

LOCAL APPENDICES TO THE COLLECTIVE AGREEMENT

Between:

NIAGARA HEALTH SYSTEM  
(hereinafter referred to as “the Employer”)

And:

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

EXPIRY: MARCH 31, 2025

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**APPENDIX 3 - SALARIES/WAGE GRIDS/CLASSIFICATIONS**

<b>Effective April 1, 2022</b>	<b>Registered Nurse/ Hepatitis C Vaccine Nurse/ Occupational Health and Safety Nurse/ Wellness</b>	<b>Resource Nurse/ Renal Access Nurse</b>	<b>Charge Nurse</b>	<b>Geriatric Assessment Nurse</b>	<b>Nurse Educator/Nurse Navigator/Oncology Information Systems Specialist</b>	<b>Advanced Practice Nurse</b>	<b>Clinical Nurse Specialist</b>	<b>Registered Nurse First Assist</b>	<b>Grad. Rate</b>	<b>Coordinator, Efficiency OR</b>
Start	\$35.52	\$36.24	\$37.95	\$37.95	\$38.76	\$51.56	\$48.08	\$41.20	\$33.80	\$47.65
1 Year	\$35.69	\$36.41	\$38.03	\$38.03	\$38.83	\$51.80	\$48.16	\$41.27	--	\$48.04
2 Years	\$36.28	\$37.01	\$38.53	\$38.53	\$39.33	\$52.23	\$48.92	\$41.80	--	\$48.88
3 Years	\$38.07	\$38.83	\$40.33	\$40.33	\$41.13	\$52.96	\$49.72	\$43.71	--	\$49.78
4 Years	\$39.87	\$40.68	\$42.13	\$42.13	\$42.94	\$54.57	\$51.35	\$45.64	--	\$50.67
5 Years	\$42.12	\$42.97	\$44.37	\$44.37	\$45.18	\$57.28	\$53.97	\$48.02	--	\$51.59
6 Years	\$44.39	\$45.28	\$46.65	\$46.65	\$47.45	\$57.35	\$54.04	\$50.44	--	\$52.53
7 Years	\$46.65	\$47.58	\$48.90	\$48.90	\$49.70	\$57.39	\$54.08	\$52.82	--	\$53.45
8 Years	\$50.85	\$51.88	\$53.22	\$53.22	\$54.04	\$58.45	\$55.08	\$57.44	--	\$55.39

<b>Effective April 1, 2023</b>	<b>Registered Nurse/ Hepatitis C Vaccine Nurse/ Occupational Health and Safety</b>	<b>Resource Nurse/ Renal Access Nurse</b>	<b>Charge Nurse</b>	<b>Geriatric Assessment Nurse</b>	<b>Nurse Educator/ Nurse Navigator/Oncology Information Systems Specialist</b>	<b>Advanced Practice Nurse</b>	<b>Clinical Nurse Specialist</b>	<b>Registered Nurse First Assist</b>	<b>Grad. Rate</b>	<b>Coordinator, Efficiency OR</b>
Start	\$37.93	\$38.70	\$41.93	\$40.53	\$41.39	\$55.06	\$51.35	\$44.00	\$37.93	\$50.89
1 Year	\$38.88	\$39.66	\$42.88	\$41.43	\$42.31	\$56.43	\$52.46	\$44.96	--	\$52.33
2 Years	\$39.86	\$40.66	\$43.86	\$42.34	\$43.22	\$57.39	\$53.75	\$45.93	--	\$53.70
3 Years	\$41.65	\$42.48	\$45.65	\$44.12	\$45.00	\$57.94	\$54.40	\$47.82	--	\$54.46
4 Years	\$43.52	\$44.40	\$47.52	\$45.99	\$46.87	\$59.57	\$56.05	\$49.82	--	\$55.31
5 Years	\$45.70	\$46.61	\$49.70	\$48.14	\$49.02	\$62.15	\$58.56	\$52.10	--	\$55.97
6 Years	\$47.98	\$48.94	\$51.98	\$50.42	\$51.29	\$62.15	\$58.56	\$54.51	--	\$56.78
7 Years	\$50.38	\$51.39	\$54.38	\$52.81	\$53.67	\$62.15	\$58.56	\$57.05	--	\$57.72
8 Years	\$54.37	\$55.47	\$58.37	\$56.91	\$57.78	\$62.50	\$58.89	\$61.41	--	\$59.22

<b>Effective April 1, 2024</b>	<b>Registered Nurse/ Hepatitis C Vaccine Nurse/ Occupational Health and Safety</b>	<b>Resource Nurse/ Renal Access Nurse</b>	<b>Charge Nurse</b>	<b>Geriatric Assessment Nurse</b>	<b>Nurse Educator/ Nurse Navigator/Oncology Information Systems Specialist</b>	<b>Advanced Practice Nurse</b>	<b>Clinical Nurse Specialist</b>	<b>Registered Nurse First Assist</b>	<b>Grad. Rate</b>	<b>Coordinator, Efficiency OR</b>
Start	\$39.07	\$39.86	\$43.07	\$41.75	\$42.63	\$56.71	\$52.89	\$45.32	\$39.07	\$52.42
1 Year	\$40.05	\$40.85	\$44.05	\$42.68	\$43.58	\$58.13	\$54.04	\$46.31	--	\$53.90
2 Years	\$41.06	\$41.88	\$45.06	\$43.61	\$44.52	\$59.12	\$55.37	\$47.31	--	\$55.32
3 Years	\$42.90	\$43.75	\$46.90	\$45.44	\$46.35	\$59.68	\$56.03	\$49.26	--	\$56.09
4 Years	\$44.83	\$45.74	\$48.83	\$47.37	\$48.28	\$61.36	\$57.74	\$51.32	--	\$56.97
5 Years	\$47.07	\$48.02	\$51.07	\$49.58	\$50.49	\$64.01	\$60.32	\$53.66	--	\$57.65
6 Years	\$49.42	\$50.41	\$53.42	\$51.93	\$52.83	\$64.01	\$60.32	\$56.15	--	\$58.48
7 Years	\$51.89	\$52.93	\$55.89	\$54.39	\$55.28	\$64.01	\$60.32	\$58.76	--	\$59.45
8 Years	\$56.00	\$57.13	\$60.00	\$58.62	\$59.51	\$64.37	\$60.66	\$63.25	--	\$61.00

<b>Nurse Practitioner</b>	<b>Effective April 1, 2022</b>	<b>Effective April 1, 2023</b>	<b>Effective August 16, 2023</b>	<b>Effective April 1, 2024</b>
Start	\$54.08	\$57.75	\$64.50	\$66.43
1 Year	\$54.50	\$59.37	\$66.31	\$68.30
2 Years	\$55.25	\$60.70	\$67.79	\$69.83
3 Years	\$56.01	\$61.28	\$68.44	\$70.49
4 Years	\$57.66	\$62.94	\$70.29	\$72.40
5 Years	\$60.45	\$65.59	\$73.25	\$75.45
6 Years	\$60.51	\$65.59	\$73.25	\$75.45
7 Years	\$60.55	\$65.59	\$73.25	\$75.45
8 Years	\$61.68	\$65.95	\$73.66	\$75.87

**NIAGARA HEALTH SYSTEM**

**WORK SHEET – O.N.A. WAGE SCHEDULE**

**PERCENTAGE DIFFERENTIAL WITH REG. N. RATES**

	<b>Resource Nurse/ Renal Access Nurse</b>	<b>Charge Nurse/ Geriatric Assessment Nurse</b>	<b>Nurse Educator/ Nurse Navigator</b>	<b>Nurse Practitioner</b>	<b>Advanced Practice Nurse</b>	<b>Clinical Nurse Specialist</b>	<b>Registered Nurse First Assist</b>	<b>Grad. Rate</b>	<b>Coordinator, Efficiency OR</b>
Start	0.0202	0.0685	0.0913	0.5225	0.4516	0.3537	0.1599	0.0483	0.3416
1 Year	0.0201	0.0656	0.0881	0.5271	0.4515	0.3493	0.1564	--	0.3459
2 Years	0.0201	0.0621	0.0842	0.5230	0.4397	0.3485	0.1522	--	0.3473
3 Years	0.0200	0.0593	0.0804	0.4713	0.3911	0.3061	0.1481	--	0.3075
4 Years	0.0203	0.0568	0.0769	0.4462	0.3687	0.2879	0.1447	--	0.2709
5 Years	0.0201	0.0535	0.0726	0.4351	0.3599	0.2814	0.1400	--	0.2248
6 Years	0.0200	0.0509	0.0690	0.3632	0.2919	0.2173	0.1362	--	0.1834
7 Years	0.0200	0.0482	0.0654	0.2980	0.2302	0.1592	0.1323	--	0.1457
8 Years	0.0202	0.0467	0.0627	0.2130	0.1495	0.0831	0.1295	--	0.0892
25 Years	0.0201	0.0466	0.0623	0.2123	0.1493	0.0830	0.1291	--	0.0897

## **APPENDIX 4 - SUPERIOR CONDITIONS**

### St. Catharines General Site

#### Article 14.01

When a nurse works on their day or days off, such nurse will be compensated at the rate of time and one-half and shall be scheduled for another day or days off with pay.

Effective Date of Ratification – August 17, 2011

1. Full-time nurses employed at the SC site as of date of ratification will be grandfathered and remain entitled to the superior condition above.
  - (a) The superior condition above is maintained for the grandfathered FT nurses in 1. above until such time that the last grandfathered FT nurse has retired or resigned or transferred to another site or changed status (i.e. FT to RPT or casual).
  - (b) FT SC site RN's who transfer temporarily to another site or status will be reinstated to this superior condition once they return to the SC site.
3. A list of the nurses eligible for the existing superior condition as of the date of ratification will be provided to the union. An updated list of the remaining grandfathered nurses shall be provided on April 1<sup>st</sup> of each subsequent year.
4. The parties agree to amend the superior condition above through the establishment of a joint stewardship Education Fund. This fund shall be available to all ONA members in the NHS to support nursing and leadership education. The education fund shall be funded as follows:
  - For each FT RN from the SC site who exists as per 1 above, \$2500.00 per year per nurse shall be added each and every subsequent year to the education fund
  - The Education Fund will be capped annually at \$782,000.00.
  - The funds must be utilized within each fiscal year as uncommitted funds cannot be carried over to the next fiscal year.
5. The Education Fund will be separate and distinct from any Corporate Training and Education budget and any other funds or endowments including the NPDC funds and administered separately. The parties agree that mandatory education and inservice training remains the responsibility of the Employer and is not covered by this fund.
6. The application and administration processes for the Education Fund are set out in Appendix 5.

### Schedule "C" – Educational Increments

Salary recognition for additional preparation shall be in addition to the above schedule if used in the position assigned as follows:

- (a) For successful completion and documentation of a course agreed on by the Hospital and the Association, \$15.00 monthly.
- (b) For a course in Nursing Unit Administration (CHA/CAN) – or its equivalent, \$15.00 monthly.
- (c) For a one year University Certificate or Diploma in Nursing, \$40.00 monthly.
- (d) For a Bachelor of Science in Nursing Degree, \$80.00 monthly.
- (e) For a Master of Science in Nursing Degree, \$120.00 monthly.
  - (1) A nurse possessing more than one degree or certificate shall be entitled only to the highest single increment to which any of their degrees or certificates entitle them.
  - (2) Items (c), (d) and (e) shall be payable only to Assistant Head Nurses and Head Nurses.

