

COLLECTIVE AGREEMENT

Between:

ALEXANDRA HOSPITAL, INGERSOLL
(hereinafter referred to as "the Hospital")

And:

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

Expiry Date: March 31, 2025

APPENDIX 3

SALARY SCHEDULESRegistered Nurse

Hourly Rate

	<u>1-Apr-23</u>	<u>1-Apr-24</u>
Start	\$37.93	\$39.07
1 Year	\$38.88	\$40.05
2 Years	\$39.86	\$41.06
3 Years	\$41.65	\$42.90
4 Years	\$43.52	\$44.83
5 Years	\$45.70	\$47.07
6 Years	\$47.98	\$49.42
7 Years	\$50.38	\$51.89
8 Years	\$54.37	\$56.00

Clinical Leaders/Resource NurseClinical Leader/infection Control

Hourly Rate

	<u>1-Apr-23</u>	<u>1-Apr-24</u>
Start	\$41.93	\$43.07
1 Year	\$42.88	\$44.05
2 Years	\$43.86	\$45.06
3 Years	\$45.65	\$46.90
4 Years	\$47.52	\$48.83
5 Years	\$49.70	\$51.07
6 Years	\$51.98	\$53.42
7 Years	\$54.38	\$55.89
8 Years	\$58.37	\$60.00

The hourly rate for the Clinical Leaders/Resource Nurse and Clinical Leader/ Infection Control will be maintained at the Registered Nurse straight time hourly rate plus the responsibility pay provided for in Article 19.04 (c). In the event the quantum of pay in Article 19.04 (c) is increased, the same increase will be made to the above rates.

RN Educator

Hourly Rate

	<u>1-Apr-23</u>	<u>1-Apr-24</u>
Start	\$40.28	\$41.49
1 Year	\$41.27	\$42.51
2 Years	\$42.27	\$43.54
3 Years	\$44.07	\$45.39
4 Years	\$45.93	\$47.31
5 Years	\$48.09	\$49.53
6 Years	\$50.38	\$51.89
7 Years	\$52.78	\$54.36
8 Years	\$56.77	\$58.47

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APPENDIX 4

SUPERIOR CONDITIONS

Non-applicable

APPENDIX 5 - LOCAL ISSUES

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ARTICLE A – RECOGNITION

A-1 The Hospital recognizes the Association as the sole and exclusive bargaining agent for all registered and graduate nurses employed in a nursing capacity by Alexandra Hospital in Ingersoll, save and except Clinical Co-ordinators, Corporate Facilitator Education, Accreditation and Quality, and persons employed for not more than twenty-four (24) hours per week.

The Hospital recognizes the Association as the sole and exclusive bargaining agent for all registered and graduate nurses employed in a nursing capacity by Alexandra Hospital in Ingersoll, employed for not more than twenty-four (24) hours per week, save and except Clinical Co-ordinators, Corporate Facilitator Education, Accreditation and Quality.

ARTICLE B - MANAGEMENT RIGHTS

B-1 The management of the Hospital and the direction of the working forces therein are fixed exclusively with the Hospital except as specifically limited by the provisions of this Agreement. Without limiting 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, direct, classify, transfer, promote, demote, layoff, recall, discharge, suspend or otherwise discipline nurses provided that a claim by a nurse that she has been discharged, suspended or otherwise disciplined without just cause may be the subject of a grievance and dealt with as provided elsewhere in the Collective Agreement;
- (c) establish, alter, and enforce reasonable rules and regulations;
- (d) determine all work procedures, the kind and locations of equipment to be used, methods to be used, the allocation and number of nurses to be required from time to time, the services to be performed, the standards of performance of all nurses, work assignments, the hours of work and all other rights and responsibilities of management not specifically modified in this Agreement.

ARTICLE C - REPRESENTATION AND COMMITTEES

C-1 For the purposes of the Bargaining Unit Committees referred to in Article 6 of the Central Agreement, members representing the nurses may be either Full-Time or Part-Time. The Hospital will recognize:

- (a) up to four (4) nurses as nurse representatives;
- (b) a Grievance Committee of up to three (3) nurses;
- (c) a Hospital-Union Committee of up to three (3) nurses;
- (d) a Negotiating Committee of up to four (4) nurses, one of whom will be the Bargaining Unit President.
- (e) a Unit Based Council of six (6) nurses, one of whom will be the Bargaining Unit President or their designate.

C-2 No more than three (3) nurses will be excused from duty in any one area of the Hospital at any one time to attend to their responsibilities outlined in this Collective Agreement. However, it is understood that only one nurse from the Operating Room and two (2) nurses from the Emergency Department and one nurse from Special Care Unit will be excused from duty at any one time.

C-3 Hospital Association Committee (HAC)

The Bargaining Unit President, or designate, will identify to the Hospital which committee members require payment under article 6.03(e) at each HAC meeting.

ARTICLE D - UNION INTERVIEW

D-1 The interview period as provided for in Article 5.06 will be scheduled at the Hospital at a mutually agreeable time during nurse's orientation period or at a time arranged between the union representative and the nurse. The Hospital will advise the designated union representative(s) of all new nurse(s) orientation schedules. The Union will arrange an interview period with the nurse or may conduct the interview during the nurse's orientation.

ARTICLE E - SENIORITY

E-1 The Hospital will provide the Union with a copy of the seniority list as provided for in Article 10.02 of the Central Agreement as at January 1 and July 1 of each year.

ARTICLE F - LEAVE FOR UNION BUSINESS

F-1 In accordance with Article 11.02 of the Central Agreement, leaves of absence for Union business shall be granted up to a total aggregate of thirty (30) days each calendar year, provided four (4) weeks' notice is given in writing to the Clinical Co-ordinator or the Scheduling Clerk from the Bargaining Unit President or their delegate, whenever possible, and provided no more than three (3) nurses are absent at any one time. Arrangement for staff coverage will be made by the Clinical Co-ordinator or their delegate at the time of the request being granted. However, it is understood that only one nurse from the Operating Room and one nurse from the Emergency Department and one nurse from the Special Care Unit will be excused from duty at any one time. Special consideration will be given two additional nurses who are elected to a union position.

F-2 Local Coordinator Leave

In accordance with Article 11.02 of the Central Agreement, the Hospital will grant leaves of absence without pay, to a nurse who is elected to the position of Local Coordinator, up to a total of forty (40) days each calendar year, provided four (4) weeks' notice is given in writing to the Clinical Co-ordinator or the Scheduling Clerk from the Local Coordinator whenever possible. Arrangement for staff coverage will be made by the Clinical Co-ordinator or their delegate at the time of the request being granted. These leaves of absence will be separate from and not counted against Leave for Union business in Article F-1 above.

