Year	41.33	42.47
Geriatric Emergency Management Nurse	2 Years	41.33	42.47
Clinical Nurse Consultant	3 Years	41.33	42.47
	4 Years	41.62	42.76
	5 Years	42.63	43.80
	6 Years	43.65	44.85
	7 Years	44.66	45.89
	8 Years	46.56	47.84
	9 Years	46.67	47.95
	25 Years	47.50	48.81

		Effective April 1, 2011	Effective April 1, 2013
Nurse Clinician	1 Year	34.02	34.96
	2 Years	34.71	35.66
	3 Years	34.75	35.71
	4 Years	36.04	37.03
	5 Years	37.31	38.34
	6 Years	38.58	39.64
	7 Years	39.85	40.95
	8 Years	41.13	42.26
	9 Years	43.23	44.42
	25 Years	43.99	45.20

		Effective April 1, 2011	Effective April 1, 2013
Nurse Coordinator	1 Year	39.25	40.33
	2 Years	40.42	41.53
	3 Years	41.62	42.76
	4 Years	42.81	43.99
	5 Years	44.01	45.22
	6 Years	45.27	46.51
	7 Years	46.55	47.83
	8 Years	47.89	49.21
	9 Years	49.26	50.61
	25 Years	50.24	51.62

		Effective April 1, 2011	Effective April 1, 2013
Clinical Nurse Specialist	1 Year	35.70	36.68
Wound Care Specialist	2 Years	35.99	36.98
	3 Years	36.03	37.02
	4 Years	37.25	38.27
	5 Years	38.61	39.67
	6 Years	39.70	40.79
	7 Years	40.82	41.94
	8 Years	41.96	43.11
	9 Years	44.10	45.31
	25 Years	44.88	46.11

		Effective April 1, 2011	Effective April 1, 2013
Outreach Clinical Leader	1 Year	35.67	36.65
	2 Years	37.01	38.03
	3 Years	38.39	39.45
	4 Years	39.73	40.82
	5 Years	41.13	42.26
	6 Years	42.75	43.93
	7 Years	44.03	45.24
	8 Years	45.35	46.60
	9 Years	46.71	47.99

		Effective April 1, 2011	Effective April 1, 2013
Clinical Resource Reviewer	1 Year	30.78	31.63
Patient Flow Coordinator	2 Years	31.22	32.08
CTO Coordinator	3 Years	31.54	32.41
	4 Years	33.06	33.97
	5 Years	34.44	35.39
	6 Years	36.26	37.26
	7 Years	38.08	39.13
	8 Years	39.94	41.04
	9 Years	42.51	43.68
	25 Years	43.26	44.45

		Effective April 1, 2011	Effective April 1, 2013
Nurse Practitioner	APN*	45.95	47.21
	1 Year	48.25	49.58
	2 Years	49.48	50.84
	3 Years	50.76	52.16
	4 Years	52.05	53.48
	5 Years	53.35	54.82
	6 Years	54.72	56.22
	7 Years	56.11	57.65
	8 Years	57.53	59.11
	25 Years	58.68	60.29

*formerly APN Candidate

APPENDIX 4**SUPERIOR CONDITIONS****BENEFITS**

The parties agree that the Nursing Coordinators, Registered Nurse First Assistants and Nurse Practitioners will become entitled to all benefits as provided for by the ONA Central Collective Agreement except for dental recall which will remain at six (6) months until such time the ONA Collective Agreement reaches parity.

SCHEDULING – NURSE PRACTITIONERS

The parties recognize that the position requirements of the Nurse Practitioner do not lend itself to standard daily hours of work. In recognition of this factor, the parties agree that employees in this classification may establish their own flexible time schedules to provide the services necessary under the following guidelines:

- (a) Advanced Practice Nurses will be expected to manage their work to achieve a maximum of seventy-five (75) hours in a two week pay period.
- (b) Any overtime required subject to (a) above must be pre-approved by the Program Director or Designate.
- (c) Any hours deemed overtime will be administered as per the current conditions in the Collective Agreement.

SCHEDULING – REGISTERED NURSE FIRST ASSISTANT

The parties agree to continue the current process of posting schedules on a monthly basis for the Registered Nurse First Assistant group.

ARTICLE A – RECOGNITION

- A.1 FT The Hospital recognizes the Ontario Nurses` Association as the exclusive bargaining agent for all registered and graduate nurses employed in a nursing capacity by Southlake Regional Health Centre, in the Municipality of York, Newmarket, Ontario, save and except Managers, persons above the rank of Manager, in-Service Co-ordinator, Discharge Planning Manager, and persons regularly employed for not more than twenty-four (24) hours per week.
- PT The Hospital recognizes the Ontario Nurses` Association as the exclusive bargaining agent for all registered and graduate nurses regularly employed in a nursing capacity for not more than twenty-four (24) hours per week by Southlake Regional Health Centre, in the Municipality of York, Newmarket, Ontario, save and except Managers, persons above the rank of Manager.
- A.2 The word "nurses" when used throughout this Agreement shall mean persons included in the above described bargaining unit.
- A.3 "Supervisor" or "Immediate Supervisor" when used in this Agreement shall mean the first supervisory level excluded from the bargaining unit.
- A.4 For the purpose of this Agreement the position of Head Nurse is now called Clinical Manager.

ARTICLE B – MANAGEMENT FUNCTIONS

- B.1 The Union recognizes that the management of the Hospital and the direction of the working force are fixed exclusively in the Hospital and shall remain solely with the Hospital, except as specifically limited by this Agreement. Without restricting the generality of the foregoing, the Union acknowledges that it is the exclusive function of the Hospital to:
- (a) maintain order, discipline and efficiency;
 - (b) hire, assign, retire, discharge, direct, promote, classify, transfer, layoff, suspend, or otherwise discipline nurses, provided that a claim by a nurse that she/he has been discharged, suspended, or disciplined without just cause, may become the subject of a grievance and may be dealt with as hereinafter provided;
 - (c) determine in the interest of efficient operation and highest standard of service, job rating or classification, the hours of work, the tours of duty, work assignments, and working establishment for any service,
 - (d) determine the number of personnel required, the services to be performed and methods, procedures, and equipment to be used in connection therewith;
 - (e) make and enforce and alter from time to time reasonable rules and regulations to be observed by the nurses, provided that such rules and regulations shall not be inconsistent with the provisions of the Agreement.

- B.2 The Hospital recognizes that the rights described in this Article shall be exercised in a manner consistent with all provisions of this Agreement.

ARTICLE C – ASSOCIATION COMMITTEES AND REPRESENTATIVES

C.1 (a) Union Representatives

There shall be fifteen (15) Union Representatives. There will be no more than two (2) Union Representatives per floor and the distribution of said Union Representatives will be at the discretion of the Union. The Union shall provide a current list of these Union Representatives to Human Resources.

