LOCAL APPENDICES TO THE
COLLECTIVE AGREEMENT

Between:

GRAND RIVER HOSPITAL CORPORATION
(Hereinafter referred to as "the Hospital")

And:

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

Expiry: March 31, 2020
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**Educator/Professional Practice Leader/Nurse Clinician**

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APPENDIX 4 - SUPERIOR CONDITIONS – FREEPORT SITE ONLY

ARTICLE I – DEFINITIONS AND GRADUATE NURSE

In reference to the Central Document, Article 2.02 and the obsolete agreement Article 3.01 (b)

A graduate nurse is defined as a nurse with registration incomplete who is a graduate of a program acceptable to the College of Nurses of Ontario and is either in the process of being registered by the College of Nurses of Ontario or is completing registration requirements. This registration is to be completed within twenty-four (24) months of employment for nurses hired after July 1, 1975.

ARTICLE II – EDUCATION ALLOWANCE

In reference to the Central Document, Article 19.09 and the obsolete agreement Article Schedule A.

Education Increments

(a) An additional $15.00 per month will be paid to a nurse who has obtained a recognized certificate or for successful completion of a recognized course of four (4) or more weeks duration but less than three (3) months recognized by the Ontario Hospital Association or the Registered Nurses’ Association of Ontario. To qualify such a course or certificate must be agreed upon by the Hospital and Association. Not more than one (1) increment of $15.00 per month will be recognized for any one nurse and only such certificates or courses as are in the Hospital’s opinion required with respect to the Nurse’s position will be recognized.

(b) Any nurse in the employ of the Hospital on the date of signing this Agreement who claims to be entitled to an educational increment shall within thirty (30) days submit a request for such increment to the Administrator for his consideration.
APPENDIX 5 – LOCAL PROVISIONS

ARTICLE A – RECOGNITION

A-1 The Grand River Hospital Corporation recognizes the Ontario Nurses' Association as the exclusive bargaining agent for all registered and graduate nurses employed in a nursing capacity by the Grand River Hospital, save and except coordinators, supervisors, managers and persons above the rank of coordinator, supervisor and manager.

ARTICLE B – MANAGEMENT RIGHTS

B-1 The Union acknowledges that it is the exclusive function of the Hospital except as specifically restricted by the provisions of the Agreement to:

(a) Maintain order, discipline and efficiency;

(b) Hire, assign, retire, discharge, direct, promote, demote, classify, transfer, layoff, recall and suspend or otherwise discipline employees, 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;

(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) Make and enforce and alter from time to time reasonable rules and regulations to be observed by the employees not inconsistent with the provisions of the Agreement.

B-2 These rights shall not be exercised in a manner inconsistent with the provisions of this Agreement.

ARTICLE C – ASSOCIATION SECURITY

C-1 In reference to Article 5.06, the Hospital will schedule to have an officer of the Union or union representative interview newly hired employees as part of the Hospital Orientation Program.

ARTICLE D – REPRESENTATIVES AND COMMITTEES

D-1 In reference to Article 6.02 (a), there shall be forty-five (45) Union Representatives.

D-2 In reference to Article 6.02(b), there shall be a Grievance Committee composed of four (4) union members and the Bargaining Unit President.
D-3 (a) In reference to Article 6.03 (a), the Union and the Hospital shall each appoint up to four (4) persons and the Bargaining Unit President to the Hospital-Association Committee.

The Hospital and the Union may invite other persons to meetings of this Committee, as required, to deal with specific situations as they arise.

(b) In reference to Article 6.03 (e), the bargaining unit will notify the Hospital in advance of each meeting which two (2) Committee representatives will be paid per meeting.

D-4 In reference to Article 6.04 (a), the Negotiating Committee shall be composed of at least four (4) Union members and the Bargaining Unit President.

D-5 In reference to Article 9, the Professional Development Committee shall be composed of at least four (4) Union members and the Bargaining Unit President.

D-6 The Union’s appointees to all committees may be full-time or part-time employees.

D-7 All correspondence from the Hospital to the Union shall be sent to the President of the Bargaining Unit with the exception of all financial billings which will go directly to the Treasurer of the bargaining unit within sixty (60) calendar days of the period utilized.

D-8 **Scheduling Committee**

The purpose of the Scheduling Committee will be to review requests for implementation of new scheduling arrangements prior to either implementation by the Hospital or voting by employees to ensure that the proposed scheduling arrangements comply with the requirements of the Collective Agreement. Should a schedule be proposed that does not comply with the requirements of the Collective Agreement, such schedules will be forwarded to the Hospital-Association Committee for discussion.

The committee shall be comprised of three (3) union representative and three (3) management representatives. The union representatives shall not suffer any loss of earnings from her or his regularly scheduled working hours for the purpose of attending this committee meeting. Should a meeting be held outside of the individuals regular scheduled working hours, the Union Representative shall be compensated at their regular straight time hourly rate of pay for all time spent.

D-9 The Occupational Health and Safety Committee as identified in Article 6.05 of the Central collective agreement shall have one (1) member from the Ontario Nurses’ Association per committee, with the option of having two (2) members on the KW site committee and one (1) alternate for the Freeport site committee. The Bargaining Unit shall advise the employer who the members will be on the committee in writing. Four (4) of the ONA members will be certified representatives, certification to be paid by the employer.

**ARTICLE E – SENIORITY**

E-1 In reference to Article 10.02, seniority lists shall be submitted to the President of the Bargaining Unit semi-annually by no later than February 15th and no later than
ARTICLE F – LEAVE OF ABSENCE

F-1 In reference to Article 11.02, Leave for Association Business will be granted. The Union will be granted up to a maximum of two hundred and fifty (250) days of unpaid leave in each calendar year.

Such leave shall be subject to the following conditions:

i) the leave does not interfere with the continuance of efficient operation of the Hospital;

ii) not more than twenty (20) employees are absent on any such leave at the same time, and not more than two (2) employees from a patient care area;

iii) a request must be made in writing. The Union will provide the Hospital with two – (2) weeks notice prior to the commencement of the leave. In extenuating circumstances this time may be reduced.

iv) Leaves for the Bargaining Unit President, the Grievance Chair and the Local Coordinator, and leaves under Articles F-2 and F-3, shall not be included as part of this article.

F-2 The Bargaining Unit President and Grievance Officer shall be granted leave with pay up to a total of five (5) days per pay period to be divided among the two positions as the union sees fit. This day will be scheduled between Monday to Friday (not on a paid holiday) and will not result in the employee working in excess of seventy-five (75) hours in a pay period.

F-3 Local Coordinator Leave

The Hospital agrees to grant leaves of absence, without pay, to employees elected to the position of Local Co-ordinator. The request must be made in writing. The Union will provide the Hospital with two – (2) weeks’ notice prior to the commencement of the leave. In extenuating circumstances this time may be reduced. It is understood and agreed that a Local Co-ordinator shall be granted such leave(s) as she or he may require fulfilling the duties of the position to a maximum of fifty (50) days per calendar year.

ARTICLE G – HOURS OF WORK AND SCHEDULING

G-1 Regular Part-Time

(a) The regular part-time employee must be available as required by the Hospital to work twelve (12) months of the year, less vacation entitlement and shall be available as follows:

i) two weekends in four (4) weeks;

ii) twenty-two point five (22.5) hours per week, these shifts may be on a regular predetermined basis, it is understood that a regular part-
time employee who has been pre-scheduled for forty-five (45) hours in a pay period has met their commitment;

iii) a minimum of four (4) additional recognized holidays (not including the Holiday Season as addressed elsewhere) during each calendar year, and,

iv) a minimum of two (2) of three (3) shifts for employees that work seven and one half (7.5) hour shifts or both shifts for all other scheduling models.

It is understood that the time off in (a) above is subject to approval of vacation requests under this Collective Agreement.

(b) Casual Part-Time

The casual part-time employee who wishes to be scheduled will:

i) supply her/his availability a minimum of two (2) weeks in advance of the schedule being posted, on the required form.

ii) notify her/his manager/designate if they become available for work as soon as the change in circumstance becomes known.

(c) All scheduled hours for regular part-time employees shall be scheduled in an equitable manner before any casual employees are utilized.

Staff are required to submit their availability a minimum of two (2) weeks in advance of the schedule being posted, on the required form. If availability is not submitted, does not meet the operational needs of the unit, or does not meet the requirements of G-1 (a), part-time employees may be scheduled up to their commitment based on the needs of the unit.

Prior to the schedule being posted, staff will be scheduled in the following order:

i) Regular part-time employees up to 45 hours by seniority

ii) Job share employees who submitted availability up to 45 hours by seniority

iii) Regular part-time employees and job shares who submitted availability for greater than 45 hours by seniority

iv) Casual part-time employees who have submitted availability, prior to being scheduled the Hospital will confirm they are still available.

(d) After the schedule is posted, if employees have not been scheduled up to their commitment, they will be offered tours by seniority up to their commitment before additional tours are offered. Once regular part-time employees on the unit have been offered their commitment, they will be offered all additional hours that become available on their unit in an equitable manner on the basis of seniority and submitted availability prior to utilizing casual employees on the unit.

