LOCAL APPENDICES TO THE

COLLECTIVE AGREEMENT

Between:

GEORGIAN BAY GENERAL HOSPITAL
(Hereinafter referred to as the “Employer”)

And:

ONTARIO NURSES’ ASSOCIATION
(Hereinafter referred to as the “Union”)

Expiry Date: March 31, 2023
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APPENDIX 3

SALARY SCHEDULES

Articles 19.01(a) and (d) apply to nurses only

19.01 (a) The salary rates in effect during the term of the Agreement shall be those set forth in Appendix 3 attached to and forming part of this Agreement. The regular straight time hourly rates for full-time, regular part-time and casual part-time Registered Nurses at hospitals shall be as follows:

<table>
<thead>
<tr>
<th>Classification - Registered Nurse</th>
<th>April 1, 2021</th>
<th>April 1, 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start</td>
<td>$33.90</td>
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<tr>
<td>1 Year</td>
<td>$34.06</td>
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<td>$44.52</td>
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<td>8 Years</td>
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<td>$48.17</td>
</tr>
<tr>
<td>25 Years</td>
<td>$48.53</td>
<td>$49.02</td>
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</table>

(Articles 19.01 (b) and 19.01 (c) apply to part-time nurses only)

(b) The hourly salary rates, inclusive of the percentage in lieu of fringe benefits in effect during the term of this Agreement for all regular and casual part-time nurses shall be those calculated in accordance with the following formula:

Applicable straight time hourly rate + 13%.

(c) The hourly salary rates payable to a regular or casual part-time nurse include compensation in lieu of all fringe benefits which are paid to full-time nurses except those specifically provided to part-time nurses in this Agreement. It is understood and agreed that holiday pay is included within the percentage in lieu of fringe benefits. It is further understood and agreed that pension is included within the percentage in lieu of fringe benefits. Notwithstanding the foregoing, all part-time nurses may, on a voluntary basis, enrol in the Hospital's Pension Plan when eligible in accordance with its terms and conditions. For part-time nurses who are members of the Pension Plan, the percentage in lieu of fringe benefits is nine percent (9%).
It is understood and agreed that the part-time nurse’s hourly rate (or straight time hourly rate) in this Agreement does not include the additional 9% or 13%, as applicable, which is paid in lieu of fringe benefits and accordingly the 9% or 13%, as applicable, add on payment in lieu of fringe benefits will not be included for the purpose of computing any premium or overtime payments.

(d) The parties agree to maintain the percentage differentials in the wage rates which presently exist between the classification of Registered Nurse and the other classifications which are covered by the Collective Agreement.
## Classification – Nurse Practitioner

<table>
<thead>
<tr>
<th>Step</th>
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</thead>
<tbody>
<tr>
<td>Start</td>
<td>$52.64</td>
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## APPENDIX 3

### SALARY SCHEDULES

<table>
<thead>
<tr>
<th>Classification – Graduate Nurse</th>
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<tr>
<td>Start</td>
<td>$32.56</td>
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<td>$45.76</td>
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<td>$46.58</td>
<td>$47.05</td>
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### Classification – Patient Flow Navigator

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<thead>
<tr>
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<td>Start</td>
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<td>3 Years</td>
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<tr>
<td>4 Years</td>
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### Classification – Infection Control Practitioner

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<thead>
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<th>Step</th>
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<th>Effective April 1, 2022</th>
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<tbody>
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<td>25 Years</td>
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</table>
APPENDIX 4

APPENDIX OF SUPERIOR BENEFITS

FOR HURONIA DISTRICT HOSPITAL ONLY

A - 1 FULL-TIME & PART-TIME

The list of names submitted in Article 5.05 will include the addresses of the nurses.

A - 2 FULL-TIME

Sick leave pay-out on termination of employment shall be as follows:

(a) after 5 years - 25% up to a maximum of 30 days
(b) after 10 years - 50% up to a maximum of 30 days
(c) employees who retire under any of the provisions of the Hospitals of Ontario Pension Plan - 50% up to a maximum of 60 days.

A - 3 In addition to the salaries set forth in Appendix "A", the Hospital will pay monthly the following educational allowances to all full-time nurses subject to the following conditions:

(a) proof of the certificate or diploma held must be submitted by the nurse to the Hospital;
(b) in accordance with the above, a nurse possessing more than one certificate or degree shall be entitled only to the highest allowance provided in the schedule;
(c) payment of the allowance shall commence at the start of the first full pay period following the filing with the Hospital of the required proof of standing, except that a newly hired nurse who is qualified for an educational allowance on their date of hiring shall be paid from that date;
(d) the allowance shall be added to a nurse’s basic monthly salary; and
(e) the nurse must be working in the area to which the course is applicable,
(f) it shall be the responsibility of the nurse to pay for all course materials and tuition fees. This would not prevent the nurse from making an application for assistance.
Educational Allowance

C.H.A. Nursing Unit Administration

Course or 6 months Post Graduate Course $15.00 per month
One year University Course in Nursing $40.00 per month
Baccalaureate in Nursing $80.00 per month
APPENDIX 5

LOCAL ISSUES

Between:

GEORGIAN BAY GENERAL HOSPITAL
[hereinafter referred to as the "Hospital"]

And:

ONTARIO NURSES' ASSOCIATION
[hereinafter referred to as the "Union"]
APPENDIX 5

APPENDIX ON LOCAL ISSUES

ARTICLE A - RECOGNITION AND DEFINITIONS

A - 1 FULL-TIME ONLY

The Hospital recognizes the Ontario Nurses’ Association as the exclusive bargaining agent for all lay, registered and graduate nurses employed in a nursing capacity by the Hospital at Penetanguishene and Midland, save and except Care Managers and Co-ordinators, persons above the rank of Care Managers and Co-ordinators and persons regularly employed for not more than twenty-four (24) hours per week.