F-3 Meetings

The Employer will pay the Bargaining Unit President or designate at their regular straight time hourly rate for all time spent attending meetings called by and scheduled by the Employer outside their regularly scheduled hours. Such hours will be invisible for purposes of determining premium payment.

F-4 The Bargaining Unit President will have one (1) day per month at the standard hours per shift on the unit where they work of paid leave compensated by the Employer. The purpose of such time will be to deal with membership issues and Union business.

ARTICLE G – SCHEDULING

G-1 The normal daily tours are:

- Eight (8) hour shifts
- Twelve (12) hour shifts
- Ten (10) hour shifts
- 2D 2N tours

Where the Hospital wishes to introduce in a unit or make variations to the normal tours, the shifts and the terms of the shifts will be agreed in writing between the parties prior to implementation.

Where it is determined that the start time should be changed, the employer will notify the Union nine (9) weeks in advance of the change and a meeting will be held to discuss such changes if requested by the Union.

G-2 Eight (8) hour tour schedules:

Work schedules for eight (8) tours will take into account the following:

- (a) Nurses will not work more than seven (7) consecutive days unless requested by the nurse involved and agreed to by the Hospital. Nurses shall be paid premium pay for all shifts worked as a result of the Hospital's failure to comply with this provision.
- (b) Shift schedules shall be posted four (4) weeks in advance and cover a nine (9) week period, unless mutually agreed otherwise by the Scheduling Committee. The hospital will endeavour to schedule all shifts at the time of posting.
- (c)
 - i) A mutual exchange of shifts will be submitted in writing to the attention of the Leader or designate. Exchanges of tours will not be unreasonably denied. These exchanges will not in any event result in premium or overtime payment by the Hospital.
 - ii) A request by a nurse for a change in the posted schedule must be submitted in writing to the Leader or designate or the scheduling clerk at least forty-eight (48) hours in advance of the requested change. Such request is subject to approval by the Leader or designate, but will not be unreasonably denied. The response shall be provided to the nurse who requests the change within twenty-four (24) hours of the original submission of the request, where possible. It is understood that the change requested by the nurse will not result in premium payment.

- (d) A Full-Time nurse is entitled to two (2) weekends off in any four (4) but the Hospital will endeavour to provide Full-Time nurses with one (1) weekend off in two (2).

A nurse will receive premium pay as provided for in Article 14.03 for all hours worked on a third (3rd) consecutive and subsequent weekend save and except where:

- i) Such weekend has been worked by the nurse to satisfy specific days off requested by such nurse; or
- ii) such nurse has requested only weekend work; or
- iii) such weekend is worked as a result of an exchange of tours with another nurse.

For the purpose of this section, weekend is defined as a period of fifty-six (56) consecutive hours following the Friday day tour to the Monday day tour inclusive.

- (e) For Part-Time only

At least sixteen (16) hours off will be scheduled between shift changes. At least thirty-two (32) hours off will be scheduled following the night shift when changing the schedule to either the day shift or evening shift. Where this provision is not met, the nurse will be paid in accordance with Article 14.03 for time worked.

- (f) The scheduling provisions outlined above may be waived between December 15- January 15, in order to schedule nurses off a minimum of five (5) consecutive days over Christmas or New Year's. This provision will not apply to nurses not regularly scheduled to work weekends.

Nurses, except those not regularly scheduled to work weekends will yearly alternate Christmas or New Year's time off. Unless otherwise requested by the nurse, time off at Christmas will commence no later than the end of the evening shift of December 23rd and shall include December 24th, 25th, and 26th, and time off at New Year's will commence no later than the end of the evening shift of December 30th and shall include December 31st and January 1st. Operating Room nurses will alternate being on-call either the Christmas or New Year's period on a yearly basis.

Nurses may request either Christmas or New Year's off, subject to the alternating schedule referred to above, by October 1st of each

year. The shift and on-call schedules shall be posted by November 1st of each year in each nursing unit.

Full-Time only: (g), (h), (i), (j)

- (g) In any two (2) week period two (2) consecutive days off will be scheduled. The remaining days off may be split.
- (h) Where a Full-Time nurse rotates through days/evenings or days/nights, the Hospital will endeavour to schedule them so that there is an equitable distribution of day tours to evening or night tours.
- (i) Nurses will only be scheduled to work days/evenings or days/nights unless mutually agreed otherwise.
- (j) At least sixteen (16) hours will be scheduled between shift changes. At least forty-eight (48) hours off will be scheduled following the night shift when changing the schedule to either the day shift or evening shift. Where this provision is not met, the nurse will be paid in accordance with Article 14.03 for time worked.

G-3

Twelve (12) hour tour schedules

Work schedules for twelve (12) hour tours will take into consideration the following:

- (a) No split shifts.
- (b) Shift schedules shall be posted four (4) weeks in advance and cover a nine (9) week period, unless mutually agreed otherwise by the Scheduling Committee. The hospital will endeavour to schedule all shifts at the time of posting.
- (c) No more than three (3) consecutive extended tours shall be scheduled. If more than three (3) consecutive tours are worked the nurse shall be paid premium pay for all hours worked in excess of three (3) consecutive tours, with the exclusion of tours worked as a result of a shift exchange under G-2(d).
- (d) A mutual exchange of shifts will be submitted in writing to the attention of the Leader or designate. Exchanges of tours will not be unreasonably denied. These exchanges will not in any event result in premium or overtime payment by the Hospital.

A request by a nurse for a change in the posted schedule must be submitted in writing to the Leader or designate at least forty-eight

(48) hours in advance of the requested change. Such request is subject to the approval by the Leader or designate but will not be unreasonably denied. The response shall be provided to the nurse who requests the change within twenty-four (24) hours of the original submission of the request, where possible. It is understood that the change requested by the nurse will not result in premium payment.

- (e) A nurse shall receive either every other weekend off or two (2) weekends out of any four (4). A nurse will receive premium pay as provided for in Article 14.03 for all hours worked on a third consecutive and subsequent weekend save and except where:
 - i) such weekend has been worked by the nurse to satisfy specific days off requested by such nurse; or
 - ii) such nurse has requested only weekend work; or
 - iii) such weekend is worked as a result of an exchange of tours with another nurse.