Once all unit employees have been offered additional shifts, shifts may be offered to off unit employees in an equitable manner on the basis of seniority and submitted availability in the following order:
All additional shifts will be subject to the following:

i) Employees who wish to be considered for additional hours must indicate as such in the manner prescribed by the hospital:

ii) A tour will be deemed to have been offered when a call and/or e-mail is placed to the employee. A maximum of two points of contact will be made to each employee prior to moving on to the next employee. The employee is responsible for identifying and updating her/his preferred points of contact. The Hospital will maintain record of that preference.

iii) When a regular part-time employee accepts an additional tour, she/he must report for that tour unless arrangements satisfactory to the hospital are made.

iv) The Hospital will not be required to offer tours which would result in overtime premium pay.

v) Eligible employees who have indicated availability for a full shift will be given the full shift over eligible employees who have indicated their availability for only part of an available shift.

vi) Where an eligible employee indicates availability for only part of an available shift and the hospital is unable to find an employee who can work the entire shift, the eligible employee may be given the part shift. Should the remainder of the shift remain uncovered and the eligible employee subsequently becomes available to work the remainder of the shift, she/he will be paid at the same rate of pay until the duration of the original shift is completed.

vii) Part time employees who do not wish to work beyond their commitment shall be entitled to notify the hospital in writing that they do not wish to be contacted for additional shift beyond their Scheduled Shifts. A Part time employee shall be entitled to amend this notification in writing at any time. Notwithstanding this provision, the Hospital will be permitted to contact nurses where patient safety and/or operational needs is potentially compromised.

(e) When the Hospital determines that premium hours must be offered, they shall be offered on the basis of seniority in the following order:

i) Full-time employees
ii) Regular part-time employees;
iii) Casual part-time employees;

Where additional hours are premium hours such hours will be offered to employees on the unit on the basis of seniority and availability in the above order.
Once all unit employees have been scheduled based on their seniority and availability, shifts may be offered to off unit employees based on seniority and availability in the above order.

(f) Employees will only be considered for off unit shifts if they have made themselves available for other units and they have the skill and ability to work on the unit they are needed.

G-2 Applies to all Scheduling Models

(a) (i) **Posting of Schedules**

Schedules will be posted four weeks in advance for at least four (4) weeks.

(ii) 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 work schedule
3. Any changes to the posted schedule in real time

All unscheduled lines will follow the language of the scheduling model of their unit. If the unit has more than one scheduling model, it must be determined by the hospital which scheduling model is being followed.

**Time off following night shift**

The Hospital shall schedule at least forty-eight (48) hours off following the night tour when switching to days or evenings. If an employee works with less than forty-eight (48) hours off following the night tour, she/he will receive premium payment pursuant to Article 14 of the central document; save and except:

i) where the shift has been worked to satisfy specific days off required by such employee
ii) such tour was worked as a result of an exchange of tours with another employee

**Changing of Shifts in a week**

Employees shall not be scheduled to change shifts more than twice in any week.

(b) It is also agreed that an employee’s availability for and/or agreement to work tours offered after the schedule is posted does not waive such employee’s claim for premium payment when provided for under Article G or any other relevant part of this agreement.

(c) **Call in process for additional tours/shifts/hours**

(i) Shifts commencing within one (1) to eight (8) hours:

The first employee eligible to be called for the shift will be given five (5) minutes to respond before the Hospital proceeds down the availability list.
Shifts commencing in more than eight (8) hours but less than twenty-four (24) hours:
The first employee eligible to be called for the shift will be given fifteen (15) minutes to respond before the Hospital proceeds down the availability list.

Shifts commencing in more than twenty-four (24) hours but less than seventy-two (72) hours:
The first employee eligible to be called for the shift will be given one (1) hour to respond before the Hospital proceeds down the availability list.

Shifts commencing in more than seventy-two (72) hours but less than one (1) week:
The first employee eligible to be called for the shift will be given twenty-four (24) hours to respond before the Hospital proceeds down the availability list.

Shifts commencing in one (1) week or more:
The first employee eligible to be called for the shift will be given forty-eight (48) hours to respond before the Hospital proceeds down the availability list.

ii) Needs List

At the time of posting the schedule, if unfilled shifts (needs) remain, the Hospital may, prior to utilizing the call-in process, post a needs list on the nursing unit. The needs list will be posted within three (3) business days from the date the schedule was posted, and at the same time sent to the employee's Hospital email address.

The needs list will remain posted for ten (10) calendar days (or fourteen (14) days during the summer schedule). The date the list will be removed will be clearly indicated on the list. During the ten (10) day period (or fourteen (14) during the summer schedule) employees may provide their availability to be assigned any of the shifts on the needs list.

The Employee's written responses must be received by the department scheduler prior to 1400 hours on the tenth (10th) day (or fourteenth (14th) day during the summer schedule).

The Hospital will schedule employees in accordance with Article G-1 (d) and (e). For clarity, the Hospital will not be confirming the employee's availability subsequent to their submission. The Hospital will notify each employee who has been scheduled into a vacant shift, in writing, within 7 days of the date that the list is removed.

If there remain unfilled shifts from the original needs list the employer may repost the list again for five (5) days. Employee’s written response must be received by the department scheduler by 1400 hours on the 5th day and shifts will be confirmed within 48 hours. This process may be repeated until the shifts are filled.
G2-(b) applies to any shifts that employees agree to work or make themselves available to work under this process.

Any shift that becomes available after the schedule is posted shall be filled in accordance with Article G-1 (d).

NOTE: A response by email is considered to be a response in writing.

(d) Exchange in Shifts

Requests for exchange of shifts within the current scheduling period of the same length between two (2) employees within the same nursing unit must be submitted, in writing on the form provided by the Hospital. Such requests must be submitted forty-eight (48) hours in advance of the first shift, except in extenuating circumstances. The form must state the shifts to be exchanged, the date and be signed by both employees before the manager/designate will consider the request. If an employee is unable to sign the request a verbal confirmation, by both employees, with the manager or manager’s designate is required. There shall not be any premium paid as a result of the exchange of shifts. Requests will not be unreasonably denied. All denials will be in writing with reasons for such denial. Full and part-time employees can exchange shifts.

Under special circumstances, with management approval staff may submit shift exchanges in advance of the current scheduling period and these requests will not be unreasonably denied (e.g. including but not limited to educational advancement reasons).

Full-time employees may request a shift exchange with employees who are not working the same number of hours on that shift however, in order to maintain full time hours (1950 per year) the full-time employee will request banked lieu time or vacation for the remaining hours.

In areas with the hybrid scheduling model, full-time employees may request up to twice per calendar year a shift exchange with employees who are not working the same number of hours on that shift providing that the full-time employee requests a personal leave of absence, utilizes banked premium hours or vacation for the remaining hours.

No partial shift exchange will be granted where one part exchanged is less than four (4) hours and a shift may not be separated into more than two (2) parts. When Nurses working 7.5 hour shift exchange a partial shift, the total number of hours paid by the Hospital for that exchanged shift shall not exceed 7.5 hours. In such circumstances when the shift is split between two nurses working 7.5 hour shift, each nurse shall be paid 3.75 hours.

For clarity, staff with approved vacation are not permitted to shift exchange into or out of an approved vacation shift.

(e) Shift and Weekend Premium

Shift Premium
In reference to Article 14.10, an evening shift shall be all hours worked between 1500 and 2300 hours, and a night shift shall be all hours worked between 2300 and 0700 hours.

Weekend Premium

In reference to Article 14.15, weekend premium will be paid for each hour worked between 2300 hours Friday and 2300 hours Sunday.

(f) Relief Periods

i) Relief periods as referred to in Article 13.01 (b) may be combined into one (1) relief period subject to the Clinical Director’s or designate approval. Meal and relief periods cannot be used to shorten the length of the shift.

ii) The scheduling of unpaid meal periods and paid relief periods as referred to in Article 13.01 (a) and (b) respectively shall be in accordance with the Unit’s assignment and shall be paid in one of two methods.

Option A:
1st fifteen (15) minute break – paid, 1st thirty (30) minute break – unpaid, 2nd fifteen (15) minute break – paid, 2nd thirty (30) minute break – half paid, half unpaid; or

NOTE: Scheduled breaks for 7.5 hour tours ends after the 2nd fifteen (15) minute break.

Option B:
1st thirty (30) minute break – paid, 2nd thirty (30) minute break – unpaid, 3rd thirty (30) minute break – half paid, half unpaid.

NOTE: Scheduled breaks for 7.5 hour tours ends after the 2nd thirty (30) minute break.

Option C:
Two (2) forty-five (45) minute breaks – 1st forty-five (45) minute break – unpaid, 2nd forty-five (45) minute break – paid.

iii) For the purposes of payment as referred to in Article 13.01 (d), the unpaid meal period on the night tour shall be scheduled between 2300 – 0400 hours.

iv) Employees who are prevented from leaving the Hospital building during unpaid meal periods, in order to respond to emergency codes, will be paid at regular straight time hourly rate.

v) Should an employee be recalled to duty during her/his meal time, additional time off shall be provided later in the tour. Employees who carry a CODE beeper will not be required to carry the beeper during their break times.