(b) Grievance Committee

The Grievance Committee shall consist of not more than three (3) full-time nurses and two (2) regular part-time nurses.

(c) Hospital-Union Committee

The Hospital-Union Committee shall be comprised of not more than five (5) representatives of the Union, two (2) of which shall be part-time and five (5) representatives of the Hospital.

(d) Negotiating Committee

The Negotiating Committee shall be comprised of not more than five (5) nurses, two of which shall be part-time.

- (e) The Hospital will recognize Health and Safety representatives for the Union that will be members of the Joint Health and Safety Committee for the Hospital. There will be three (3) full-time members and one (1) part-time member. The Union will also establish alternate members for the Health and Safety Committee. The Union will inform the Hospital of the names of the members that are the Health and Safety Committee members and alternate on a yearly basis. Members and alternates, as designated by the Union, will be compensated as per the Occupational Health and Safety Act.

(f) Scheduling Committee

There will be a Scheduling Committee composed of three (3) ONA members, one of whom will be Regular Part-Time and three (3) Hospital Representatives. The Committee will meet on minimum every three (3) months or as needed. The Committee will use a recorder to take and distribute minutes. These minutes will be distributed within ten (10) days of the Committee meeting. Information pertaining to and including schedules are to be provided to the Scheduling Committee at least eight (8) weeks in advance of the implementation of any changes in Unit scheduling practices.

The purpose of this committee will be:

- i) to act in an advisory capacity and assist in resolution of scheduling concerns;
- ii) to review all new master schedules and to ensure compliance with the Collective Agreement;

- iii) to provide suggestions to minimize Agency usage;
- iv) to provide advice regarding scheduling of regular part-time nurses.

C.2 The Union interview for newly hired nurses shall be scheduled during the new employee's orientation period. The Hospital shall designate the time and place for the interview.

The Hospital will provide the Union with a minimum of six (6) weeks notice, in writing, of the designated time and location of the Union interview.

C.3 The Hospital will provide paid leave to the Bargaining Unit President of fifteen (15) hours per week.

The scheduling of the above hours will be negotiated between the Local President, Human Resources and the Unit Manager involved.

The President will accrue full service and seniority during this time, and this time will be deemed as work time. The Hospital will not require the President to attend meeting(s) after working the night shift.

ARTICLE D – SCHEDULES OF WORK

D.1 General Scheduling Provisions

The Hospital will adhere to the following in the formulation of work schedules:

- (a)
 - i) Work schedules will be posted two (2) weeks in advance to cover a six (6) week period.
 - ii) Schedules shall be posted as soon as possible on the day of posting.
 - iii) The Hospital will not change a posted schedule with less than forty-eight (48) hours notice, unless by mutual agreement.
 - iv) Each Unit will have a master schedule with a copy provided to the Union upon request. Each master schedule will reflect the baseline needs that being all full time rotations and remaining tours.
 - v) The hospital will not schedule split shifts.
 - vi) The day shift is the first shift of the day.
- (b) Nurses are permitted to exchange scheduled tours of duty with another nurse scheduled in that Unit, provided that the exchange in tours has been submitted in writing forty eight (48) hours prior to the shift exchange, except in extenuating circumstances, co-signed by the nurses involved, and approved by the manager. Such requests will not be unreasonably denied.
- (c) Request for specific days and/or additional time off after the schedule has been posted will be submitted at least two (2) weeks prior to the time off being requested. The nurse will receive a written response to the request within one (1) week of the date of the submitted request. Exceptional requests may be submitted to the manager and the manager will consider the request and the request will not be unreasonably denied.

- (d) Nurses presently employed on the evening or night tours on a permanent basis, will not be rotated except by mutual consent.

Notwithstanding the above, each nurse on a permanent shift may be required to do a tour of duty on days, for in-service requirements and evaluation every six (6) months, not to exceed three (3) weeks in a six (6) month period.

- (e) Additional shifts will be offered up to full time hours to nurses based on their seniority and equitability in the following order: regular part-time, job sharers, and then to casual nurses.

In the event that further overtime is available, full-time nurses will be called by seniority and equitability prior to regular part-time and casual nurses.

A tour will be deemed to be offered whenever a call is placed or a message left.

- (f) The Hospital will provide the union with a minimum of eight (8) weeks written notice of start and stop times. The Hospital will endeavour to provide the Union and employees at least eight (8) weeks notification of any permanent change (a period defined as length of the normal posted schedule) in the unit master schedule. Where mutually agreed, this period of notice can be reduced. The Hospital and the Union will discuss schedule changes prior to the changes being implemented. The Hospital will not implement new start and stop times for any new or existing units without notification to the Union. The Union will be provided with copies of all unit schedules upon written request to the Manager of Human Resources.

- (g) When a line on a master rotation becomes vacant, the nurses in the unit concerned may request in writing to change to the vacant line. The vacant line on the master rotation shall be offered to the most senior nurse, based on seniority as defined in accordance with Article 10.

- (h) Where a nurse has worked and accumulated approved overtime hours, according to Articles 14.06 and 14.09, and elects to take equivalent time off, such time off must be taken within 60 days following the date on which it was accumulated. Such time off will be scheduled at a mutually agreeable time between the nurse and her/his manager. Requests for such time off will not be unreasonably withheld.

(i) Reassignment (Floating)

In accordance with the provisions set out in Article 10.07 (g) and 10.08, where nurses are reassigned to meet patient care needs at the Hospital, they will be reassigned to units or areas where they are qualified to perform the available work:

- i. Patient care requirements are the first priority.
- ii. The Hospital will not normally reassign probationary employees,
- iii. The Hospital will reassign, where possible, employees who volunteer,
- iv. The Hospital will normally reassign agency employees before reassigning staff employees, and
- v. The Hospital will normally reassign staff nurses in the following sequence on the basis of reverse seniority; regular part-time; regular full-time.

(j) In the event that certain nursing departments of the Hospital are closed for a planned closure either during the Christmas or New Year's period or during the period June 15 to September 15, nurses assigned to these areas and who are not required as additional staff, either in a specific area or as additional float staff, by the Hospital may have the following options:

- (1) The nurse may request to be floated to other areas of the Hospital; or
- (2) The nurse may request to be granted an unpaid leave of absence.

(k) Nurses employed in Ambulatory Day Care, PACU, Mental Health Outpatient Program, Education Services, Discharge Planning and Employee Health, Cardiac Short Stay, Cancer Clinic, Arrhythmia Program, Cardiac Catheterization Lab, Diagnostic Imaging, Cardiac Rehabilitation and Prevention, Cardiac Clinics, Diabetic Clinic and any other Monday to Friday clinics shall continue to work a schedule which provides for the current number of weekends off.