For the purpose of this section, a weekend is defined as a period of fifty-six (56) consecutive hours following the Friday day tour to the Monday day tour inclusive.

- (f) At least forty-eight (48) consecutive hours off are to be scheduled following night tours.
- (g) The scheduling provisions outlined above may be waived between December 15- January 15, in order to schedule nurses off a minimum of five (5) consecutive days over Christmas or New Year's. This provision will not apply to nurses not regularly scheduled to work weekends.

Nurses, except those not regularly scheduled to work weekends will yearly alternate Christmas or New Year's time off. Unless otherwise requested by the nurse, time off at Christmas will commence no later than the end of the extended tour day shift /triage shift of December 23rd and shall include December 24th, 25th and 26th, and time off at New Year's will commence no later than the end of the extended tour day shift/triage shift of December 30th and shall include December 31st and January 1st. Operating Room nurses will alternate being on-call either the Christmas or New Year's period on a yearly basis.

Nurses may request either Christmas or New Year's off, subject to the alternating schedule referred to above, by October 1st of each year. The shift and on-call schedules shall be posted by November 1st of each year in each nursing unit.

- (h) Article H-2 of the Collective Agreement will not apply to extended tour rotations.

Full-Time only: (i), (j)

- (i) One thousand, nine hundred and fifty (1,950) paid hours in a year, to average twenty (20) tours in a six (6) week scheduling period.
- (j) At least two (2) consecutive days off will be scheduled.

G-4

Ten (10) hour tour schedules

Work schedules for ten-hour tours will take into consideration the following:

- (a) There will not be less than a period of twelve (12) consecutive hours between shifts worked by a nurse.
- (b) No split shifts.
- (c) Shift schedules shall be posted four (4) weeks in advance and cover a nine (9) week period, unless mutually agreed otherwise by the Scheduling Committee. The hospital will endeavour to schedule all shifts at the time of posting.
- (d) For nurses working ten (10) hour tours, a regular tour shall be 9.375 consecutive hours in any twenty-four (24) hour period, exclusive of a total of thirty-seven and one-half (37½) minutes of unpaid mealtime.

Nurses shall be entitled, subject to the exigencies of patient care, two (2) relief periods during the tour of a total of thirty-seven and one-half (37½) minutes.

- (e) No more than four (4) consecutive extended tours shall be scheduled. If more than four (4) consecutive tours are worked the nurse shall be paid premium pay for all hours worked in excess of four (4) consecutive tours, with the exclusion of tours worked as a result of a shift exchange described in G4(f).
- (f) A mutual exchange of shifts will be submitted in writing to the attention of the Leader or designate. Exchanges of tours will not be unreasonably denied. These exchanges will not in any event result in premium or overtime payment by the Hospital.

A request by a nurse for a change in the posted schedule must be submitted in writing to the Leader or designate at least forty-eight (48) hours in advance of the requested change. Such request is

subject to the approval by the Leader or designate but will not be unreasonably denied. The response shall be provided to the nurse who requests the change within twenty-four (24) hours of the original submission of the request, where possible. It is understood that the change requested by the nurse will not result in premium payment.

- (g) A nurse shall receive either every other weekend off or two (2) weekends out of any four (4). A nurse will receive premium pay as provided for in Article 14.03 for all hours worked on a third consecutive and subsequent weekend save and except where:
 - i) such weekend has been worked by the nurse to satisfy specific days off requested by such nurse; or
 - ii) such nurse has requested only weekend work; or
 - iii) such weekend is worked as a result of an exchange of tours with another nurse.

For the purpose of this section, a weekend is defined as a period of fifty-six (56) consecutive hours following the Friday day tour to the Monday day tour inclusive.

- (h) At least forty-eight (48) consecutive hours off are to be scheduled following night tours.
- (i) The scheduling provisions outlined above may be waived between December 15- January 15, in order to schedule nurses off a minimum of five (5) consecutive days over Christmas or New Year's. This provision will not apply to nurse's who are not regularly scheduled to work weekends.

Nurses, except those not regularly scheduled to work weekends, will yearly alternate Christmas or New Year's time off. Unless otherwise requested by the nurse, time off at Christmas will commence no later than the end of the extended tour day shift /triage shift of December 23rd and shall include December 24th, 25th and 26th, and time off at New Year's will commence no later than the end of the extended tour day shift/triage shift of December 30th and shall include December 31st and January 1st. Operating Room nurses will alternate being on-call either the Christmas or New Year's period on a yearly basis.

Nurses may request either Christmas or New Year's off, subject to the alternating schedule referred to above, by October 1st of each year. The shift and on-call schedules shall be posted by November 1st of each year in each nursing unit.

Full-Time only: (j), (k)

- (j) One thousand, nine hundred and fifty (1,950) paid hours in a year, to average twenty (24) tours in a six (6) week scheduling period.
- (k) At least two (2) consecutive days off will be scheduled.

G-5

Voting and Implementation Process for Twelve (12) and Ten (10) hour tours

Pursuant to Article 13 of the Collective Agreement the parties agree to adhere to the following process when implementing Twelve (12) hour Tours and Ten (10) Hour Tours.

- (a) Twelve (12) hour tours or ten hour tours shall be introduced into any unit when,
 - i) eighty percent (80%) of the nurses in the unit so indicate by secret ballot, and
 - ii) the Hospital agrees to implement extended tours. Such agreement shall not be withheld in an unreasonably arbitrary manner.
- (b) Twelve (12) hour tours and ten (10) hour tours may be discontinued in any unit when:
 - i) fifty percent (50%) of the nurses in the unit so indicate by secret ballot; or
 - ii) the Hospital because of
 - A) adverse effects on patient care,
 - 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, states its intention to discontinue extended tours in the schedule.
- (c) When notice of discontinuation is given by either party in accordance with paragraph (b) above, then:
 - i) the parties shall meet within two (2) weeks of the giving of notice to review the request for discontinuation; and
 - ii) where it is determined that the twelve (12) hour tours or ten (10) hour tours will be discontinued, affected nurses shall be given sixty (60) days' notice before the schedules are so amended.

G-6 Work Schedules for 2D 2N tours will take into consideration the following:

When the Hospital and the Union agree, the 2D 2N extended tour schedule may be instituted where eighty percent (80%) of those Nurses on a particular nursing unit who vote have so indicated by secret ballot. The Union shall conduct such votes.