(g) Applies to all Scheduling Models
Holiday Season Scheduling

The Hospital will endeavour to follow the master rotation. The scheduling regulations may be adjusted by the Hospital between December 15th and January 10th to facilitate time off at either Christmas or New Year’s. The Hospital will endeavour to provide six (6) consecutive days but not less than four (4) consecutive days off at either Christmas or New Year’s periods. The Christmas period is defined as December 24, 25 and 26. The New Year’s period is defined as December 31 and January 1.

The above shall not apply to any area where employees normally work Monday to Friday and/or are not normally scheduled to work on Christmas Day, Boxing Day and New Year’s Day, unless operationally feasible. In addition, weekend workers will be required to work as per their regular schedule.

Employees may be required to work either the Christmas period, or New Year’s period, on alternate years and shifts, as required by the Hospital. Job share lines will only be required to work either Christmas period or New Year’s period and the partners shall determine how this obligation will be fulfilled. If the job share partners are unable to agree on which portion they will work, the Hospital shall schedule such work and the job sharer shall work in accordance with the posted schedule. Any changes made after the schedule has been posted must be arranged as per the Collective Agreement.

Requests for a preferred period of time off (days off in conjunction and contiguous to either the Christmas or New Year’s period) must be submitted by the employee to the manager by October 1st of each year. Requests will be approved on the basis of seniority, where there is a conflict. The Holiday schedule will be posted by November 1st.

If it is operationally possible to schedule employees to have both Christmas and New Year’s periods off, this will be scheduled on a rotational basis starting with the most senior (full and part-time staff) who has never had both off in a working year and who makes this request in writing. If an employee has been scheduled to be off work both Christmas and New Years in one year, and, if such employee is required to be scheduled to work the following year, such employee will be scheduled to work the opposite of what they were last scheduled to work in the holiday season.

Should it not be operationally possible to schedule staff according to their period last worked, the Hospital will ask for volunteers. If there are no volunteers, the Hospital will supply the Bargaining Unit President with a list of the unit(s), shifts(s) and nurse(s) affected 10 days prior to the posting of the schedule. The parties will then meet to discuss the options available to resolve the operational impact.

Where a patient care area has self-scheduling, the above provisions apply. Where employees schedule themselves to work part of either the Christmas or New Year’s period, they must identify which holiday, as per paragraph 1 above, they have worked. If the schedule is incomplete for required unit coverage, the manager may schedule in accordance with these provisions.
Employees who are absent in any year from December 15 through to January 10 inclusive may be scheduled at the discretion of the hospital to work either the Christmas period or New Year's period upon their return.

At the request of the employee the consecutive days off as noted above may be scheduled during the period of December 1st to January 10th to facilitate their cultural preferences.

(h) Permanent Tours

i) Consideration will be given by the Hospital to an employee who requests to work evening or night shifts on a permanent basis. The request and the Hospital's response will be in writing.

Termination of this arrangement, by either the Hospital or employee, can occur with notice of two weeks plus one complete scheduling period.

ii) An employee scheduled to work steady night tours shall have her weekend off scheduled on a Friday and Saturday.

iii) It is understood that an employee working permanent evening or night tours may be scheduled by the Hospital to the day tour for three (3) shifts each quarter.

(i) Banking of Premium Pay

In accordance with Article 14.09 of the Collective Agreement, where the full-time or part-time employee chooses equivalent time off for time worked, such time off shall be taken within the fiscal year at a mutually agreeable time. At no time will the employee accumulate more than forty five (45) hours of equivalent time off. If the employee is unable to schedule and take the time off by the end of the fiscal year, the employee will be paid for all hours owing.

In addition, for employees working on units anticipated to have scheduled temporary closures or slowdowns during the fiscal year, equivalent time off shall be taken at a mutually agreeable time before the end of the fiscal year. If the employee is unable to schedule the time off by the end of the fiscal year, the employee will be paid for all hours owing. It is understood, that full-time may bank up to ninety (90) hours and part-time employees up to forty-five (45) hours.

In addition, a part-time employee may only bank and utilize the above noted time within their home program; and banked time is paid out prior to full-time and part-time employees transferring to another program.

(j) Voting Procedure

Scheduling Model

i) Where the employees’ wish to change the unit’s scheduling model they will approach the unit manager. If the manager agrees to implement the proposed scheduling model a vote will proceed. It is
understood that such agreement by the Hospital shall not be withheld in an unreasonable or arbitrary manner. The voting procedure (with the exception of self scheduling) will be as follows:

a) A combined sixty percent (60%) of all full-time and regular part-time (including job sharers) employees permanently assigned to such units so indicate by secret ballot; and,

b) The secret ballot vote will be conducted, at no cost to the Hospital, by the Union. The Union will post the result of the vote.

ii) The secret ballot referred to above shall not take place unless six (6) months has elapsed from the day of any previous vote.

iii) A schedule may be discontinued or changed in any unit when:

a) Sixty percent (60%) of all full-time and regular part-time employees (including job sharers) permanently assigned to such unit so indicate by secret ballot; or

b) The Hospital determines that the schedule:
   A) Causes adverse effects on patient care; or
   B) Results in the inability to provide a workable staffing schedule; or
   C) Results in other undesirable outcomes that are neither unreasonable nor arbitrary.

iv) If a schedule in a unit is discontinued in accordance with (c) above, it is agreed that:

a) The parties shall meet within two (2) weeks of the decision to discontinue the schedule in such unit to review the decision: and,

b) The affected unit shall be given sixty (60) days notice before the scheduling model is amended.

Voting Procedure – Master Schedules

i) Changes to the Master Schedules for any unit shall be discussed at the Hospital-Association Committee as required.

The affected unit shall be given forty-five (45) days notice before the master schedule is amended.

Within that time period, when there are options for such master schedules the employees affected will then choose the preferred schedule by a majority vote of full and regular part time employees permanently assigned to such unit. Where the vote is between an existing schedule and an alternative, there must be a minimum of
60% of votes for the alternative to be implemented. The vote shall be conducted as in Voting Procedures above.

All schedules shall be approved by the Scheduling Committee. There shall be no more than two schedules for the final vote.

ii) The secret ballot referred to above shall not take place unless six (6) months has elapsed from the day of any previous vote.

iii) Employees shall choose their preferred lines according to seniority on the master schedule.

NOTE: The original incumbent job sharer or the most senior job sharer if there is no original incumbent shall choose the preferred line on the new master schedule according to the employee's seniority.

NOTE: For clarity, the notice periods specified above begins with written notice by FAX or e-mail to the bargaining unit president or designate following discussion between the parties and is co-incident with formal discussions with all staff on the affected unit(s).

(k) Where the available shifts in a patient care area permit, the Hospital will endeavour not to schedule employees more than fifty percent (50%) of the time on evening and/or night tours unless requested by the employee.

G-3 7.5 hour scheduling model

(a) Scheduling may provide for more than five (5) consecutive days of work but not more than seven (7) consecutive days of work without days off as long as four (4) days off are scheduled each fourteen (14) days. In any two (2) week period, at least two (2) consecutive days off must be scheduled. The remaining two (2) days may be split. Split tours will not be scheduled.

(b) When employees are shifting from a night tour to a day or evening tour, employees will have a period of forty-eight (48) consecutive hours off following the completion of a night tour when changing to the day or evening tour. Paid holidays or days in lieu thereof shall not be used to change tours.

Employees will have a period of fifteen (15) consecutive hours off between scheduled tours.

A shorter period of time between changes of tours may be scheduled by mutual consent.

When an employee is obligated by the Hospital to work with less than fifteen (15) consecutive hours off or forty-eight (48) consecutive hours off following the completion of a night tour when changing to the day or evening tour, the employee shall be paid in accordance with Article 14.03 for all hours worked on the next tour worked.

When an employee works overtime in conjunction with her/his full shift the above clause shall apply providing such overtime exceeds four (4) hours.
(c) i) Full-time only

The Hospital will schedule employees off either two (2) out of four (4) weekends or every other weekend depending on the unit schedule. However, an employee will receive, as per Article 14.03, premium payment for all hours worked on a third (3rd) consecutive and subsequent weekend, save and except where:

1) such weekend has been worked by the employee to satisfy specific days off required by such employee; or

2) such weekend is worked as a result of an exchange of tours with another employee.

The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

ii) Part-time only

The Hospital will schedule employees off at least two (2) out of four (4) weekends in the scheduling period. The Hospital will not schedule an employee to work more than two (2) consecutive weekends regardless of scheduling period. However, an employee will receive, as per Article 14.03, premium payment for all hours worked on the third (3rd) consecutive and subsequent weekend, save and except where:

1) such weekend has been worked by the employee to satisfy specific days off required by such employee; or

2) such weekend is worked as a result of an exchange of tours with another employee; or

3) such employee has requested weekend work only.

The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be
defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

(d) A weekend shall be defined as any period of at least fifty-six (56) consecutive hours off work during the period following the completion of the Friday day or evening tour until the commencement of the Monday day tour. Employees who are scheduled the weekend off will not be scheduled to the Friday evening tour save and except employees who work permanent evening shifts.