If, however, circumstances warrant a change in these schedules with respect to the number of weekends off, the Hospital will provide the Union with at least eight weeks' written notice and meet with the Union for discussion prior to implementing the change.

D.2 Provisions Specific to Regular Part-time Employees

(a) Regular Part-Time Commitment

- i) The regular part-time nurses will be available to work a minimum of twenty-two and one-half (22.5) hours per week or forty-five (45) hours in a two week pay period. Regular part-time nurses will be scheduled based on seniority and availability up to their commitment. Once the schedule is posted when shifts become available, the shifts will be offered to regular part-time nurses that have not been scheduled up to their commitment of hours. It is the responsibility of the regular part-time nurses to provide the Hospital with availability, in writing. The availability should be updated on a weekly basis or more often, if necessary.
 - ii) Available for scheduling twelve (12) months of the year unless the employee is on scheduled weeks of vacation or an approved leave of absence.
 - iii) Available to work on either period the Christmas period or the New Year's period and in addition at least three (3) other holidays during the year, two (2) of which will be those that fall between the dates of May 15th and September 15th of each year.
 - iv) Regular part-time employees will not be required to work their full commitment in any pay period where a week of vacation is scheduled.
- (b) At least forty-eight (48) hours off are to be scheduled following a period of scheduled night tours to a day shift or an evening shift.
 - (c) The Hospital will attempt to schedule nurses to rotate the two tours of their preference (D/E or D/N). However, for the continuance of efficient operation, the Hospital reserves the right to assign a nurse to a tour other than her/his preference, following notification, in writing, to the nurse concerned.

Notwithstanding the above, an employee who wishes to rotate all three (3) shifts must put their desire in writing to the Manager or designate with a copy to the Union.

D.3 Scheduling For 7.5 Hour Tours

- (a) The weekend is defined as all hours from the completion of any day shift (s) on Friday to the commencement of any day shift (s) on Monday. A weekend for the permanent night nurses will commence no later than 0730 hours on Friday and will include a total of fifty six (56) consecutive hours off.
- (b) At least sixteen (16) hours off shall be scheduled between shifts, and at least forty-eight (48) consecutive hours off shall be scheduled following night duty.
- (c) A nurse will not be required to work more than seven (7) consecutive tours, followed by a minimum of two (2) consecutive days off. A nurse who rotates tours will not be required to work more than seven (7) consecutive shifts on either evenings or nights, without being scheduled for a period of day tours, unless otherwise agreed.

- (d) Nurses will not be required to change tours more than once per week.
- (e) The Hospital will schedule nurses to rotate between two shifts either days and evenings or days and nights. The assigning of these scheduled shifts will be based on the nurse's preference. Any disputes regarding the scheduling of these shifts, will be determined based on seniority. Nurses will be provided with written notice of any changes to their schedule, as per the collective agreement, and the notice will be provided to the Union.

D.4 Extended Tours

- (a) For nurses working extended tours, a regular day tour shall be comprised of 11.25 paid hours, which shall include forty-five (45) minutes of paid break time, and forty-five (45) minutes of unpaid break time.

- (b) Scheduling

The following scheduling provisions shall apply to nurses working extended tours as follows:

- i) No more than three (3) consecutive extended tours shall be scheduled.
- ii) At least twelve (12) hours time off will be scheduled between shifts.
- iii) A weekend is defined as fifty-six (56) consecutive hours off, which shall commence no later than 1930 hours Friday. A weekend for permanent night nurses shall be defined as commencing no later than 0730 hours Friday.
- iv) A full time nurse may not be required to change tours of duty more than once during a week.
- v) The Hospital will not change a posted schedule with less than forty-eight (48) hours notice, unless by mutual agreement.
- vi) At least forty-eight (48) consecutive hours off shall be scheduled following night duty to a scheduled day shift. A shorter period of time between changes may be agreed upon by mutual consent.

FT Only

- (c) The Hospital will provide at least every second (2nd) weekend off.

If the nurse is required to work on a second (2nd) consecutive and subsequent weekend, she/he will receive premium payment as defined in the Central Agreement, for all hours worked on that weekend and subsequent weekends, until a weekend is scheduled off, save and except where:

- i) such weekend has been worked by the nurse to satisfy specific days off requested by such nurse; in advance of the requested weekend.
- ii) such nurse has requested weekend work; or
- iii) such weekend is worked as a result of an exchange of shift(s) or fulfilling a request for paid time off with another nurse.

- (c) The Hospital will provide one additional weekend off per year in addition to every second weekend off. This additional weekend off shall be scheduled at a mutually agreeable time between the Nurse and the Nurse's Manager. The Nurse will submit in writing request for the additional weekend off. The request for the additional weekend off will be submitted four weeks in advance of the requested weekend and a response shall be provided to the Nurse at least two weeks in advance of the requested weekend. The scheduling conditions shall be waived to accommodate this special arrangement.
- (d) Extended tour schedules will be finalized prior to any vote being taken and will start after the successful secret ballot vote conducted by the Union and a Management representative. The secret ballot vote will require an eighty (80) percent agreement of the secret ballots cast, by Full Time and Regular Part Time Nurses on the Unit.
- (e) An extended tour schedule may be discontinued where the Nurses on the unit vote to discontinue extended tours. The vote to discontinue will be conducted by the Union and a Management representatives, by secret ballot of Full Time and Part Time Nurses on the Unit and will require a eighty (80%) vote to discontinue.
- (f) When less than eighty (80%) percent of the nursing staff in a particular nursing unit vote as outlined in Article D.4 (e), in favour of extended tours by secret ballot, the Union may approach the Hospital and ask them to consider the implementation of a combination of extended tours and normal tours in a particular nursing unit.

The Hospital shall make space available to the Union, in order to permit them to conduct a vote, to ensure that 100% of the unit staff have indicated their preference for normal tours or extended tours. The parties must meet to discuss the implementation of a combination schedule. Approval for implementation of a combination of extended tours and normal tours shall not be unreasonably denied.

D.5 Scheduling Provisions for 10 Hour Tours

- i) The ten (10) hour tour schedule may be introduced when a written request has been provided to the Hospital and copied to the Bargaining Unit President, signed by fifty (50%) of the nurses on that Unit.
- ii) The ten (10) hour schedule will be finalized prior to any vote on the ten (10) hour tour has been taken. Eighty (80%) of the nurses (full and part-time) that vote by secret ballot must be in favour of the ten (10) hour schedule.
- iii) The following scheduling provisions shall apply to all nurses working extended 10 hour tours:
 - (1) A ten (10) hour tour will be paid 9.375 hours. Nurses will be scheduled four (4) shifts in a week for 37.5 hours of paid time.
 - (2) Nurses shall be entitled, subject to exigencies of patient care, to unpaid meal periods of 37.5 minutes and 37.5 minutes of paid break time.