PART-TIME ONLY

The Hospital recognizes the Ontario Nurses’ Association as the exclusive bargaining agent for all lay registered and graduate nurses regularly employed for not more than twenty-four (24) hours per week in a nursing capacity at Penetanguishene and Midland, save and except Care Managers and Co-ordinators, and persons above the rank of Care Managers and Co-ordinator.

ARTICLE B - MANAGEMENT RIGHTS

B - 1 The Union acknowledges that it is the exclusive right of the Hospital to:

(a) maintain order, discipline and efficiency;

(b) hire, discharge, direct, classify, transfer, promote, demote, lay-off, recall and suspend or otherwise discipline nurses for just cause provided that a claim of discriminatory classification, promotion, demotion or transfer or a claim that a nurse has been unjustly discharged, suspended or otherwise disciplined may be the subject of a grievance and dealt with in accordance with the Grievance Procedure;

(c) establish and enforce reasonable rules and regulations to be observed by the nurses but before altering such rules and regulations, the Hospital will discuss same with the Union and give the Union the opportunity of making representation with respect to such proposed alterations;

(d) generally to manage and operate the Hospital in all respects in accordance with its obligations and, without restricting the generality of the foregoing, to determine the kinds and locations of machines and equipment to be used, the allocation and number of nurses
required from time to time and the standards of nursing performance for all nurses.

B - 2 The foregoing rights shall be exercised only in a manner consistent with the provisions of this Agreement.

ARTICLE C - COMMITTEES AND REPRESENTATIVES

C - 1 Union Representatives

The Hospital will recognize seven (7) Union Representatives.

On an annual basis the Union will provide the Hospital with a current list of Union representatives by January 31 of each year. The Union will notify the Hospital of any changes to the list of Union Representatives within thirty (30) days of a change.

C - 2 Negotiating Committee

There will be a Negotiating Committee of three (3) nurses to represent both bargaining units at the Hospital.

C - 3 Grievance Committee

There will be a Grievance Committee of three (3) nurses.

C - 4 Hospital-Association Committee

There shall be a Hospital-Union Committee comprised of three (3) representatives of the Hospital, one (1) of whom shall be a senior manager responsible for nursing service or their designate and of the Union, one (1) of whom shall be the Local President or their designate. The membership of the Committee may be expanded by mutual agreement.

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

C - 5 Union Interview

The Union will be allowed a reasonable amount of time to interview newly employed nurses during the Hospital’s regular general orientation session. The Hospital shall provide the Association, at least three (3) days in advance, with the known names of the nurses who will be attending the interview. The Hospital shall also provide the Association with the classification, date of hire and area assigned for each newly hired nurse,
the Hospital will also provide name and, position of any Nurse that leaves the employment of the hospital.

C - 6  Professional Development Committee

In accordance with Article 9.02, the committee should be comprised of three (3) representatives of the Hospital and three (3) representatives of the Union.

ARTICLE D - SCHEDULING REGULATIONS

Any violation of Article D will be compensated by premium payment where applicable.

D - 1  The day tour will be the first shift of the day.

D - 2  For the purpose of clarity and for the application of shift premium as specified in Article 14.10 of the Collective Agreement, the normal daily tours are:

- 0700 hours to 1500 hours: Day Tour
- 1500 hours to 2300 hours: Evening Tour
- 2300 hours to 0700 hours: Night Tour

The normal daily extended tours are:

- 0700 hours to 1900 hours: Day Tour
- 1900 hours to 0700 hours: Night Tour

For the purpose of clarity, for the application of shift premium as specified in Article 14.10 of the Collective Agreement shall apply to an extended tour as follows:

- (a) Evening premium to be paid for all hours worked between 1500 hours to 2300 hours
- (b) Night premium to be paid for all hours worked between 2300 hours to 0700 hours

D - 3  Scheduling Regulations – Full-Time and Part-Time – 7.5 Hour Tour

Violation of the following will be compensated by premium payment:

- (a) A period of at least two (2) tours will be scheduled between shifts worked by a nurse unless a lesser period of time is mutually agreed upon between the nurse and their immediate supervisor. There shall be a minimum of sixteen (16) hours off between the conclusion of work and the start of the nurse’s next tour, unless expressly waived by the nurse. If the Employer fails to schedule a period of sixteen (16) consecutive hours off between periods of work, the Employer
will pay to the nurse the premium as set out in Article 14.03 for the following tour of duty. Paid holidays or days in lieu thereof shall not be used to change shifts.

(b) A request by a nurse for a change of scheduled working hours must be submitted in writing, co-signed by the nurse willing to exchange tours, prior to the shift affected. Such change initiated by the nurse will not result in additional cost to the Hospital. All changes must be approved by the Care Manager or designate. Such request shall not be unreasonably denied.

(c) No split tours.

(d) Schedules shall be posted at both sites two (2) weeks in advance for a four (4) week period by the fifteenth (15th) of the previous month. Requests will be submitted by the first (1st) of the month prior to posting. Requests for time off after the first of the month in extenuating circumstances will not be unreasonably denied.

(e) Nurses will not be scheduled to work more than seven (7) consecutive days.

(f) FULL-TIME ONLY

At least one half (½) of a nurse’s tours shall be scheduled on the day based on each Unit’s master rotation unless otherwise mutually agreed.

(g) Full-time and Part-time

At least forty-eight (48) hours time off shall be scheduled following a block of tours on the night shift, unless mutually agreed otherwise. A "block of tours" is defined as two (2) or more.

(h) FULL-TIME ONLY

Not more than two (2) consecutive weeks will be scheduled on evenings or nights unless otherwise mutually agreed. A nurse will not be required to change shifts more than once during a work week.

