

BETWEEN

WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE)

AND

HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

April 1, 2013 to March 31, 2017



Dear Member:

Your Manitoba Nurses' Union Collective Agreement guarantees your salary and benefits. The provisions in this agreement ensure your right to be treated in a fair and respectful manner in your workplace. Provisions also give you a voice in decision making regarding patient care and allow you to document situations which may be unsafe for nurses and our patients.

Nurses in Manitoba unionized in 1975. This Collective Agreement represents the commitment and hard work of thousands of nurses over the years. We are proud to be able to say that we have one of the best agreements in Canada. As representatives of 97% of nurses in Manitoba, we believe that our voice is the most effective in speaking out for nurses on workplace and patient care issues.

To ensure fair treatment, you must be aware of your rights. Please take the time to read this agreement. If you have any questions, please talk to your Ward Rep or Local/Worksite President. Your Labour Relations Officer can be reached at the MNU Provincial Office. Phone numbers are listed on the back cover of this agreement.

Sincerely,

Sandi Mowat President

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INDEPENDENT ASSESSMENT COMMITTEE (I.A.C.)
INDEPENDENT ASSESSMENT COMMITTEE (I.A.C.)

THIS AGREEMENT MADE BETWEEN

WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE)

(herein called the "Employer")

– and –

HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

(herein called the "Union")

PREAMBLE

WHEREAS, it is the desire of both parties to this Agreement to recognize a mutual obligation to provide the best possible quality of health care through the successful operation of the Health Care Facility as a service institution; and to maintain harmonious relationships between the Employer and the members of the Union; and to recognize the value of joint discussion and negotiation in matters related to working conditions; and

WHEREAS, the Employer and the Union have agreed to enter into a Collective Agreement containing terms and conditions of employment of the nurses as herein set forth; and

WHEREAS, the Employer recognizes the responsibility to secure nurses from risks to their safety, health and welfare arising out of or in connection with the activities in their workplaces, the Employer will comply with their responsibilities in accordance with Section 2(2) of The Workplace Safety and Health Act.

NOW, THEREFORE, the Employer and the Union mutually covenant and agree as follows:

ARTICLE 1 -- SCOPE OF RECOGNITION

101 The Employer recognizes the Union as sole bargaining agent for nurses in the bargaining unit defined in the Manitoba Labour Board Certificate MLB-5922.

ARTICLE 2 - DURATION

201 This Collective Agreement shall be in full force and effect from the 1st day of April, 2013, up to and including the 31st day of March, 2017.

202 Either party to this Collective Agreement desiring to terminate this Collective Agreement or renegotiate a new Agreement, shall give notice to the other party in writing at least ninety (90) days prior to the expiration date of the Collective Agreement and present its proposals in writing at a meeting between the parties, within thirty (30) days following such notice. If notice is not given as above, the Collective Agreement shall be automatically renewed without change for a further period of one (1) year.

<u>203</u> The provisions of this Agreement shall continue in effect following the expiry date until replaced by a new Agreement, or until the declaration of a strike or lockout, whichever occurs first.

ARTICLE 3 -- DEFINITIONS

<u>301</u> A "nurse" is a Registered Nurse, or a Nurse Practitioner (Registered Nurse Extended Practice) or a Licensed Practical Nurse, or a Registered Psychiatric Nurse, or a graduate nurse, or a graduate nurse extended practice or a graduate practical nurse, or a graduate psychiatric nurse who is employed by the Employer in one of the occupational classifications described in Appendix "C" attached hereto and forming part of this Agreement, subject to 3807 herein.

- **302** Employment status of nurses shall be defined as:
- (a) A "full-time nurse" is one who works the full prescribed hours of work specified in Article 14.
- (b) A "part-time nurse" is one who works on a regular and continuing basis for less than the full prescribed hours as specified in Article 14 but not less than seven and three-quarter (7.75) hours per bi-weekly period when averaged over a four (4) week period.

Notwithstanding this, any nurse employed prior to April 1, 1996 on a parttime basis which permits her/him to work less than the above shall maintain her/his part-time employment status.

(c) "Casual nurse" as defined in 3501.

<u>303</u> "Weekend" shall mean the 48 hour period between 0001 hours on the Saturday to 2400 hours on the following Sunday.

<u>304</u> "Bi-weekly period" as used herein shall mean the two (2) weeks constituting a pay period.

<u>305</u> Wherever the feminine pronoun is used in this Agreement it includes the masculine pronoun where the context so requires. Where the singular is used it may also be deemed to mean plural.