Based on availability, an employee may be scheduled a Friday evening shift; or accept a Friday evening shift, and premium payment applicable to consecutive weekends worked will be waived for this purpose only.

G-4 Traditional 11.25 hours Scheduling Model

(a) i) Full-time only

The Hospital will schedule employees off either two (2) out of four (4) weekends or every other weekend depending on the unit schedule. However, an employee will receive, as per Article 14.03, premium payment for all hours worked on a third (3rd) consecutive and subsequent weekend, save and except where:

1) such weekend has been worked by the employee to satisfy specific days off required by such employee; or

2) such weekend is worked as a result of an exchange of tours with another employee.

For the purpose of this section, a weekend shall be defined as any period of at least fifty-six (56) consecutive hours off work that includes Saturday and Sunday and commences no later than the completion of the Friday day or evening tour.

The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

ii) Part-time only

The Hospital will schedule employees off at least two (2) out of four (4) weekends in the scheduling period. The Hospital will not schedule an employee to work more than two (2) consecutive weekends regardless of scheduling period. However, an employee will receive, as per Article 14.03, premium payment for all hours
worked on the third (3rd) consecutive and subsequent weekend, save and except where:

1) such weekend has been worked by the employee to satisfy specific days off required by such employee; or

2) such weekend is worked as a result of an exchange of tours with another employee; or

3) such employee has requested weekend work only.

For the purpose of this section, a weekend shall be defined as any period of at least fifty-six (56) consecutive hours off work that includes Saturday and Sunday and commences no later than the completion of the Friday day or evening tour.

The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

(b) No more than three (3) consecutive extended tours will be scheduled without a day off. Premium will be paid as per Article 14.03, for all hours worked on the fourth (4th) and subsequent extended tours save and except where:

i) the tour is worked to satisfy specific days off requested by the employee; or

ii) the shift is worked as a result of an exchange of tours with another employee.

(c) For Traditional Schedule (with one week in six scheduled off) A full time employee will be scheduled only extended tours, to a total of two hundred and twenty five (225) hours over the six (6) week schedule. It is understood that this is the equivalent of seventy five (75) hours every two (2) weeks over the length of the schedule and that this will result in uneven bi-weekly pays. The master schedule provides employees with one period of seven (7) consecutive days without a scheduled shift, inclusive of their paid holiday lieu day. For clarity, 7.5 hours lieu days will be scheduled as part of the master rotation. In order to maintain full time hours (1950 per year), the employee will request either lieu time or vacation for the remaining 3.75 hours.

**G-5 4 on 5 Off Scheduling Model**

(a) An employee working the 4 on 5 off eleven point two five (11.25) hours
extended tour schedule shall receive three (3) weekends off in a nine (9) week schedule. Once an employee has worked six (6) weekends in a nine (9) week schedule, all hours worked on subsequent weekends in that nine (9) week schedule will be paid at premium as per Article 14.03. save and except where:

i) The weekend has been worked by the employee to satisfy specific days off requested by such employee; or

ii) The weekend is worked as a result of an exchange of tours with another employee.

For the purpose of this section, a weekend shall be defined as any period of at least fifty-six (56) consecutive hours off work that includes Saturday and Sunday and commences no later than the completion of the Friday day or evening tour.

The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

(b) No more than four (4) consecutive extended shifts shall be scheduled. The four (4) consecutive shifts will consist of two (2) eleven and one-quarter (11.25) hour days immediately followed by two (2) consecutive eleven and one-quarter (11.25) hour nights followed by five (5) consecutive days off. Premium will be paid, as per Article 14.03, for a fifth (5th) tour and subsequent tours save and except where:

i) The fifth (5th) extended tour is worked to satisfy specific requested days off requested by the employee; or,

ii) The fifth (5th) extended tour is the result of an exchange with another employee.

iii) The shift is the result of a required tour as requested by the employee.

(c) Notwithstanding the above, the parties agree that once each quarter of the year, each full-time line will be scheduled an additional required tour according to the needs of the nursing unit.

The required tours assigned will be two (2) day tours and two (2) night tours, unless agreed otherwise by the employee.
Such assignment will observe the normal scheduling guidelines in Article G-2 (a), including but not limited to, time off between tour changes and weekends off.

By mutual agreement, in advance of the posted schedule, an employee may be scheduled their required tour as a 5th shift in a row without premium applying.

Such assignments will be posted in accordance with Article G-2 (a) and will be brought to the attention of the employee by the posting of the schedule. This will include job share lines.

The assignment of required tours will not occur during the period from December 20th and January 10th and will not be assigned on a paid holiday unless otherwise agreed to by the employee.

Employees who wish to utilize over time hours already in their lieu bank for these required tours shall be allowed to draw 11.25 hours and apply this to the required tour. Such request must be made two weeks prior to the posting of the schedule. In addition, an employee may apply their required tour to a short notice call in, however the normal scheduling guidelines noted above will be observed.

(d) For Part Time Employees on a 4 on 5 off rotation:

(i) For part-time employees, any combination of four (4) consecutive extended tours must be followed by five (5) consecutive days off prior to returning to work a second (2nd) set of four (4) consecutive extended tours.

(ii) For part-time employees Article G-1 applies in regards to scheduling.

(iii) Based on availability, a part-time employee could be scheduled six (6) out of nine (9) weekends without consecutive weekend premium applying.

G-6 Self Scheduling Model

(a) i) Self-scheduling may be introduced into any unit when eighty percent (80%) of either the combined full-time and regular part-time employees (including job sharers), or regular part-time only (including job sharers), permanently assigned to the unit so indicate by secret ballot; and

ii) The Hospital agrees to allow self-scheduling on the unit. It is understood that such agreement by the Hospital shall not be withheld in an unreasonable or arbitrary manner.

iii) The secret ballot vote will be conducted, at no cost to the Hospital, by the Union. 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 either the combined full-time and regular part-time employees (including job sharers), or regular part-time only (including job sharers) permanently assigned to such unit so indicate by secret ballot; or

ii) The Hospital determines that the schedule:

   a) Causes adverse effects on patient care; or

   b) Results in the inability to provide a workable staffing schedule; or

   c) Results in other undesirable outcomes that are neither unreasonable nor arbitrary.

iii) The Hospital provides staff and union with sixty (60) days’ notice of a scheduling change.

(d) If a schedule in a unit is discontinued in accordance with (c) above, it is agreed that:

i) The parties shall meet within two (2) weeks of the decision to discontinue the schedule in such unit to review the decision; and,

ii) The affected unit shall be given sixty (60) days notice before the schedules are so amended.

(e) 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 either the combined full-time and regular part-time employees (including job sharers) or regular part-time only (including job sharers) vote in favour and subject to (a) ii) above, self-scheduling arrangements will continue.

(f) It will be the responsibility of the participating employees to ensure that adequate staffing coverage is maintained, that all shifts are covered prior to the posting period and that obligations under the Collective Agreement will be met and no violations of the Collective Agreement occur. Vacant lines will not be available during self-scheduling and will be booked at a later date by the staffing clerk or the manager.

Specifically, where part time employees self schedule, full time employees will be required to submit all time off requests three (3) weeks prior to the posting of the schedule. Part time employees who do not attend the self scheduling meeting are required to submit their availability in writing in time for the meeting.

(g) The schedule will be completed at least two (2) weeks prior to the required posting period and subject to final approval of the Department Manager.

(h) Further staff availability may be submitted at the time the self-schedule is submitted to the Department Manager.
(i) The self-scheduling model of staffing will be based on the following principles:

a) There will be an equal distribution of work (i.e. number of tours, types of shifts and weekends).

b) During the months of July and August stretches of time off exceeding eight (8) calendar days off must be requested as a leave of absence or vacation, in writing, to the manager and subject to approval.

c) Staff may self-schedule to work two (2) out of four (4) weekends in accordance with the appropriate scheduling model with the exception of part-time employees working in a patient care area where the full-time employees work a 4 on 5 off schedule, in which case part-time employees can work up to six (6) weekends in a nine (9) week scheduling period. The weekend shall be defined as per the appropriate scheduling model.

d) There will be forty-eight (48) hours off when switching from shifts that end at 0700 to a day or evening tour.

e) Based on the unit’s scheduling model, staff may self-schedule a combination of 7.5 and 11.25 hour shifts if required.

f) All full-time lines will have full-time hours in each scheduling period.

(j) The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

(k) The Collective Agreement shall apply in all respects. It is understood that no individual schedule will be implemented that contravenes any of the scheduling arrangements and other obligations set out in the Collective Agreement.

G-7 Hybrid Schedule

(a) The Hybrid Schedule is defined as one that results in an employee working a combination of extended tours (11.25 hour tours), ten (10) hour tours and normal tours (7.5 hour tours) within the scheduling period.

(b) i) Full-time only

The Hospital will schedule employees off either two (2) out of four (4) weekends or every other weekend depending on the unit schedule. However, an employee will receive, as per Article 14.03, premium payment for all hours worked on a third (3rd) consecutive and subsequent weekend, save and except where:

1) such weekend has been worked by the employee to satisfy specific days off required by such employee; or
2) such weekend is worked as a result of an exchange of tours with another employee.