(i) These regulations may be waived between December 15th and January 8th so that nurses will receive six (6) or more consecutive days off unless requested otherwise at either Christmas or New Year’s in alternating years. Christmas time off will include December 24th, December 25th and December 26th and New Years’ time off will include December 31st and January 1st. The Hospital will post the Christmas holiday schedule (defined as the period December 1st to the end of the first full week in January) not later than November 1st. This provision shall not apply to any unit in which nurses normally work Monday to Friday and are not scheduled to work on paid
holidays. Alternative requests for scheduling over this period will be considered by the Employer in a reasonable manner.

(j) **FULL-TIME**

A nurse will be scheduled off at least four (4) days in any two (2) week period including at least one (1) period of two (2) consecutive days. Split days off will be scheduled by mutual consent. (Full-time only)

(k) The Hospital will schedule two (2) weekends off in each four (4) week period and shall endeavour to maintain its practice of every second [2nd] weekend off.

(l) Full-time and Regular Part-time nurses will be available to work either Christmas or New Year's on an alternating basis.

**D - 4 Scheduling Regulations - Extended Tour**

(a) Extended tours shall be introduced into any unit when:

i) seventy-five percent (75%) of the full-time nurses in the unit and seventy-five percent (75%) of the part-time nurses so indicate by secret ballot. Ballots will be separated by full-time and part-time, and

ii) the Hospital agrees to implement extended tours, such agreement shall not be withheld in an unreasonably arbitrary manner.

(b) Extended tours may be discontinued in any unit when:

i) seventy-five percent (75%) of the full-time and seventy-five percent (75%) of the part-time nurses in the unit so indicate by secret ballot. Ballots will be separated by full-time and part-time; and

ii) the Hospital, because of

   (A) adverse effects on patient care;

   (B) inability to provide a workable staffing schedule; or

   (C) 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 extended tours will be discontinued, affected nurses shall be given forty-five (45) days notice before the schedules are so amended.

(d) Such discontinuation shall not be unreasonably denied or imposed by either party.

(e) No more than three (3) consecutive extended tours shall be scheduled per week unless expressly agreed by the nurse and their immediate supervisor.

(f) No split tours.

(g) Violation of the following will be compensated by premium payment:

i) No less than two (2) consecutive tours between changes of shift unless otherwise agreed. Paid holidays or days in lieu thereof shall not be used to change shifts. A period of at least one (1) tours will be scheduled between shifts worked by a nurse unless a lessor period of time is mutually agreed upon between the nurse and their immediate supervisor. There shall be a minimum of twelve (12) hours off between the conclusion of work and the start of the nurse’s next tour, unless expressly waived by the nurse. If the Employer fails to schedule a period of twelve (12) consecutive hours off between periods of work, the Employer will pay to the nurse the premium as set out in Article 14.03 for the following tour of duty.

ii) A request by a nurse for a change of scheduled working hours must be submitted, in writing, co-signed by the nurse willing to exchange tours, prior to the shift affected. Such change initiated by the nurse will not result in additional cost to the Hospital. All changes must be approved by the Care Manager or designate. Such request shall not be unreasonably denied.

iii) FULL-TIME

Where a nurse normally rotates shifts, at least one-half (½) of their tours shall be scheduled on the day shift in a three (3) month period unless otherwise mutually agreed.
iv) **Full-time and Part-time**

At least forty-eight (48) hours time off shall be scheduled following a block of tours on the night shift, unless mutually agreed otherwise. A "block of tours" is defined as two (2) or more.

v) **FULL-TIME**

Not more than two (2) consecutive weeks will be scheduled on nights unless otherwise mutually agreed. A nurse will not be required to change shifts more than once during a work week.

vi) These regulations may be waived between December 20th and January 5th so that nurses will receive six (6) or more consecutive days off, unless requested otherwise, at either Christmas or New Year's in alternating years.

Christmas time off will include December 24th, December 25th, and December 26th. New Year's time off will include December 31st and January 1st. The Hospital will post the Christmas holiday schedule (defined as the period of December 1st to the end of the first full week in January) not later than November 1st. This provision shall not apply to any unit in which nurses normally work Monday to Friday and are not scheduled to work on paid holidays. Alternative scheduling requests over this period will be considered by the Employer in a reasonable manner.

vii) Schedules will be posted at both sites two (2) weeks in advance of a four (4) week period by the fifteenth (15th) of the previous month. Requests will be submitted by the first (1st) of the month prior to posting. Requests for time off after the first (1st) of the month in extenuating circumstances will not be unreasonably denied.

(h) **FULL-TIME ONLY**

The Hospital will schedule every second (2nd) weekend off.

**PART-TIME ONLY**

The Hospital will schedule two (2) weekends off in each four (4) week period and shall endeavour to maintain its practice of scheduling every second (2nd) weekend off.
D - 5  A full-time nurse will receive premium payment in accordance with Article 14.03 for all hours worked on a second consecutive and subsequent 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 weekend work; or

(c) Such weekend is worked as a result of an exchange of shifts with another nurse;

(d) For purposes of scheduling, "weekend" shall be the forty-eight (48) hour period commencing no later than midnight Friday.

(e) Regular part-time nurses will receive time and one half (1½) their regular straight time hourly rate for all hours worked on a third [3rd] consecutive and subsequent weekend save and except the same provisions set out above for full-time nurses.

