# COLLECTIVE AGREEMENT

# LOCAL ISSUES

Between:

# UNIVERSITY HEALTH NETWORK (TORONTO REHABILITATION INSTITUTE (Hereinafter referred to as the "Hospital")

And:

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

Expiry: March 31, 2025

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# TABLE OF CONTENTS

| APPENDIX 3 - HOSPITAL SALARY SCHEDULE (2022-2024)                           | 1  |
|---|----|
| APPENDIX 4 - SUPERIOR CONDITIONS  |    |
| APPENDIX 5  | 4  |
| ARTICLE A – RECOGNITION   | 4  |
| ARTICLE B – MANAGEMENT FUNCTIONS  | 4  |
| ARTICLE C – ASSOCIATION REPRESENTATION                                      | 5  |
| ARTICLE D – SENIORITY   | 6  |
| ARTICLE D – SENIORITY<br>ARTICLE E – LEAVE OF ABSENCE FOR UNION BUSINESS    | 6  |
| ARTICLE F – WEEKENDS  | 6  |
| ARTICLE G – SCHEDULING OBJECTIVES   | 7  |
| ARTICLE H – VACATIONS   | 15 |
| ARTICLE I – HOLIDAYS  | 17 |
| ARTICLE J – MISCELLANEOUS   | 17 |
| ARTICLE K – JOB SHARING   | 19 |
| ARTICLE L – WORKPLACE SAFETY & INSURANCE BOARD (WSIB &                      |    |
| REINSTATEMENT)  | 20 |
| ARTICLE M – VIOLENCE IN THE WORKPLACE                                       | 21 |
| ARTICLE N - EARLY AND SAFE RETURN TO WORK (OCCUPATIONAL AND NON             | -  |
| OCCUPATIONAL)<br>ARTICLE O – MUSCULOSKETLETAL INJURY AND PREVENTION CONTROL | 22 |
|   |    |
| ARTICLE P – ELECTRONIC GRIEVANCE FORMS                                      |    |
| LETTER OF UNDERSTANDING   |    |
| RE: REGARDING MASTER SCHEDULES  |    |
| LETTER OF UNDERSTANDING   |    |
| RE: BARGAINING UNIT PRESIDENT   |    |
| LETTER OF UNDERSTANDING   | 25 |
| RE: BICKLE AND LYNDHURST SITES  |    |
| LETTER OF UNDERSTANDING   | 25 |
| RE: PERMANENT LINES   | 25 |
| LETTER OF UNDERSTANDING   | 25 |
| RE: E-MAIL FOR ONA USE  |    |
| LETTER OF UNDERSTANDING   |    |
| RE: REGISTERED NURSE PROFESSIONALISM IN THE WORKPLACE                       | 25 |

# **APPENDIX 3**

## HOSPITAL SALARY SCHEDULE (2022-2024)

# Classification – Registered Nurse

| RN      | 01-Apr-22 | 01-Apr-23 | 01-Apr-24 |
|---------|-----------|-----------|-----------|
| Start   | \$35.52   | \$37.93   | \$39.07   |
| 1 Year  | \$35.69   | \$38.88   | \$40.05   |
| 2 Years | \$36.28   | \$39.86   | \$41.06   |
| 3 Years | \$38.07   | \$41.65   | \$42.90   |
| 4 Years | \$39.87   | \$43.52   | \$44.83   |
| 5 Years | \$42.12   | \$45.70   | \$47.07   |
| 6 Years | \$44.39   | \$47.98   | \$49.42   |
| 7 Years | \$46.65   | \$50.38   | \$51.89   |
| 8 Years | \$50.85   | \$54.37   | \$56.00   |
|         |           |           |           |

# Classification A – Assistant Head Nurse

|         | 01-Apr-22 | 01-Apr-23 | 01-Apr-24 |
|---------|-----------|-----------|-----------|
| Start   | \$37.95   | \$40.52   | \$41.74   |
| 1 Year  | \$38.15   | \$41.56   | \$42.81   |
| 2 Years | \$38.68   | \$42.50   | \$43.78   |
| 3 Years | \$40.56   | \$44.37   | \$45.70   |
| 4 Years | \$42.43   | \$46.31   | \$47.70   |
| 5 Years | \$44.83   | \$48.64   | \$50.10   |
| 6 Years | \$49.63   | \$53.64   | \$55.25   |
| 7 Years | \$53.06   | \$57.30   | \$59.02   |
| 8 Years | \$57.36   | \$61.33   | \$63.17   |

# Classification – Nurse Practitioner

|         | 01-Apr-22 | 01-Apr-23 | 01-Apr-24 |
|---------|-----------|-----------|-----------|
| Start   | \$57.32   | \$61.21   | \$63.05   |
| 1 Year  | \$58.41   | \$63.63   | \$65.54   |
| 2 Years | \$59.60   | \$65.48   | \$67.45   |
| 3 Years | \$60.75   | \$66.46   | \$68.45   |
| 4 Years | \$61.95   | \$67.62   | \$69.66   |
| 5 Years | \$63.20   | \$68.57   | \$70.63   |
| 6 Years | \$64.44   | \$69.65   | \$71.74   |
| 7 Years | \$65.70   | \$70.95   | \$73.08   |
| 8 Years | \$68.35   | \$73.08   | \$75.27   |

## **APPENDIX 4**

# SUPERIOR CONDITIONS

#### FORMER LYNDHURST HOSPITAL ONLY:

Previously existing conditions retained as provided for in the O'Shea interest arbitration award dated October 23, 1981 include the following:

- A. (\*6.01) The initial list shall contain the address of each nurse.
- B. (\*16.02) Nurses who are not required to work on (a) the above holidays shall be entitled to holiday pay provided they qualify in accordance with the *Employment Standards Act*.