When less than eighty percent (80%) of the staff on a particular nursing unit vote, as outlined in paragraph 2, in favour of the 2D 2N extended tour schedule by secret ballot, the Union may approach the Hospital and ask them to reconsider the implementation of a combination 2D 2N extended tour schedule, other twelve (12) tours and a normal seven and one half (7.5 hour) tour in a particular unit.

Where the parties agree, the eighty percent (80%) figure may be varied and may be applied to combined Full-Time and regular Part-Time vote or to separate Full-Time and regular Part-Time votes.

The Hospital shall make space available to the Union in order to permit the Union to conduct a vote to ensure the Full-Time and regular Part-Time Unit staff have indicated their preference for the proposed schedule.

At any meeting with the Employer to discuss the 2D 2N schedule, a member of the Local Executive should be in attendance.

The 2D 2N schedule may be discontinued in any unit when:

- (a) Sixty-five percent (65%) of the staff in a unit so indicate by secret ballot; or
- (b) Where the Hospital decides to do so because of:
 - i) Adverse effects on patient care, or
 - ii) Inability to provide a workable staffing schedule, or
 - iii) 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;
- (c) When notice of intention to discontinue in accordance with (a) or (b) is given by either party, then:
 - i) The parties shall meet within four (4) weeks of the notice to review the request for discontinuation; and

- ii) Where it is determined that the extended tours will be discontinued, affected staff shall be given sixty (60) days notice before the schedules are so amended.
- (d) The Following Scheduling Provisions will be adhered to:
- i) No split shifts.
 - ii) Shift schedules shall be posted four (4) weeks in advance and cover a nine (9) week period, unless mutually agreed otherwise by the Scheduling Committee. The hospital will endeavour to schedule all shifts at the time of posting.
 - iii) No more than four (4) consecutive extended tours shall be scheduled. If more than four (4) consecutive tours are scheduled the nurse shall be paid premium pay for all hours worked in excess of four (4) consecutive tours.
 - iv) A mutual exchange of shifts will be submitted in writing to the attention of the Leader or designate. Exchanges of tours will not be unreasonably denied. These exchanges will not in any event result in premium or overtime payment by the Hospital.

A request by a nurse for a change in the posted schedule must be submitted in writing to the Leader or designate at least forty-eight (48) hours in advance of the requested change. Such request is subject to the approval by the Leader or designate but will not be unreasonably denied. The response shall be provided to the nurse who requests the change within twenty-four (24) hours of the original submission of the request, where possible.

- v) If a nurse is required to work on a fourth (4th) and subsequent consecutive weekend, they will receive premium payment as defined in the Central agreement for all hours worked on that weekend save and except where:
 - A) such weekend has been worked by the nurse to satisfy specific days off requested by such nurse; or
 - B) such nurse has requested only weekend work; or
 - C) such weekend is worked as a result of an exchange of tours with another nurse.

For the purpose of this section, a weekend is defined as a period of fifty-six (56) consecutive hours following the Friday day tour to the Monday day tour inclusive.

- vi) The scheduling provisions outlined above may be waived between –December 15- January 15 in order to schedule nurses off a minimum of five (5) consecutive days over Christmas or New Year's.

Nurses will yearly alternate Christmas or New Year's time off. Unless otherwise requested by the nurse, time off at Christmas will commence no later than the end of the extended tour day shift /triage shift of December 23rd and shall include December 24th, 25th and 26th, and time off at New Year's will commence no later than the end of the extended tour day shift/triage shift of December 30th and shall include December 31st and January 1st. Operating Room nurses will alternate being on-call either the Christmas or New Year's period on a yearly basis.

Nurses may request either Christmas or New Year's off, subject to the alternating schedule referred to above, by October 1st of each year. The shift and on-call schedules shall be posted by November 1st of each year in each nursing unit.

- vii) Article H-2 of the Collective Agreement will not apply to extended tour rotations.

Full-Time only: (viii), (ix)

- viii) Nurses shall receive five (5) consecutive days off following the fourth extended tour worked except as provided in (ix) below:

- ix) In order to be scheduled nineteen hundred and fifty (1950) hours in one (1) calendar year, the nurse will be scheduled thirty three and three quarter (33.75) hours or the equivalent tours, prior to any casual and/or Regular Part-Time nurses being offered any shifts after they have been scheduled to their commitment. These tours will be mutually agreed upon between the parties.

It is agreed that these thirty-three and three quarter (33.75) hours or the equivalent tours worked within the calendar year will be paid at straight time.

Notwithstanding the above, the parties agree that any of the nineteen hundred and fifty (1950) hours may be drawn from

the nurses' association leave, committee hours and education hours with mutual agreement between management and the nurse. It is understood that the nurse must identify these hours at the time of earning to the scheduler or designate. These hours will be recorded on a tracking tool by the scheduler or designate.

The nurse will meet with their leader before October 1st to obtain agreement on any remaining shifts. If mutual agreement cannot be reached, the remaining shifts will be scheduled by the Hospital.

- (e) All schedules will be done on the basis that each Full-Time Nurse will be scheduled for 1,950 hours per year.

G-7 Shift Premiums

- (a) The weekend premium as per Article 14.15 of the Central Agreement shall be paid for all hours worked between 2300/2330 hours Friday to 2300/2330 hours Sunday.
- (b) For purposes of application of Central Agreement Article 14.10, the evening shift shall be defined as 1500/1530 to 2300/2330 hours and the night shift shall be defined as 2300/2330 to 0700/0730 hours.

G-8 Lieu Time Off

Where a nurse has chosen equivalent time off in lieu of pay in accordance with Article 14.09, such time off shall be scheduled at a mutually agreeable time as soon as possible after it is earned. Such time may be accumulated to a maximum of forty five (45) hours for Full-Time nurses and forty-five (45) hours for Part-Time nurses. Any time in excess of the maximum amounts referred to above will be paid out within the current pay period.

Lieu banks will be paid out at the end of the fiscal year except that a nurse may request and the Hospital may approve, in its discretion, a carry-over of some or a nurse's entire lieu bank to the next fiscal year. Such requests must be submitted in writing to the Leader or designate by March 1.

A nurse who wants to request a payout of some or all of the lieu bank prior to the annual end of March payout must submit a written request to the Leader or designate at least eight (8) calendar days prior to payday. The requested monies will then be included with the next regular deposit.