D - 6  (a) All Regular Part-Time nurses will be available up to the commitment as specified below in sub-paragraphs (i) to (vi). The Employer will schedule shifts in a fair and equitable manner up to the commitment specified in (i) and where extra shifts beyond the commitment are available before the posting of the schedule they will be scheduled by seniority up to the nurse’s availability or until they are in a premium position in accordance with the following:

i) Available on a pre-determined basis for a minimum of forty-five (45) hours in a two (2) week period.

ii) Available for all three (3) shifts.

iii) Available to work two (2) weekends in four (4).

iv) Available for work over the Christmas period (including Christmas Eve, Christmas Day, and Boxing Day), or New Year’s period (including New Year’s Eve and New Year’s Day), on alternate years.

v) Available for work at least half (½) of the paid holidays in a calendar year; and of those for every other at least half (½) of the paid holidays falling in July, August, September and October.

vi) Available a minimum of 52 weeks each year less the number of eligible weeks of vacation time off. For further clarity this means that if a Regular Part-time nurse is entitled to 6% vacation pay he/she must be available a minimum of 49 weeks per year.
(b) Nurses will indicate their availability to the staffing office no later than the 1st of the month prior to the next posted schedule. This availability will be used for additional hours beyond commitment on the posted schedule and for hours available after the posted schedule.

Nurses who did not submit availability on the 1st of the month, will submit availability five days after the posted schedule (the 20th of the month). This availability will be used for hours available after the posted schedule.

All nurses must submit availability to the staffing office as above, this includes nurses who have no availability beyond their commitment. The form to submit availability is available from the staffing office.

(c) After the schedule is posted, shifts that become available will be distributed based on seniority and availability submitted under D-6 (b). Shifts will be offered to the most senior nurse who is available up to that nurse’s availability or until they are in a premium position. At this time, the next most senior nurse will be offered the shift.

A nurse who fails to provide the Hospital with additional availability over and above their commitment will not be considered for additional tours or contacted, unless the hospital has been unable to fill the shift based on submitted availability.

A tour will be deemed to be offered whenever a call is placed and answered or a message is left at the number.

It is the nurse’s responsibility to ensure that their current contact information and primary contact number is up to date and filed with the Hospital’s Human Resources Department.

It is understood that the Hospital will not be required to offer tours which would result in overtime premium pay.

When a regular part-time nurse accepts an additional tour, they must report for that tour.

Provided they are qualified, nurses may submit their availability to work additional tours to more than one (1) unit.

D - 7 All casual part-time Nurses will submit to the Staffing Office on the 1st of the month, a list of tours available to work. This is in no way to be construed as a commitment. If not submitted, the casual part-time Nurse will not be called for work.
D - 8 Where a nurse(s) is scheduled to work less than a normal tour (7.5 hours), Article D 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 7.5 hours to a minimum.

(b) Nurses working tours of less than 7.5 hours shall be granted a paid rest period.

(c) No part-time nurse will be scheduled solely on tour(s) 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.

(d) Nurses, working tours comprised of less than seven and one-half (7.5) hours, shall not be scheduled to work more than seven (7) consecutive tours. If a nurse is required to work on an eighth [8th] consecutive and subsequent tour, then they will receive premium pay for each tour so worked until a day off is scheduled.

D – 9 (a) Reassignment

The Hospital and the Union recognize that it is a management right to reassign an employee who is scheduled to work for a period of time up to and including a single shift under Article 14.05. This reassignment will be from the employee’s home unit to any other unit as required by the Hospital. The Hospital and the Union agree to implement the following principles if such reassignment occurs. A partial or single shift reassignment pursuant to Article 10.08 (a) will be done in the following manner:

Single Shift Reassignment

When it is necessary to reassign staff from one (1) unit to another, the reassignment will first be offered on a voluntary basis, subject to maintaining operational requirements and provided the nurse is qualified to perform the work in question.

(b) In the event that there are no volunteers, nurses will be assigned in the following order: This order applies until the next round of bargaining.

i) Float nurses

ii) A nurse, based on reverse seniority, provided that the nurse has the necessary skills, judgment and ability.

(c) For the purposes of reassignment under this provision a combined seniority list shall be used.
(d) However, the above order may be altered by management based on an evaluation of the qualifications required, skill mix required, clinical needs, client acuity and the staffing complement on the sending and receiving units.

(e) It is agreed that a reassigned nurse will be provided adequate support on the reassigned unit.

(f) It is understood that nurses will not typically be reassigned during their probationary period.

**D-10 Float Team Nurses**

(a) The Collective Agreement shall apply to all aspects of the Float Team Nurses.

(b) Float Team Nurses shall be comprised of full-time and part-time and casual positions.

(c) For the purposes of vacation, leaves of absence, lay-off or any other seniority or service entitlement under the collective agreement the Float Team Nurses shall be treated as separate units. There are two Float Team Nurse Units - General and Critical Care. Each team is a separate unit.

(d) The utilization of a Float Team Nurse shall not cause the short term or long term lay off of any nurse covered by the collective agreement or a reduction in the scheduled hours of regular part-time nurses on the unit.

(e) Prior to assigning a Float Team Nurse, the Hospital must satisfy its obligations under the collective agreement with respect to the scheduling of regular part-time and/or casual nurses for scheduled tours and/or additional tours that become available after the schedule has been posted. The Parties acknowledge that in some circumstances, such as short-call, the call-in process is not a reasonable option and Float Team Nurses may be assigned.

(f) To ensure quality patient care, each nurse assigned to a unit shall receive the orientation specific to the applicable unit(s), reasonably required prior to the commencement of the assignment.
ARTICLE E - PAID HOLIDAYS

E - 1  The following shall be recognized:

- New Year's Day  
- Civic Holiday
- Family Day  
- Labour Day
- Good Friday  
- Thanksgiving Day
- Easter Monday  
- Christmas Day
- Victoria Day  
- Boxing Day
- July 1st (Canada Day)  
- One (1) Float Day

E - 2  The Hospital shall arrange for paid holidays off to be divided equitably among the nurses in the same unit.

E - 3  A nurse will be paid for all actual hours worked on a paid holiday.