\*Indicates the clause where the language is found in previous Collective Agreement.

#### FORMER QUEEN ELIZABETH HOSPITAL ONLY:

Article 18 is a provision which existed in the Collective Agreement which expired on September 30, 1980 and which shall be retained to the extent of its application as provided for in Articles 12.02 and 12.03 of the Interest Arbitration Award (O'Shea) dated October 23, 1981 and subsequent Collective Agreements.

- 18.02 Upon termination (other than those discharged and not reinstated, pursuant to the grievance and arbitration procedures), a nurse shall receive fifty percent (50%) of her unused accumulated sick leave credits, provided they have no less than five (5) years' seniority. Upon retirement or death, a nurse shall receive payout according to the Hospital's policy.
- 18.03 If a nurse's status is altered from full-time to regular part-time, they will retain their accumulated sick leave credits for utilization while working on a regular part-time basis, or on return to the full-time unit.

Cash out for sick leave credits shall be in accordance with Hospital policy.

#### **APPENDIX 5**

## ARTICLE A – RECOGNITION

- A.01 The Hospital recognizes the Union as the exclusive bargaining agent for all Registered and Graduate Nurses at the Hospital save and except Managers, persons above the rank of Manager, Employee Health Nurse, Nurse Educators, Clinical Nurse Specialists and Nurse Clinicians.
- A.02 The expression "Immediate Supervisor" when used in this Agreement shall mean the Manager, Program Services or Operations Director.

#### ARTICLE B – MANAGEMENT FUNCTIONS

- B.01 The Union acknowledges that the management of the Hospital and the direction of working forces are fixed exclusively in the Hospital and shall remain solely with the Hospital, except as specifically limited by the provisions of this Agreement, and without restricting the generality of the foregoing, the **Union** acknowledges that it is the exclusive function of the Hospital to:
  - (a) maintain order, discipline and efficiency;
  - (b) hire, assign, retire, discharge, direct, promote, demote, classify, transfer, lay-off, recall and suspend or otherwise discipline nurses, provided that a claim of discharge or discipline without cause may be subject of a grievance and dealt with as hereinafter provided;
  - (c) determine in the interest of efficient operation and highest standard of service, job rating or classification, the hours of work, work assignments, methods of doing the work and the working establishment for the service, and the location of work;
  - (d) generally to manage the operation that the Hospital is engaged in, and without restricting the generality of the foregoing, to determine the number of personnel required, methods, procedures and equipment in connection therewith;
  - (e) establish, and enforce reasonable Hospital policies, rules and regulations to be observed by the employees, provided that they are not inconsistent with the provisions of this agreement.
- B.02 These rights shall not be exercised in a manner inconsistent with the provisions of this Agreement.

## C.01 <u>Nurse Representatives</u>

There will be one (1) Union Representative per unit.

#### C.02 <u>Grievance Committee</u>

The Grievance Committee shall be composed of four (4) members, one (1) member per site, plus the Bargaining Unit President, however not more than three (3) employees will normally attend at one time.

#### C.03 <u>Negotiating Committee</u>

The Negotiating Committee shall be comprised of five (5) nurses, one of which shall be a part-time member and one shall be the Bargaining Unit President.

#### C.04 <u>Hospital-Association Committee</u>

The Hospital-Association Committee shall be comprised of up to five (5) representatives of the Local Union with at least one (1) representative from each site and an equal number of representatives from the Hospital. If required to attend a committee meeting on a scheduled day off, a site representative shall be paid 3.75 hours at her straight time hourly rate.

## C.05 <u>Union Interview</u>

A twenty (20) minute Union interview shall be scheduled, during the first week of orientation at a mutually agreeable time, between the Local and the Hospital. However, if there are more than three (3) new hires, per site, scheduled for orientation the interview with the the Union will be for a period of up to thirty (30) minutes. The Hospital will provide the Local with a copy of the Hospital's scheduled orientation week. They will provide the local with a list of new staff hires scheduled for each orientation and will make best efforts to provide this list one (1) week prior to the scheduled orientation. The Hospital will provide audio/video equipment if it is available in order to facilitate the interview.

## C.06 Bargaining Unit President

The Bargaining Unit President will be scheduled to work day shifts. The parties agree that the Hospital shall provide the Bargaining Unit President with a paid leave of absence of one (1) normal day tours per week for the purpose of conducting Union business. No less than 2 weeks advance, the Bargaining Unit President and their manager will determine the schedule of day tours for Union business that are mutually agreeable in advance of the days to be taken subject to the operational demands of the unit.

In the absence of the Bargaining Unit President, the Acting President may use the days referenced above.

Any request for paid leave beyond the days referenced above is subject to the following conditions:

- ii. The Hospital is willing to grant such paid leave where operationally feasible.
- ii. Requests for this paid leave must be submitted in writing to the unit manager. A minimum of two (2) weeks' notice is required.
- iii. Requests will identify reasons for the paid leave.

# ARTICLE D - SENIORITY

- D.01 The seniority list will be filed with the Bargaining Unit President and posted in February and August of every year.
- D.02 In addition to the Dues Deduction List (Article 5.05), the Hospital will provide to the Bargaining Union President a monthly Leave Status Report of nurses on leaves of absence including each nurse's name, unit, effective and return dates of leave, and type of leave.