G-9

Part-Time Scheduling

- (a) Regular Part-Time nurses' commitment to be available for work as required by the Hospital will include the following:
- i) available to work two (2) weekends in four (4).
 - ii) available to work at least three (3) scheduled eight (8) hour tours or two (2) twelve (12) hour tours per week or any combination of forty-five (45) hours in a two week period for those nurses working composite positions.
- (b) It is understood that Part-Time nurses will be available all three (3) shifts.
- (c) All regular Part-Time nurses in a unit will be scheduled up to their committed hours by seniority before any casual Part-Time nurses are utilized.
- (d) When regular Part-Time nurses on the unit have been scheduled to work up to their commitment, the Hospital will endeavour to offer additional tours based on the following order:
- Regular Part-Time nurses, including job sharers, on the unit on the basis of seniority, then,
 - casual nurses on the unit on the basis of seniority.

Subject to the following:

- i) Nurses who wish to be considered for additional tours must indicate their availability in the manner prescribed by the Hospital;
- ii) a tour will be deemed to be offered whenever a call is placed;
- iii) it is understood that the Hospital will not be required to offer tours which would result in overtime premium pay;
- iv) when a regular Part-Time nurse accepts an additional tour, she/he must report for that tour unless arrangements satisfactory to the Hospital are made;
- v) provided they are qualified, nurses may submit their availability to work additional tours to more than one unit, if to do so is in accordance with existing hospital practice.

- (e) For the purposes of scheduling during December 15- January 15 which include the Christmas and New Year's period, the scheduling provision of three (3) normal tours or two (2) extended tours per week may be averaged over a two (2) week period but shall not exceed three (3) consecutive extended tours or five (5) consecutive normal tours.
- (f) A mutual exchange of shifts will be submitted in writing to the attention of the Leader or designate. Exchanges of tours will not be unreasonably denied. These exchanges will not in any event result in premium or overtime payment by the Hospital.

A request by a nurse for a change in the posted schedule must be submitted in writing to the Leader or designate at least forty-eight (48) hours in advance of the requested change. Such request is subject to the approval by the Leader or designate but will not be unreasonably denied. The response shall be provided to the nurse who requests the change within twenty-four (24) hours of the original submission of the request, where possible. It is understood that the change requested by the nurse will not result in premium payment.

G- 10

Tours of Less Than Seven and One Half (7.5) Hours

Where a Part-Time nurse(s) is scheduled to work less than a normal tour seven and one half (7.5) hours Article G in its entirety applies except as amended by the following:

- (a) Tours of less than seven and one half (7.5) hours will not be used as part of the normal scheduling on any unit without the agreement of the Union.
- (b) On units where seven and one half (7.5) hours tours are scheduled the Hospital will keep the number of tours comprised of less than seven and one half (7.5) hours to a minimum. There shall be an equitable distribution of tours less than seven and one half (7.5) hours among the regular Part-Time nurses in the unit.
- (c) Nurses working shifts comprised of less than seven and one half (7.5) hours shall be granted a paid rest period.
- (d) No Part-Time nurse will be scheduled solely on tours which are comprised of less than seven and one half (7.5) hours in any pay period, except where such arrangements are requested by the nurse.

- (e) Nurses working tours comprising of less than seven and one half (7.5) hours, shall not be scheduled to work more than five (5) consecutive tours.

Where a Part-Time nurse is scheduled to work a tour of less than seven and one half (7.5) hours overtime will be paid for all hours worked after the scheduled hours of work.

G-11

- (a) It is agreed that a nurse's availability for additional tours and/or overtime does not waive any nurse's right to premium payment provided for under this collective agreement.

- (b) Call-in at Premium for RN Staff

- (i) When the decision is made to fill a shift at premium, the following call-in process must be followed. Offering of shifts at overtime/premium pay will done in the following sequence, in rotating seniority order:

1. Regular Part-Time RN staff, including Job Shares;
2. Regular Part-Time RN staff in Temporary Full-Time positions;
3. Full-Time RN staff; and
4. Casual RN staff

If the additional shift cannot be filled according to #1-4, the Hospital may offer the shift to RNs on other units, by seniority.

- (ii) Rotating Seniority means that calls will be made in seniority order, beginning with the next most senior RN on the list after the last RN who accepted a shift at premium ("Next to be called").

- (iii) Despite this process, the Hospital may first address any shortfall/need in staffing by either extending the shift of a RN already at work or by calling in a RN scheduled to work early for their shift, subject to collective agreement provisions.

- (iv) A RN who is not qualified to perform the work of the available shift will not be called, unless other options have been exhausted and a need remains, subject to professional standards obligations.

- (v) If the Next to be called RN would incur an additional premium to the premium pertaining to the shift being filled, (eg. Consecutive weekend premium), that RN may be skipped over.

- (vi) In the event a RN is not offered an opportunity which should have been extended to their, then that nurse will be offered the next overtime opportunity that becomes available on their unit, to a limit of 2 opportunities, prior to implementing the above process. If an offer is accepted no further offer need be made.

G-12 Reassignment of Staff in Accordance with 10.08

In accordance with Article 1.02, the parties agree that the need to ensure safe, quality care on both the sending and the receiving area will be the primary consideration in all reassignment decision making. Accordingly the selection of the nurse to be reassigned will be made in the following order:

- (a) the most senior nurse who volunteers to be reassigned;
- (b) a casual working on that tour;
- (c) the least senior regular Part-Time nurse, including job share nurses working that tour;
- (d) the least senior Full-Time nurse working that tour;

In accordance with Article 10.07 (g) of the Collective Agreement, it is understood that nurses who volunteer or who are designated for reassignment, will only be reassigned if they are qualified to perform the available work in the Unit or area where the reassignment is to occur.

The above procedure is subject to ensuring that the nurses remaining on the area are qualified to perform the available work and will take into account the date of the previous reassignments.

In the event that a nurse is not selected following the order outlined above, the Manager or designate will work in consultation with staff to determine the appropriate reassignment.

G-13 When a permanent Full-Time line becomes vacant in a unit, it shall be offered to permanent Full-Time nurses on that unit up to two (2) times, in accordance with article 10.07, prior to posting the vacancy hospital wide.

G-14 Scheduling Committee

The parties agree to co-operate during the term of this Collective Agreement to discuss scheduling options which will provide for alternative schedules where such alternatives are desired.

The Hospital shall endeavour to implement schedules recommended by the Committee.

There will be a Scheduling Committee composed of a maximum of four (4) ONA members (representation to include both Full-Time and Part-Time ONA members) and a maximum of four (4) Hospital Representatives.