### Welland County General Site

#### Article 15.01 (a) – Note Regular Part-Time Only

In order to qualify for holiday pay, a nurse must:

- (a) Work their last full scheduled shift immediately preceding and their first full scheduled shift immediately following the holiday.
- (b) Work any time in the fifteen day period beginning seven days before the holiday unless unable, for reasons acceptable to the Employer, to have fulfilled conditions (a) & (b).

### Schedule "B" – Educational Increments

Salary recognition for additional preparation shall be in addition to the above scheduled if used in the position assigned as follows:

- (a) For a successful completion and documentation of a course agreed on by the Employer and the Association, \$15.00 monthly.
- (b) For a course in nursing unit administration, \$15.00 monthly.
- (c) For a one year university certificate or diploma in nursing, \$40.00 monthly.

- (d) For a Bachelor of Science in Nursing degree, \$80.00 monthly.
- (e) For a Master of Science in Nursing degree, \$120.00 monthly.
  - (1) A nurse possessing more than one degree or certificate shall be entitled only to the highest single increment to which any of their degrees or certificates entitle them.
  - (2) Items (c), (d) and (e) shall be payable only to Assistant Head Nurses.



## APPENDIX A – EDUCATION FUND

### Superior Condition Education Fund Administration and Application

The Education Fund shall be available for all ONA members in the NHS to support nursing and leadership education.

ONA members may apply by an Expression of Interest form to access the fund once in a fiscal year between April 1st and May 31st. Applicants will be chosen by Lottery June 1st of each year. The number of applicants drawn will be based on the available funds each year as set out in Appendix 4 (Superior Conditions). Successful applicants will be notified by letter and may access \$1000.00 to be used between July 1st of the fiscal year up until June 30th of the following year towards expenses or salary for Nursing or Leadership education.

Any surplus education funds not verified by the lottery winner for use by February 15<sup>th</sup> of the fiscal year shall be directed to Corporate HAC for the parties to determine the plan for use of such funds for education of ONA members prior to the end of the NHS fiscal year on March 31st or committed for use in the next fiscal year.

The Employer shall provide the Local Union with a list of employees who have exited the superior condition under Appendix 4, number 1. during the fiscal year and an accounting of the transfer of funds into the Education Fund based on the number of exits will be provided at the end of the fiscal year to the Bargaining Unit Executive.

The Employer shall provide to the Local Union quarterly reports of revenue and expenses of the Education Fund.

The course/workshop/seminar/conference must provide education that will increase knowledge and professional skills to enhance quality of care and services provided by nurses and approval will not be arbitrarily or unreasonably denied.

The parties will develop a process for the Expression of Interest and the Lottery, expense claims and providing proof of attendance at the education.

Expense claims made under this fund must meet the Broader Public Service (BPS) guidelines which include fairness, transparency, accountability and value for money.

If education is approved, salary replaced and the nurse has not attended the education, the salary replacement paid will be deducted from the pay of such RN on the next pay period.

The education fund will not be used to cover replacement costs of nurses backfilling nurses approved for the Education Fund.

## **ARTICLE A – RECOGNITION**

The Employer recognizes the Ontario Nurses' Association as the bargaining agent for all Registered and Graduate nurses employed by the Niagara Health System in a nursing capacity, save and except Coordinators, Supervisors, Infection Control Nurse, Occupational Health Nurses, Nurse Managers, Head Nurses, Program Managers, Professional Practice Leaders, Case Managers and persons above the rank of each of the foregoing classifications.

Effective April 26, 2011 for the purpose of clarity the Hospital and the Union agree that Occupational Health Nurse and Wellness Nurse classifications are included in the bargaining unit and the classification of Employee Health and Abilities Consultant is excluded from the bargaining unit.

## **ARTICLE B - MANAGEMENT RIGHTS**

B-1 The Association recognizes that the management of the Hospital and the direction of the working force are fixed exclusively in the Employer and shall remain solely with the Employer. The Association acknowledges that it is the exclusive function of the Employer to:

- (a) maintain order, discipline and efficiency;
- (b) hire, assign, retire, direct, promote, demote, classify, transfer, lay-off, recall, discipline, suspend or discharge nurses provided that a claim of discriminatory promotion, demotion or transfer or a claim that a nurse has been suspended, discharged or disciplined without reasonable cause may become the subject of a grievance and be dealt with as hereinafter provided;
- (c) determine, in the interest of efficient operation and the highest standard of service, job rating or classification, the hours of work, work assignments, methods of doing the work and the working establishment for any service;
- (d) generally to maintain the operation that the Employer is engaged in and without restricting the generality of the foregoing, to determine the number of personnel required, the service to be performed and the methods, procedure and equipment to be used in connection therewith;
- (e) develop, enforce and alter from time to time, reasonable rules and regulations to be observed by the nurses.

B-2 It is agreed that these rights shall be exercised in a reasonable and non-arbitrary manner that is consistent with the express provisions of this

Agreement and will result in the efficient and effective operations of the hospital.

## **ARTICLE C - REPRESENTATION & COMMITTEES**

C-1 There shall be one (1) Site Vice President for each site of the Niagara Health System. In the event of a vacancy at a site for a Site Vice President, the Bargaining Unit President shall notify the Employer of the name of the nurse responsible to cover or fill such vacancy.

### C-2 Nurse Representatives

There shall be twenty-four (24) nurse representatives from St. Catharines site; eleven (11) from Greater Niagara General site; eleven (11) from Welland Hospital site; two (2) nurse representatives from Douglas Memorial Hospital site, and three (3) representatives Port Colborne General site.

The Union will provide the employer in writing with the names of the representatives and the areas they represent.

### C-3 Grievance Committee

There shall be a Central Grievance Committee composed of the site Vice Presidents or Grievance Chairpersons and the Bargaining Unit President and there shall be a committee at each site composed of no more than two (2) Grievance committee representatives.

### C-4 Fiscal Advisory Committee

There shall be two (2) elected representatives plus the Bargaining Unit President on the Fiscal Advisory Committee. The Association can elect alternates should the elected representatives not be able to attend.

### C-5 Hospital/Association Committee

There shall be a Hospital/Association Committee at each Site of the Niagara Health System.

There shall be a Corporate Hospital/ Association Committee comprised of the VP from each of the sites of the NHS and the Bargaining Unit President.

### C-6 Negotiating Committee

There shall be a Negotiating Committee composed of up to nine (9) nurses and the Bargaining Unit President.

C-7 In the event that a representative is transferred from one area/site of representation to another area/site, such nurse shall continue to be recognized by the Employer as the representative of the area/site from which transferred for a period of one (1) month, for the purpose of handling any union business, except when transferred to a managerial position.

C-8 The interview of newly-hired nurse(s) as required by Article 5.06 will be granted at a time and place to be designated by the Employer. Such interview shall take place during the orientation period. The Employer will advise the Local Site Representative or their designate, of the date, time and location for such interview at least one (1) week in advance.

The Hospital shall also provide the Association with classification, date of hire and area assigned for each newly hired nurse.

If orientation does not take place within four (4) weeks of hiring, then the Association will be permitted to interview new hires during working hours.

C-9 Health & Safety Committee

In accordance with the Hospital Central Agreement Article 6.05 there will be a Health & Safety committee at each Site. The Employer shall recognize up to two (2) appointed ONA members per site as certified workers pursuant to the *Occupational Health And Safety Act*. When a regular member is unable to attend, a local site alternate will be appointed by the Union.

C-10 Scheduling Committee

There will be a Scheduling Committee comprised of up to three ONA bargaining unit representatives plus the Bargaining Unit President (or designate) and Employer Representatives. The ONA representatives shall be appointed by the Union. The committee shall meet once every 6 months or as called by the Co-Chairs. The employer will compensate up to four (4) ONA bargaining unit representatives (other than the Bargaining Unit President) for up to (4) hours spent in attendance at these meetings. The purpose of the committee shall be to discuss scheduling issues that are common to all sites and to discuss issues that can't be resolved by the process set out in F-1.

**ARTICLE D - LEAVE OF ABSENCE - ASSOCIATION BUSINESS**

D-1 The Employer shall grant unpaid Leaves of Absence to attend Union business. The aggregate total will be six hundred and seventy-five (675) days per year.

There shall be no more than twelve (12) nurses absent at one time from St. Catharines site, six (6) nurses absent at one time from Greater Niagara

General site, Welland Hospital site, and no more than two (2) nurses absent at any one time from Douglas Memorial Hospital site, Port Colborne General site.

In addition, there shall be the flexibility to provide for one (1) additional nurse to be absent from one of the following sites: Douglas Memorial Hospital site, or Port Colborne General site.

The Union will give at least fourteen (14) days notice except in extenuating circumstances.

Requests for such leave shall be made to the Employer two (2) weeks prior to the date of the leave of absence; however, such requests shall not be unreasonably denied.

Cancellation of Association leave of absence for Union business requires 24 hours notice to the Employer if the affected nurse is to be returned to their regular tour of duty. Failure to provide adequate notice to nurses affected by such change will not result in premium penalty to the Employer.

D-2

(a) A nurse elected or appointed as the Bargaining Unit President will, on written application to the Hospital, be granted a leave of absence for the term of their office. If the nurse was a part-time employee prior to becoming the Bargaining Unit President, they will be considered temporary full-time during the term of office. If the nurse was part-time prior to becoming the Bargaining Unit President, the nurse will receive vacation pay in accordance with Article 16.06 and Article K and the nurse shall be considered to be on unpaid vacation when taking time off for vacation purposes.

The nurse must take their full vacation entitlement off during the vacation year.

If the nurse was a full-time employee prior to becoming the Bargaining Unit President, they will continue to be considered full-time. The nurse must take their full vacation entitlement off during the vacation year. The nurse will accrue service and seniority as applicable. The Bargaining Unit President will be scheduled five (5) days per week, Monday to Friday day shift and will be paid 75 hours per pay period. The Union will reimburse the Employer for 37.5 hours per pay period plus the cost of benefits which include EHC, Dental, Accidental Death and Dismemberment HOOGLIP, HOODIP and LTD or percentage in lieu. It is understood that there shall be no premium payment incurred by the Hospital. The Hospital will bill the ONA local each month for the union's portion.

Upon completion of a nurse's term of office, they shall return to their former position and classification. If the nurse's position is

eliminated, the nurse shall participate in the layoff process, as set out in the collective agreement.

- (b) Where such application for full-time leave of absence has not been requested, the Bargaining Unit President may request to be scheduled to work Monday to Friday day shifts with weekends off for the term of their office unless otherwise mutually agreed. It is understood that there shall be no premium incurred as a result of this arrangement.
- (c) Where requested, the Site Vice-Presidents will be scheduled on day shifts, if possible. This shall not be unreasonably denied. It is understood that there shall be no premium payment incurred as a result of this arrangement.

## **ARTICLE E - ILLNESS**

E-1 A nurse must notify their immediate supervisor or designate on duty at least one and a half (1.5) hour prior to the commencement of their tour if on the day tour and at least six (6) hours if on the afternoon or night tours. It is understood that shifts commencing up to and including 1100 hours are considered day tours for the purpose of this provision. Unless a future return date or contact date has been established, it is the responsibility of the nurse to notify their supervisor or designate in accordance with the above before each and every missed shift unless the severity of the nurse's illness or injury prevents the nurse from making such call.