For the purpose of this section, a weekend shall be defined as any period of at least fifty-six (56) consecutive hours off work that includes Saturday and Sunday and commences no later than the completion of the Friday day or evening tour.

The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

ii) Part-time only

The Hospital will schedule employees off at least two (2) out of four (4) weekends in the scheduling period. The Hospital will not schedule an employee to work more than two (2) consecutive weekends regardless of scheduling period. However, an employee will receive, as per Article 14.03, premium payment for all hours worked on the third (3rd) consecutive and subsequent weekend, save and except where:

1) such weekend has been worked by the employee to satisfy specific days off required by such employee; or

2) such weekend is worked as a result of an exchange of tours with another employee; or

3) such employee has requested weekend work only.

For the purpose of this section, a weekend shall be defined as any period of at least fifty-six (56) consecutive hours off work that includes Saturday and Sunday and commences no later than the completion of the Friday day or evening tour.

The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be
defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

(c) Employees will not be scheduled to work more than:

i) three (3) extended tours, or

ii) seven (7) normal (7.5 hours) tours or tours of less than 7.5 hours, or

ii) four (4) tours of a combination of normal and extended tours

iv) four (4) ten hour tours

without a day off. Should an employee work more than what is outlined above, she/he shall receive premium payment as per Article 14.03 for all hours worked on subsequent shifts except where:

i) the extra shift is worked by the employee to satisfy specific requested days off; and,

ii) the extra shift is worked as a result of an exchange of tours with another employee.

(d) Full-time only

Employees shall not be scheduled for single days off more than once in a pay period.

G-8 Ten Hour Tours

(a) For employees working ten (10) hour tours, a regular tour shall be 9.375 consecutive hours in any twenty-four (24) hour period, exclusive of a total of thirty-seven and one-half (37½) minutes unpaid meal time.

(b) Employees shall be entitled, subject to the exigencies of patient care, to relief periods during the tour of a total of thirty-seven and one-half (37 ½ ) minutes paid.

(c) Employees will have a period of twelve (12) consecutive hours off between scheduled shifts.

(d) No more than for (4) consecutive tours will be scheduled without a day off. Premium will be paid in accordance with Article 14.03 for all hours worked on the fifth (5th) and subsequent tours until time off is scheduled save and except where:

i) the tour is worked to satisfy specific days off requested by the employee, or

ii) the tour is worked as a result of an exchange of tours with another employee.

(e) i) Full-time only
The Hospital will schedule employees off either two (2) out of four (4) weekends or every other weekend depending on the unit schedule. However, an employee will receive, as per Article 14.03, premium payment for all hours worked on a third (3rd) consecutive and subsequent weekend, save and except where:

1) such weekend has been worked by the employee to satisfy specific days off required by such employee; or

2) such weekend is worked as a result of an exchange of tours with another employee.

For the purpose of this section, a weekend shall be defined as any period of at least fifty-six (56) consecutive hours off work that includes Saturday and Sunday and commences no later than the completion of the Friday day or evening tour.

The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

ii) Part-time only

The Hospital will schedule employees off at least two (2) out of four (4) weekends in the scheduling period. The Hospital will not schedule an employee to work more than two (2) consecutive weekends regardless of scheduling period. However, an employee will receive, as per Article 14.03, premium payment for all hours worked on the third (3rd) consecutive and subsequent weekend, save and except where:

1) such weekend has been worked by the employee to satisfy specific days off required by such employee; or

2) such weekend is worked as a result of an exchange of tours with another employee; or

3) such employee has requested weekend work only.

For the purpose of this section, a weekend shall be defined as any period of at least fifty-six (56) consecutive hours off work that includes Saturday and Sunday and commences no later than the completion of the Friday day or evening tour.
The parties agree that the acceptance of work on what would otherwise be a defined weekend off, of less than seven and one-half (7 ½) hours on that weekend, will not qualify the employee to consecutive weekend premium for subsequent weekend work.

Cancellation of the tour without proper notice, per Article 14.12, by the Hospital will entitle the employee to the above premium.

The parties agree that an employee must work a minimum of the full shift offered (at least 7.5 hours) on what would otherwise be defined as a weekend off in order to qualify the employee to consecutive weekend premium for subsequent weekend work.

G-9 Part-Time Only – Tours of Less than 7.5 Hours

Where tours of less than seven and one-half (7.5) hours are required, Article G in its entirely applies except as amended by the following:

(a) The Hospital will endeavour to keep the number of tour of less than seven and one-half (7.5) hours to a minimum.

(b) There shall be an equitable distribution of such tours among the regular part-time employees in each unit except where an employee requests to work exclusively tours of less than seven and one-half (7.5) hours and the manager and sixty percent (60%) of regular part-time employees in the patient care area agree.

(c) Employees working less than seven and one-half (7.5) hour tours shall be granted the appropriate paid rest period(s).

(d) For employees working tours of duty of less than seven and one-half (7.5) hours, no more than seven (7) shifts in a row shall be scheduled. If an employee is required to work on a eighth (8th) consecutive and subsequent tour, then she/he will receive premium payment for each shift so worked until a day off is scheduled.

(e) All hours worked on tours less than seven and one-half (7.5) hours shall be counted towards an employee fulfilling their commitment.

(f) For clarity, the relief periods will be as follows for tours of less than 7.5 hours:
   - Four (4) hour tour – 15 minutes
   - Five (5) hour tour (4.75 hours paid tour) – 15 minutes paid and 15 minutes unpaid
   - Six (6) hour tour (5.5 hours paid tour – 30 minutes unpaid meal and 15 minutes paid.

G-10 Standby

(a) The Hospital will notify the Bargaining Unit President prior to initiating permanent standby assignments on an unit.

(b) Full-time and regular part-time (including job share) employees may self schedule standby in an equitable manner according to the needs of the Unit. Where the needs of the Unit have not been met with the self-
scheduling, the Clinical Director will schedule standby in an equitable manner in accordance with the language below.

(c) Standby assignments shall be posted at the same time as the tour of duty schedules. Changes to the posted standby schedule will be brought to the personal attention of the employee at least forty-eight (48) hours in advance of the change. Employees shall be permitted to exchange their standby assignments.

(d) A full-time employee will not be scheduled for standby on a scheduled day off unless mutually agreed between the employee and the Hospital. Employees will not be scheduled for standby when on vacation.

(e) Employees with permanent standby assignment will be provided a beeper while on standby, if requested.

(f) Standby will not be scheduled on a night before a scheduled day shift unless otherwise agreed to by the employee.

(g) The parties agree to determine standby commitment on a unit-by-unit basis, and if necessary, will use the Scheduling Committee to vet changes to standby practices.

(h) i) The Hospital shall schedule such that no employee shall be required to undertake standby for longer than sixteen (16) consecutive hours or eight (8) consecutive hours where the employee is scheduled to work immediately prior or subsequent to the standby period.

ii) Employees will not be scheduled to standby immediately prior to or subsequent to an eleven point two five (11.25) hour tour.

**G-11 Reassignment of Staff in Accordance with 10.07**

Where the Hospital determines that an employee must be reassigned for a partial or single shift, the following will apply:

(a) Employees working on the unit on the shift will be asked for a volunteer to be reassigned and the most senior volunteer will be reassigned.

(b) Where there are no volunteers, the least senior casual employee working on the unit on the shift will be reassigned.

(c) Where there are no casual employees, the least senior regular part-time employee working on the unit on the shift will be reassigned.

(d) Where there are no regular part-time, the least senior full-time employee working on the unit on the shift will be reassigned.

The above procedure is subject to ensuring that the employees remaining on the unit are qualified to perform the available work. The Hospital will, in consultation with the employee, make the determination of whether or not the employee to be reassigned is qualified for the assignment. If the least senior employee has been re-assigned in the preceding six (6) weeks, the next least senior employee will be
re-assigned, subject to the latter. For clarity, nursing units are required to keep a log of the re-assignment activity for this purpose.

Should the unit which originally reassigned the staff member require additional staff during the same shift, the manager/designate may request for the reassigned nurse to return.

G-12 Cancellation of Shifts

Where the Hospital has determined that there is a need to cancel staff on a particular shift, it will be done in accordance with Article 10. Where the cancelation is after the start of the shift the following method will apply:

In applying the steps below off unit nurses shall be cancelled first.

a) Any nurse incurring overtime premium, so long as the overtime premium shift is not part of the employee's regular posted schedule.

b) Part-time nurses will be given first opportunity to volunteer

c) Where there are no part-time nurses choosing to volunteer, full-time nurses will be given next opportunity to use vacation or banked time.

d) Where there are no part-time or full-time nurses choosing to volunteer, casual nurses will be given next opportunity to volunteer.

e) Where there is more than one volunteer, the member with the highest seniority will be given the opportunity to go home.

f) Where there are no volunteers, casual nurses in reverse order of seniority will be cancelled first.

g) Where there are no casual nurses working that shift, regular part-time nurses in reverse order of seniority will be cancelled.

h) Where there are no casual or regular part-time nurses working that shift, full-time nurses in reverse order of seniority will be cancelled.

i) For purposes of this process, employees working in temporary positions will use their permanent status for this cancellation process as outlined in Article 10.08 and 10.09; for example: if a regular part-time nurse is working in a temporary full-time position, they will be cancelled as a regular part-time nurse.