The Committee will meet on a minimum of every four (4) months. Upon mutual agreement by the parties, ad hoc meetings can be scheduled as necessary.

Proposed Master Schedules are to be provided to the Scheduling Committee at least six (6) weeks in advance of the implementation of any changes in Unit scheduling practices.

Each unit will provide a copy of their current master rotation to the Scheduling Committee and Bargaining Unit President by January 31st of each year and any new or revised master rotations following January 31st of each year.

The purpose of this committee will be:

- (a) to act in an advisory capacity and assist in resolution of scheduling concerns;
- (b) to review all new master schedules and to ensure compliance with the Collective Agreement;
- (c) to provide suggestions to minimize Agency usage;
- (d) to provide advice regarding the scheduling of Part-Time nurses.

ARTICLE H – HOLIDAYS

H-1 The days designated under Article 15.01 are:

New Year's Day - January 1	Family Day (3rd Monday in February)
Good Friday	Easter Monday
Victoria Day	Canada Day - July 1
Civic Holiday	Labour Day
Thanksgiving Day	Remembrance Day - November 11
Christmas Day - December 25	Boxing Day - December 26

H-2 Where the nurse is scheduled off on a weekend in conjunction with a paid holiday, the Hospital will schedule the nurse off on the paid holiday, unless required.

Where the nurse is scheduled to work a weekend in conjunction with a paid holiday, the Hospital will schedule the nurse to work the paid holiday, if required.

This clause will not apply to extended tour rotations.

H-3 Full-Time only

Where a nurse is entitled to a lieu day under Article 15.04 or 15.05, such day off must be taken at a mutually agreeable time within thirty (30) days before or after the holiday or payment shall be made in accordance with Article 15.03.

ARTICLE I – VACATIONS

I-1 The date for determining vacation entitlement under Article 16.01 shall be on the nurses vacation anniversary date.

I-2 Vacations shall be scheduled as follows:

- (a) All requests for vacations for the period May 15th to November 14th must be submitted to the Hospital by March 31st of each year. This vacation schedule shall be posted by May 1st.
- (b) All requests for vacation for the period November 15th to May 15th must be submitted by October 1st of each year. The vacation schedule shall be posted by November 1st.
- (c) In scheduling vacation requests, preference will be given to nurses in accordance with their seniority, staffing requirements of the unit, provided the nurse exercises this right by the dates established in a) or b) above, after which time vacation requests, which must be in writing, will be scheduled on a first come, first served basis.
- (d) Nurses may request and be granted up to five (5) days vacation in single days off.
- (e) In an effort to enable an improved equitable distribution of vacation time for all nurses, requests for vacation during the period of June 15th through September 15th will be granted, within the parameters outlined above, for a maximum of three (3) consecutive weeks. It is further agreed for special circumstances that if a nurse requests more than three (3) consecutive weeks during this time period, the request will be made in writing to the manager and this request will not be unreasonably denied.

I-3

Vacations shall be scheduled as follows:

- (a) For the period of May 15th to November 14th, nurses shall provide their vacation preference(s) in writing by March 31st and seniority will be the determining factor for approval of such requests and based on operational needs. Approved vacation requests will be posted no later than May 1st.

Nurses shall receive a written response of denied vacation requests no later than April 6th.

Any vacation requests made after March 31st deadline will be approved on a first come first served basis and based on staffing requirements of the unit.

- (b) All requests for vacation for the period November 15th to May 14th must be submitted by October 1st of each year. The Hospital will post the vacation planners on each unit no later than September 1st. The vacation planners shall remain posted for a minimum of two (2) months. The vacation schedule shall be posted by November 1st.

For the period of November 15th to May 14th, nurses shall provide their vacation preference(s) in writing by October 1st and seniority will be the determining factor for approval of such requests and based on staffing requirements of the unit. Approved vacation requests will be posted no later than May 1st.

Nurses shall receive a written response of denied vacation requests no later than October 7th.

Any vacation requests made after the October 1st deadline will be approved on a first come first served basis and based on staffing requirements of the unit.

- (c) Nurses may request and be granted up to a maximum five (5) days vacation in single days off.
- (d) In an effort to enable an improved equitable distribution of vacation time for all nurses, requests for vacation during the period of June 15th through September 15th will be granted, within the parameters outlined above, for a maximum of three (3) consecutive weeks. It is further agreed for special circumstances that if a nurse requests more than three (3) consecutive weeks during this time period, the request will be made in writing to the manager and this request will not be unreasonably denied.

1-4 Normally vacations may not be taken between December 15th and January 15th. However, it is understood that the hospital will consider requests for vacation during this period. If vacation is granted during this time period, it will be on a rotational basis by seniority.

1-5 Supplementary vacation

Full-Time nurses entitled to supplementary vacation pursuant to article 16.01(f) of the central Collective Agreement will request such vacation as per article I-2. Unused supplementary vacation will be carried over to the following vacation year(s).

Part-Time nurses entitled to supplementary vacation pursuant to article 16.06 of the central Collective Agreement will request such vacation as per article I-2. Unused supplementary vacation will be carried over to the following vacation year(s). The additional two percent (2%) vacation pay will be paid out within one (1) month of earning the supplementary vacation.

I-6 The vacation accrual practice will be as following:

- I. Vacation will be accrued on a bi-weekly basis and the nurses current vacation balance will be reflected on their bi-weekly pay statement
- II. Nurses will have the ability to take their vacation time off as it is earned
- III. A nurse may carry a balance of no greater than four (4) weeks in their vacation bank. If a nurse exceeds the maximum allowable amount, the leader will notify the nurse in writing and request that the nurse submit a plan to comply with this article.
- IV. Due to transition into the new vacation practice the above process outlined in 1-5 iii will not be enforced until two (2) years from implementation.
- V. Nurses will gain access to entitlement under Article 16 on their vacation anniversary date.

I-7 Vacation Cancellation

In extenuating and/or catastrophic circumstances resulting in a cancelation of a vacation (i.e. canceled flights, accommodations, etc.), a nurse may cancel their vacation. This cancellation is subject to approval by Leadership in consultation with Human Resources.

ARTICLE J - BULLETIN BOARDS

J-1 The Hospital will provide bulletin boards at each clinical area and the cafeteria for posting of notices related to Union business. All notices shall be signed by the Bargaining Unit President or their designate.

J-2 Electronic Communication

The Employer agrees to provide computer access and access to e-mail for the Bargaining Unit President or a designated Committee Member to electronically communicate notices or information pertaining to the Union and its membership. Such use will comply with the Hospital's policies and procedures on the use of electronic communication.