- iv) The Hospital or the Union may discontinue the ten (10) hour schedule in a Unit with the provision of ninety (90) days written notice to the other party. Upon receipt of such notice a meeting shall be held between the parties within fifteen (15) days, to discuss the discontinuation of the schedule. It is understood and agreed that such discontinuation shall not be unreasonable or arbitrary.

D.6 4 ON/5 OFF – Extended Tour Schedule

- (1) 4ON/5OFF rotations are for full-time employees only.
- (2) The 4 ON/5 OFF extended tour schedule may be implemented when eighty (80%) percent of the employees on a particular nursing unit have so indicated by secret ballot.
- (3) When less than eighty (80%) of the staff on a particular nursing unit vote in favour of the 4 ON/5 OFF extended tour schedule by secret ballot, the Union may approach the Hospital and ask them to consider the implementation of a combination 4 ON/5 OFF extended tour schedule, other extended tours and normal (7.5 hour) tour in a particular unit.
- (4) The eighty (80%) percent figure above may be varied by mutual agreement between the parties.
- (5) The Hospital shall make space available to the Union in order to permit the Union to conduct the secret ballot vote.
- (6) The 4 ON/5 OFF schedule may be discontinued in any unit when:
 - (i) fifty-one (51%) of the nurses in a unit so indicate by secret ballot;
 - or
 - (ii) the Hospital decides to do so because of:
 - A) adverse effects on patient care, or
 - B) inability to provide a workable staffing schedule, or
 - C) where the Hospital wishes to do so for other reasons which are neither unreasonable nor arbitrary, and states its intention to discontinue the extended tours in the schedule;
 - (iii) When notice of discontinuance is given by either party in accordance with number (ii) above, then:
 - A) the parties shall meet within four (4) weeks of the giving of notice to review the request for discontinuance; and
 - B) where it is determined that the extended tours will be discontinued, affected nurses shall be given sixty (60) days notice before the schedules are so amended;

- (7) The scheduling provisions contained in the Collective Agreement are applicable save and except as amended below:
- (a) Nurses will not be required to work more than four (4) shifts in a row. If a nurse works a fifth (5th) shift, the nurse will receive premium pay. The nurse will not receive premium payment if the fifth (5th) shift is requested by the nurse as a required additional shift to maintain full-time hours.
 - (b) Nurses will not be scheduled to work more than three (3) consecutive weekends. If a nurse works a fourth (4th) weekend or a portion of a weekend, the nurse will be paid premium as per the Collective Agreement, for all hours worked on that weekend, unless the nurse requests to work that weekend shift to maintain full-time hours and to work their required additional shift(s).
 - (c) All 4ON/5OFF master schedules will be calculated to years end to ensure the schedule provides 1950 hours in each calendar year. Nurses must make themselves available to work their required additional shift(s) on all shifts. The scheduling of the required additional shifts will be scheduled to provide direct patient care, prior to the scheduling of regular part-time nurses. The required additional shifts will be scheduled equally throughout the year and the number of required additional shifts will be determined by the nurse in consultation with the Manager, by January 31st of each year. If the nurse does not provide the required availability for these required additional shift(s), the Manager will have the ability to schedule these required additional shifts(s) equitably throughout the year.
 - (d) Prior to formulating a 4ON/5OFF master rotation for any unit the parties must agree on all scheduling provisions specific to the 4ON/5OFF rotation. The master rotation schedule will be developed based on the number of employees who indicate their willingness to work a 4ON/5OFF rotation. The finalized master rotation must be agreed upon by the parties prior to being presented to the employees on the unit. Once the master rotation is finalized it will not be altered without the consent of the Union.

D.7 Four Hour Tours (PT Only)

Where four-hour shifts are required, Article D in its entirety applies except as amended by the following:

- (a) The Hospital will endeavour to keep the number of four (4) hour shifts to a minimum.
- (b) There shall be an equitable distribution of such tours among the regular part-time nurses in each unit. Equitable distribution is understood to mean equity in the distribution of four (4) and seven and one-half (7½) hour or longer tours where they are available.
- (c) Nurses working four (4) hour tours shall be granted a fifteen minute paid rest period as per the Central Collective Agreement.

- (d) There will be no more than seven (7) shifts in a row scheduled. If a nurse is required to work on a eighth (8th) consecutive and subsequent tour, then she/he will receive premium payment for each shift so worked until a day off is scheduled.
- (e) On a unit where there are regular pre-scheduled four (4) hour tours, these four (4) hour tours shall be considered to be a full shift worked. Any requirement to work additional time beyond the four (4) hours will constitute overtime worked.

ARTICLE E – CHRISTMAS SCHEDULE

E.1 A nurse will be scheduled off work for not less than five (5) consecutive days during the holiday period, unless the nurse requests otherwise, except in areas which are not normally required to work on weekends and statutory holidays. The normal scheduling conditions shall be waived to accommodate this special arrangement between December 15th and January 15th. For the purpose of this schedule, the Christmas period off shall be defined as the beginning of the day shift(s) on December 24th until the beginning of the day shift(s) on December 27th. The New Year's period off shall be defined as the beginning of the day shift(s) on December 31st until the beginning of the day shift(s) on January 2nd.

A nurse not scheduled on the holiday period that they were expected to work will be deemed to have worked the holiday period for scheduling purposes.

Nurses will indicate their preferences of work for the holiday period, in writing, by October 1st of each year.

The Hospital will post schedules indicating time off for the holiday period by November 1st. These schedules shall cover at least a six (6) week period.

If the nurse was scheduled to work the Christmas period, the nurse must be scheduled to have the following Christmas period off, unless the nurse chooses to work.

If the staffing requirements allow for additional staff to be off, it will be granted based on seniority of the scheduled nurses requesting the time off.

ARTICLE F – VACATIONS (FULL-TIME AND PART-TIME)

F.1 The vacation period shall be from June 1st until May 31st of the following year. Vacation quota will apply for the period of June 15th until September 15th of each year.

F.2 Vacation requests for the period of June 15th until September 15th will be submitted to the Manager by April 1st. Vacations will be granted by seniority. The approved vacation time for this period will be posted by May 1st of each year.

Requests for vacation at any other time of year shall be submitted at least three (3) weeks prior to the posting date for the new schedule and shall be granted on a first come first served basis. A response to the request will be provided from the Manager, in writing within three (3) weeks of the request and prior to the posting of the schedule. Exceptional requests for vacation will be considered by the Hospital at

any time. A vacation request cannot be submitted greater than 12 months ahead of the requested time off.

- F.3 The Hospital shall endeavour to grant up to fifteen percent (15%) of the nurses on the unit off at any one time to accommodate vacation requests. Vacation requests will be dealt with separately for full-time and regular part-time nurses on the unit at the same fifteen percent (15%) ratio for both nursing groups. When this is not a whole number, it shall be “rounded up” at 0.5 or greater.