E-2 When returning to duty from illness or injury the nurse must notify their immediate supervisor or designate on duty of their return to duty at least six (6) hours before the start of an evening or night tour and by 1900 hours before the start of a day tour. A day shift is a shift that starts between 0500 and 1000 for the purposes of this provision.

Should the nurse report on duty without providing such notice, the replacement arrangement will hold.

E-3 Modified Work

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

- (a) The Hospital will advise the Bargaining Unit President with the names of:
  - i) Nurses for whom a WSIB Form #7 has been filed;
  - ii) Nurses that return from an absence due to WSIB;

- iii) Nurses who apply for LTD Benefits;
- iv) Nurses when they are approved for LTD benefits;
- v) Nurses who are on permanent accommodation;
- vi) Nurses who require permanent accommodation; and
- vii) Nurses who have filed incident reports for an injury a copy of which will be provided to the site representative.
- viii) Nurses for whom the Hospital has recommended/required a referral for a medical assessment for suitability of modified and/or return to work.

Reasonable requests for updated information with regards to all of the above will be provided to the Union upon request.

- (b) The Hospital agrees to provide the employee with a copy of the W.S.I.B. Form #7, and/or any other form at the same time as it is sent to the Board.
- (c) The Hospital agrees to inform the nurse in the event that it intends to dispute a claim of work related injury.
- (d) When it has been medically determined that an employee can return to work but is unable to return to the full duties of a nurse's position, the Employer will notify the union and provide appropriate documentation related to restrictions and job duties and meet with the representative of the Ontario Nurses' Association to facilitate a meaningful discussion to promote a successful return to suitable work.
- (e) The Employer and the Union recognize their joint responsibility to ensure that all parties are available for modified work meetings.
- (f) Filling a vacancy created by a nurse requiring a permanent accommodation does not remove the parties' duty to accommodate that employee preferably in their previous position.

## **ARTICLE F – SCHEDULING**

F-1 Staff from each unit will be involved in collaboration with management when scheduling issues arise. The Site Vice-President and/or Bargaining Unit President will be advised of such issues and will attend meetings if requested by the staff.

Any unresolved issues will be forwarded to the Scheduling Committee as per Article C-10.

F-2 The Employer will, in the formulation of working schedules, carry out the objectives set forth below:

## (a) (Full-time and Regular Part-time Only)

- i) Work schedules will be posted on the first day of the pay period a minimum of eight (8) weeks in advance inclusive of the current two (2) week pay period.
- ii) Schedules shall be posted as soon as possible on the day of the posting and a copy sent to the union upon request.
- iii) All Nurses shall be entitled to direct access to the following in relation to work schedules (electronic or otherwise);
  - 1. The posted work schedule
  - 2. The Master schedules
  - 3. Any changes to the posted schedule in real time
- iv) The designated ONA site Vice Presidents and the Bargaining Unit President shall have access and training if requested, to all of the following in relation to work schedules at all sites (electronic or otherwise)
  - 1. The posted work schedule
  - 2. The Master schedules
  - 3. Any changes to the posted schedule in real time
  - 4. Call Logs

In addition to the above the Hospital agrees to cooperate with the union by providing relevant information that is requested by the union for the purpose of ensuring compliance with the collective agreement.

Each Unit, except those where self-scheduling is done, will have a master schedule, with a copy provided to the Union, upon request.

- v) When a master schedule is amended, F-1 will apply.

## (b) (Full-time and Regular Part-time Only)

All nurses shall be scheduled two (2) out of four (4) weekends off.

A nurse will receive premium pay, as defined in Article 14.03 for all hours worked on a third consecutive and subsequent weekend, save and except where:

- i) Such a weekend has been worked by a nurse to satisfy specific days off requested by such nurse; or
- ii) Such nurse has submitted a written request for weekend work; or



iii) Such weekend is worked as a result of an exchange of shifts with another nurse.

(c) (Full-time and Regular Part-time Only)

For those nurses working 7.5 hour tours, in the case of changes in assigned shifts in accordance with the schedule, there will be an interval of no less than sixteen (16) hours off between tours, unless otherwise agreed or premium will be paid under Article 14.03 for those hours.

(d) (Full-time and Regular Part-time Only)

The Hospital will not schedule split tours except by mutual agreement.

(e) (Full-time and Regular Part-time Only)

A nurse will be scheduled four (4) days off in any two (2) week period unless mutually agreed.

(f) A nurse may exchange their scheduled tours of duty with another nurse provided the arrangement is submitted in writing, dated and signed and is approved by the immediate supervisor. Such requests shall not be unreasonably denied. Such changes in scheduled tours will not result in overtime premium.

(g) (Full-time and Regular Part-time Only)

The Employer will endeavour not to schedule a nurse more than six (6) consecutive days unless agreed to by the nurse. However, no nurse shall be scheduled more than seven (7) consecutive days without days off except by request of or agreement by the nurse. Where this is not done the Employer will pay the nurse premium pay as defined in Article 14.03 for each additional day until a day off is scheduled.

(h) (Full-time and Regular Part-time Only)

A nurse will be scheduled at least forty-eight (48) hours off following scheduled night shifts unless otherwise agreed to. Should a nurse be scheduled to work with less than forty eight (48) consecutive hours off following night shifts the nurse will be paid in accordance with Article 14.03 of the collective agreement.

(i) (Full-time and Regular Part-time Only)

Consideration for nurses from a particular nursing unit to request a schedule which accommodates specific requests from individual

nurses for days/evenings, days/nights, evening/nights, evenings or nights will be in accordance with Article F-1.

When a vacancy becomes established within a unit, a nurse within the unit may request, in writing, the shift combination so vacated. When in the opinion of the Employer, the ability of the nurse(s) applying is suitable; the unit seniority of the nurse shall be the deciding factor.

(j) (Full-time and Regular Part-time Only)

A weekend is defined as being fifty-six (56) hours off work during the period following the completion of the Friday evening shift and the beginning of the Monday day shift.

(k) (Full-time and Regular Part-time Only)

The Hospital will endeavour to equitably distribute shift work amongst nurses in a unit working the same shift rotation unless mutually agreeable.

(l) (Full-time and Regular Part-time Only)

The Hospital will endeavour to schedule nurses at least fifty percent (50%) of tours worked on the day shift except where the nurse chooses to work straight shifts, or a greater percentage of shifts.

(m) (Full-time and Regular Part-time Only)

A request form for scheduling will be available in order to allow nurses to put in requests, if applicable, for lieu time for statutory holidays, lieu time for overtime, shift exchanges and unscheduled vacation. Requests shall not be unreasonably denied and the Manager and/or their designate shall respond at the time of posting. Vacation requests that fall within the posted schedule will be approved or denied within seven (7) calendar days. Nurses denied approval shall have first right of refusal prior to approval being granted to new requests for the same date(s).

(n) (Full-time and Regular Part-time Only)

Individual lines on a master rotation shall not be changed without prior discussion between the nurse affected and their immediate supervisor. Where a nurse has complained to their Manager about a schedule and the Union requests a copy of the applicable schedule, the Manager shall provide a copy to the Union.

(o) (Full-time and Regular Part-time Only)

A Nurse will not be required to change tours more than twice in seven (7) days.

(p) (Full-time and Regular Part-time Only)

Employees who have been granted permanent evening or night tours will not be rotated except by mutual consent or in order to meet reasonable Hospital staffing requirements or to be assessed or instructed on day tours. Requests for permanent shifts will not be unreasonably denied.

F-3

(a) All nurses will receive at least five (5) consecutive days off, at either Christmas or New Year's, except in areas which normally are not scheduled to work on weekends or paid holidays. Time off at Christmas shall include from 0001 hours December 24<sup>th</sup> until 0700 hours on December 27<sup>th</sup> and time off at New Year's shall include from 0001 hours on December 31<sup>st</sup> until 0700 January 2<sup>nd</sup>, unless otherwise mutually agreed between the Hospital and the nurse.

The normal scheduling regulations may be waived between December 15<sup>th</sup> and January 10<sup>th</sup> to enable the Employer to schedule five (5) days off at either Christmas or New Year's. A Nurse shall not be scheduled to work more than their normal weekend commitment during this period if there are other Nurses who have not been scheduled to work their normal weekend commitment.

The Employer will provide a list by September 1<sup>st</sup> for Nurses to indicate their preference for Christmas and New Year's time off by October 1<sup>st</sup>. In the event of conflict in preferences indicated by nurses, the conflict will be resolved on the basis of applying:

- i) alternating time off at Christmas and New Year's yearly, and
- ii) seniority where i) above does not resolve the conflict.

Where it is possible to schedule nurses for both Christmas and New Year's off, such nurses will be offered such time according to seniority on a rotational basis from year to year.

The Employer will post the schedule with respect to time off at Christmas and New Year's by November 1<sup>st</sup>. Any errors will be corrected and additions will be made and the schedule will be reposted by November 10<sup>th</sup> without penalty.

(b) Nurses may elect to split shifts on a holiday by mutual consent.

(c) When sixty percent (60%) of the nurses on any unit wish to try an alternative scheduling arrangement for the Christmas/New Year's period, the Employer and the Union agree to meet with the nurses to discuss the arrangement.

F-4 A nurse shall be entitled to a fifteen minute relief period for each half (½) tour and a half (½) hour unpaid lunch away from the area.

If a nurse is recalled to the unit during their break, additional time shall be provided later in the tour. The two (2) relief periods may be combined into one (1) relief period with the approval of the Hospital.

F-5 Subject to the staffing exigencies of the unit, a nurse shall receive consideration in scheduling to allow them to pursue nursing/clinical course(s) to further their education, when the nurse:

- i) presents proof of registration in such course(s) when it becomes available;
- ii) such request shall not be unreasonably denied.

F-6 Four Hour Tours of Duty

In accordance with the Collective Agreement, the Employer and the Union agree to the scheduling of four (4) hour tours of duty for part-time nurses working in the Niagara Health System.

The scheduling of the four (4) hour tours shall comply with all of the scheduling provisions contained in the Local Issues Appendix.

A four (4) hour tour will consist of four (4) paid hours which shall be inclusive of one (1) fifteen (15) minute paid break period.

Where four (4) hour tours are scheduled, all available tours are divided equally amongst the regular part-time nurses scheduled for four (4) hour tours.

No nurse shall be scheduled to work solely on four (4) hour tours in any paid period, unless agreed to by the nurse.

The Employer will notify the Union and provide specifics of the proposed schedule prior to the posting of a four (4) hour tour schedule on any unit.

F-7 Where the Niagara Health System, in consultation with the Union, identifies prescheduled casual hours, these hours shall be posted as full time and/or regular part-time hours.

### EXTENDED TOURS

F-8 Extended tours shall be introduced into any unit when:

- (a) Seventy percent (70%) of the full-time and regular part-time nurses in the unit so indicate by secret ballot; and

- (b) The Hospital agrees to implement the extended tours. Such agreement shall not be withheld in an unreasonably arbitrary manner.
- (c) When less than seventy percent (70%) of the full-time and regular part-time nurses in a particular unit vote, as outlined in Article F-8 (a) in favour of extended tours by secret ballot, the Union may approach the Hospital and ask them to consider the implementation of a combination of extended and normal (7.50 hour) tours in a particular unit.