# ARTICLE E – LEAVE OF ABSENCE FOR UNION BUSINESS

- E.01 Leave of absence for Union business shall be given subject to the efficient operation of the Hospital, provided adequate notice is given. It is agreed that no more than two (2) nurses from the same program, shall be absent on such leave at the same time. Exceptions will be considered by the Hospital on a case-by-case basis. The Union will give a minimum of two (2) weeks' notice in advance when possible.
- E.02 The Hospital agrees to grant leaves of absence requested, in writing, by the individual elected to the position of Local Coordinator, subject to meeting the operational requirements of the Hospital, on the basis that such leaves will be requested as far in advance as possible, normally not less than two (2) weeks in advance, and shall be limited to fulfilling the duties of the position.

# ARTICLE F – WEEKENDS

- F.01 A nurse will receive premium pay for all hours worked on a third (3rd) and subsequent consecutive weekend, save and except where:
  - (a) such weekend has been worked by the nurse to satisfy specific days off requested by such nurse; or

- (b) such nurse has requested weekend work; or
- (c) such weekend is worked as the result of an exchange of shifts with another nurse.

#### ARTICLE G – SCHEDULING OBJECTIVES

- G.01 The Hospital will endeavour to maintain and achieve the following objectives in the formulation of working schedules, although it is recognized by the Association that it has not always been and may not always be possible to attain these objectives:
  - 1. At least one (1) weekend off in two (2);
  - <u>NOTE</u>: Where existing scheduling practices provide for better than one weekend off in two, the Hospital will endeavour to maintain that practice.
  - 2. Schedules will be posted no less than twenty-eight (28) days in advance of a twenty-eight (28) day posting period;
  - 3. Nurses will not normally be scheduled to work more than six (6) consecutive calendar days. This clause does not prohibit exchange of shifts by an individual staff that might result in six (6) or more consecutive calendar days following the process described in G.01 (12).
  - 4. No less than two (2) consecutive shifts shall be scheduled off between a change of tours.
  - 5. All nurses will receive at least six (6) consecutive days off at either Christmas or New Year's, except in areas where nurses are not regularly scheduled to work on weekends and statutory holidays. Days off at Christmas will include December 24, 25, and 26<sup>th</sup> and New Year's will include December 31<sup>st</sup> and January 1<sup>st</sup>, unless otherwise mutually agreed. Days worked at Christmas will include December 24<sup>th</sup>, 25<sup>th</sup> and 26<sup>th</sup>, and at New Year's will include December 31<sup>st</sup> and January 1<sup>st</sup> unless otherwise mutually agreed.
  - All nurses will submit requests and availability for Christmas/New Year's season by October 1<sup>st</sup> and confirmed by November 15<sup>th</sup>. This provision shall not apply to any area where nurses normally work Monday to Friday and are not normally scheduled to work on paid holidays.
  - 7. Scheduling objectives may be waived between December 15 and January 15 in order to accommodate G.01 (5).

- 8. A nurse who rotates shifts shall be scheduled two (2) consecutive days off after working the night shift; duty;
- 9. For nurses who rotate shifts, the Hospital will endeavour to schedule at least fifty (50%) percent of the tours on day shift except where the nurse agrees to work a greater percentage of shifts. When this is not possible, the nurses involved in the scheduling unit, shall, over a reasonable period of time, be scheduled to the same number of day tours. Days off shall not be included in the averaging system.
- 10. For those who rotate, a weekend shall be defined as fifty-six (56) consecutive hours off work during the period following the completion of the Friday day shift until the commencement of the Monday day shift.
- 11. Continuing education courses, related to nursing practice will be accommodated as follows:

Work schedules not yet finalized will be changed to accommodate continuing education courses depending on the needs of the unit as determined by the Manager.

- 12. Nurses who wish to alter their already posted schedule must find their own replacement using the approved staffing policy and identify the replacement to the Manager no less than seventy-two (72) hours prior to the scheduled shift before an alteration to the schedule will be considered. It is agreed that any such exchange of shifts shall not result in overtime not otherwise payable. Such request will not be unreasonably denied. Article E applies to requests for Union Leave.
- 13. The scheduling of the time off for a nurse who elects to take time off in lieu of payment for overtime as provided in Article 14.09, will be by mutual agreement of the nurse and the Hospital. The nurse will be paid for all overtime banked hours that have not been taken by March 31<sup>st</sup> of a given year.
- 14. The Hospital will endeavour to distribute overtime by seniority, on a rotational basis, to those nurses on a Unit who make themselves available in order of full-time first, then part-time and then casual per fiscal year. An overtime tour will be deemed to be offered whenever a call is placed.
- 15. All work available in a unit at the time, will be assigned prior to the posting of the schedule.