E - 4  Provided there is no violation of the scheduling regulations set out in D-1 and D-2:

   (a) When a nurse is scheduled to work the weekend contiguous to a paid holiday, the nurse will be scheduled to work the paid holiday;

   (b) If a nurse is scheduled off the weekend contiguous to a paid holiday, they shall be scheduled off the paid holiday.

E - 5  FULL-TIME

When a nurse works on a holiday or when a holiday falls on a scheduled day off, compensating time off shall be scheduled concurrent with scheduled weekends off, vacation or at a mutually agreeable time.

A maximum of 37.5 hours may be accumulate in the “stat lieu time bank” at any time. It is the responsibility of the employee to manage their “stat lieu time banks” such that no greater than 37.5 hours is accumulated. In circumstances where the employee has accumulated greater than 37.5 hours in their “stat lieu time bank”, payment of all hours above 37.5 will be paid out in the employee’s next pay cheque.

ARTICLE F – VACATIONS

F - 1  (a) The Hospital will post by March 1st a vacation sheet in each nursing unit to cover the period from June 15th to September 15th in each year. Each nurse employed in the unit shall indicate prior to April 1st their vacation request preferences by indicating their 1st, 2nd, and 3rd choice. In the event of the number of requests for vacation exceeds the maximum number permitted off at any time preference will be given to the most senior nurses.
(b) Week-long vacation requests will be granted prior to approving single day(s) vacation requests to ensure maximum opportunity for summer vacation utilization.

(c) Subject to the Employer’s obligations with respect to the posting of schedules and consistent with the Employer’s ability to amend schedules consistent with the Collective Agreement, the vacation summer work schedule shall be approved by the Manager and posted by May 15th for the period June 15 to September 15. Any remaining time for vacation in prime time shall thereafter be granted on a first come first serve basis.

(d) Vacation requests for all other times shall be submitted to the Manager for approval no later than the first 1st of the month before the posting of the applicable schedule. A decision with respect to all such requests shall be confirmed by the Manager within two (2) weeks of the request.

(e) Department managers will grant up to two (2) consecutive calendar weeks of vacation (regardless of how many hours constitute the two calendar weeks), as available, by seniority for the first choice requested. For times in which a junior employee has requested the same choice as a more senior employee, the junior employee’s 2nd or 3rd choice will be considered and awarded (if available).

(f) Once the first round of processing is completed, the department manager will review the remaining vacation weeks requested (pertaining to employees who requested more than two (2) weeks of vacation) and award (as available) those vacation requests in (two week blocks) following the same process as step 2. This process will continue until all vacation requests have been processed.

F - 2 The vacation year is January 1st to December 31st.

F - 3 In the event the approved vacation period extends beyond the current posted work schedule, prior to leaving on vacation, nurses shall be notified of the date and time at which to report to work following vacation.

F - 4 Should a nurse request, the Hospital will endeavour to schedule off the weekend before and after a nurse’s vacation.

F - 5 Vacations may be taken as one (1) day or any multiple thereof.

F - 6 A week of vacation shall be defined as thirty-seven and one-half (37½) hours vacation.

F - 7 Vacation may commence on any day of the week.

F - 8 Vacation credits may be taken as it is earned but must be taken by the end of the fifteen (15) months following the end of the calendar year in which
the vacation credit was earned. Any vacation credits not taken within 15 months of following the end of the calendar year in which the vacation was earned, will be scheduled off at management’s discretion and with the employee’s agreement, which will not be unreasonably withheld, at the next reasonable opportunity.

F - 9 Full-time employees will progress to the next highest level of vacation entitlement on the employee’s anniversary date (i.e. 3rd, 11th, 20th and 25 years), and accrue vacation accordingly.

ARTICLE G - SENIORITY LIST

G - 1 Seniority lists for nurses will be posted in March and September.

ARTICLE H - UNION LEAVE

H - 1 Leave of Absence for Union Business

Leave of absence for Union business shall be given up to an aggregate of seventy-five (75) days during the calendar year for all members of the bargaining unit, provided adequate notice is given the Hospital. Adequate notice will be deemed to be a formal written request (fax, e-mail or mail) to Human Resources and the department manager at least fourteen (14) days in advance, requesting leave for Union business. It is agreed that not more than three (3) nurses in total nor more than one (1) nurse per unit shall be absent on such leave at the same time.

The Hospital will provide replacement for leave for Union business provided such leave of absence does not interfere with the efficient operation of the Hospital. Request for leave shall not be unreasonably denied.

H - 2 Local Coordinator Leave

The Hospital agrees to grant leaves of absence, without pay, to nurses elected to the position of Local Co-ordinator. Subject to reasonable notice, it is understood and agreed that a Local Co-ordinator shall be granted such leave(s) as they may require fulfilling the duties of the position.

H - 3 Paid Professional Leave Days

Each nurse shall be entitled to apply for professional development leave in a calendar year. The nurse shall provide the hospital with as much notice as is practicable to ensure that replacement staff are provided.

The Nurse shall be advised, prior to taking any professional development days of any transportation, wage replacement, registration fees, subsistence and other expenses that will be paid by the Employer.
H - 4  (a) The Hospital will pay the Bargaining Unit President or designate their regular straight time hourly rate for all time spent attending meetings with the Hospital outside their regularly scheduled hours when the Hospital specifically requests their attendance. Such hours will not be included for purposes of determining premium payments (i.e. these hours will not attract premium payment and will not be counted for purposes of determining eligibility for premium payment on other hours worked).

(b) The Hospital will provide the Bargaining Unit President with a paid leave of absence of one (1) days per month at the standard hours per shift on the unit where they work for the purpose of conducting Union business. The Parties will agree on the timing of this leave with a focus on efficient and effective use of this time for conducting Union business.