Notwithstanding the above, the Manager in any department may schedule additional Registered Nurses off at any one time, if staffing requirements permit it.

- F.4 It is understood that vacation weeks are not necessarily continuous, however, the Hospital will endeavour to accommodate the wishes of the nurses with respect to the choice of vacation dates, subject to the need to meet the operating requirements of the Hospital. The Hospital will not unreasonably deny vacations. Vacation may commence on any day of the week, a week being defined as Monday – Sunday for the period June 15 to September 15 only. This will be counted as a full week’s vacation, regardless of the number of vacation hours used to achieve the week off. It is understood that those who are scheduled for a week off as part of the regular schedule will not be counted toward the 15% off quota.

- F.5 A nurse may only exercise her/his seniority rights once in each vacation year. The parties agree that where nurses request separate vacation weeks during the prime time vacation period such requests will be considered one (1) request under Article G.5 provided all weeks are submitted under one (1) request.

- F.6 Vacation pay shall be paid to all nurses in advance of their vacation period, if they so request. Request for vacation pay must be submitted to the nurse’s Manager, two weeks in advance of the pay period in which the vacation is scheduled.

Vacation pay shall be paid to all regular part-time and casual nurses on each bi-weekly pay.

- F.7 Nurses may not take more than three (3) weeks of vacation from June 15th to September 15th. After vacation weeks have been granted a nurse may request single vacation days. Such requests will not be unreasonably denied.

- F.8 There will be no carryover of vacation past May 31st of the following year. Exceptional requests will be considered by the Hospital.

- F.9 Vacation may not be taken between December 24th and January 1st of each year.

ARTICLE G – PAID HOLIDAYS

- G.1 The following shall be paid holidays:

New Year’s Day	Thanksgiving Day
Family Day (3 rd Monday in February)	2nd Monday in November
Good Friday	Christmas Day
Victoria Day	Boxing Day
Dominion Day (Canada Day)	Labour Day
Civic Holiday	1st Monday in June

- G.2 When a nurse qualifies for lieu days, the lieu day shall be scheduled off at a mutually agreed upon time, including weekends, within sixty (60) days either side of the holiday unless otherwise mutually agreed to by the nurse and the Hospital.
- Nurses may request, in writing, to accumulate up to five lieu days. Such days are to be used at a mutually agreeable time as determined by the nurse and her/his manager.
- G.3 FT Only Scheduling of a day off on the day of observance of a holiday, will be distributed among the nurses in each nursing unit concerned, as equitably as is reasonably practical.
- G.4 The master rotation, for all staff may be waived for a two week period surrounding a paid holiday, in order to accommodate the conditions set out below:
- (a) A nurse required to work the weekend in conjunction with a paid holiday, shall be required to work the paid holiday.
 - (b) A nurse scheduled off on a weekend in conjunction with the paid holiday shall be scheduled off duty on the paid holiday.
- G.5 FT Only In accordance with the current practice nurses working in the following areas, Ambulatory Day Care, PACU, Mental Health Outpatient Programs, Discharge Planning, Employee Health, Nurse Educators, Cancer Clinic, Cardiac Short Stay Unit, Arrhythmia Program, Cardiac Catheterization, Cardiac Clinics, Diabetic Clinic, Diagnostic Imaging, Prenatal Clinic, Breastfeeding Clinic and any other eight (8) hour clinics Monday to Friday will be scheduled off on paid holidays. The Hospital will provide the Union with at least eight (8) weeks written notice of any changes to the scheduling for these areas, and will meet with the Union to discuss the changes prior to implementing any changes.

ARTICLE H – STANDBY/ON CALL

- H.1 The Standby/On Call scheduling currently occurs in the following Units, Surgical Suite, Post Anesthetic Care Unit, Ambulatory Day Care, Cardiac Cath Lab and Arrhythmia Clinic.
- H.2 Prior to implementation of Standby/On Call scheduling, the rationale and the proposed hours of Standby/On Call scheduling will be presented to the Hospital Association Committee.
- H.3 Standby or on call scheduling will be established in Patient Care Units where urgent care is required for specialized care provided by the nurses assigned to those units.
- H.4 All nurses scheduled for standby will be provided with pagers provided by the Hospital. The pagers will be returned by the employees to the Hospital on the next scheduled day of work.
- H.5 There will be equal distribution of the Standby/On call scheduling for all nurses assigned to the designated unit including full time and part time nurses. Casual nurses that are qualified may be scheduled Standby / On Call.

- H.6 Nurses may exchange or give away Standby/On Call scheduling with the mutual consent of the nurses involved and the approval of the Manager. The exchange of or give away of Standby/On Call scheduling will not result in incremental costs.
- H.7 Standby/On Call scheduling will be posted in accordance to the local collective agreement at the same time frame as per the posting of the regular schedule. The nurses scheduled Standby / On Call, will be scheduled for a maximum of five (5) consecutive shifts of standby. Nurses will not be required to work in excess of sixteen (16) hours in a twenty-four (24) hour period without being relieved from duty.
- H.8 The statutory holidays will be equally distributed amongst the nurses that are scheduled Standby/On Call.
- H.9 Nurses scheduled on standby are entitled to the normal relief and meal periods in accordance with the collective agreement. The Hospital will make available a sleep/rest area for nurses scheduled Standby/On Call.
- H.10 The nurses will clarify the need to remain at work prior to leaving the Hospital, according to the Departmental Process.
- H.11 Nurses will not be required to work their next scheduled shift without a minimum of eight (8) hours of rest period between the completion of the standby assignment and the next scheduled shift. The nurse will be paid for all scheduled hours within the eight (8) hour rest period. The Nurse must contact the Unit and be available to work any remaining hours of the scheduled shift or may request lieu time off if Unit's needs permit.

ARTICLE I – JOB SHARING

- I.1 When the Hospital agrees to a Job Sharing agreement pursuant to Article 20.01 of the Central Agreement, the following conditions shall apply:
- (1) Job sharing requests with respect to full-time positions shall be considered on an individual basis.
 - (2)
 - (a) Total hours worked by the job sharing arrangement will equal one (1) full-time position. The job sharers will divide the scheduled shifts as per the Collective Agreement, by mutual agreement between the partners. If there are any disputes regarding the scheduled shift(s), the Manager will assign the shift(s).
 - (b) Job-sharers may work additional shifts as per the Local Collective Agreement article regarding Part-time Scheduling and Commitment.
 - (3) The above schedules shall conform with the scheduling provisions of the full-time Collective Agreement.
 - (4) Each job sharer may exchange shifts with her/his partner, as well as with other nurses as provided by the Collective Agreement.
 - (5) The job sharers involved will have the right to determine which partner works on scheduled paid holidays and job sharers shall only be required to work the number of paid holidays that a full-time nurse would be required to work.