#### G.02 Extended Tours

- 1. An extended tour shall be introduced into any unit when:
  - (a) Sixty-six percent (66%) of the 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 unreasonable arbitrary manner.
- 2. An extended tour may be discontinued in any unit when:
  - (a) Sixty-six percent (66%) of the nurses in the unit so indicate by secret ballot; or
  - (b) The Hospital because of:
    - (i) Proven adverse effects on patient care,
    - (ii) Inability to provide a workable staffing schedule.
    - (iii) Other reasons which are neither unreasonable nor arbitrary.
- 3. When notice of discontinuation is given by either party in accordance with paragraph 2 above, then:
  - (a) The parties shall meet within four (4) weeks of the giving of notice to review the request for discontinuation; and
  - (b) Where it is determined that the extended tours will be discontinued, affected nurses shall be given twenty-eight (28) days' notice before the schedules are so amended.
- 4. Extended tours can be organized for individual employees or small groups without the above limitations. Introduction must be by mutual agreement of the nurse(s), Manager and the Union.
- G.03 When the Hospital requires a nurse to float to another unit, the Hospital will reassign employees within the following sequence: the Hospital will first ask for volunteers, followed by the least senior casual; then the least senior regular part-time; and then least senior regular full-time, with an equitable rotation thereafter at the discretion of the Manager. The Hospital will not float probationary employees or nurses who are on orientation.
- G.04 At the discretion of the manager, nurses who do not rotate shifts may be scheduled to work twenty (20) days or more per year on the day shift to contribute to clinical and functional programs (such as education,

assessment and participation in Team & Family Conferences). Agreement as to the time for such scheduling on days shall not be unreasonably withheld.

G.05

- 1. All regular part-time nurses in a unit will be scheduled up to their committed hours by seniority before any casual part-time nurses are utilized.
  - 2. When part-time nurses on the unit have been given the opportunity to work up to their commitment, the Hospital will endeavour to offer additional tours in accordance with the following:
    - (a) Nurses who wish to be considered for additional tours must indicate their availability in the manner prescribed by the Hospital. The Hospital's principles that support staffing consideration for additional tours will be consistently delivered throughout all programs and posted on each unit.
    - (b) A tour will be deemed to be offered whenever a call is placed;
    - (c) It is understood that the Hospital will not be required to offer tours which would result in overtime premium pay;
    - (d) When a regular part-time nurse accepts an additional tour, they must report for that tour unless arrangements satisfactory to the Hospital are made;
    - (e) Additional shifts will be distributed on an equitable and rotating basis offered in the following order:
      - 1. Part-time employees within the unit
      - 2. Part-time employees within the program
      - 3. Casual employees within the unit
      - 4. Casual employees within the program
      - 5. Part-time employees Hospital-wide
      - 6. Casual employees Hospital-wide
    - (f) Provided they are qualified, nurses may submit their availability to work additional tours to more than one unit, if to do so is in accordance with existing Hospital practice. If working such time would result in premium payment, the nurse must indicate this in advance in order to receive the payment.
    - (g) Once the above protocol has been exhausted, any nurse may be contacted.

- G.06 <u>Four Hour Tours</u> (Part-time Employees Only)
  - 1. A four (4) hour tour will consist of four (4) paid hours inclusive of one (1) fifteen (15) minute paid break.
  - 2. The Hospital will keep the number of four (4) hour tours to a minimum.

#### G.07 Change of Master Rotation

- (a) Master schedules will not be changed arbitrarily or unreasonably. If there is a change that is required in order to meet operational needs the Hospital will (with limitations as described in the preamble of G.01), follow the process described below:
  - (i) Changes to the Master Schedule for any unit shall be discussed at the Hospital Association Committee as required;
  - (ii) A Scheduling Committee will be created to develop a schedule that complies with both the Hospital's needs and the scheduling provisions in the collective agreement:
    - If the Scheduling Committee creates one (1) schedule, then it is understood that the vote will be between the current master schedule and the proposed master schedule.
    - If the Scheduling Committee creates two (2) schedules, then it is understood that the nurse can only vote for one (1) schedule or the other schedule. The current master schedule will not be part of this vote.
    - The schedule with the majority (50%+1) votes will be implemented.
    - If the proposed schedule is voted down by the nurses, the Scheduling Committee will meet to review the scheduling requirements of the Hospital and working together to attempt to come up with a new proposal.
  - (iii) The nurses shall be given forty-five (45) days' notice before the new master schedule is implemented;
  - (iv) On the new master schedule, employees (shall choose their preferred lines according to seniority;
  - (v) Where the schedules have been put to two (2) votes and a majority is not reached, then the Hospital may implement the

new master schedule acknowledging the Union's right to grieve;

- (vi) In some cases, it may be necessary for the Hospital to implement the new master schedule while the voting process takes place.
- G.08 Pursuant to Article 13 of the Central Collective Agreement, the parties agree to implement the following scheduling provisions:

#### Extended Tours

- (a) Extended tours shall be defined as per Central Collective Agreement Article 13.02
- (b) In order for a nurse to be considered "working extended tours," s/he shall normally work an average of more than 4 extended tours in each 2-week period. That averaging shall be over a mutually agreed-to period, and posted on each unit. The agreement concerning averaging of tours may be subject to continuing approval from the Director of the Employment Standards Branch.
- (c) Nurses will not be required to work more than four (4) consecutive twelve (12) hour tours. Nurses shall be paid a premium pay for the fifth (5th) and subsequent day until a day off is scheduled.
- (d) Full-time nurses who work extended tours and rotate shifts will have twelve (12) hours scheduled off between tours and a minimum of forty-eight (48) hours after working night duty, unless otherwise mutually agreed. Overtime shall not apply for the purposes of this article.
- (e) No split shifts.
- (f) For nurses who work extended tours, a weekend shall be defined as fifty-six (56) hours off work during the period following the completion of the extended tour day shift on Friday until the commencement of the day shift on Monday. For extended tours, G.01 (10) shall not apply.
- (g) A meal period will be provided as per Article 13.02 in the Central Collective Agreement.
- (h) The overtime provisions at Article 14.01 of the Central Collective Agreement shall apply, subject to the following: where Article 14.01 refers to 7.5 paid hours, this should read 11.25 paid hours for extended tours. For nurses working extended tours, overtime shall be paid at the rate of time and one-half (1 1/2) the nurses' regular straight time hourly rate for all work performed in excess of 11.25

paid hours in a twenty-four (24) hour period subject to Article 14.01 Central Collective Agreement