Cancellation of nurses must be done according to the provisions of the Collective Agreement, and this provision above in no way disentitles any nurse from premiums set out in Article 14 should they apply.

ARTICLE H – PAID HOLIDAYS

H-1 In reference to Article 15.01 (full-time) or 15.08 (part-time), the twelve (12) Paid Holidays are as follows:
New Year’s Day     Civic Day
Family Day     Labour Day
Good Friday     Thanksgiving Day
Easter Monday     Remembrance Day
Victoria Day     Christmas Day
Canada Day – July 1    Boxing Day

H-2 For the purposes of this Article, a paid holiday shall consist of twenty-four (24) hours, commencing at 2300 hours on the day prior to the day on which the paid holiday is recognized.

H-3 If any of the above holidays is proclaimed on a day other than the traditional calendar day, the proclaimed day shall be substituted for the traditional calendar day.

H-4 Full-Time Only (Applies to 7.5 hour scheduling model, hybrid schedule, and ten hour tours)

(a) In reference to Articles 15.04 and 15.05, a lieu day off shall be scheduled within sixty (60) days following such paid holiday at a time mutually agreed upon, or the employee may request to bank up to five (5) lieu days to be used for personal emergencies between January 2nd and December 15th of each year. Christmas Day, Boxing Day and New Year’s Day may not be banked. Any outstanding lieu banks not used by December 15th each year will be paid out.

In order to use the above options the employee must:

i) Request the lieu day for a specific time or give notice to bank the lieu day two (2) weeks prior to the posting of the schedule;

ii) If no request is received under (a) within two (2) weeks from the earned lieu day, the Hospital may schedule the lieu day.

iii) Requests for specific lieu days shall be requested two (2) weeks prior to the posting of the schedule. The manager will respond with approval or denial of such requests within two (2) weeks of receipt, in writing. However, urgent or emergency requests for time off due to family illness, health related appointments or bereavement not covered by the Collective Agreement or family problems may be requested at any time after the schedule is posted. Such requests will not be unreasonably denied.

(b) Notwithstanding H-4 (a), employees working the traditional 11.25 hour extended tour schedule, lieu days will be scheduled as part of the master rotation. However, an employee may request in writing, two (2) weeks prior to the posting of the schedule an alternate lieu day off. Such requests shall not be unreasonably denied. For the traditional schedule (with one week in six scheduled off) please refer to G-4 (c).

(c) Notwithstanding H-4 (a), full-time employees working the 4 on 5 off extended tour, a paid holiday lieu day shall be scheduled by the employee on an otherwise unscheduled day.

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H-5 Employees entitled to a paid holiday lieu day will receive seven and one-half hours paid and may use any combination of lieu time or vacation time to receive payment for the full tour off.

H-6 Part-time Only

The Hospital will endeavour, where possible, to schedule employees to work the holiday if scheduled to work the adjoining weekend subject to scheduling restrictions, master schedules and employee availability and seniority.

ARTICLE I – VACATIONS

I-1 In reference to Article 16, the date for determining vacation entitlement shall be service as of June 30th.

I-2 (a) Vacation earned for the vacation period ending June 30th of any year must be taken by June 30th of the subsequent year.

(b) Vacation may be requested prior to June 30th in any year but must not exceed earned vacation to that date taken.

(c) All requests must be submitted on the appropriate form to, and approved by the manager/designate in writing. Vacation requests will be accepted up to (2) weeks prior to the posting of the schedule. Only under exceptional circumstances will vacation requests be considered after that period. The Manager will respond with approval or denial of such requests, within two (2) weeks of receipt.

(d) Vacation requests submitted after the timelines provided in I-3 will be considered on a first come, first serve basis.

I-3 Prime Time Vacation will be identified for the purposes of Article I-3 as July 1 – September 15. The entire schedule for the Prime Time Vacation Period will be posted not later than May 15 of each year.

Vacation Lists shall be posted by February 15th in each year. Vacation request lists will be posted in a two (2) tier process; 50% of the Employees who are most senior on each unit will have until March 15 to put in their requests; the remaining 50% of the Employees will then have until April 1 of each year to fill in their vacation requests. Vacation lists shall be withdrawn on April 1st and finalized vacation approvals will be posted no later than April 30th. Employees shall be given preference with respect to vacation period in accordance with seniority. Requests received after April 1 will be scheduled on a first come, first served basis. Vacation quotas will be determined on each unit, and will be reasonable. Vacation quotas will be reviewed annually prior to the summer vacation request process and will be communicated to staff. Where an adjustment is made to the quota within the vacation year, management will communicate the quota to staff. Upon request by the Union the Hospital shall provide the union with the detail on how the quotas were calculated. The Parties shall act reasonably with respect to all requests for information. Employees may request all their annual vacation entitlement during the above noted time period.

(a) Vacation requests for Prime Time will be submitted as per Article I-3. Employees may choose to submit a first and second choice for Prime Time
Vacation requests, however it is understood that seniority will be the deciding factor, specifically where there is a conflict, senior Employees will be granted their first choice prior to Employees junior to them.

(b) Employees who have one (1) to twelve (12) years of service may be granted no more than two (2) weeks vacation during the Prime Time Vacation Period.

(c) Employees who have thirteen (13) to twenty-seven (27) years of service may be granted no more than three (3) weeks vacation during the Prime Time Vacation Period.

(d) Employees who have more than twenty-seven (27) years of service may be granted no more than four (4) weeks vacation during the Prime Time Vacation Period.

(e) Vacation requests for full weeks will have precedence over less than full week requests during Prime Time, provided they are submitted in accordance with Article I.

(f) For Prime Time Vacation requests one (1) week will be defined as Monday through Sunday.

I-4 Additional vacation requests will be considered, only after all Employees have had their Prime Time Vacation Requests submitted in accordance with I-3, and Prime Time Vacation requests have been approved. Approval of such requests will not be unreasonably denied.

I-5 Once schedules are posted, if an employee no longer desires their requested approved vacation, they may make themselves available to pick up tours. Such employees will be called last for any tours; after all other available employees have been offered such tours, i.e. prior to premium calls.

For clarity, staff with approved vacation are not permitted to shift exchange into or out of an approved vacation shift.

ARTICLE J – MISCELLANEOUS

J-1 The Hospital shall provide four (4) bulletin boards at each site (KW and Freeport) for the use of the Union. One bulletin board will be provided at each of the Guelph dialysis satellite, 850 King Street and the Hazelglen site in Cambridge and Palmerston site. Relocation of bulletin boards will be discussed at Hospital-Association Committee.

J-2 In reference to Article 11.11 (c) Prepaid Leave Plan, a total of ten (10) employees (full-time or part-time) may be absent at any one time.

J-3 Travel between Hospital Sites

Where the hospital requires the employees to travel between Hospital Sites during their shift, they may choose to take a taxicab or their own automobile. The parties further agree that the hospital should not be responsible for reimbursing an employee for expenses incurred by her when she travels from one hospital to the other to fulfill duties on behalf of the Union.
Where employees choose to take a taxicab, they will be provided with a taxi voucher at no cost to themselves.

Where employees choose to use their own automobile, they will be reimbursed as per Article 14.13.

J-4 Employees who have paid for parking at one site, will not be required to pay for parking at alternative sites. Should this occur, the employee will be reimbursed any out of pocket parking expenses.

J-5 Notification to Unsuccessful Job Applicants

The parties agree that any unsuccessful candidate, who was interviewed for a specific posting, will be contacted, within one (1) week of the acceptance of the position by the successful candidate and prior to the posting of the name of the successful candidate. All other applicants will be advised as per current practice, such practice will be discussed at Labour Management Meetings on an ad hoc basis.

J-6 Union Matters

The Bargaining Unit President shall have the option of being scheduled only on the day tour except where such request would result in an inability to provide a workable staffing schedule within a specific unit. Such request shall not be unreasonably denied.

The employer shall provide an office in the hospital for the sole use of the Union executive.

The employer shall provide a voice mail system for the Bargaining Unit President.

J-7 Re: Electronic Grievance

1. The parties agree to use the electronic version of the O.N.A. Grievance Form at Appendix 1 of the Hospital Central Agreement.

2. The parties agree that hard copies of the electronic form are valid for purposes of Article (7 and/or 8) of the Hospital Central Agreement.

3. The union undertakes to get a copy of the electronic version signed by the grievor and/or complainant, if the grievance goes beyond step 2 of the grievance process as outlined in the central collective agreement.

4. 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.