(6) Coverage:

- (a) The Job sharers will attempt to cover each other's incidental illnesses. If a Job Sharer cannot cover the other's absences, the Unit Manager will be notified in the usual manner to book coverage. Job sharers are required to cover each other's planned absences with a minimum of two (2) weeks notice. The Job Sharer will cover each other's vacation of up to 3 consecutive weeks duration unless extenuating circumstances approved by the nursing Unit Manager.
- (b) Pregnancy leave, and other leaves pursuant to Article 11 of the Central Agreement:

In the event that one member of the job sharing arrangement goes on any of the above leaves of absence, the coverage will be negotiated with the Unit Manager but it is hoped that the remaining member of the position would be prepared to cover the leave of absence as much as possible.

(7) Implementation

Where the job sharing arrangement arises out of the filling of a vacant full-time position, both job sharing positions will be posted and selection will be based on the criteria set out in the Collective Agreement.

- (8) Any incumbent full-time nurse wishing to share her/his position, may do so without having her/his half of the position posted. The other half of the job sharing position will be posted and selection will be made on the criteria set out in the Collective Agreement.
- (9) If one of the job sharers leaves the arrangement, her/his position will be posted. If there is no successful applicant to the position, the shared position must revert to a full-time position. The remaining nurse will have the option of continuing the full-time position or reverting to a part-time position for which she/he is qualified. If she/he does not continue full-time, the position must be posted according to the Collective Agreement.

(10) Discontinuation

Either the Hospital or the Union may discontinue the job sharing arrangement with ninety (90) days` notice. Upon receipt of such notice a meeting shall be held between the parties within fifteen (15) days to discuss the discontinuation. It is understood and agreed that such discontinuation shall not be unreasonable or arbitrary.

ARTICLE J – LEAVE OF ABSENCE

- J.1 Leave of absence for Union business shall be granted, once approved by the Bargaining Unit President, for a total of one hundred and fifty (150) days for both Full Time and Part Time Nurses in the Bargaining Unit. The Union will provide Human Resources with four weeks notice of the leave except in emergency situations. The Hospital will grant Leave for Union Business to one nurse from any one Unit and will not unreasonably deny the request.

When the Local Coordinator works in the Bargaining Unit, the leave of absence time for Union business requested by the Local Coordinator will not be included in the aggregate days, as per the above one hundred and fifty (150) days.

- J.2 Officials of the Union, shall be permitted to wear an insignia on their uniforms, during working hours, indicating that they are officials of the Union.
- J.3 A Union representative that leaves their work area to attend business, as required by the Employer will be replaced by the Manager, if required. The Hospital will notify the Manager and the manager will provide the replacement if required. Attendance at any meeting will not be unreasonably denied and if denied the meeting will be rescheduled if necessary.

ARTICLE K – PRE-PAID LEAVE

- K.1 Effective April 1, 1989, it is agreed that seven percent (7%) of the full-time and part-time bargaining unit shall be permitted to be on pre-paid leave. It is further agreed that the determination of seven percent (7%) of the full-time bargaining unit and seven percent (7%) of the part-time bargaining unit will be based on the November seniority list.

ARTICLE L – MISCELLANEOUS

- L.1 Pay slips will be available via the current e-pay system. All nurses not currently enrolled in epay, shall do so no later than April 30, 2009. A nurse may request to have her pay slips mailed out, if a long absence is anticipated, i.e. Maternity Leave
- L.2 The Hospital agrees to supply and launder scrub dresses or scrub suits for nurses working in the Obstetrical area, Operating Rooms, Emergency Department, Critical Care areas, any designated isolation Units and Sterile Procedure Rooms. All scrub suits are the property of the Hospital.
- Nurses shall have the option of wearing scrub dresses or scrub suits in the Operating Room.
- L.3 A copy of the seniority list will be filed with the Union by March 1st and by September 1st.
- L.4 The wearing of nursing caps shall be optional.
- L.5 The Union shall be permitted to maintain Union binders on each individual nursing unit at the Hospital. Such binders shall contain general information regarding the duties and responsibilities of the Union.
- L.6 Any information acquired by the Employer from the automatic time clock system will not be used in arbitrary or discriminatory manner.
- L.7 The parties agree that the Attendance Management Program will not be used in an arbitrary or discriminatory manner. Nurses will not be required to attend any meeting on their own time relating to the Attendance Management Program.

- L.8 The Hospital will provide office space for use by the Local. This space will include a telephone, fax machine, computer, email, inter and intranet use and lockable filing cabinets. Each member of the local executive will have remote Hospital email access.

ARTICLE M – ASSERTIVE COMMUNITY TREATMENT TEAM

- M.1 The nurses working in the Assertive Community Treatment Team will be required to work on call from 1630 to 0830 each weekday Monday to Friday, and will work on Holidays, Saturdays and Sunday for all hours required and will be paid the Standby premium as per the Central Collective Agreement.

The nurses working in the Assertive Community Treatment Team, will be paid one hour and thirty minutes (1½ hours) for every Clinical Patient call and any calls related to the initial Clinical Patient call within one (1) hour.

ARTICLE N – MODIFIED WORK

1. The Hospital will notify the President of the Local Nurses' Association of the names of all nurses who go off work due to a work related injury or when a nurse goes on L.T.D.
2. The Hospital agrees to provide the employee with a copy of the Workers' Compensation Board Form 7 at the same time as it is sent to the Board.
3. The Hospital will notify the Union of any nurse who has been injured while on Hospital property because of a physical assault within three (3) days of the hospital becoming aware of the injury. The Hospital will consider reimbursement for damage to personal property (e.g. glasses, watches and uniforms) resulting from such physical assaults.
4. Early and Safe Return to Work

The Hospital and the Union both recognize their obligations in facilitating the early and safe return to work of disabled employees. The Hospital and the Union agree that ongoing and timely communication by all participants in this process is essential to the success of the process.

1. A Return to Work Committee (RWC) will be established, at least one member of which will be a representative of the Union. The committee will meet at least once per month. The Union member will suffer no loss of regular earnings for attendance at such meetings. If the Union member is required to attend on their day off they will receive pay at straight time or time in lieu where possible for hours spent in return to work meetings. Such hours are invisible for the purpose of determining premium.