J-3 Electronic Submission Professional Responsibility/Workload Form

- (a) The parties agree to use the electronic version of the ONA Professional Responsibility Workload Report form (PRWRF) at Appendix 6 of the Hospital Central Agreement;
- (b) The parties agree that hard copies of the electronic form are valid for purposes of Article 8 of the Hospital Central Agreement.
- (c) Electronic PRWRF may be sent, via e-mail, to the applicable manager and copied to Human Resources or the identified designate, and the Bargaining Unit President .
- (d) The electronic signature of the Union Executive Representative or Labour Relations Officer will be accepted as the original signature.
- (e) The Union undertakes to get a copy of the electronic version signed by the nurse(s).
- (f) The parties agree to not use or rely upon any preliminary arguments related to the use of the electronic version should a PRWRF proceed to Independent Assessment Committee, as per Article 8.01.

ARTICLE K - JOB SHARING

K-1 If the Hospital agrees to a job sharing arrangement pursuant to Article 20.01 of the Central Collective Agreement, the following conditions shall apply unless otherwise agreed to by the parties:

- (a) Job sharing requests with regard to Full-Time positions shall be considered on an individual basis.
- (b) Where the job sharing arrangement arises out of the filling of a vacant Full-Time position both job sharing positions must be posted and selection based on the criteria set out in the Collective Agreement. An incumbent Full-Time nurse wishing to share their position may do so without having their half of the position posted.

However, the other half of the job shared position must be posted and the selection based on criteria set out in the Collective Agreement.

- (c) All job sharers shall be treated as regular Part-Time nurses and be subject to the provisions of the Part-Time Collective Agreement except as referred in item (i).
- (d) If one of the job sharers leaves the arrangement, their 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 in the Full-Time position or another regular Part-Time position. If she does not continue Full-Time, the position must be posted according to the Collective Agreement. The job sharers will have the option of reverting back to a regular Part-Time position, if and when a job sharing arrangement is cancelled.
- (e) The job sharers will not be scheduled to work more than ten (10) days in a two (2) week period between them. If either of the job sharers are called to work extra shifts as requested by the Employer other than for their portion, they will be paid at their straight time regular rate of pay.
- (f) Total hours worked by the two (2) job sharers shall be equal to one (1) Full-Time position. Schedules for job sharers shall conform to the schedule provisions of the Full-Time Collective Agreement. The division of these hours over the schedule shall be determined by mutual agreement between the two (2) nurses. Three (3) week days (Monday - Friday) before the posting of the new schedule, the Leader will be informed by writing of the division of the time by the two (2) job sharers. Any changes made during the schedule by the job sharers will be reported to Leadership.
- (g) Each job sharer may exchange shifts with their partner, as well as other qualified nurses in accordance with the Collective Agreement and item (f).

(h) Coverage:

- i) It is expected that both job sharers will cover each other's vacation and incidental illnesses. If, because of unavoidable circumstances, one cannot cover the other, the unit Leader must be notified to book coverage. Where consistent lapses of coverage occur as a result of a job share arrangement, said job share will first be discussed between the job sharing partners and their immediate Leader or designate. Where resolution is not achieved it will be discussed at a Hospital Association Committee Meeting to collaboratively achieve improvement. Job sharers are not required to cover for their partner in the case of prolonged or extended absences.
- ii) Vacation, Pregnancy and Parental Leave, and other leaves pursuant to Article 11 of the Central Agreements.

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's Leader, but it is hoped that the remaining member of the position would be prepared to cover the leave of absence as much as possible.

- (i) Job sharers will determine between themselves which partner will work on scheduled paid holidays subject to the conditions of the Full-Time Collective Agreement and item (f). Only one job sharer shall be scheduled to work either the Christmas or New Year's holidays.
- (j) Each party to this Agreement shall have the option of cancelling the Arrangement with sixty (60) days' written notice. Upon receipt of such notice, a meeting shall be held between the parties to discuss the discontinuation. Such discontinuation shall not be unreasonable or arbitrary.
- (k) Any issue arising out of the enforcement of this Agreement will be dealt with at a Hospital Association Meeting.

ARTICLE L - PRE-PAID LEAVE PLAN

- L-1 Pre-paid leave plan - one (1) Full-Time nurse and one (1) Part-Time nurse shall be the maximum number of nurses off work in any one (1) year. If no Full-Time or Part-Time nurse applies to enter the plan, an additional Full-Time or Part-Time nurse may apply. However, the maximum remains at two (2) nurses.

ARTICLE M – MISCELLANEOUS

M-1 The Hospital agrees to provide scrub uniforms to those nurses working in Emergency Department and Operating Room at no cost to those nurses and this practice will not be discontinued without sixty (60) days' notice to the Union and discussion at the Hospital-Association Committee.

M-2 Full-Time nurses may be considered for temporary Full-Time vacancies on the same basis as regular Part-Time nurses.

M-3 Modified Work

(a) The Hospital will notify the Bargaining Unit President and the Return to Work representative of the names of all nurses off work due to a work related injury (whether or not the nurses are in receipt of WSIB Benefits) and those on LTD by the 15th of each month.

(b) When it has been medically determined that a nurse is unable to return to the full duties of their position due to a disability, the Hospital will notify and meet with the Return to Work representative or designate of the Ontario Nurses' Association to discuss any restrictions and/or accommodation surrounding the nurse's return to suitable work.

(c) The Hospital agrees to provide the nurse with a copy of the Workplace Safety Insurance Board Form 7 at the same time as it is sent to the Board.

(d) The Hospital and the Union recognize the purpose of modified work/return to work programs is to provide fair and consistent practices for accommodating nurses who have been ill, injured or permanently disabled, to enable their safe return to work.

M-4 Retiree Benefits – Process for payment

Any bargaining unit nurse who retires and wishes to participate in the benefit plans as outlined in article 17.01(h) will provide advance payment of the benefits through post-dated cheques provided on a yearly basis.

It is understood that any transaction would be dated the fifteenth (15th) of each and every month.

The Employer will notify the Union of the benefit costs to retired nurses each time the benefit costs are renegotiated by the Employer.

M-5 Notification to Unsuccessful Job Applicants

The parties agree that any unsuccessful candidate for an ONA job posting will be notified, in writing or by email, within one (1) week of the decision being made and prior to the posting of the name of the successful candidate.