F-9 Extended tours may be discontinued in any unit when:

- (a) Seventy percent (70%) of the full-time and regular part-time nurses in the unit so indicate by secret ballot; or
- (b) The Hospital, in consultation with the Union, determines that
  - i) There is an adverse effect on patient care, or
  - ii) There is an inability to provide a workable staffing schedule,

and the Hospital states its intention to discontinue the extended tours in the schedule.

F-10 When notice of discontinuation is given by either party in accordance with F-9 above, then:

- (a) The parties shall meet within two (2) weeks of the giving of notice to review the request for discontinuation; and
- (b) Where it is determined that the extended tours or combination of extended tours and normal (7.50 hour) tours will be discontinued, affected nurses shall be given ten (10) weeks notice before the schedules are so amended.

F-11 Nurses shall receive two (2) out of four (4) weekends off, from the completion of the Friday day tour to the commencement of the Monday day tour.

F-12 A nurse will receive premium pay as defined in Article 14.03 for all hours worked on the third and subsequent consecutive weekend until a weekend is scheduled off, save and except where:

- (a) Such weekend has been worked by the nurse to satisfy specific days off required by such nurse; or
- (b) Such nurse has submitted in writing a request for weekend work; or

- (c) Such weekend is worked as the result of an exchange of shifts with another nurse.

F-13 In the event of an extended tour trial, such trial period shall be six (6) months, unless otherwise agreed. Such trial period may be terminated by either party upon at least ten (10) weeks written notice to the other.

F-14 No nurse shall be required to work more than three (3) consecutive extended tours unless mutually agreed between the nurse and the Employer. When the employer requires an employee to work a fourth (4<sup>th</sup>) or more consecutive extended tour, premium pay shall be paid for the fourth (4<sup>th</sup>) or more consecutive extended tour.

F-15 It is understood that the unpaid meal period may be away from the area.

- (a) (Applies to all nurses)

If a nurse is recalled to the unit during their break, additional time shall be provided later in the tour. The two (2) relief periods may be combined into one (1) relief period with the approval of the Hospital.

- (b) The Employer will, in the formulation of working schedules, carry out the objectives set forth below:

- i) Work schedules will be posted a minimum of eight (8) weeks in advance inclusive of the current two (2) week pay period.
- ii) Schedules shall be posted as soon as possible on the day of the posting and a copy sent to the Union upon request.
- iii) Each Unit, except those where self-scheduling is done, will have a master schedule, with a copy provided to the Union, upon request.
- iv) When a master schedule is amended, F-1 will apply.

- (c) Prior to altering the starting and finishing time in a unit, or introducing different shifts, the Bargaining Unit President shall be notified and the nurses in the unit consulted for inputting comments.

F-16 (Applies to all nurses)

A nurse may be permitted to exchange their scheduled hours of work with another nurse provided the arrangement is submitted in writing to and is approved by the Manager concerned.

F-17 A minimum of four (4) consecutive tours off shall be scheduled following scheduled night shifts unless otherwise agreed or premium will be paid under Article 14.03.

- F-18 Nurses working extended tours, who so request, shall be granted permanent night tours and will not be rotated except by mutual consent or in order to meet reasonable Hospital staffing requirements or to be assessed or instructed on day tours. Requests for permanent shifts will not be unreasonably denied.
- F-19 The Hospital will avoid scheduling of split tours unless mutually agreeable.

JOB SHARING (Full-time and Regular Part-time Only)

- F-20 The introduction of job sharing arrangements in a Unit will be subject to mutual agreement between the Union and the Hospital. The Parties shall not arbitrarily or unreasonably refuse to implement job sharing.

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

The employees involved in job sharing are entitled to all the terms of the part-time Collective Agreement except those which are modified as follows:

- (a) Schedules will conform with Articles F and K of the Collective Agreement which sets out scheduling.
- (b) Total hours worked by the job sharers shall equal one (1) full-time position. Job sharers will have the option of determining between themselves which partner will work on a scheduled tour; however, all scheduled tours must be covered. Such schedules will not be unilaterally imposed or changed by the Employer, but once the schedules are posted they will not be changed without the permission of the supervisor in the area concerned. Such permission will not be unreasonably withheld.
- (c) When one or both job sharers work over Christmas, neither can be required to work over New Year's, and vice versa unless mutually agreed otherwise.
- (d) Paid Holidays  
Job sharers will not be required to work, in total, more paid holidays than would one (1) full-time employee, unless mutually agreed otherwise.
- (e) Each job sharer may exchange shifts with their partner as well as other employees as provided by the Collective Agreement.
- (f) Coverage

- i) It is expected that both job sharers will cover each other's incidental illnesses, vacation and any short term leaves of up to thirty (30) days duration for tours which fall within the Job Share Master Schedule. Where the job sharers agree to cover for vacation, they will not be part of the vacation quota in their unit. If, because of unavoidable circumstances, one cannot cover the other, the unit supervisor must be notified. Job sharers are not required to cover for their partner in the case of prolonged or extended absences over thirty (30) days. Job sharers shall be offered additional unscheduled tours only if they have made their availability known. It is understood that they may only make themselves available on tours that would not result in premium payment or on shifts where their partner is not scheduled to work, unless requested by the employer and agreed to by the nurse, in which case both job share partners can submit additional availability.

- ii) Vacation, Maternity Leave and other Leaves pursuant to Article 11 of the Central Agreement:

In the event that one member of the job sharing arrangement goes on any of the above leaves of absence exceeding thirty (30) days, the remaining partner has the option of covering all of the absent partner's shifts for the duration of the absence. If the employee is unable to cover the entire leave of absence they must inform the manager in advance at least two (2) weeks prior to the leave commencing. Job sharers are not required to cover for their partner in the case of prolonged or extended absences exceeding thirty (30) days or Union leaves.

- (g) Implementation

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

- (h) An incumbent full-time employee wishing to share their position, may do so without having their half of the position posted provided the nurses' application for such has been approved by the Hospital. The other half of the job sharing position will be posted and selection will be made on the criteria set out in Article 10 of the Collective Agreement.
- (i) If one of the job sharers leaves the arrangement, the remaining nurse will have the option of continuing full-time in the position. If they decline this option, the vacant half of the Job Share line will be posted. If there is no successful applicant, the position will be posted



as a full-time position in accordance with Article 10.07 and the remaining nurse will revert to a regular Part time B position.

(j) Discontinuation

The Hospital or the Union may discontinue the job-sharing arrangement with 90 days' notice. Upon receipt of such notice a meeting shall be held between the parties to discuss the discontinuation. It is understood and agreed that such discontinuation shall not be unreasonable or arbitrary.

Should the job-sharing arrangement be discontinued the employees will revert to regular part-time "A" status.

### RPT Scheduling

F-21 A. RPT "A" nurses must be available to work in accordance with the master schedule which is regular and pre-determined. Such scheduling regulations will be in accordance with Article F, Hours of Work. Only where an RPT "A" nurse indicates interest in being scheduled greater than their commitment per pay at the time of posting through the submission of their availability calendar, the Hospital may schedule the nurse up to seventy-five (75) hours per pay on an equitable opportunity basis starting with seniority.

B. RPT "B" Availability

RPT "B" nurses must be available to work as follows:

- i) 44 weeks of the year including the month of December
- ii) Either the month of July or the month of August. No more than 50% of RPT "B" nurses may make themselves not available in any one month. If there is a conflict in the non-availability indicated by nurses, the conflict will be resolved on the basis of applying:
  - 1. Alternating July and August each year and on a rotational basis for other months.
  - 2. Seniority where 1. does not resolve the conflict.
- iii) A regular part-time B nurse may not be unavailable for more than 4 weeks in the period from June 15<sup>th</sup> to September 15<sup>th</sup> including unavailability in ii) above.
- iv) Available 2 out of 4 weekends.
- v) Available 45 hours/pay of which at least 50% must be shift.
- vi) Available for all extended tour shifts (11.25 hr) on extended tour units.
- vii) Consideration will be given to a preference for two out of three shifts on Regular tour (7.5hr) Master rotation units.

- viii) Available Christmas (Christmas Eve, Christmas Day, Boxing Day) or New Year's (New Year's Eve, New Year's Day, January 2) and three other paid holidays (as set out in Article H in conjunction with the weekend where applicable. If there is a conflict in non-availability indicated by the RPT nurses, the conflict will be resolved on the basis of applying:
  1. Alternating on a rotational basis
  2. Seniority where 1. does not resolve the conflict.
  
- C. If a RPT "B" nurse is unavailable for a period of one week or more, the nurse must submit this information to the employer, within the time frame of the vacation request process as outlined in Article K – Vacation. (for information purposes only). If a RPT "B" Nurses unavailability is submitted in accordance with this article F-21 C, the nurse will be considered to be unavailable for work and Article D i) will not apply to that period of unavailability.
  
- D. RPT "B" Scheduling
  - i) Scheduling of RPT "B" nurses will be done based on availability on an equitable basis starting with seniority per pay period.
  
  - ii) If all RPT "B's" on a given unit indicate non-availability for the same day or shift and have not met their commitment thus resulting in the Employer's inability to cover that shift, the shift will be offered to RPT "B" nurses in accordance with Article K and M below. If no RPT "B" is available to cover that shift, it will be offered to a CPT. If CPT are unable to cover, a RPT "B" nurse from that unit will be scheduled on a rotating basis based on reverse seniority.
  
- E. Only where an RPT "B" nurse indicates interest in being scheduled greater than forty-five (45) hours per pay at the time of posting through the submission of their availability calendar, the Hospital may schedule the nurse up to seventy-five (75) hours per pay on an equitable opportunity basis starting with seniority.
  
- F. After the schedule has been posted, the nurse will have no obligations to availability except as scheduled. All changes to availability submitted at least three (3) weeks in advance of the posting of the schedule shall be considered by the hospital in the nurses work schedule.

#### Additional Shift Scheduling

- G. RPT "B" nurses, who are scheduled for less than 45 hours per pay on the unit, will be offered additional shifts based on availability and

on an equitable opportunity basis starting with seniority, up to 45 hours per pay.

- H. Remaining shifts after G above will be offered to RPT nurses within the unit, followed by RPT nurses at the site and then RPT nurses at all sites who are qualified to perform the work, who have indicated availability for additional shifts on that unit. Shifts will be offered based on availability, on an equitable opportunity basis starting with seniority.
- I. This agreement applies to RPT nurses in job sharing positions; however, the scheduling procedure is limited to the restrictions set out in Article F-20, Job Sharing. A Job Sharer may be scheduled to work additional shifts only when their Job Share partner is not scheduled to work. Any last minute call-in for a Job Sharer is permitted.
- J. Remaining shifts after H above will be offered to CPT nurses within the unit, followed by CPT nurses at the site and then CPT nurses at all sites who are qualified to perform the work, who have indicated availability for additional shifts on that unit. Shifts will be offered based on availability, on an equitable opportunity basis starting with seniority.
- K. It is understood that the Hospital will not be required to offer tours, which would result in overtime premium pay.
- L. Where a CPT Nurse is awarded a temporary vacancy, such nurse shall be covered by all of the scheduling regulations and premiums in accordance with the provisions related to the vacancy that they have been awarded. All other benefit entitlements will remain unchanged.
- M. A refused shift where a nurse has indicated availability is deemed to be an offer of work.
- N. A shift will be deemed to be offered whenever a call is placed.
- O. If a nurse has not indicated their availability in the manner prescribed by the Hospital, they shall be deemed to be available for all shifts during the period up to forty-five (45) hours.