- (i) Article G .01 (4) of the Local Collective Agreement shall not apply to Extended Tours except for the following situation. Where part-time nurses who do not normally work extended tours but accept extended tours as additional shifts, G.01 (4) shall apply. Specifically for change of tours in this situation, premium pay shall apply at the rate of one and one-half (11/2) the nurse's regular straight rate if less than two (2) consecutive normal shifts is scheduled off between change of tours.
- (j) For the purpose of paying the weekend premium referred to in Article 14.15 of the Central Collective Agreement, the weekend is defined as follows:
  - Commencing at 2300 hours Friday and concluding forty-eight (48) hours later on Sunday at 2300 hours; Or
  - Other forty-eight (48) hour period determined by the programs and will be posted;
  - This clause does not apply to what is considered the definition of a weekend for the purpose of scheduling time off on weekends.
- (k) For the purpose of paying the shift premium referred to in Article 14.10 of the Central Collective Agreement for extended tours, shift premium will be paid as per hours worked during the defined periods of evening shift and night shift as per normal tours.
- (I) Request for three (3) or less vacation days by nurses working extended tours shall be submitted in writing as far in advance as possible.
- (m) Nurses who are normally scheduled to work day/night extended tours may be scheduled to work either a normal day tour or normal night tour to complete their rotation.
- (n) Nurses who are normally scheduled to work only extended day tours may be scheduled to work either a normal day tour or a normal evening tour to complete their rotation.

## Combination of Extended and Normal Tours

- (o) Rotations shall be considered to be a "combination of extended and normal tours" if they meet the following criteria:
  - at least two (2) extended tours in a two-week period; and
  - no more than four (4) extended tours in a two-week period; and
  - are seventy-five hours in a two-week period.

(p) For nurses working a "combination of extended and normal tours" rotation, the collective agreement provisions regarding extended tours shall apply, except for article G.01 (10) of the local agreement, which shall not apply. Article G.01 (4) will only apply between a normal tour and normal tour.

#### Innovative Scheduling

- (q) The parties agree in principle that if an evening shift is to be scheduled before a weekend off, the next scheduled shift will be evening on Monday. The Friday evening schedule before a weekend off shall not be scheduled on normal basis.
- (r) Where requested in writing by a nurse, the parties by mutual agreement may develop a schedule that will include a night/evening rotation. In the event that the nurse who requested the rotation leaves the position, it will revert back to day/evening or day/night rotation at the discretion of the manager.
- (s) If mutually agreed, nurses may be scheduled to work tours that are averaged over two or more weeks. This Agreement concerning averaging of tours may be subject to continuing approval from the Director of the Employment Standards Branch.
- (t) Not withstanding G.01, it is understood that employees may approach their Manager to request to work 2 weekends out of 4 without premium pay. Such requests will be considered under the Innovative Unit Scheduling language of article 13.03 of the central agreement.

All references to "0700 hours," "1900 hours" or "2300 hours" shall be adjusted as is appropriate so as to accord with shift change times that are unique to a specific program or unit.

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

The Hospital may discontinue because of:

- A) adverse effect on patient care, or
- B) inability to provide a workable staffing schedule, or
- C) the Hospital wishes to do so for other reasons which are neither unreasonable nor arbitrary.

#### G.09 <u>Casual Employees</u>

- (a) A casual employee must submit their availability four (4) weeks prior to posting of the schedule.
- (b) A casual employee who declares themselves available for work shall notify the Hospital as soon as a change in circumstance becomes known.

#### G.10 Return from Absence

In the case of an absence, a nurse must provide the supervisor or designate with at least two (2) hours' notice for a day shift and four (4) hours' notice for an evening or night shift of the absence prior to the beginning of the nurse's scheduled shift. Nurses returning to duty following a sick leave must advise <u>both</u> the Unit Manager and the Unit not less than eight (8) hours in advance of their scheduled shift that they intend to return.

# ARTICLE H – VACATIONS

H.01 (a) It is understood and agreed that the Hospital will give every consideration to the nurse's preference as to the planning of her vacation subject to the conditions below.

In the event of a conflict between nurses, the Hospital will provide bargaining unit seniority, but the Hospital reserves the right to the final decision as to the scheduling of vacations.

- (b) Parties agree to discuss and develop a process for the distribution of prime time vacation on a fair and equitable basis.
  - (i) The Hospital will post summer vacation request lists for the period June 15<sup>th</sup> to September 15<sup>th</sup> by February 1<sup>st</sup>. Employees will submit their written requests for vacation, to a maximum of four (4) weeks, by April 1<sup>st</sup>. The Hospital will post approved summer vacation request lists by May 15<sup>th</sup>. If the Hospital cannot approve all requests, the Hospital will grant approval on the basis of seniority within the unit. Any remaining available time for vacation during prime time shall thereafter be considered on a first come first served basis.
  - (ii) During this period, first priority will be given to full week vacation requests. Once full week vacation requests have been granted, then vacation requests for less than a full week will be considered and granted on the basis of seniority.
  - (iii) Part-time staff who wish to work additional shifts during the summer must submit availability by April 15<sup>th</sup>.