J-8 Full-time Temporary Vacancies

In accordance with Article 10.07 (d) Full time employees shall be considered for temporary vacancies on the same basis as regular part time employees.
ARTICLE K – RETIREMENT

K-1  Retiree Benefits – Process for payment

(a) It is understood and agreed that the following shall apply:

i) To be eligible for retiree benefits the retiree must have been a participant in the Hospital benefit plans as outlined in Article 17.01 (h) for a period of twelve (12) months prior to making application for retiree benefits.

ii) Dependent coverage shall be those dependents that were covered for the period as in (i) above and no dependants may be added following the nurse’s last day of work.

iii) The benefit plan(s) applicable to the retiree shall be those in place at the Hospital at the time of application.

iv) In the event that plan design should change the retiree benefits shall remain consistent with those plans in effect for full time members of the ONA bargaining unit.

v) A retiree’s participation and coverage is subject to the terms and conditions of the plan and changes thereof.

vi) The retiree shall be billed and provide advance payment for the full amount of the premiums on a monthly basis. The application for retiree benefits shall be accompanied by a “void” cheque to be used as direct withdrawal for the monthly payment. The Hospital shall notify the nurse of any increase in the premiums and the retiree shall remit payment for any increase in a timely fashion and amend any payments as necessary.

vii) In the event that the retiree wishes to terminate coverage, the retiree shall provide three (3) months notice in writing to the Hospital. The retiree may not rejoin the plan once coverage has been terminated.

(b) Any and all coverage shall cease immediately upon the occurrence of any of the following:

i) Any quarterly payment is missed or a cheque is returned to the Hospital.

ii) Failure to remit payment in respect of any increase in premiums within 30 days of being notified by the Hospital of the increased rate.

iii) The death of the retiree.

iv) The retiree’s 65th birthday.

v) The closure of the Hospital.

(c) Once coverage is terminated for any reason, the Hospital is under no further obligation to offer coverage to the retiree.
(d) The Hospital will notify the Union of the benefit costs to retired employees in April of each year, or on the annual renewal date.

ARTICLE L – DISABILITY MANAGEMENT

L-1  (a) Worker’s Safety and Insurance Board

The Hospital agrees to provide, via email or otherwise, the Unions site representative on Occupational Health and Safety Committee and the Bargaining Unit President with a copy of the Workplace Safety and Insurance Board’s Form #7 (Employer’s Report of Accidental Injury or Industrial Disease) at the same time it is sent to the Board.

(b) Transitional Work Programs

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

The parties understand their obligations in accordance with the Ontario Human Rights Code and the Workplace Safety and Insurance Act.

(ii) In the event of a workplace injury/illness that precludes an employee from performing their full duties and/or when an employee has submitted medical information indicating they are unable to return to the full duties of her or his position due to a disability, the Hospital will provide the employee with an initial offer of modified work and notify and meet with the Bargaining Unit President or designate and the employee and to discuss the circumstances surrounding the possibility of modified and/or accommodated work. A copy of the Modified Work Plan will be provided in advance of the meeting. The parties may mutually agree, where appropriate, that a meeting is not required. The parties may agree to conduct the meeting via teleconference to facilitate employees return to work.

(iii) Time spent by the employee’s union representative will be compensated at regular straight time hourly rates. All employees accessing the Transitional Work Program will be informed of their right to union representation at any such meetings to discuss their Return to Work Program, by the employer, prior to the employer meeting with them at the first Return to Work/Transitional Work meeting.

The Employer agrees that a joint accommodation committee consisting of an equal number of Union and management representatives will facilitate any accommodation of disabled employees.
Joint Accommodation Committee Meeting

The Employer agrees that a joint accommodation committee consisting of an equal number of Union and management representatives will meet every month unless otherwise agreed. The date(s) of these meetings will be mutually agreed. The purpose of the committee shall be to discuss issues related to members who are off work due to disability, to explore the possibilities of the accommodation of disabled employees and to monitor any permanent or temporary accommodations that are ongoing.

(a) The Hospital will notify the Bargaining Unit President of the names of all bargaining unit members who have reached fifteen (15) weeks off work as a result of any illness or injury.

(b) The Hospital will notify the Bargaining Unit President of the names of all bargaining unit members who go off work due to a work related injury or when off work on LTD, by the thirtieth (30th) of every month.

(c) Time spent by the employee’s union representative will be compensated at regular straight time hourly rates.

ARTICLE M– VIOLENCE IN THE WORKPLACE

(a) Violence shall be defined as any incident in which an employee is abused, threatened or assaulted during the course of their employment. The Hospital agrees that these incidents will not be condoned in the workplace. Any employee who believes their situation was abusive shall report this to their immediate supervisor who will make every reasonable effort to rectify the situation.

(b) The parties agree that if incidents involving an aggressive patient or visitor occurs, such action will be recorded and reviewed at the Occupational Health and Safety Committee. Reasonable steps within the control of the Hospital will follow to address the legitimate health and safety concerns of the nurses presented in that forum.

The parties further agree that suitable subjects for discussion at the Hospital Association Committee will include aggressive patients.

(c) Within three (3) days of being notified that an employee has been assaulted while performing their work, the Occupational Health and Safety Department shall notify the Bargaining Unit President or designate and the Unions site representative on the Occupational Health and Safety Committee, in writing. The assaulted employee may choose to have their name remain confidential. Updated statistics on numbers of staff assaulted while performing work will be brought to each meeting of the Joint Health and Safety Committee.

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

**ARTICLE N – GUIDELINES FOR REPORTING SICK TIME**

**Reporting Off Duty**

N-1  
(a) When reporting off ill, notify the designated area.  
(b) For the evening or night tour of duty for 7.5 hours tours – the employee shall endeavour to contact the designated area four (4) hours in advance.  
(c) For the evening or night tour of duty greater than 7.5 hours - the employee shall endeavour to contact the designated area three (3) hours in advance.  
(d) For employees whose day tour of duty commences on or prior to 1200 hours – The employee will endeavour to contact the designated area two (2) hours in advance. However, for tours that begin at 0700 hours it is recognized that an employee may find upon waking that she/he is not fit to report for duty and they will endeavour to reach the designated area no less than 90 minutes in advance.

**Returning to Work**

N-2 In order to plan for appropriate patient care, the minimum reporting expectation is:  
(a) at least ten (10) hours before the commencement of the next scheduled day tour of the employee; and  
(b) at least six (6) hours before the evening or the night tour.  

It is understood that the above process does not apply to absences that would require a return to work plan.

**ARTICLE O – JOB SHARING**

Recognizing that some employees desire a more flexible working arrangement than is currently provided for in the Collective Agreement, the parties agree to the following terms and conditions and scheduling regulations for Job Sharing.

O-1 All such positions shall be considered Full-Time.  
O-2 Job sharers shall be treated as regular Part-Time employees for all purposes, with the exception of part-time scheduling language.  
O-3 Posted schedules for job-sharing will be identical to the rotation for the full-time line that they share and subject to the Local full-time scheduling language and premiums.  
O-4 The total number of employees allowed to job share will be up to a maximum of seventy (70) positions. If expansion of the maximum number of job-shared
positions is desired by either party, such will be done so by mutual agreement of the parties. Individuals who are presently working full-time and wish to make application to job share shall do so to their Manager. The applicant's portion of the position will not be posted but the remainder of the original position shall be posted as per the Central Collective Agreement.

O-5 If more employees in an area make application to job share in that area than is acceptable to the Hospital, the decision of which jobs is (are) to be shared shall be based on seniority.

O-6 The selection process for applicants to the posted position shall be in accordance with the Central Collective Agreement.

O-7 If one of the job sharers terminates their position or transfers to a different position, the posting of such Job Share vacancy will be as per the Central Collective Agreement.

O-8 Job sharers will have the option of determining between themselves which portion of the rotation they will work; however, this determination must be made before the schedule is posted and each job sharer will be required to work a minimum of one shift per month except during vacation time. If the job sharers are unable to agree on which portion they will work, the Hospital shall schedule such work and the job sharers shall work in accordance with the posted schedule. Any changes made after the schedule has been posted must be arranged as per the Collective Agreement.

O-9 (a) Job sharers shall be required to cover for each other’s vacation except in an emergency situation. Where job sharers cover for each other’s vacation, the vacation approval shall not count in the unit vacation quota.

(b) Job sharers shall be offered their partner’s incidental illness days, sick leave and any other leave of absence. If the partner is unable to be contacted or cannot work, the Employer will schedule such hours in accordance with the Collective Agreement.

(c) The job sharers shall have the option of exchanging shifts with other full-time and part-time employees in accordance with the Collective Agreement.

O-10 Discontinuation

The Union or the Hospital 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. If the Job Sharing arrangement is discontinued, then the full-time position shall be offered to the original owner of the full-time position, if any, prior to it being posted as a full-time position as per Article 10.07. If as a result of the discontinuation of the job share position the original owner of the position does not accept the full time position or the remaining job sharer(s) is not the original owner she/he will revert to a regular part time position in the unit. If the elimination of a job share position results in a layoff in the unit, all of the provisions under Article 10 will apply.
O-11 Job sharers have the option to pick up additional tours, in accordance with their part-time seniority, once regular part-time have been offered tours up to their commitment.

O-12 Employer will provide to the Union the names of all nurses working in a job share and will indicate who the original FT incumbent, if any, to the job share position was and the unit they work on by February 15th of each year.

**ARTICLE P – PAY**

P-1 (a) Pay cheques will be deposited directly to the bank of the employee’s choice on a bi-weekly basis.

(b) Pay stubs will be available two (2) days prior to the regular pay day.

(c) The employer shall not make any unauthorized deductions without the employee’s written consent.