F-22 For the purpose of Article 14.10 of the collective agreement only, the evening shift shall be defined as hours worked between 1500 hours and 2300 hours, the night shift shall be defined as hours worked between 2300 hours and 0700 hours.

F-23 Four (4) on five (5) off scheduling arrangement ("The Schedule") for FULL-TIME only

1. A four (4) on five (5) off schedule shall consist of four (4) consecutive scheduled 11.25 hours shifts followed by five (5) consecutive days off except:
  - i) Where mutually agreed in order to establish a workable master rotation; and
  - ii) Where a Nurse is required to pick up a shift (s) for the purpose of ensuring that they have 1950 pensionable hours in the calendar year.
2. A four (4) on five (5) off schedule may be introduced in areas of the Hospital for a six (6) month trial period. A secret ballot will be conducted by the Union and such trial will be implemented where seventy-five percent (75%) of the nurses in any unit indicate their willingness to work such a "schedule".
3. Prior to voting for a six (6) month trial period, the proposed schedule shall be made available for the nurses to view for a mutually agreeable time frame.
4. Following the six (6) month trial period, a secret ballot will be conducted by the Union and where seventy-five percent (75%) of the nurses affected by "the schedule" indicate a desire to continue "the schedule", "the schedule" may be adopted on a permanent basis. Nurses working on the unit prior to the initial vote who indicate a desire to continue a schedule other than this four (4) on five (5) off schedule, shall be provided a master line outside of this four (4) on five (5) off schedule.
5. If a vacancy occurs in the four (4) on five (5) off schedule or a traditional schedule, the line will first be offered to the present full-time or Job Sharers requesting the schedule change, in writing, in order of seniority prior to offering the line to new nurses or nurses transferring into the unit.
6. Scheduling
  - i) Will be scheduled nineteen hundred and fifty (1950) pensionable hours per calendar year. In order to schedule 1950 hours per calendar year, the Nurses must work additional shifts ("pick up shifts") at their regular straight time hourly rates to fulfil the required hours, or use paid holiday lieu time, banked lieu time or vacation time for such additional shifts. Nurses are responsible for calculating their own hours for the year and determining whether additional shifts must be picked up in order to bring the nurse as close to 1950 hours as possible in the payroll year. Pickup shifts

must be approved by the manager prior to the schedule being posted. It is understood that additional shifts will not incur overtime. It is understood that each nurse will pick up a minimum of fifty (50) percent evening or night shifts.

- ii) Requests and agreements for scheduling of pick up shifts will be clearly identified and agreed in writing between the Nurse and the Manager, or designate. Pick up shifts will be identified clearly on the schedule as such.
  - iii) The scheduling provisions of F-1, F-2 (a), (f), (h), (j), (l), (m), (n), (o), (p), and F-3, F-4, F-5, F-6, F-15, F-16, F-18, F19, F-20 are applicable to this scheduling arrangement.
  - iv) With the exception of Job Share Nurses, who share a full time scheduling line and are included in the full time master rotation, none of the provisions of this agreement shall be applicable to part time or casual nurses unless they have been awarded and are filling a posted temporary full time vacancy of a nurse working this schedule.
7. A Full Time nurse will not be required to work more than four (4) consecutive extended tours. Premium pay will be paid for all hours worked on a fifth (5th) tour and all subsequent tours in accordance with Article 14.03, until a nurse receives a day off.
  8. Full-time nurses will not be scheduled to work more than three (3) consecutive weekends in a row. Weekend scheduling will be in accordance with the agreed upon schedules. The schedules for each unit shall be attached to and form part of this agreement. Premium pay will be paid for all hours worked on a fourth (4th) consecutive and one subsequent consecutive weekend worked except as provided for in the exception under Article F-12, or except as specifically noted on the particular unit's Master schedule in order to establish a working and balanced schedule.
  9. The Hospital shall endeavour to provide at least five (5) consecutive days off at Christmas / New Years in accordance with the provisions of Article F-3 of the agreement. The Christmas / New Years schedule will be developed by the Nurses on the unit and submitted to the manager no later than October 1. The Employer will post the schedule with respect to time off at Christmas and New Year's by November 1. Nurses can also exchange shifts, to facilitate this; however no additional costs are to be incurred by the Employer as a result of shift exchange or as a result of scheduling five (5) consecutive days off. Shift exchanges must be pre-approved in writing by the manager. Any disputes arising from the Christmas / New Years scheduling will be referred to the scheduling

committee for review prior to the posting of the schedule, in accordance with Article F-1 of the agreement.

10. Discontinuation

- A) "The schedule" may be discontinued when:
- (i) Fifty percent (50%) of the nurses working "the schedule" so indicate by secret ballot; or
  - (ii) Where the Hospital determines that factors such as:
    - (1) Adverse effects on patient care;
    - (2) Inability to provide a workable staffing schedule prevent the continuation of "the schedule" and states its intention to discontinue "the schedule"; or
  - (iii) Where the Hospital wishes to do so for other valid reasons which are neither unreasonable nor arbitrary and so states its intention to discontinue "the schedule."
- B) Where it is determined that "the schedule" will be discontinued, the affected nurses shall be given sixty (60) days' notice, or such longer period of time as agreed to by the parties, before the schedules are so amended.

**ARTICLE G - STANDBY**

- G-1 (a) In accordance with Article 14.07, on-call staff will receive the standby pay for each hour of on-call duty, outside of regular working hours. When called in from standby, on-call will be paid in accordance with Article 14.06, or 14.04 as applicable.
- (b) The Employer will notify the Bargaining Unit President or designate prior to initiating ongoing standby assignments on any unit.
- (c) Scheduled standby assignments will be distributed as equitably as possible amongst the nurses in any unit utilizing standby.
- G-2 Standby assignments shall be posted at the same time as the tours of duty schedules. Nurses shall be permitted to exchange their standby assignments.
- G-3 (a) Except in the OR/Recovery Room units or Endoscopy, where nurses are not scheduled to work weekends, nurses will not be scheduled for standby on a scheduled day off or scheduled on a weekend off, unless mutually agreed between the nurse and the Employer.

(b) If a nurse is scheduled for standby on a weekend and is called into work, they are considered to be “working” the weekend.

- G-4 Nurses scheduled for standby shall be provided with pagers.
- G-5 The Employer will endeavour to make available a room for nurses scheduled for standby.
- G-6 Vacant standby assignments that become available after the schedule is posted will be offered to all nurses qualified to perform the work. Standby will not be reassigned without consultation with the Nurse whose schedule is being changed. Should standby be reassigned to a nurse, that nurse will have the option to have an existing standby assignment removed from their schedule.
- G-7 Standby scheduled will not be reassigned without consultation with the Nurse whose schedule is being changed. The Employer shall endeavour to first solicit volunteers to agree to take standby before reassigning a standby shift.
- G-8 Standby will not be scheduled on a night before a scheduled day shift unless otherwise agreed to by the nurse.
- G-9 Where a nurse has been assigned standby and continues to work or is called back after 2400 hours, such nurse will be allowed leave without loss of earnings until they have eight (8) hours off unless they do so by mutual agreement between the nurse and the Employer.

**ARTICLE H - PAID HOLIDAYS**

H-1 The following shall be recognized as paid holidays:

- |                                    |                  |
|------------------------------------|------------------|
| New Year’s Day                     | Civic Holiday    |
| Family Day                         | Labour Day       |
| Good Friday                        | Thanksgiving Day |
| Easter Sunday                      | Remembrance Day  |
| Victoria Day                       | Christmas Day    |
| Canada Day (July 1 <sup>st</sup> ) | Boxing Day       |

H-2 (Full-time Only)

Lieu days shall be granted and scheduled at a mutually agreeable time. Such day must be taken within ninety (90) days after the holiday, except in units that have closure dates, or payment will be made in accordance with Article 15.03. If the reason the day is not taken is due to staffing requirements, this time frame will be extended by mutual agreement.

Nurses who work extended tours may bank three (3) 7.5 hour stats and use these to take two extended shifts off.

H-3 (Full-time and Regular Part-time Only)

When an employee is scheduled off on a paid holiday which occurs on a Monday or a Friday, the Hospital will endeavour to schedule the employee off the Saturday and Sunday in conjunction with such holiday. When an employee is scheduled to work on a paid holiday which occurs on a Monday or a Friday, the Hospital will endeavour to schedule the employee to work the Saturday and Sunday.

H-4 (Full-time Only)

If any of the above mentioned holidays occur on a full-time employee's day off or during an employee's vacation, another day off in lieu thereof will be granted as agreed upon by the employee and their immediate supervisor except as amended by Article 13.03, 13.04 and Letters of Understanding for innovative and Weekend Scheduling.

**ARTICLE I - PREMIUM PAYMENT/OVERTIME**

I-1 The Hospital is not required to offer an opportunity to work overtime hours on the same shift that a nurse has previously rejected an opportunity to work or if weekend premium is triggered.

When full shifts on a unit, that incur overtime payment are offered, they will be offered, by seniority

- i) first to full-time nurses on that unit on a rotating basis,
- ii) then to TFT/RPT/JS nurses whose home unit is where the shift is being offered on a rotating basis for those nurses who have made their availability know.
- iii) then to casuals whose home unit is where the shift is being offered.
- iv) Nurses shall have the opportunity to indicate, in writing, their availability for shifts in units other than their home unit.

When additional hours that are contiguous to a shift, that incur overtime payment are offered, they will be offered in the same order as above to those Nurses working that shift.

I-2 (Full-time and Regular Part-Time)

Entitlement for all nurses to lieu time as provided for in Article 14.09 shall be scheduled at a mutually acceptable time but in any event shall be taken



within a period of one hundred and eighty (180) days unless mutually agreed.

- (i) A maximum of 75 hours lieu time may be held in their lieu bank at any one time. At the discretion of the Hospital, the lieu bank may be paid out after one hundred and eighty (180) days.
- (ii) In units which have closure dates or slowdowns the Nurses shall be entitled to bank up to 150 hours which may be used during the closure (s) or shut down (s). At the discretion of the Hospital, the lieu bank may be paid out after one hundred and eighty (180) days.

I-3 The hospital is not required to offer an opportunity to work overtime hours if such offer results in the nurses working more than five (5) consecutive extended tours.

## **ARTICLE J - MISCELLANEOUS**

J -1 The Hospital shall provide a locked bulletin board at each site in a centrally visible place mutually determined by the Union and the Hospital for the posting of Union business. A small space will be provided on the bulletin board on each unit with mutual agreement of the Employer and the Union. The Union will endeavour to have all such notices signed by the site administrator or designate prior to posting.