- (iv) Nurses will submit written vacation requests for times other than summer, 45 days in advance. The Hospital will give a written response indicating approval or denial to the request within two (2) weeks of receipt of the request. Once the Hospital has approved a request, the Hospital and the Nurse will change this approval time only by mutual agreement.
- (v) Other than during the summer period, requests for less than five (5) vacation days must be submitted in writing as far in advance as possible and such request will not be unreasonably denied.

Requests for isolated weekend vacation days will be granted only when of other staff are available as replacements and without any premium payment being invoked. Such requests will not be unreasonably denied.

- H.02 Vacations may be taken at any time of the year except for the period from December 15<sup>th</sup> to January 15<sup>th</sup>. The Hospital agrees to consider a special request on an individual basis provided that it does not interfere with the efficient operation of the Hospital. Such agreement shall not unreasonably be denied.
- H.03 Vacation quotas shall not be unduly restrictive and shall only include members of the bargaining unit.
- H.04 If requested by employee, the Hospital shall schedule the weekend off before and the weekend after a nurse's vacation when the vacation is one week or longer in duration. Such request shall be granted at the discretion of the manager.
- H.05 Nurses requesting a transfer between June and September to another nursing unit will be granted vacation during that time which is compatible with the staffing needs of the receiving patient care unit and vacation schedule already established notwithstanding bargaining unit seniority.
- H.06 An employee may cancel their vacation if the nurse gives the Hospital at least one month's advance notice [or six (6) calendar weeks' notice in respect of summer vacation], provided that the vacation cancellation will not result in premium payment not otherwise payable.
- H.07 A nurse shall be permitted to carry up to two (2) weeks of vacation the next year providing all vacation approved for carryover is taken by April 1<sup>st</sup> of the next year unless the nurse is on an approved Leave of Absence.

#### ARTICLE I – HOLIDAYS

I.01 The Hospital agrees to recognize the following paid holidays:

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

I.02 For the purpose of payment, it is understood and agreed that the holiday commences at the end of the evening shift immediately prior to the holiday and not commencing at the night shift on the day of the designated holiday.

#### I.03 Full-time Nurses Only

Where a nurse qualifies for lieu day(s), such lieu day(s) may be taken within fifteen (15) days prior to a holiday. Up to three (3) lieu days may be accumulated, which may be taken concurrently, at a mutually agreeable time between the nurse and her immediate supervisor within sixty (60) calendar days following the holiday. Failing mutual agreement, the lieu day will be paid to the nurse in accordance with Article 15.05. Lieu days will not be permitted to be carried over to the following calendar year except for Christmas and Boxing Day.

#### I.04 Part-time Nurses Only

Regular Part-time employees will receive unpaid time off on an annual basis for the purpose of vacation in accordance with the following schedule (subject to the vacation scheduling regulations of the hospital):

Vacation pay of 6% - 3 weeks Vacation pay of 8% - 4 weeks Vacation pay of 10% - 5 weeks Vacation pay of 12% - 6 weeks Vacation pay of 14% - 7 weeks

## ARTICLE J – MISCELLANEOUS

- J.01 The Hospital will provide bulletin board space for the purpose of posting notices regarding meetings and other matters restricted to Union matters.
- J.02 Nurses may agree to participate on Hospital committees upon request of the Chairperson and will attend meetings when not regularly scheduled to work at a straight time rate of pay for the length of the meeting.

J.03 Each nurse shall keep the Hospital informed of her current address and telephone number by notifying the People & Culture **D**epartment via electronic means as designated by the Hospital.

All written correspondence from the Hospital to a nurse will be transmitted electronically or by registered mail to the last specified address of the nurse, and shall be deemed delivery to the nurse.

- J.04 In accordance with 11.11(c) of the Collective Agreement four (4) nurses per site may be absent at any one time with no more than one per unit.
- J.05 The Hospital shall endeavor to correct shortage(s) in a nurse's regular pay as early as possible, but no later than within one (1) pay period of the date of written notice from the nurse to the Hospital of the shortage. It is understood that should a part-time employee not submit his/her payroll information on time, it will be corrected by the following pay period. Shortages of pay in excess of one (1) shift, due to Hospital error, shall be corrected within five (5) business days. The Hospital shall administer such correction by issuing the difference in a separate cheque.
- J.06 The Hospital will provide a uniform allowance of one (\$100) dollars/annum for full-time nurses and prorated for part-time nurses (casuals excluded) payable where uniforms are required.
- J.07 The Hospital shall endeavour to continue to provide continuing education and in-service on all shifts.
- J.08 The Hospital agrees to give the Union at least forty-five (45) days' notice of any intended change to the parking arrangements prior to implementation.
- J.09 (a) The Hospital will provide taxi fare or provide a mileage allowance in accordance with (b) below for travel between sites where Union Representatives fulfilling their obligations under the terms of the Collective Agreement are required to attend meetings with the Hospital.
  - (b) The Hospital will provide a mileage allowance of \$0.55/km where Union Representatives fulfilling their obligations under the terms of the Collective Agreement use their own vehicles to attend a meeting required by the Hospital.
- J.10 The Hospital will provide an office for use by the Union to be located at Toronto Rehabilitation Institute. Such furnishings and file cabinets as available will be provided by the Hospital for use at the discretion of the Union. A telephone extension will be provided and the parties will develop a procedure for reimbursement of phone charges.