ARTICLE I - BULLETIN BOARD

I - 1 The Hospital shall provide bulletin board space at each Hospital for the use of the Union.

ARTICLE J - PRE-PAID LEAVE PLAN

J - 1 One (1) nurse from each unit.

ARTICLE K – OCCUPATIONAL HEALTH AND SAFETY/WORK RELATED INJURY

K - 1 The Hospital will notify the President of the Local Nurses’ Union or designate of the Bargaining Unit of the names of all nurses who go off work due to a work related injury or when a nurse goes on LTD. The President shall notify in writing the Director of HR who the designate shall be.

K - 2 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 early and safe return to work.

When it has been medically determined that an employee is unable to return to the full duties of their position due to a disability, the Hospital will notify and meet with a staff representative of the Ontario Nurses’ Association and a member of the Local Executive to discuss the circumstances surrounding the employee’s return to suitable work.

The Parties undertake to provide safe and meaningful employment for both permanently or temporarily disabled nurses based on the following principles.
(a) A nurse has the right to employment following an injury or illness if the employee is able to perform either the essential duties of their pre-injury/illness job or any other suitable modified work.

(b) The Employer shall accommodate the work or the workplace for the nurse with a disability to the extent that the accommodation does not cause the Employer undue hardship.

(c) The Union acknowledges that the employee has a duty to cooperate as directed by the Occupational Health Service.

K - 3 The Hospital agrees to provide the employee with a copy of the Workers’ Safety and Insurance Board Form 7 at the same time as it is sent to the Board.

K - 4 Musculoskeletal Injury Prevention and Control

The Hospital in consultation with the Joint Health and Safety Committee will develop and put into effect musculoskeletal injury prevention, measures that focus on procedures, practice, equipment and training for the health and safety workers.

K - 5 Needlestick/Sharps Injuries

Recognizing the danger of needlestick/sharps injuries, the Parties acknowledge the commitment of the Hospital in the area of policies, procedures, equipment and products that help to reduce or eliminate these dangers.

ARTICLE L – VIOLENCE IN THE WORKPLACE

L - 1 (a) Definition of Violence

The Employer agrees that no form of verbal, physical, sexual, racial or other abuse which may cause physical or psychological injury or that gives a person reason to believe that they or another person is at risk of physical and or psychological injury will be condoned in the workplace. Any employee who believes the situation to be abusive shall report this to the immediate supervisor who will take every precaution reasonable to rectify the abusive situation.

(b) Function of Joint Health and Safety Committee

All incidents involving aggression or violence shall be brought to the attention of the Joint health and Safety Committee. The Employer agrees that the Joint Health and Safety Committee shall concern itself with all matters relating to violence to staff. The Employer, in conjunction with the JHSC, will immediately and thoroughly investigate all acts and reports of potential/actual violence and
forthwith take every precaution reasonable in the circumstances to prevent violence from occurring.

(c) **Training**

The Employer agrees to provide education, training, information and instruction, developed in consultation with the JHSC, on the violence prevention and harassment policies, measures, procedures and programs, and on prevention of violence to all employees, including domestic violence that can spill over into the workplace. This training will be done during a new employee’s orientation and updated on an annual basis for all employees.

(d) **Damage to Personal Property**

The Hospital shall consider reimbursement for replacement of damages incurred to the employee’s personal property, such as eyeglasses, contact lenses or other prosthesis, etc. ripped uniforms, personal clothing, as a result of being assaulted while performing their work.

**ARTICLE M – MISCELLANEOUS**

M - 1  (a) **On-Call/Standby**

The Hospital will notify the Bargaining Unit President or designate prior to initiating ongoing standby assignments on any unit.

(b) Should the Employer require employees to be on standby in accordance with Articles 14.06 and 14.07, the standby shall be scheduled by:

i) request for volunteers;

ii) should not enough volunteers come forward, employees shall be scheduled in such a way as to not require an employee to be scheduled until all employees within the designated category and department have been scheduled.

(c) When the Hospital requires nurses to be scheduled on standby, nurses shall be scheduled on standby so that they shall have at least every other weekend off from such standby and shall not be scheduled on-call/standby on their vacation.

(d) Standby Schedule shall be posted at the same time as the work schedule.

(e) The Hospital will inform new hires of their obligation to take on-call shifts for any unit that has standby assignments.
(f) Standby assignments will be distributed equitably amongst all the full-time and part-time and casual employees in any unit utilizing standby as much as possible on each posted schedule.

(g) Employees shall be permitted to exchange or giveaway their standby assignments with a Registered Nurse who is qualified to perform the work and mutually consents and manager approval, which will not be unreasonably withheld.

(h) The Hospital will make available suitable accommodation and/or resting area for employees scheduled for standby.

(i) **Standby/Operating Room/PACU**

The nurses in the department shall attempt to self schedule the stand-by assignments. If self-scheduling is deemed unsuccessful, a stand-by rotation will be developed and reviewed by the staff of the department. Approval of the self-scheduling arrangement will not be unreasonably denied. Employees shall be permitted to exchange their stand-by shifts.

(j) There shall be (2) Registered Nurses on standby at all times while the Operating room is open, excluding elective surgical days where there is at least (2) Registered Nurses working in the Operating Room Department.

M - 2 HURONIA SITE:

Prior to any changes in costs of providing parking services, the proposed changes will be discussed at the Union-Hospital Committee. In the event the Hospital changes the rates, the Union has the right to grieve.

M - 3 The Hospital will continue to supply scrub/lab coats to those nurses who require them. The Hospital will consider providing scrubs to nurses who request them.

M - 4 In addition to posting all bargaining unit jobs as per the current practice, all job vacancies will be emailed to the bargaining unit president.

M - 5 Notification to Unsuccessful Job Applicants.