J-2 Payroll Policies (Full-Time and Part-Time)

- (a) Pay will be deposited directly into the nurses' bank account on every second Thursday but may be delayed until Friday due to circumstances beyond the reasonable control of the Hospital. Each nurse will be provided with an itemized statement of their wages, deductions and premiums.
- (b) Any earnings omitted on a pay of \$100 or greater which is not caused by a nurse coding improperly, shall be paid to the nurse, if requested, within three (3) working days from the time of issuance of the pay or notification by the nurse an error has been made.
- (c) The parties agree the Hospital is permitted to withhold or deduct from an employee's wages any over payment or under contributions of deductions in the amount of 15% of the total owing until such time that the total has been exhausted. The Hospital will notify such employee and the Union of the total amount owed and the amount of the intended deductions two (2) weeks in advance of the pay period in which such deductions will commence. Should the fifteen (15) percent repayment prove to be a hardship for the employee, alternate repayments may be arranged. Should there be any dispute over the right of the employer to deduct the monies or the amount of

the deductions, the nurse or the union shall advise the employer of such dispute and a meeting will be held. In such cases the employer shall not make any deductions until the matter is resolved and the employee signs an authorization for the deduction.

J-3 On the request of the nurse, the Employer will provide each nurse, on termination of employment, with a signed statement indicating the following:

1. Term of Employment - start and termination dates and hours worked;
2. Current Grid Level and Hourly Rate;
3. Areas of Assignment.

J-4 Prepaid Leave Plan (as outlined in Article 11.11)

On September 1<sup>st</sup> of each year or such other time as mutually agreed between the nurse and Hospital, the Hospital will allow a nurse to enter the pre-paid leave plan as outlined in Article 11.11. A nurse wishing to enter the plan will submit their written request to the Site Administrator or designate.

The maximum number of nurses that may be absent at any one time is three (3) from Welland Hospital site, Greater Niagara General site and St. Catharines site, one (1) from Niagara-on-the-Lake site, Port Colborne General Hospital site and Douglas Memorial Hospital site, with no more than one (1) nurse absent from any one nursing unit.

J-5 The Employer shall notify the Union in writing of the name of Employer representatives and/or committee members and the managers and where they may be located as well as the effective date of their respective appointments.

J-6 Reassignment of Staff in accordance with Article 10.07 (h) and 10.08 (a)

The parties agree that the need to ensure safe, quality care on both the sending and receiving area will be the primary consideration in all reassignment decision making.

- (a) Where reassignment is necessary, Registered Nurses will first be reassigned from units that are over staffed. Reassignment will be done on a rotational basis, starting with the least senior, in reverse order of seniority. The rotational wheel will be reset every year on January 1.
- (b) Reassignment is subject to ensuring that the nurses remaining on the unit are qualified to perform the available work. The Hospital will, in meaningful consultation, with the Nurse, make the determination

of whether or not the nurse required to be reassigned is qualified to perform the available work.

In the absence of the Clinical Manager, the charge nurse shall be responsible for designating the nurse to be transferred in accordance with the above.

- (c) Reassignment shall be done as follows:
- (i) Nurses working on the unit on the shift will be asked for a volunteer to be reassigned and the most senior volunteer will be reassigned.
  - (ii) Where there are no volunteers agency staff will be reassigned and then, the least senior casual Nurse working on the unit on the shift will be reassigned.
  - (iii) Where there are no casual employees, the least senior (FT or PT combined) Nurse working on the unit on the shift will be reassigned.

All Nursing units shall keep a log of the re-assignment activity for this purpose.

- (d) The reassigned nurse will identify to the Team Leader/Charge Nurse their experience and needs in relation to duties required on the receiving unit. The Team Leader/Charge Nurse on the receiving unit will provide an appropriate assignment to the nurse, and familiarize the reassigned nurse to the general functioning on the unit and will act as or assign a resource to the reassigned employee.
- (e) It is understood that the following nurses will not be reassigned:
- i) A nurse who is actively mentoring or being mentored in accordance with Article 9.08
  - ii) A nurse assigned as a Charge or Resource Nurse
  - iii) A nurse who is in their probationary period as per Article (10.01a)
  - iv) A nurse who is currently engaged in a return to work plan
- (f) A nurse is reassigned during their orientation on their home unit shall not suffer any reduction in orientation hours.

J-7

If the Hospital knows in advance that a nurse will be transferred to a different unit on reporting to work, the Hospital will endeavour to contact the nurse prior to reporting.

- J-8 The employer agrees that with future permanent transfer of programs or services, the Union will be provided with ninety (90) days' notice.
- The nurses affected will be orientated to any relevant differences between the sites.
- J-9 After commencing their shift and where the employee is required by the employer to go to another site to perform the duties of their classification, the employee will receive mileage between the sites from the employer at a rate established by Corporate policy or \$.30 per kilometre whichever is greater or the employer will provide transportation to nurses who do not have their own means of transportation.
- J-10 Each nurse holds one position in the NHS as per the seniority list. The seniority list shall include the part-time nurses classification as a RPT A, B, Job Share or Casual.

**ARTICLE K – VACATION** (Full-time and Regular Part-time Only)

- K-1 Vacation may be taken in weeks, single days or multiples thereof. The employer will consider on a case by case basis requests by nurses for vacation in hours based on a minimum four (4) hour timeframe for professional development or occasional personal needs. These requests shall not be unreasonably denied. It is understood that a vacation week coincides with the nurses' scheduled work week.
- K-2 Full-time and regular part-time A vacation quotas shall be separate. Vacation quotas shall be established by the Hospital. Vacation quotas shall not be unduly restrictive. The minimum vacation quotas for each unit shall be established to ensure that all employees who are entitled to Vacation time off have the opportunity to take all of their vacation entitlement within the vacation year. Vacation quotas will be re-assessed annually prior to the summer vacation request process.
- K-3 (Full-time and Regular Part-time Only)
- From June 15<sup>th</sup> to September 15<sup>th</sup> no more than three (3) weeks will be granted to any one (1) individual nurse. The Hospital may grant more than three (3) weeks to the individual nurse in extenuating circumstances or where vacation quota has not been met. The weeks including June 15<sup>th</sup> and September 15<sup>th</sup> will be considered prime time weeks.
- K-4 Vacation may not be taken between December 15<sup>th</sup> and January 10<sup>th</sup>. Vacation during this period may be permitted on an exception basis based on the operational needs of the Hospital.
- K-5 Part-time nurses transferring to full-time status will be given the option of having their vacation paid out in cash at the time of transfer or converting to

accumulated vacation days to be taken in accordance with the provisions of this agreement.

K-6 Regular part-time A and B nurses shall be considered part of the regular part-time vacation quotas while working in temporary full-time positions.

K-7 Vacation pay for part-time and casual nurses shall be paid out on the first pay day in August of each year.

K-8 Vacation Request Process

In scheduling vacations in each unit or area, requests for vacation by nurses performing similar duties shall be given consideration by seniority provided that they indicated their preference(s) as follows:

For the purposes of clarity requests for partial weeks or single days of vacation shall be considered a week for the Pre-approved Request for Vacation Process which occurs twice per year. For the twice a year pick a nurse will have priority picking according to seniority for the number of weeks of their vacation entitlement for that given year commencing with the summer period.

#### Summer Period

For the vacation period July 1 to December 15 of each year the manager will post a vacation request sheet no later than November 30 of the previous year. This request sheet will remain posted until the following January 1. The senior half of the staff in each unit or area must submit their request for vacation no later than 1500 hours on December 15. The junior half of the staff in each unit or area must submit their request for vacation no later than 1500 hours on January 1. The manager will post the approved vacation list by the following February 1.

NB: Prime Time - From June 15<sup>th</sup> to September 15<sup>th</sup> no more than three (3) weeks will be granted to any one (1) individual nurse (Article K-4). The weeks including June 15<sup>th</sup> and September 15<sup>th</sup> will be considered prime time weeks.

#### Winter Period

For the vacation period January 10 to June 30 of each year the manager will post a vacation request sheet no later than August 1 of the previous year. This request sheet will remain posted until the following September 1. The senior half of the staff in each unit or area must submit their request for vacation no later than 1500 hours on August 15. The junior half of the staff in each unit or area must submit their request for vacation no later than 1500 hours on September 1. The manager will post the approved vacation list by the following October 1.

Requests for vacation outside of the above noted time periods must be submitted by the nurse, in writing, to their manager, and the manager will

respond. These requests will be considered on a “first come, first served” basis, and shall not be unreasonably denied. Requests will be either denied or approved by the Manager and/or their designate in accordance with Article F-2 (m) within seven (7) calendar days. The Employer will consider granting the request based on operational needs.

The above process applies to full time and regular part time “A” nurses.

Note: Regular part time “B” nurses must submit, in writing, to their clinical manager periods of non-availability of one week or more within the time frames described above. For reference purposes, a RPT "B" nurse's non-availability periods are outlined within the Memorandum of Agreement entitled "Regarding RPT Scheduling", set out in the Local Appendix of the collective agreement. Failure to submit a period of non-availability within the time frames described above will be construed as being available. If a nurse has not submitted their unavailability in the manner described above, they shall be considered to be available for all shifts.

The parties agree that the above noted process will be implemented beginning the winter request period of the year 2008.

*Revised February 12th, 2014*

#### **ARTICLE L - SENIORITY**

- L-1 A copy of the Full-Time and Part-Time nurses seniority list shall be filed with the Site Vice President and Bargaining Unit President and posted by the first (1<sup>st</sup>) Monday in June and by the first (1<sup>st</sup>) Monday in December of each year.

#### **ARTICLE M – EDUCATION (Full-time and Regular Part-time)**

- M-1 The Employer in reference to Article 9.07 will endeavour to provide a nurse with as much notice as possible of mandatory inservice or education and the Employer will make every attempt to co-ordinate and schedule such sessions in a way that provides a number of different inservices as well as options on a number of dates.

## **ARTICLE N – VIOLENCE IN THE WORKPLACE**

N-1 The Employer and Association agree that no form of verbal, physical, sexual, racial or other abuse of nurses will be condoned in the workplace. The Employer shall post “No Tolerance” signs at all Hospital and Unit entrances. Any nurse who believes the situation to be abusive or witnesses exhibitions of violent behaviour, shall report this to the immediate supervisor and complete an IRS. The Supervisor will make every reasonable effort to rectify the abusive situation and evaluate if a safety plan is needed. When necessary or when requested, a safety plan will be formulated and implemented for the affected staff.

The Hospital agrees that, it will take all necessary steps to ensure that there is an adequate level of resources available under Hospital Policy.

The Hospital shall endeavour to notify the Union within twenty-four (24) hours of the incident coming to the attention of the immediate supervisor of any nurse who has been assaulted while performing their work. The assaulted nurse may choose to have their name remain confidential. Such information shall be provided to the Union in writing as soon as possible. Updated statistics on numbers of staff assaulted while performing work will be brought to each meeting of the Joint Health and Safety Committee.

When a nurse, in the exercise of their functions, suffers damage to their personal belongings (clothing, watch, glasses, contact lenses or other prosthesis, etc.), the Employer shall provide for replacement or repair at no cost to the nurse. The nurse will endeavour to present their claim to the Employer within seven (7) days after the event, unless it was impossible for them to do so during this period.

The Employer shall ensure that any nurse involved in an abusive/violent/traumatic situation will be provided with a debriefing session and, if required, will be accommodated.

### **VIOLENCE PREVENTION**

The Employer, the Union and nurses recognize their obligations under the *Occupational Health and Safety Act*, to take every precaution reasonable to protect workers, regarding the risk of workplace violence from a person with a history of violent behaviour.

The Employer has and will maintain policies and procedures that support a violence prevention program to minimize the risk of violence or potential for violence from patients, visitors/family members or any person in the workplace.