It is further agreed that the Hospital will provide the Union with access to a photocopier located at each site and the parties will develop a procedure for reimbursement of photocopier charges.

J.11 Jury Duty

Where a nurse is selected to serve on a jury and does actually serve on a jury, upon request from the nurse, her work schedule shall be converted to a Monday through Friday day tour basis with potential weekends off, beginning with the first day of the trial and continuing up to the conclusion of the completion of the trial, or upon the trial being recessed, the nurse shall be returned to that point on her or his former schedule that is considered appropriate by the Hospital. See Article 11.06 (a).

#### ARTICLE K – JOB SHARING

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

- K.01 Job sharing requests with regard to full-time positions shall be considered on an individual basis.
- K.02 Total hours worked by the job sharer shall equal one (1) full-time position. The division of these hours on the schedule shall be determined by mutual agreement between the two (2) nurses with the approval of the Manager. Job sharers shall not be required to work any tours outside of the tours of the full-time position unless mutually agreed.
- K.03 The above schedules shall conform with the Full-time scheduling provisions of the Collective Agreement.
- K.04 Each job sharer may exchange shifts with her partner, as well as with other nurses as provided by the Collective Agreement.
- K.05 The job sharers involved will have the right to determine which partner works on scheduled paid holidays and job sharers shall only be required to work the number of paid holidays that a full-time nurse would be required to work.
- K.06 <u>Coverage:</u>
  - (a) It is expected that both job sharers will cover each other's incidental illnesses. If, because of unavoidable circumstances, one cannot cover the other, the unit supervisor must be notified to book coverage. Job sharers are not required to cover for their partner in the case of prolonged or extended absences.

#### (b) <u>Vacation, Maternity Leave, and other leaves pursuant to Article 11 of</u> <u>the Central Full-time and Part-time Agreements:</u>

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

#### K.07 Implementation

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

- K.08 An incumbent full-time nurse wishing to share her position, may do so without having her half of the position posted; however the other half of the job shared position must be posted and the selection based on the criteria set out in the Collective Agreement.
- K.09 If one of the job sharers leaves the arrangement, her position will be posted. If there is no successful applicant to the position, the shared position must revert to a full-time position. The remaining nurse will have the option of continuing the full-time position or reverting to a part-time position for which they are qualified. If they do not continue full-time, the position must be posted in accordance with the Collective Agreement.

#### K.10 <u>Discontinuation</u>

Either party may discontinue the job-sharing arrangement with ninety (90) days' notice. Upon receipt of such notice a meeting shall be held between the parties within fifteen (15) days to discuss the discontinuation. It is understood and agreed that such discontinuation shall not be unreasonable or arbitrary. In the event of discontinuation, the incumbent job sharers shall revert to a regular part-time position.

## <u>ARTICLE L – WORKPLACE SAFETY & INSURANCE BOARD (WSIB &</u> <u>REINSTATEMENT)</u>

- L.01 (a) In accordance with the *Occupational Health & Safety Act*, the Hospital will notify the Local on a bi-monthly basis, of the names of all nurses who sustained a work related injury.
  - (b) The Hospital agrees to provide the employee with a copy of the Workplace Safety & Insurance Board (WSIB), Form 7 at the same time as it is sent to the Board.

- (c) When it has been medically determined that an employee is unable to return to her former position due to permanent disability, the Hospital will notify and meet with a member of the Local executive and a member of the Ontario Nurses Association Staff Representative.
- (d) When the Hospital is to meet with an employee about her return to "Work Hardening light duties" the employee shall be advised of their right to union representation in accordance with Article N - Early and Safe Return to Work.

The Bargaining Unit President will be provided with advance notice of all Return to Work meetings.

(e) The Bargaining Unit President will be given copies of all "Return to Work Programs"

# ARTICLE M – VIOLENCE IN THE WORKPLACE

The Hospital agrees that incidents of workplace violence are not tolerated. Nurses will report all incidents and near misses to the immediate supervisor who will take every precaution reasonable to rectify the situation. Such incidents include psychological/verbal abuse, physical abuse/assault, aggressive/threatening behaviours, violent incidents, sexual abuse/assault, domestic violence that impacts the workplace, financial/material/harassment/discrimination.

- M.01 (a) The Hospital agrees to have in place policies and procedures to deal with violence in the workplace. The policies will address the prevention of violence, the management of violent situations and support to nurses who have faced violence.
  - (b) The Hospital, in conjunction with the JOHSC, will immediately and thoroughly investigate all acts and reports of potential/actual violence and forthwith take every precaution reasonable in the circumstances to prevent violence from occurring.
  - (c) The Hospital, with the nurse's consent, will inform the Union within three (3) days of any nurse who has been assaulted while performing her work. Such information shall be submitted, in writing, to the Union as soon as possible.
  - (d) Staff will be reimbursed for personal property as specified in the WSIB Operational Policies.
  - (e) The Hospital will train all new nurses during orientation and all nurses on a high-risk unit and other units when necessary based on a review of risk assessments for the unit on the violence policy, program

(measures and procedures) and will provide hazard specific training and refresher training on the risks identified for specific jobs/units.