The Parties agree that any unsuccessful interviewed candidate for an ONA job posting will be notified, in writing, 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 ONA Bargaining Unit President will be advised of who receives the above notice by email.
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 first 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.

Errors in Pay

Shortages in an employee’s pay will be rectified upon the following conditions:

(a) If the shortage occurs as a result of an employee’s action or inaction, it will be corrected on the next standard payroll.

(b) If the shortage occurs as a result of the Hospital’s error and amount to less than four (4) hours pay, it will be corrected on the next standard payroll.

(c) If the shortage occurs as a result of the Hospital’s error in an amount of four (4) hours or more, the monies will be issued within (2) payroll department working days.

In reference to the above points, all errors must be reported by the employee directly to the immediate supervisor.

Eligibility for Mentorship

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.

In selecting a Mentor, the Manager will take into account the following skills and experience:

(a) Demonstrated, relevant clinical experience
(b) Understanding of adult learning principles
(c) Clinical Knowledge, skill and judgment
(d) Effective communication skills and emotional intelligence
(e) Critical thinking and problem-solving skills
(f) Willingness and ability to share knowledge and skills
(g) Where all other factors are equal, seniority

The Manager will select and assign the Mentor for a given mentoring relationship.
ARTICLE N - JOB SHARING

N - 1  Job sharing requests with regard to full-time positions shall be considered on an individual basis.

N - 2  Total hours worked by the job sharer shall equal one (1) full-time position. The division of these hours on the schedule shall be determined by mutual agreement between the two (2) nurses and the Care Manager of the Unit.

N - 3  The above schedules shall conform with the scheduling provisions of the Full-time Collective Agreement for the purposes of determining applicable premiums and scheduling requirements.

Employees participating in a job share may provide availability over and above their scheduled shifts in accordance with the scheduling provisions applicable to regular part-time staff.

In the event that there are holes in the posted schedule after all regular part-time nurses have been scheduled up to their commitment and all job share shifts have been covered, any shifts that remain available will be offered in order of seniority, and subject to availability to regular part-time staff. The job shares will be included in the group offered these shifts.

N - 4  Each job sharer may exchange shifts with their partner, as well as with other nurses as provided by the Collective Agreement.

N - 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.

N - 6  Coverage:

(a)  It is expected that both job sharers will cover each other's incidental illnesses. If, because of unavoidable circumstances, one (1) cannot cover the other, the unit supervisor must be notified to book coverage. Job sharers are not required to cover for their partner in the case of prolonged or extended absences.

(b)  Vacation, Pregnancy Leave, and other Leaves pursuant to Article 11 of the Central Agreement:

In the event that one (1) member of the job sharing arrangements goes on any of the above leaves of absence, the coverage will be negotiated with the unit supervisor, but it is hoped that the remaining member of the position would be prepared to cover the leave of absence as much as possible.
Implementation:

(a) 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.

(b) An incumbent full-time nurse wishing to share their position may do so without their half [½] of the position being posted. The other half [½] of the job sharing position will be posted and selection will be made on the criteria set out in the Collective Agreement.

(c) If one (1) 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 job sharer will have the option of continuing the full-time position or reverting to a part-time position for which they are qualified. If they do not continue full-time, the position must be posted according to the Collective Agreement.

Discontinuation:

Either party 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 O – OVERTIME

O - 1 (a) For any full-time or part-time nurse who chooses to bank overtime as lieu time, the Manager will allow the nurse to bank a maximum of seventy-five (75) hours. It is the responsibility of the employee to manage their Overtime Lieu Banks such that no greater than seventy-five (75) hours is accumulated. In circumstances where the nurse has accumulated greater than 75 hours in their overtime bank, payment of all hours above seventy-five (75) hours will be paid out on the nurse’s next pay cheque. Requests for banked time off will follow scheduling regulations and will not be unreasonably denied.

(b) Part-time nurses who work above sixty (60) hours will be allowed at their request to bank up to fifteen (15) hours at straight time in a two (2) week period, provided their total bank hours do not exceed seventy-five (75) hours.

(c) Education hours may not be banked.
ARTICLE P – ELECTRONIC GRIEVANCE FORMS

P - 1 The Parties agree that hard copy grievance forms and or an electronic version of the O.N.A. Grievance form (found at Appendix 1 of the Hospital Central Agreement) are valid for purposes of Article 7 of the Hospital Central Agreement and will be accepted as original.

P - 2 Electronic grievance forms may be sent, via email, to the applicable Manager and copied to Human Resources, or the identified designate.

P - 3 The electronic typed signature of the Union Executive representative or Labour Relations Officer will be accepted as the original signature.

P - 4 The Union undertakes to get a copy of the electronic version signed by the individual grievor (if applicable), should the grievance proceed beyond the Step No. 2 Grievance Meeting.

P - 5 The Parties agree to not use or rely upon any preliminary arguments related to the use of the electronic version of the grievance form should a grievance proceed to mediation or arbitration.
Dated at Midland, Ontario, this 1st day of March, 2022.

FOR THE EMPLOYER:

“Gail Nielsen”

“Angela Wiggins”

“Bill Whittaker”

FOR THE UNION:

“Kara Northgrave”
Labour Relations Officer

“Michelle Marchand”
LETTER OF UNDERSTANDING

Between:

GEORGIAN BAY GENERAL HOSPITAL
(Hereinafter referred to as the “Employer”)

And:

ONTARIO NURSES’ ASSOCIATION
(Hereinafter referred to as the “Union”)

Re: 4 On /5. Off Scheduling Agreement

The Parties agree to implement a 4-On / 5-Off schedule subject to the following terms and conditions:

(a) It is understood that the shifts worked will be extended tours and consists of 2 day and 2 night shifts.