(d) Any errors or omissions by the employer on an employee’s pay cheque, when the amount owing is equal to or greater than seven and a half (7.5) hours pay, shall be reimbursed either by manual cheque or by direct deposit within five (5) working days of notification to the Employer. Any errors or omissions by the employer on an employee’s pay cheque, when the amount owing is less than seven and a half (7.5) hours pay, shall be paid by direct deposit on the following pay. It is the employee’s responsibility to identify the preferred method of payment. Should the employee fail to identify a preference, the hospital will determine the appropriate method of payment.

(e) Any staff on Short Term Disability or Leave of Absence, for which a pay stub is generated, in excess of four (4) weeks, shall have their pay stubs mailed to their home address on pay day, at their request. In the case of Pregnancy and Parental Leave, or other absence of known duration, the request may be made at the start of the absence.
Dated at Kitchener, Ontario, this 19 day of November, 2018.

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LETTER OF UNDERSTANDING

Between:

GRAND RIVER HOSPITAL CORPORATION
(Hereinafter referred to as “the Hospital”)

And:

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

Re: Uniform Allowance

The Hospital shall provide and launder scrubs at no cost to the employees in the following areas: OR, PACU, DELIVERY, ENDOOSCOPY SUITE, INTERVENTIONAL SUITE, and GYNECOLOGICAL/SPECIALTY CLINIC.

Notwithstanding the above, the parties agree that throughout the lifetime of the Collective Agreement there will be discussion at the Hospital-Association Committee on the option of continuing to supply uniforms.

The parties agree that they may mutually agree during the lifetime of the Collective Agreement to alter the areas outlined above based on the options.

Dated at Kitchener, Ontario, this 19 day of November, 2018.

Saldon Traina
Labour Relations Officer

Glen Oram

Slavko Sapeta

Bruce Jermyn

Jill Schitka

Carol Gunsch

Amanda Plozzer

Carol Bulgin

Jennifer Cepukas

Michelle Heffernan
LETTER OF UNDERSTANDING

Between:

GRAND RIVER HOSPITAL CORPORATION
(Hereinafter referred to as “the Hospital”)

And:

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

RE: Electronic Professional Responsibility Workload Report Form

When technologically feasible the parties shall meet to discuss the implementation of an electronic PRWR form on the employers intranet.

Dated at __Kitchener__________, Ontario, this __19___ day of __November______, 2018.

FOR THE EMPLOYER FOR THE UNION

Saldon Traina ___________________ Glen Oram ____________________________
Labour Relations Officer

Slavko Sapeta ___________________ Bruce Jermyn _________________________

Jill Schitka _____________________ Carol Gunsch _________________________

Amanda Plozzer _________________ Carol Bulgin _________________________

_____________________________ Jennifer Cepukas _______________________

_____________________________ Michelle Heffernan ______________________
LETTER OF UNDERSTANDING

Between:

GRAND RIVER HOSPITAL CORPORATION
(Hereinafter referred to as “the Hospital”)

And:

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

RE: Article 13:04 – Unit Weekend Schedule

The Hospital and Association agree to a Unit Weekend Schedule Pursuant to Article 13:04 of the Central Collective Agreement. The following conditions will apply:

(a) A Unit Weekend Schedule may be introduced on a unit when:

   (i) A full-time nurse submits to her/his manager a request in writing to work a Unit Weekend Schedule, and the manager, upon review determines that such an arrangement is acceptable for the unit or;

   (ii) When a manager identifies a need for a Unit Weekend Schedule

(b) Where the introduction of a Unit Weekend Schedule creates a significant change to the existing master schedule, such work schedule will be introduced into the unit subject to the voting procedure outlined in Article G-2(i) and G-2(j).

(a) Once the affected employees have chosen their lines on the new master schedule according to seniority, the unit weekend schedule will be implemented at the beginning of the next scheduling period.

(b) The schedule will provide a weekly average of thirty (30) hours and will include two (2) 11.25 hour tours and one 7.5 hour tour.

(c) A weekend worker shall not be entitled to weekend and shift premiums.

Discontinuation

1. Converted position

(a) Either party, with the provision of 90 days written notice, may discontinue the Unit Weekend Schedule arrangement.

(b) Upon receipt of notice of discontinuation, the parties will arrange a meeting to discuss the discontinuation of the arrangement.

(c) Should the Unit Weekend Schedule arrangement be discontinued, the nurse in such position will revert back to her/his previous position. If a change to the master
schedule is required; once the affected employees have chosen their lines on the new master schedule according to seniority, the Unit Weekend schedule will be discontinued.

2. Posted Position

(a) Where a nurse elects to discontinue the Unit Weekend Schedule position, she/he will remain in such position until she/he is successful in obtaining alternate employment through the posting process or

(b) She/he may elect to move to an available casual position on the unit.

(c) Where the Hospital elects to discontinue the Unit Weekend Schedule position, Article 10.08 of the Collective Agreement will apply.

Dated at Kitchener, Ontario, this 19 day of November, 2018.

FOR THE EMPLOYER
Saldon Traina
Slavko Sapeta
Jill Schitka
Amanda Plozzer

FOR THE UNION
Glen Oram
Labour Relations Officer
Bruce Jermyn
Carol Gunsch
Carol Bulgin
Jennifer Cepukas
Michelle Heffernan
LETTER OF UNDERSTANDING

Between:

GRAND RIVER HOSPITAL CORPORATION
(Hereinafter referred to as “the Hospital”)

And:

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

RE: Article G-2 (i) - Banking of Premium Payment

WHEREAS the parties agree that contrary to Article G-2 (i), the Hospital will permit ONA members to use their overtime lieu bank for payment on dates where they do not have scheduled shifts.

AND WHEREAS the parties agree that this practice will continue for the life of this renewed collective agreement and statutory extension.

In addition, it is understood that the Hospital has provided the union notice that this practice will cease at the conclusion of this renewal collective agreement. However, this does not preclude the union from tabling a proposal regarding this provision at collective bargaining.

Dated at ______ Kitchener _______, Ontario, this ______ day of ______ November_______, 2018.

FOR THE EMPLOYER FOR THE UNION

Saldon Traina Glen Oram
Labour Relations Officer

Slavko Sapeta Bruce Jermyn

Jill Schitka Carol Gunsch

Amanda Plozzer Carol Bulgin

Jennifer Cepukas

Michelle Heffernan
Let's break down the letter of understanding into its components and ensure it's understandable. Here's how it's structured:

**Letter of Understanding**

Between:

**Grand River Hospital Corporation**  
(Hereinafter referred to as “the Hospital”)

And:

**Ontario Nurses’ Association**  
(hereinafter referred to as “the Union”)

**Re: Composite Positions: Employees Working on Two (2) Units Within a Program**

Where the parties agree that full-time and/or part-time composite position(s) may be created.

(a) The Hospital shall notify the union of any new proposed composite positions and shall provide the details of the positions including a draft job posting setting out proposed home unit, and the other unit, the hours of work, and the skills abilities experience and qualifications for the position(s).

(b) The posting of such position(s) will clearly outline the requirement to work in more than one unit and will specify the home unit and other unit to be worked.

(c) This nurse will be scheduled on a master schedule where possible.

(d) The incumbent will receive orientation to both areas and on an ongoing basis will be offered in-service opportunities provided to both areas.

(e) All scheduled hours will clearly indicate to which unit the nurse must report.

(f) The employee will request and receive vacation approval from their home unit. The same will apply to statutory holidays.

(g) For the purposes of layoff, recall, or any other provisions dealing with seniority rights, the home unit will be used.

(h) The discontinuation or elimination of these composite positions will be dealt with under Article 10.08 of the central hospital agreement.

(i) All terms and conditions of the Collective Agreement, including scheduling will apply unless otherwise amended above.
Dated at Kitchener, Ontario, this 19 day of November, 2018.

FOR THE EMPLOYER

Saldon Traina
Slavko Sapeta
Jill Schitka
Amanda Plozzer

FOR THE UNION

Glen Oram
Labour Relations Officer
Bruce Jermyn
Carol Gunsch
Carol Bulgin
Jennifer Cepukas
Michelle Heffernan
Between:

GRAND RIVER HOSPITAL CORPORATION  
(Hereinafter referred to as “the Hospital”) 

And:

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

RE: Union Leave Requests  

The parties agree to continue the current practice with respect to requests for union leave on days where an employee may not have been actually scheduled to work, and further agree to continue the current practice with respect to union reimbursement to the employer for salary and benefit continuation on such days until March 31, 2019. Prior to March 31, 2019, the parties will meet to discuss any changes to the process for union leaves. 

Where the union representatives are casual or unscheduled Part time and where the leave is requested in advance of the posted schedule the employer shall place the nurse on the schedule on the requested union leave days for the purpose of the continuation and reimbursement of salary under Article 11.02 (a). 

Dated at Kitchener, Ontario, this 19 day of November, 2018. 

FOR THE EMPLOYER      FOR THE UNION 

Saldon Traina       Glen Oram 

Slavko Sapeta       Bruce Jermyn 

Jill Schitka       Carol Gunsch 

Amanda Plozzer       Carol Bulgin 

Jennifer Cepukas       Michelle Heffernan  

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