The Hospital will provide an updated list of information to the RWC before each monthly meeting including the following:

- i) Employees absent from work because of disability who are in receipt of Workplace Safety Insurance Board benefits
- ii) Employees absent from work because of disability who are in receipt of Long Term Disability benefits including last day worked

- iii) Employees who required temporary or permanent accommodation in the workplace
2. It is understood that it is the obligation of the disabled employee in receipt of short-term or long-term disability benefits to ensure the Hospital's Occupational Health Department is advised as soon as possible of any change in medical restrictions which may affect their ability to return to regular or modified duties.
 3. The Occupational Health Department will discuss the needs of employees for accommodation as soon as possible with their respective manager or designate, and the Union will advise the RWC as soon as possible when return to their original position or unit has not occurred. The Occupational Health Department in consultation with the Union representative will examine opportunities for temporary accommodation until such time as an appropriate permanent accommodation is determined.
 4. The Hospital will advise the Union of offers permanent accommodation within or outside the bargaining unit.
 5. The parties recognize that more than one employee requiring accommodation may be suitable for a particular position or arrangement. In such cases the Hospital will consider the skills, ability and experience of the employees and will also consider ability to acquire skills, seniority and path of least disruption in the workplace.
 6. The committee will monitor the status of accommodated employees and the status of employees awaiting accommodation. The committee will review any circumstances where attempts to accommodate an employee have proven unsuccessful.
 7. Before posting, the Hospital's Human Resources department will examine all potential vacancies to determine if they can be used to accommodate a disabled employee who requires accommodation but cannot return to their home unit.
 8. Where such vacancies are within the bargaining unit, the Hospital will consult with the Union on the feasibility of an accommodation giving consideration to all factors including the number of accommodated employees in the unit, the operational needs of the unit, safety of patients and employees working in the unit.
 9. Whether or not the parties agree to waive the posting procedure in order to facilitate an accommodation and whether or not the position is within the bargaining unit, the parties will sign an agreement containing the details of the accommodation. The parties may also agree to a written agreement for temporary accommodation of extended duration.
 10. The home position of a nurse who needs permanent accommodation may be posted under the following circumstances:
 - (i) the employee is permanently accommodated in another position or arrangement
 - (ii) the weight of the medical evidence establishes that there is no reasonable prospect of a return to her original position in the foreseeable future
 - (iii) the Hospital may elect to fill the disabled employee's home position by posting a temporary to permanent vacancy

- a) In so electing, the position will be filled in accordance with the job posting provisions of the Collective Agreement
- b) If and when it is confirmed that the disabled employee cannot return to her original position, the position may be offered to the incumbent on a permanent basis
- c) When a job offer is made for the vacancy, the successful applicant will be clearly advised of the temporary status of the position and of its potential permanency.
- d) Filling of a disabled employee's home position does not remove the Hospital's duty to accommodate that employee.

ARTICLE O – BULLETIN BOARDS

- O.1 The Hospital will provide bulletin board space for the use of the Union, in posting Union notices. The Union will have the right to post Union notices on the bulletin board in the conference rooms, on each nursing unit. Such notices must be submitted to the Manager of Human Resources or Coordinator of Labour Relations for approval within forty-eight (48) hours. Such approval will not be unreasonably withheld.

ARTICLE P – VIOLENCE IN THE WORKPLACE

- P.1 Violence shall be defined as any incident in which a nurse is abused, threatened or assaulted during the course of his/her employment. It includes the application of force, threats with or without weapons and severe verbal abuse. The Hospital agrees that such incidents will not be condoned. Any nurse who believes he/she has been subjected to such incident shall report this to a supervisor who will make every reasonable effort to rectify the situation.
- P.2 The Hospital agrees to develop formalized policies and procedures in consultation with the Joint Health and Safety Committee to deal with workplace violence. The policy will address the prevention of violence and the management of violent situation and support to nurses who have faced workplace violence. These policies and procedures shall be communicated to all nurses.
- P.3 The Hospital will report all incidents of violence to the Joint Health and Safety Committee for review.
- P.4 The Hospital agrees to provide training and information on the prevention of violence to all employees who come into contact with potentially aggressive persons. This training will be done during a new employee's orientation and updated as required.
- P.5 The Hospital, with the nurse's consent, will inform the Union within three (3) days of any nurse who has been subjected to violence while performing his/her work. Such information shall be submitted in writing to the Union as soon as possible.
- P.6 The Hospital will consider requests for reimbursement for damages incurred to the nurse's personal property, such as eyeglasses, ripped uniforms, personal clothing, as a result of being assaulted while performing his or her work.

ARTICLE Q – NEEDLE STICK AND SHARPS INJURIES

- Q.1 The Hospital, in consultation with the Joint Health and Safety Committee, shall develop, implement and monitor a program for the prevention of needle stick and sharp injuries and the treatment of such injuries should they occur. The program should include and address employee training and education with respect to needle stick and sharps injury prevention, and provide for the maintenance of a needle stick/sharps injuries log to detail incidents. The program shall be evaluated annually by the Hospital in consultation with the Joint Health and Safety Committee.

Dated at Toronto, Ontario, this 26th day of January, 2012.

FOR THE EMPLOYER

[Signature]

[Signature]

Lorrie Reynolds

[Signature]

Alisa McQueen
Human

FOR THE UNION

[Signature]
Labour Relations Officer

[Signature]

[Signature]

[Signature]

[Signature]
[Signature]

LETTER OF UNDERSTANDING

Between:

ONTARIO NURSES' ASSOCIATION
(hereinafter referred to as the "Union")

And:

SOUTHLAKE REGIONAL HEALTH CENTRE
(hereinafter referred to as the "Hospital")

Re: Weekend Worker

Requests for Weekend Worker positions shall be considered on an individual basis where mutually agreed to by the Hospital and the Union.

All vacancies that arise by the creation of a Weekend Worker position will be filled in accordance with the Collective Agreement.

The Weekend Worker positions will work a rotation of two shifts days/ evenings or day/nights based on the Units requirements.

A Weekend Worker may request time off as per the provisions of the Collective Agreement and the shift will be offered to the part-time staff as per the scheduling provisions of the Local Appendix.

Requests for Vacation will be considered as per the Collective Agreement including the Local Appendix provisions related to the vacation percentages and the Weekend Worker will be considered as a full-time nurse.

The Weekend Worker may request to discontinue the arrangement by providing the Hospital and Union with a written request. The Hospital and the Union will meet with the Worker and determine when the position can be discontinued. The nurse will be required to apply to the job posting and obtain a new position within the Bargaining Unit.

The Hospital or the Union may discontinue the Weekend Worker arrangement with ninety (90) days' notice. Upon receipt of such notice, a meeting shall be held between the parties within fifteen (15) days to discuss the discontinuation of the Weekend Worker arrangement. It is understood and agreed that such discontinuation shall not be unreasonable or arbitrary.

Dated at Toronto, Ontario, this 26th day of January, 2012

FOR THE EMPLOYER

[Signature]

[Signature]

Lorne Reynolds

[Signature]

Maureen

FOR THE UNION

[Signature]
Labour Relations Officer

[Signature]

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[Signature]

[Signature]

LETTER OF UNDERSTANDING

Between:

ONTARIO NURSES' ASSOCIATION
(hereinafter referred to as the "Union")

And :


SOUTHLAKE REGIONAL HEALTH CENTRE
(hereinafter referred to as the "Hospital")


In consideration of the request of nurses to have access to a payroll deduction option to purchase Canada Savings Bonds with the current bond issue, the Hospital agrees to provide a payroll deduction option and the Hospital will continue the program unless the participation level falls below forty (40) nurses.