- (f) The Hospital will endeavour to provide debriefing and post traumatic counselling for nurses who have suffered as a result of violence. Leave required to attend such debriefing or counselling will be without loss of pay.
- (g) In accordance with the *Occupational Health and Safety Act*, the Hospital agrees to have in place policies and procedures to deal with violence in the workplace. The policies will address the prevention of violence, the management of violent situations and support to nurses who have faced violence.

# <u>ARTICLE N – EARLY AND SAFE RETURN TO WORK (OCCUPATIONAL AND NON-OCCUPATIONAL)</u>

The Hospital and the Union are committed to returning disabled employees to meaningful and valuable work to the Hospital, and to meeting the parties' legislated responsibilities.

The Parties recognize the following principles:

- That the Bargaining Unit President (BUP) or designate will be notified electronically of all return to work meetings with employees. The BUP will be responsible for getting union representation at such meetings.
- Once 24 hour notification is sent to the BUP or designate The Parties agree that lack of union or HR representation will not delay the early and safe Return to Work process.
- Co-operation in facilitating the return to work of disabled employees.
- On-going and timely communication by all participants in the process is essential to the success of the process.
- Sharing of information that is necessary for all participants to participate fully in the process.
- Both the Hospital and the Union have a responsibility for educating disabled employees on the return to work process.
- The Hospital supply a list of all employees currently off work or on a RTW program
- The Parties agree in principle to meet adhoc as recommended by the HAC when issues in process develop.

#### ARTICLE O – MUSCULOSKETLETAL INJURY AND PREVENTION CONTROL

The Hospital in consultation with the Joint Health and Safety Committee (HSC) shall develop, establish and put into effect, musculoskeletal prevention and control measures, procedures, practices, equipment and training for the health and safety of employees, and review once a year.

#### ARTICLE P – ELECTRONIC GRIEVANCE FORMS

The parties agree that grievances may be filed electronically as well as by hard copy as per Article 7.09. A grievance sent through the Hospital's internal e-mail (i.e. Using a Hospital assigned e-mail address) and/or grievance sent from external addresses provided to the Hospital will be accepted by the Hospital as having been properly presented.

# LETTER OF UNDERSTANDING

## **RE: REGARDING MASTER SCHEDULES**

The parties agree that the following principles will be reviewed when revising a master schedule:

- (a) When vacancy occurs it can be changed from a permanent shift to a rotating shift.
- (b) For new hires and those currently working rotating shifts consideration will be given to permanent shifts on consideration of individual circumstances (to be reviewed on a six month basis), taking into account the following:

Accommodation under the Human Rights Code supported by medical documentation

Child care/elder care responsibilities

Education/Professional development

Patient care needs

Other relevant factors

## LETTER OF UNDERSTANDING

#### **RE: BARGAINING UNIT PRESIDENT**

The Bargaining Unit President will be scheduled to work day shifts. The parties agree that the Hospital shall provide the Bargaining Unit President with a paid leave of absence of one (1) normal day tours per week for the purpose of conducting Union business. The Bargaining Unit President and her manager will determine the schedule of day tours for Union business that are mutually agreeable in advance of the days to be taken subject to the operational demands of the unit.

This agreement covers the term of the current Bargaining Unit President and/or expiration of this collective agreement, whichever occurs first. Should the need arise to implement this provision, Article E.03 of the Local Agreement will take effect.

# LETTER OF UNDERSTANDING

# **RE: BICKLE AND LYNDHURST SITES**

The Hospital Security Officer will be made available subject to operational requirements to assist any nurse who requests an escort to and from the parking area at the Bickle, Lyndhurst Sites and University Centre.

Requests from nurses at these sites should be made in advance on an individual basis directly with the security department.

# LETTER OF UNDERSTANDING

#### **RE: PERMANENT LINES**

Notwithstanding the content of Letter of Understanding – Master Schedules the parties agree that the Hospital will review, on an annual basis, all permanent lines, on an individual, case-by-case basis, to determine their efficacy from an operational perspective and bearing in mind any Human Rights considerations.

Any modifications arising out of this Letter of Understanding shall not constitute a change to the Master Schedules.

## LETTER OF UNDERSTANDING

## RE: E-MAIL FOR ONA USE

- 1. The Hospital agrees to provide an e-mail user group for active ONA Registered Nurses.
- This information would be provided to the Bargaining Unit President of Toronto Rehabilitation Institute. This information is contained in the global address list entitled "<u>TRI-REGISTEREDNURSES@uhn.ca</u>.
- 3. The Union agrees that the usage of this email system would comply with the Hospital's policy governing e-mail usage at the Hospital.

## LETTER OF UNDERSTANDING

## **RE: REGISTERED NURSE PROFESSIONALISM IN THE WORKPLACE**

The parties acknowledge the significant role Registered Nurses play in the delivery of high quality healthcare. We also recognize it is important for patients and staff to be able to readily identify Registered Nurses who are widely dispersed throughout the Hospital.

| DATED AT <u>Toronto</u> , ONTARIO THIS <u>5</u> | DAY OF _ <u>April</u> 2024. |
|---|-----------------------------|
| FOR THE HOSPITAL                                | FOR THE UNION               |
| Mandy Madill                                    | Brent Tousignant, LRO       |
| Andrew Long                                     | Myla Santos                 |
| Gabrielle Golea                                 | Erwin Robb                  |
| Jodelle Vassell                                 | Fransico Reyes              |
| Gloria Kwan                                     |                             |
| David Mastrangelo                               |                             |
| Veronika Buntin                                 |                             |
| Victoria Akinsola                               |                             |
| Zahra Kaba                                      |                             |