The parties including a certified ONA representative from the Joint Health & Safety Committee shall meet to develop a roll-out plan to ensure all ONA

members are aware of the violence prevention program including the following existing policies and procedures:

- Flagging Alert and Visible Warning System
- Code White and/or Staff Duress/Panic Alarms
- Family Member/Visitor Violence
- Code of Conduct

Roll-out plan will include staff meetings, huddles, safety videos, e-mails to staff, and rounding.

Safe management Group training will continue to be available to all ONA members.

In addition, all ONA members are required to complete the Violence Prevention & Code White Training Module by December 31<sup>st</sup> each year. Compliance will be reported to each Joint Health & Safety Committee annually in January.

Signed at St. Catharines, Ontario, this 4<sup>th</sup> day of April, 2024.

FOR THE EMPLOYER

FOR THE UNION

"Fiona Peaceful"

"Tom Szuty"

Labour Relations Officer

"Sarah Barnett"

"Loretta Tirabassi-Olinski"

"Lynn Guerriero"

"Cheryl Hayes"

"Mike Flook"

"Judy L Dean"

"Amanda Basilone"

"Christina DiMario"

"Stef Irish"

"Danielle DenBak"

"Kevin Wylie"

"Susan DiMaurizio"

"Julie Sherk"

"Elizabeth Audibert"

"Toni Rogers"

"Wendy Teminski"

"Natalie Ferraro"

\_\_\_\_\_

"Elayn Young"

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## LETTER OF UNDERSTANDING

### RE: Self-Scheduling

In accordance with Article 13.03 of the Collective Agreement, the Parties may wish to implement Self-Scheduling to achieve a scheduling practice that offers the benefit of Self-Scheduling to staff, in addition to satisfactory and efficient staffing coverage to the Hospital.

The Parties agree to enter into a Self-Scheduling Program on the following conditions:

- (1) Self-Scheduling may be cancelled at any time by either party, by giving forty (40) days written notice to the other party, of its desire to terminate this agreement.
- (2) The Employer will not be required to pay overtime rates for any hours worked by a nurse in excess of the normal hours, where such excess hours are made necessary only to accommodate the transition to or from the Self-Scheduling. Similarly, no penalty or premium payments referred to in Article 14.03 resulting directly from the transition to or from the Self-Scheduling will be paid.
- (3) Any and all conditions and terms of the Collective Agreement, Appendices, and Letters of Understanding between the Hospital and Association shall remain in full force and effect except as amended by this Letter of Understanding.
- (4) With the introduction of Self-Scheduling, all Regular Part-time Nurses shall be considered RPT "B" Nurses and the Memorandum of Agreement Regarding RPT Scheduling will apply.
- (5) Charge Nurses will not be included in the Self-Scheduling process. However, where the parties agree that Charge Nurses in a particular unit may Self-schedule, their selection of shifts will be separate from and prior to the other Self-schedulers, and shifts requiring replacement will be dropped to the unit pick.
- (6) Self-Scheduling is viewed by the Employer as scheduling by nurses' request and Articles F will apply. It is essential that Self-Scheduling does not result in additional costs to the Employer. The selection of tours shall be made in accordance with departmental needs.
- (7) The effects of Self-Scheduling will be closely monitored and feedback from participants will be sought through regular contact and/or meeting to ensure a continued smooth and efficient Self-Scheduling process.
- (8) For the purpose of Article 13.02 the normal working schedule will be six (6) weeks. Full-time Nurses will be required to schedule themselves for two hundred and twenty five (225) hours and Part-time Nurses will be required

to select a minimum of one hundred and thirty five (135) hours during the six (6) week schedule, provided the hours are available.

- (9) For the purpose of Article 13.02 the normal tour for Nurses covered by this agreement may be eleven & one quarter (11.25) or seven & one-half (7.50) hours (exclusive of meal time), or a combination thereof, as determined by the Hospital and Association on a Unit basis. Part-time nurses may elect to work part tours.
- (10) Regular Part-time Nurses will be required to select a minimum of ninety (90) hours in a four (4) week posting period, provided the hours are available.
- (11) Full-time and Regular Part-time Nurses must work a minimum of fifty percent (50%) shift, where such shift is available, unless they desire to work permanent shift. Permanent night shift is permissible provided that the Nurse on permanent shift works the day tour every four (4) months for three (3) 7.5 hour days or two (2) 11.25 hour days when the Clinical Manager is scheduled to work.
- (12) Full-time scheduling lines must indicate a minimum of 22.5 hours worked in any week(s) not approved for vacation.
- (13) The Nurse, when Self-scheduling will ensure a period of at least two (2) seven and one-half (7.5) tours off between a change of tours and at least six (6) seven and one-half (7.5) hour tours off when changing from night tour to another tour of duty. A shorter period of time may be agreed upon by mutual consent between the nurse and the Hospital. Where a nurse is not Self-scheduling safely, or is consistently waiving the scheduling premiums either party may require the nurse to cease the practice of scheduling shorter periods of time off.
- (14) No Nurse shall be scheduled more than three (3) consecutive extended tours unless mutually agreed between the Nurse and the Employer.
- (15) Notwithstanding thirteen (13) above, no nurse shall schedule themselves or be scheduled for more than four (4) consecutive extended tours or forty-five (45) hours without a day off.
- (16) Full-time and Regular Part-time Nurses shall schedule two (2) out of four (4) weekends off in each four (4) week scheduling period. A weekend is defined as being fifty-six (56) hours off work during the period following the completion of the Friday evening shift and the beginning of the Monday day shift. Where a nurse schedules less than 2 out of 4 weekends off, the premium pay for all self scheduled hours worked on a 3<sup>rd</sup> and any subsequent weekend(s) under F-12 shall not apply.
- (17) When Self-scheduling a weekend worked and selecting day shifts, a Nurse shall work Friday, Saturday and Sunday or Saturday, Sunday and Monday unless otherwise mutually agreed between the Hospital and the Nurse.

When selecting night shifts the Nurse shall work the actual Friday night, Saturday night, and Sunday night unless otherwise mutually agreed between the Hospital and the Nurse.

If a Nurse is called in and works on a weekend in conjunction with two (2) or more consecutive self-scheduled weekends, the Nurse shall only be entitled to third and subsequent weekend premium pay to a maximum of one (1) third/subsequent weekend.

Article F-2(b) applies where switches occur on a weekend.

- (18) Nurses who are scheduled to work on a Holiday weekend will be given the first opportunity to work on the actual day of the Holiday.

Credit for "stat worked" for a holiday weekend of nights is applied to the shift containing the seven hours of holiday pay.

For the purpose of credit for a "stat worked", Good Friday and Easter Sunday are considered one stat.

- (19) Priority groups shall be randomly selected based on the total number of nurses to Self-schedule and will rotate the opportunity for first choice on the basis of the rotation of Full-time groups first, then the Regular Part-time groups, then the Casual Part-time groups. Job Sharers are included in the Full-time groups.

- (20) It is understood that Full-time nurses and Regular Part-time nurses who have scheduled themselves to work either Christmas or New Year's will be required to schedule themselves to work as follows:
- a) Christmas on Days or Evening: December 24, 25, 26.
  - b) Christmas on Nights: December 23, 24, 25.
  - c) New Year's on Days or Evening: December 31, January 1, 2
  - d) New Year's on Nights: December 30, 31 and January 1

All nurses will receive at least five (5) consecutive days off, at either Christmas or New Year's, except in areas which normally are not scheduled to work on weekends or paid holidays.

The normal scheduling regulations may be waived between December 15<sup>th</sup> and January 10<sup>th</sup> to enable nurses to be scheduled five (5) days off at either Christmas or New Year's.

- (21) Designated Holidays or lieu days will be scheduled on seven and one-half (7.5) hour tours and will be paid on the basis of seven and one-half (7.5) hour tours.

- (22) Process for Self-Scheduling

- (a)
  - i) Self-scheduling may be introduced into any unit when seventy percent (70%) of the combined full-time and regular part-time employees permanently assigned to the unit so indicate by secret ballot, and; all categories of staff must participate in self scheduling.
  - ii) The secret ballot vote will be conducted, at no cost to the Hospital, by the Union. The result of the vote will be determined on the basis of votes cast, not including spoiled ballots. The Union will post the result of the vote.
- (b) The secret ballot referred to above shall not take place unless six (6) months has elapsed from the day of any previous vote.
- (c) Self-scheduling may be discontinued or changed in any unit when:
  - i) Sixty percent (60%) of the combined full-time and regular part-time employees (including job sharers) permanently assigned to such unit so indicate by secret ballot.
  - ii) The secret ballot vote will be conducted, at no cost to the Hospital, by the Union. The result of the vote will be determined on the basis of votes cast, not including spoiled ballots. The Union will post the result of the vote.
- (d) Self-scheduling will be introduced on a trial basis for a period of six (6) months. One month prior to the end of the trial, a second secret ballot vote will be conducted as per above. Where at least eighty percent (80%) of the combined full-time and regular part-time employees vote in favour and subject to agreement of the Hospital, self-scheduling arrangements will continue.
- (e) Further staff availability will be submitted at the time the self-schedule is submitted to the Department Manager. Once the schedule is posted, the nurse will ensure that their submitted availability is updated as necessary.
- (f) All full-time lines will have scheduled full-time hours in each scheduling period.

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## **LETTER OF UNDERSTANDING**

### **RE: Innovative Scheduling**

In accordance with Article 13.03 the parties agree to the following with respect to innovative schedules:

- 1) Process for Introduction and Discontinuation of Schedules;
  - (a)
    - i) This schedule may be introduced into any unit when seventy percent (70%) of the combined full-time and regular part-time (including job sharers) employees permanently assigned to the unit so indicate by secret ballot;
    - ii) The secret ballot vote will be conducted, at no cost to the Hospital, by the Union. The result of the vote will be determined on the basis of votes cast, not including spoiled ballots. The Union will post the result of the vote.
  - (b) This schedule will be introduced on a trial basis for a period of six (6) months. One month prior to the end of the trial, a second secret ballot vote will be conducted as above. Where at least seventy percent (70%) of the combined full-time and regular part-time employees vote in favour and subject to agreement of the Hospital, this schedule will continue.
  - (c) This schedule may be discontinued or changed in any unit when:
    - i) Seventy percent (70%) of the combined full-time and regular part-time employees (including job sharers) permanently assigned to such unit so indicate by secret ballot.
    - ii) The secret ballot vote will be conducted, at no cost to the Hospital, by the Union. The result of the vote will be determined on the basis of votes cast, not including spoiled ballots. The Union will post the result of the vote.
- 2) This schedule may be cancelled at any time by either party, by giving forty (40) days written notice to the other party, of its desire to terminate this Agreement.
- 3) The Employer will not be required to pay overtime rates for any hours worked by a nurse in excess of the normal hours, where such excess hours are made necessary only to accommodate the transition to or from the schedule. Similarly, no penalty or premium payments referred to in Article 14.03 resulting directly from the transition to or from the schedule will be paid.
- 4) No nurse shall be scheduled more than three (3) consecutive extended tours.
- 5) Any and all conditions and terms of the Collective Agreement, Appendices, and Letters of Understanding between the Hospital and Association shall remain in full force and effect except as amended by this Letter of Understanding.