The parties further agree that the above notification will be copied to the ONA Bargaining Unit President.

M-6 Violence in the Workplace

- (a) Violence shall be defined as any incident in which a nurse is threatened or assaulted during the course of their employment. This includes the application of force, threats with or without weapons, as well as verbal abuse and or psychological trauma/harm/injury illness. The Hospital agrees that such incidents will not be condoned in the workplace. Any nurse who encounters such acts of violence in the workplace shall verbally report the incident to their supervisor immediately and complete an Unusual Occurrence Report, whether experienced directly by the nurse or if witnessed as an incident involving another nurse.
- (b) The Hospital agrees to develop, maintain, implement and ensure compliance with formalized policies and procedures updated and amended in consultation with the Joint Occupational Health and Safety Committee to deal with workplace violence. The policy will address the prevention of violence and the management of violent situations. Prior to implementing any changes to these policies, the Hospital agrees to consult with the Joint Health and Safety Committee. These policies and procedures shall be communicated to all nurses and supervisors.
- (c) The Hospital will ensure that there is a procedure to report all incidents of violence to the Joint Occupational Health and Safety Committee. Nurses will report all such incidents of violence through the Hospital's risk management system. It is understood that an incident debrief will be scheduled within four (4) days of any violent incident.
- (d) The Hospital agrees to provide mandatory education, training and information on the prevention of violence to all nurses who come into contact with potentially aggressive persons. The Hospital agrees to provide mandatory education, training and information on their violence in the workplace policy. The employer will provide this training and review this policy within six (6) months during new nurse's orientation and update staff annually or as per legislation.

- (e) The Hospital will ensure that all reports of assaults resulting in injury are reported to the Workplace Safety and Insurance Board (WSIB) in accordance with WSIB policy.
- (f) The Hospital will notify the JHSC and the Bargaining Unit President or designate in writing of all incidents related to violence within four (4) days. Such notices will contain all of the information as prescribed on Section 5 of the Health Care Regulations.
- (g) The Hospital agrees that where there is a risk of violence, measures will be in place to ensure access to trained nurses and assistance.
- (h) The Hospital shall provide for reasonable repair or replacement cost for damage to a nurse's personal belongings (clothing, watch, glasses, contact lenses and prosthesis; jewellery is excluded with the exception of plain wedding bands) directly attributed to an assault while performing their work. It is understood that reimbursement shall be subsequent to completion of a Hospital Unusual Occurrence Report and the nurse's provision of a receipt. The nurse will endeavour to present their claim to the Hospital within seven (7) days after the event, unless it was not possible for their to so do during this period.
- (i) The Hospital and the Union recognize that, where violent incidents occur, the Nurse will be supported through Occupational Health and Safety Services and they will be provided with resources as appropriate.

ARTICLE N - MENTORSHIP

- N-1 The Employer will provide, on a regular basis, all nurses with the opportunity to indicate their interest, in writing, to assume a mentorship role. Application forms will be available on each of the units.

ARTICLE O - ELECTRONIC GRIEVANCE FORMS

- O-1 The parties agree to use the electronic version of the (O.N.A. Grievance Form at Appendix 1 of the Hospital Central Agreement).
- O-2 The parties agree that hard copies of the electronic form are valid for purposes of Article 7 of the Hospital Central Agreement.
- O-3 Electronic grievances may be sent, via email, to the applicable manager and copied to Human Resources, or the identified designate.

- O-4 The electronic signature of the Union Executive representative or Labour Relations Officer will be accepted as the original signature.
- O-5 The Union undertakes to get a copy of the electronic version signed by the grievor.
- O- 6 The parties agree to not use or rely upon any preliminary arguments related to the use of the electronic version should a grievance proceed to mediation or arbitration.

ARTICLE P - INDIVIDUAL SPECIAL CIRCUMSTANCES ARRANGEMENTS

- P-1 All individual special circumstance schedule arrangements will be discussed and agreed to by the individual nurse, the Labour Relations Officer, and the Employer Representative in writing and in accordance with Article 13.05 of the Central Hospital Agreement.

LETTER OF UNDERSTANDING
RE: PERIOPERATIVE AREA

The parties agree that this Letter of Understanding is relevant to the Perioperative Area only.

1. Where regular Part-Time nurses are scheduled to work less than a normal tour seven and one-half (7½) hours, Article G in its entirety applies except as amended by the following:
 - (a) The Hospital will endeavour to keep the number of tours comprised of less than seven and one-half (7½) hours to a reasonable level.
 - (b) Nurses shall be granted a rest period.
 - (c) Nurses shall not be scheduled to work more than five (5) consecutive tours.
 - (d) Shift schedules shall be posted at such time as the Perioperative Area Supervisor or their delegate can determine staffing needs of the unit, at least four (4) weeks in advance.
 - (e) Standby assignments will be posted four (4) weeks in advance and cover a four (4) week period and such assignment will be distributed through the self-scheduling process as equitably as possible amongst the nurses in the Perioperative Area.
 - (f) Regular Part-Time nurses will be available to work at least twenty-two and one-half (22½) scheduled hours per week (refer G-7 (a) ii).

2. Standby
 - (a) The Hospital will make available, at the Hospital, suitable accommodation for nurses wishing to stay at the Hospital while on standby.
 - (b) Where a nurse is called in from standby, payment will be in accordance with Article 14.06 of the Hospital Central Collective Agreement.

3. Any hours that become available for the day shift, Monday to Friday, and such hours are known for a period of time greater than sixteen (16) hours, will be considered as scheduled hours rather than as a call back.

LETTER OF UNDERSTANDING
RE: PAIN MANAGEMENT CLINIC

For purposes of coverage for the Pain Management Clinic, nurses may be scheduled to work a ten (10) hour tour which will consist of 9.375 consecutive hours in any twenty-four (24) hour period, exclusive of a total of thirty-seven and one-half (37.5) minutes of unpaid meal time. Nurses shall be entitled, subject to the exigencies of patient care, to relief periods during the tour of a total of thirty-seven and one-half (37.5) minutes.

All other provisions of the Central and Local Agreement will be adhered to for this position.

Dated at Ingersoll, Ontario, this 29th day of March, 2023.

FOR THE EMPLOYER

FOR THE UNION

Katie Mihovics

Marie Haase
Labour Relations Officer

Jennifer Row

Dan Bannister
Bargaining Unit President

Megan Force

Heather McCall

April Mullen

Derek Degriek

Kelly Ager