(b) When the 2 Day / 2 Night rotation is introduced into any unit there will be a six (6) month trial period in order to evaluate the process. At the completion of the six (6) months trial there will be a second vote by secret ballot to decide whether the 2 Days / 2 Night rotation will continue.

(c) 2 Day / 2 Night rotations may be discontinued in any unit when:

i) the Hospital provides the Union with written notice ninety (90) days in advance, of its desire to discontinue the 2 Day / 2 Night rotation; or

ii) eighty percent (80%) of the nurses working the 2 Day / 2 Night rotation in the unit indicate by a secret ballot.

(d) Nurses will not be required to work more than four (4) consecutive tours. If a nurse works a fifth (5th) consecutive tour, they will receive pay at time and one half, save and except where:

i) the shift worked is as a result of an exchange of shifts with another nurse; or

ii) the shift worked is to ensure that all obligations to the Hospital are met (see section (e) below); or

iii) the nurse has requested to work that shift; or

iv) the shift has been worked by the nurse to satisfy specific days off required by such nurse.

(e) All schedules will be done on the basis that each full-time nurse will be scheduled for 1950 hours per year. Schedules will be mutually agreed to by the individual and their manager.
In order to achieve 1950 hours per year a nurse must work an additional 22.5 hours every nine weeks. To reach 1950 hours, staff will choose one of two options as below:

i) Pre-booked on the master rotation for 22.5 hours every 9 weeks.
ii) Pre-booked on the master rotation for 5 vacation hours every two weeks (2.5 hours/week = 22.5 hours in 9 weeks) and can draw from their vacation entitlements, time owed bank, stat bank or float bank, in combination to pre-booking, to equal 22.5 hours extra every 9 weeks with mutual agreement between management and the nurse.

Items i) and ii) above may be used in combination to achieve the 1950 hours per year with mutual agreement.

Once a nurse has chosen the method they wish to make up the hours, changes will only be made by mutual agreement and will be made at the beginning of a 9 week cycle. No changes to the method will be made during the summer vacation time (June 15 – September 15).

(f) At least four (4) weeks notice shall be given by the Hospital to the Union before any changes are implemented to the master rotation.

(g) It is understood that a nurse working this scheduling agreement will see a variation in hours per pay period and will not consistently average 75 hours per pay period.

(h) For the purposes of calculating overtime, hours will be averaged over a period of nine (9) weeks. All hours worked over and above the Master Rotation will be considered overtime.

(i) If a nurse is required to work on a fourth (4th) and subsequent consecutive weekend, they will receive payment as defined in the Central Collective Agreement for all hours worked on that weekend, save and except where:

i) the weekend worked is a result of an exchange of shifts with another nurse; or
ii) the weekend worked is to ensure that all obligation to the Hospital are met (see section (c) (e) above); or
iii) the nurse has requested to work that weekend; or
iv) the weekend has been worked by the nurse to satisfy specific days off required by such nurse.
(j) Where a vacancy occurs in the 2 Days / 2 Nights schedule, the rotation will first be offered to the other nurses on the unit who have expressed an interest in working this schedule, in accordance with seniority. The manager or delegate will advise the unit nurses of the availability of a position in the 2 Days / 2 Nights rotation. The nurse will request the change of rotation in writing and submit the request to the manager. The most senior nurse interested will fill the position and will start the rotation at the beginning of the next rotation.

The vacancy created will be posted as per Article 10.07 of the Central Agreement.

(k) Article E - 4 of the Local Agreement will not apply.

(l) Notwithstanding to all the foregoing the Parties agree that in the Emergency Department, that the following shift combinations are allowed to be scheduled and are defined as follows:

Definition - D = 07:00 to 19:00 , LD =11:00 to 23:00 and N = 19:00 to 07:00

Schedule - D D N N, D LD N N

Dated at ____Midland____, Ontario, this 1st ____ day of ____March____, 2022.

FOR THE EMPLOYER:

“Gail Nielsen”  “Kara Northgrave”
Labour Relations Officer

“Angela Wiggins”  “Michelle Marchand”

“Bill Whittaker”

FOR THE UNION:


LETTER OF UNDERSTANDING

Between:

GEORGIAN BAY GENERAL HOSPITAL
(Hereinafter referred to as the “Employer”)

And:

ONTARIO NURSES’ ASSOCIATION
(Hereinafter referred to as the “Union”)

Re: Innovative Unit Schedule For Dialysis Unit

The Employer and Union agree to implement an innovative unit schedule on the Dialysis Unit.

It is recognized that the attached schedule includes occurrences of:

(a) A period of twelve (12) consecutive hours off between scheduled shifts

(b) Four consecutive shifts 3 x 11.25 hours + 1 x 7.5 hours

All terms and conditions of the collective agreement shall continue to apply, with the exception of:

Article D-3 (a) and Article D-4 (e)

(a) The Union reserves the right to request discontinuation of this Innovative Unit Schedule on the Dialysis Unit; such request will not be arbitrary or unreasonable.

(b) The Hospital may discontinue this innovative Unit Schedule on the Dialysis Unit, because of:

   i) adverse effects on patient care;

   ii) an inability to provide a workable staffing schedule; or

   iii) for other reasons which are neither unreasonable nor arbitrary.

(c) When notice of discontinuation is given by either party due to either A) or 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 Innovative Unit Schedule will be discontinued, affected nurses shall be given forty-five (45) days of notice before the schedule is amended.
(d) Such discontinuation shall not be unreasonably denied or imposed by either party

Dated at ___Midland____, Ontario, this __1st__ day of ____March____, 2022.

FOR THE EMPLOYER:

“Gail Nielsen”

“Angela Wiggins”

“Bill Whittaker”

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FOR THE UNION:

“Kara Northgrave”

Labour Relations Officer

“Michelle Marchand”

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