Dated at Toronto, Ontario, this 26th day of January, 2012

FOR THE EMPLOYER

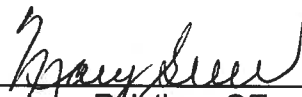
FOR THE UNION



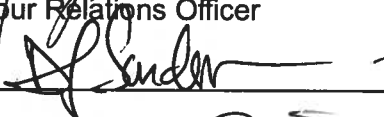


Lorne Reynolds

Alex McQueen
Wilmans



Labour Relations Officer



Dana Oliver

Kelley Johnston

Julie Williams

LETTER OF UNDERSTANDING

Between:

ONTARIO NURSES' ASSOCIATION
(hereinafter referred to as the "Union")

And:

SOUTHLAKE REGIONAL HEALTH CENTRE
(hereinafter referred to as the "Hospital")

Re: Self Scheduling

Where the parties agree to the use of self-scheduling for full-time and part-time employees on a unit, the following will apply:

Eighty percent (80%) of the full-time and regular part-time employees on the unit must indicate by secret ballot their willingness to participate prior to commencement of a trial of self-scheduling. This vote will be conducted by the Union on the Unit.

A trial of self-scheduling shall run for a six (6) month period after which full-time and regular part-time employees will indicate by an 80% vote by secret ballot, their willingness to continue using self scheduling.

When a unit adopts self-scheduling as a trial or on a permanent basis, all employees on the unit will be required to participate in self-scheduling.

Employees participating in self-scheduling shall be responsible for scheduling their hours of work, including paid holidays and lieu days. Employees participating in self scheduling shall be responsible for scheduling their hours of work, including paid holidays and lieu days. Paid holidays and lieu days must be approved by the manager.

The completed schedule shall be submitted to the Manager of the Unit for review and approval, to ensure that appropriate coverage is maintained, at least two (2) weeks in advance of the required posting time. The Manager must approve the schedule and such approval shall not be unreasonably withheld.

Self-scheduling, including all scheduling guidelines, shall comply with all the provisions of the Collective Agreement in all respects.

The parties will agree to all guidelines related to self-scheduling prior to the implementation of self-scheduling on any unit.

1. Cancellation of the self-scheduling by either the Hospital or the Union shall be with four (4) weeks written notice to the other.
2. The cancellation of self-scheduling by the Hospital will not be for reasons which are arbitrary, discriminatory or in bad faith.

- 3. Self-scheduling may be discontinued in a unit when eighty percent (80%) of the employees in the unit so indicate by secret ballot. This vote will be conducted by the Union on the Unit.

There will be a six (6) month Self Scheduling trial in one unit of mutual agreement.

Dated at Toronto, Ontario, this 26th day of January, 2012.

FOR THE EMPLOYER

FOR THE UNION

[Signature]

[Signature]
Labour Relations Officer

[Signature]

[Signature]

Lennie Reynolds

Dana Owen

[Signature]
Wumau

[Signature]
[Signature]
Julia Williams

LETTER OF UNDERSTANDING

Between:

ONTARIO NURSES' ASSOCIATION
(hereinafter referred to as the "Union")

And:

SOUTHLAKE REGIONAL HEALTH CENTRE
(hereinafter referred to as the "Hospital")

1. The Bargaining Unit President is to be on full leave of absence with the annual salary for such leave being maintained by the Hospital. The Bargaining Unit President will be scheduled to work Monday through Friday for the period of her/his term. On completion of her/his term of office, the Bargaining Unit President shall return to her/his previous position, which includes rotation on the nursing unit.
2. The Bargaining Unit President is, however, to remain on the Hospital payroll, in order to The Bargaining Unit President is to retain her/his nursing unit as a home base. The Bargaining Unit President may work on the Home unit for up to four (4) weeks per year as mutually agreed by the Bargaining Unit President and her/his manager. The reporting relationship shall be through the Human Resources Department except when the Bargaining Unit President works on her/his home unit at which time the reporting relationship shall be through the home unit manager.
3. Maintain continuity of coverage with benefits and pension entitlements as are presently applicable. The Bargaining Unit President remains a member of ONA bargaining unit with all of the rights and responsibilities that are provided under the Collective Agreement. For clarity, seniority and service shall continue to accrue.
4. The Hospital will bill ONA Local 124 on a quarterly basis for the portion (40% of the annual salary) to be paid by the Association for the period of her or his term.
5. This Letter of Understanding, providing an additional three days of paid leave to the Bargaining Union President, will exist for the length of this Collective Agreement; its renewal will be subject to mutual agreement between the Hospital and the Union.
6. Article C.3 remains in effect and is not subject to the time limits of this Letter of Understanding.

Dated at Toronto, Ontario, this 26th day of January, 2012.

FOR THE EMPLOYER

[Signature]

[Signature]

Lorrie Reynolds

Ally McOwen
Human Resources

FOR THE UNION

[Signature]
Labour Relations Officer

[Signature]

Dana Owen

Kelly Johnston

[Signature]
Julia Williams

LETTER OF UNDERSTANDING

Between:

ONTARIO NURSES' ASSOCIATION
(hereinafter referred to as the "Union")

And:

SOUTHLAKE REGIONAL HEALTH CENTRE
(hereinafter referred to as the "Hospital")

Re: Addendum - Part Time Commitment to 7.5 hour and Extended Tour shifts.

1. Regular part time RN's will be available to work three (3) out of six (6) weekends based on availability, but will not be scheduled for more than two (2) consecutive weekends during the six (6) week posted schedule.
2. Both the Union and the Hospital agree to meet after twelve (12) months of this signed agreement to review this Letter of Understanding.
3. If the Part Time RN is required to work on a second (2nd) consecutive and subsequent weekend, she/he will receive premium payment as defined in the Central Agreement, for all hours worked on that weekend and subsequent weekends, until a weekend is scheduled off, save and except where:
 - i) such weekend has been worked by the nurse to satisfy specific days off requested by such nurse; in advance of the requested weekend.
 - ii) such nurse has requested weekend work; or
 - v) such weekend is worked as a result of an exchange of shift(s) or fulfilling a request for paid time off with another nurse.
 - iv) when a nurse makes themselves available for two (2) weekends in a row.
4. Premium pay will apply if scheduled for more than three (3) weekends out of six (6), save and except as above.

Dated at Toronto, Ontario, this 25th day of January, 2012.

FOR THE EMPLOYER

[Signature]
[Signature]
 Lorne Reynolds
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FOR THE UNION

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 Labour Relations Officer
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