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**LETTER OF UNDERSTANDING****RE: Electronic Grievance Form**

- (a) The parties agree to use the electronic version of the (O.N.A. Grievance Form at Appendix 1 of the Hospital Central Agreement).
  - (b) The parties agree that hard copies of the electronic form are valid for purposes of Article 7 of the Hospital Central Agreement.
  - (c) The electronic signature of the Union Executive representative or Labour Relations Officer will be accepted as the original signature.
  - (d) The Union undertakes to get a copy of the electronic Grievance Form signed by the grievor if not resolved at Step 2.
  - (e) 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.
- 

**LETTER OF UNDERSTANDING****RE: Professional Responsibility Workload Report Form (PRWRF)**

- (a) The parties agree to use the electronic version of the ONA/OHA Professional Responsibility Workload Report Form (PRWRF) at Appendix 6 of the Hospital Central Agreement.
  - (b) The parties agree that hard copies of the electronic PRWRF are valid for purposes of Article 8 of the Hospital Central Agreement.
  - (c) The electronic signature of the Union Executive representative or Labour Relations Officer will be accepted as the original signature.
  - (d) 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 an Independent Assessment Committee as per Article 8.01.
-

**LETTER OF UNDERSTANDING**

**RE: Parking Rates**

The Parties agree that prior to any changes in parking rates, the proposed changes will be discussed with the Hospital/Association Committee. In the event the Hospital changes rates, the Association has the right to grieve.

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**LETTER OF UNDERSTANDING**

**RE: Multi-Site Jobs**

Whereas the Parties desire to trial multi-site jobs at the six sites of NHS, therefore the parties agree as follows:

1. Where sufficient vacant hours exist between sites as determined by the NHS and in collaboration with the Union, those hours may be combined to create a temporary full-time or part-time job. The filling of such positions will not result in the layoff or loss of hours of any full-time or part-time nurse.
  2. The NHS may create float positions between sites where it is feasible.
- 

**LETTER OF UNDERSTANDING**

**RE: Unit Weekend Schedule**

Whereas:

- (a) the Unit Weekend Schedule is provided for in Article 13.04 of the Central Collective Agreement,

AND

- (b) The parties desire to implement the Unit Weekend Schedule on various units in the NHS,

Therefore, the Parties hereby agree as follows:

1. Implementation – The introduction of a unit weekend schedule on a specific unit requires the approval of the NHS and ONA. The introduction of such unit weekend schedule is based on full-time hours.

With each new Weekend Worker arrangement an individual LOU will be signed by the parties.

2. Schedule – The schedule of hours will be in accordance with Article 13.04 of the Central Agreement.

3. Vacation – If a weekend worker transfers to a regular full-time position, any vacation/holiday bank shall remain intact to be used for vacation or lieu time. if a weekend worker transfers to a part-time position or terminates employment, all vacation/holiday credits will be paid out.

4. Scheduling Provisions – The following scheduling provisions do not apply to nurses who accept positions under this Agreement.

- (a) weekends off;
- (b) scheduled days off;
- (c) days off at Christmas and New Year's.

5. Replacements – Nurses who replace weekend tour nurses who are absent due to illness, vacation, leave of absence etc., will be considered part-time and will be selected in accordance with normal unit procedures.

6. Vacancies – Subsequent to implementation of a unit weekend schedule, any vacancy for a weekend tour nurse will be reviewed by the NHS. The NHS reserves the right to fill the vacancy with a weekend tour nurse or it will revert to a full-time position.

7. Discontinuation – A unit weekend schedule may be cancelled by either Party on giving three (3) months' notice in writing in accordance with the following:

- If the nurse previously held a full-time position which was converted to a unit weekend schedule they may request to revert back to their full-time schedule.
- If the nurse posted into the unit weekend schedule, they are required to post out of the unit weekend schedule.

A meeting shall be held within two (2) weeks of receipt of such notice to discuss the reasons for and the process of discontinuation.



## LETTER OF UNDERSTANDING

### RE: Uniform Allowance

1. Where uniforms are required and not already provided for as outlined in Paragraph 4 below, the Hospital shall provide \$70.00 per year uniform allowance to the full-time registered nurses and \$35.00 for part-time, payable the first full pay period of January.
2. Welland County General Site only – The Hospital shall provide \$70.00 per year clothing allowance to the full-time registered nurses payable the first full pay period in January.
3. The Hospital agrees to continue its practice of supplying and laundering scrub pants and tops for O.R., Recovery Rooms, I.C.U., Emergency, Women and Babies, I.R., H.I.U., Day Surgery, Endoscopy.
4.
  - i) The Hospital shall provide scrub pants and tops in accordance with present practice at no cost to the nurse, in those areas where nurses are required to wear hospital uniforms.
  - ii) If a nurses' uniform, which for the purposes of this article only shall include a watch and eyeglasses, is damaged during the performance of their duties and such damage is beyond repair and the damage occurred through no fault of the nurse, the Hospital will compensate the nurse for the uniform. The total compensation during any calendar year shall not exceed \$100.00 per nurse.

## LETTER OF UNDERSTANDING

### RE: Filling of Temporary Vacancies

The Hospital agrees to consider full-time nurses in the filling of temporary full-time vacancies which are expected to be twelve (12) months or longer in accordance with Article 10.07(d).

The Hospital agrees to consider full-time nurses in the filling of temporary full-time vacancies which are expected to be twelve (12) months or less for all classification above staff RN and special temporary projects/secondments in accordance with Article 10.07 (d).

For temporary vacancies expected to be twelve (12) months or less that are posted under Article 10.07 (d) and not filled after the initial posting, the hospital shall be entitled to repost the temporary vacancy indicating that full-time nurses will be considered for the vacancy in accordance with Article 10.07(d).

Nurses who are currently filling a temporary vacancy need not be considered for a further temporary vacancy for the duration of the term of their current temporary posting.

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## **LETTER OF UNDERSTANDING**

### **RE: Electronic Job Posting**

The parties agree that the requirement for posting under Article 10.07 shall be deemed satisfied when jobs are posted for the required duration on the Hospital's Intranet site SourceNet.

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## **LETTER OF UNDERSTANDING**

### **RE: Staffing Resource Team**

The parties wish to provide a method of creating full-time positions for nurses and require innovative methods to satisfy both staffing needs and recruitment and retention issues, and for that purpose the parties agree to the following terms:

1. The job posting for these positions shall reference that this position is subject to this Letter of Understanding between the Union and Hospital. This Letter of understanding shall be made available to all applicants for the positions.
2. The Staffing Resource Team (SRT) will be utilized to cover short term absences for the duration of seven (7) days or less. This may include, but is not limited to, last minute sick calls, bereavement leaves or emergency leaves. Operational needs may require, from time to time, that nurses be assigned for a longer duration. However, in no case shall the assignment be more than 60 calendar days nor shall the assignment prevent the filing of a vacancy under Article 10.07 (d).
3. The Collective Agreement shall apply to all aspects of the SRT, except where explicitly outlined in this Letter.
4. For the purposes of Collective Agreement administration, the SRT will be deemed as a unit/department with one Manager as determined by the Hospital.
5. SRT positions will be full-time positions only.
6. The SRT will have a Master Schedule consisting of extended tours.
7. It is understood that the SRT will support all sites of Niagara Health, and as such said nurse(s) may be required to work at all sites for partial and/or single shifts. When they are reassigned between sites during a shift they will be paid mileage as per NHS policy.

8. Once all regular part-time nurses have reached commitment, and Article F-21 has been complied with, the Employer may assign a SRT nurse to the “extra and uncovered shift(s)”.
9. The Hospital shall be entitled to utilize the SRT at straight time prior to offering a premium pay opportunity under Article I.
10. In the event of reassignment, the SRT RN shall be reassigned first. The reassignment of the SRT nurse for more than a single shift shall not be considered a layoff.
11. Staffing Resource Team Nurses shall be entitled to indicate their individual preferences with regard to units and sites. The Hospital will endeavour to take these preferences into consideration in assignments. Article 10.07 (g) shall apply to all assignments of SRT Nurses. In the event that a Nurse determines that they do not have the skill, ability, qualifications or training to perform the patient assignment to which they have been assigned on the unit they shall immediately advise the Charge Nurse who shall consult with the individual Nurse and the Manager of the unit to resolve the issue. SRT Nurses shall receive orientation on the general functioning of the unit as required and as mutually agreed between the RN and the Manager.
12. SRT Nurses shall not be utilized in a unit where there is a short term layoff. In the event of a long term layoff in a unit, the SRT shall not be used until Article 10.09 and 10.10 (recall from Layoff) has been complied with.
13. All SRT nurses will report to their assigned unit/site at the start of their scheduled shift.
14. The number of nurses on the Staffing Resource Team shall not exceed more than two (2%) percent of the total number of Registered Nurses employed in the ONA bargaining unit by the NHS. Where the Hospital has been demonstrated a need to increase the number of Nurses on the SRT and should a request be made to increase this number, the parties will meet to review, and such request will not be unreasonably denied.
15. This agreement shall be attached to and form part of the collective agreement. Any proposed changes or proposed removal of this Letter of Understanding shall be the proper subject for negotiations for the renewal of collective agreement.

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## **LETTER OF UNDERSTANDING**

### **RE: Union Office Space**

The Employer agrees to provide a private locked office space with a computer and internet access for use of the union representatives at All Sites.

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## LETTER OF UNDERSTANDING

### **RE: Nurse Practitioner/RNEC (Registered Nurse Extended Class)**

1. The Hospital will ensure the NP must work one thousand nine hundred and fifty (1,950) pensionable hours in a calendar year.
2. The parties recognize there is a master schedule and the normal workweek shall consist of thirty-seven and one half (37.5) hours.
3. Due to the nature of the work, the NPs will have access to flexible scheduling in accordance with their workload, subject to the approval by their manager, or their designate.
4. Such Flexible scheduling will not result in overtime premium pay. Flexible scheduling will be done in accordance with the operational needs and will ensure appropriate coverage.
5. If the NP is authorized to work Overtime and/or Premium hours, they shall receive premium pay in accordance with Article 14.03. The NP may elect time off at the equivalent rate in accordance with Article 14.09 of the Collective Agreement.
6. For clarity, this LOU is not an introduction of extended tours for the NPs.
7. The Hospital or the Union may discontinue this LOU with 90 days' notice. Upon receipt of such notice a meeting shall be held between the parties to discuss the discontinuation. It is understood and agreed that such discontinuation shall not be unreasonable or arbitrary.

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## LETTER OF UNDERSTANDING

### **RE: Telephone Standby**

The parties agree that when a nurse who is required to remain available for duty on standby outside their regularly scheduled working hours they shall receive standby pay in accordance with Article 14.06, 14.07 and 14.09

Payment for telephone consults that occur while an employee is on standby will be paid in 15 minute increments. Any other calls received during that same 15 minute period will not result in any additional compensation.

Any additional time spent on the call over and above the initial 15 minutes shall be compensated at the same rate but in fifteen (15) minute increments. When required to travel article(s) 14.06, 14.07 and 14.09 shall apply.

The nurse cannot receive pay for other calls received during the same fifteen (15) minute interval.

The nurse shall keep a log of all calls and submit it to their manager or designate.

If a nurse is scheduled for telephone standby on a weekend and performs work, they are considered to be working the weekend.