<u>306</u> A "Registered Nurse" or a "Nurse Practitioner" (Registered Nurse Extended Practice) is a person entitled to practice under the Registered Nurses' Act of Manitoba.

<u>307</u> A "Licensed Practical Nurse" is a person entitled to practice under the Licensed Practical Nurses' Act of Manitoba.

<u>308</u> A "Registered Psychiatric Nurse" is a person entitled to practice under the Registered Psychiatric Nurses' Act of Manitoba.

309 An Operating Room Technician shall mean a person who has graduated from a formal course in Operating Room Technology approved by the Employer.

310 A "graduate nurse" means a person whose name is entered on the graduate nurse register of the College of Registered Nurses of Manitoba. A graduate nurse extended practice means a person whose name is entered on the graduate nurse extended practice register of the College of Registered Nurses of Manitoba. A "graduate practical nurse" means a person whose name is entered on the register of graduate practical nurses of the College of Licensed Practical Nurses of Manitoba. A "graduate psychiatric nurse" means a person whose name is entered on the register of graduate psychiatric nurse" means a person whose name is entered on the register of graduate psychiatric nurses of the College of Registered Psychiatric Nurses of Manitoba. The terms of this Agreement shall be applicable to the graduate nurse, the graduate practical nurse, graduate psychiatric nurse, and graduate nurse practitioner, except as otherwise specified in the Collective Agreement.

<u>311</u> <u>Definition of Continuous Service/Length of Employment</u>

"Length of Employment" shall mean the period of time since an employee last became a full-time or part-time employee in a permanent or term position for purposes of calculating all entitlements pursuant to this Agreement including, but not limited to, vacation, bonus vacation and pre-retirement leave and "Length of Service" shall have a similar meaning. Conversion from full-time or part-time status to casual status shall be considered a break in service and no period of casual employment or prior full-time or part-time employment in a permanent or term position shall be included in an employee's length of employment or length of service even when a casual employee subsequently becomes a full-time or part-time employee.

ARTICLE 4 -- MANAGEMENT RIGHTS

401 The Union recognizes the right of the Employer to exercise its function of management which includes, without limiting the generality of the foregoing; the right to direct the work of its nurses; to hire, promote, demote and discipline, suspend and discharge for just cause; or to expand or contract the numbers of the work force; to assign activities, determine job content; to transfer nurses to any area within the jurisdiction of the Employer; and to determine the numbers and the classification of nurses at any designated work area; to make, modify, and enforce rules and regulations in a manner consistent with the terms of this Agreement, and to establish the standards of volume, the level and quality of work performance, and if necessary, to sub-contract work to meet the requirements of the institution.

The Employer agrees not to exercise the foregoing rights in a manner inconsistent with this Agreement.

<u>402</u> The Employer, in administering the Collective Agreement, shall act reasonably, fairly, in good faith, and in a manner consistent with the Collective Agreement as a whole.

ARTICLE 5 -- UNION SECURITY AND REPRESENTATION

501 All nurses who are union members in good standing, or who may subsequently become union members in good standing, shall as a condition of employment maintain union membership during the life of this Agreement. All nurses who are not union members shall not be required to become members as a condition of employment. All new nurses hired shall as a condition of employment, become union members within ninety (90) days from the date of employment and shall as a condition of employment, remain union members in good standing during the life of this Agreement. During the thirty (30) days immediately preceding the expiry date of the Collective Agreement as outlined in Article 201, any member may make application to the Union requesting termination of her/his membership.

The Employer agrees to deduct an amount equal to the current Union dues as directed in writing by the Manitoba Nurses' Union from each nurse in the bargaining unit, whether a member of the Union or not. Such letter shall include any dues exemptions. The Employer shall forward such dues to the Manitoba Nurses' Union by the 15th day of the following month together with a list of the names of nurses from the facility for whom deductions have been made and a list of the names of all nurses newly hired/terminated/on leave of absence for a period of four (4) weeks or longer. Electronic copies of the lists will be provided with specifications as per attached memorandum.

The Employer also agrees to deduct once annually the amount of any special general assessment made by the Union. The Union shall notify the Employer, in writing, of the amount of the assessment at least one (1) month in advance of the end of the pay period in which the deductions are to be made.

The Employer agrees to provide each newly hired nurse with a Union Membership Form at the time of hiring. A nurse who chooses to complete the Union Membership Form shall forward the completed Union Membership Form to the Local President.

502 The Employer agrees to deduct union dues and the amount of any special general assessment in arrears upon receiving written authorization from the Union, and the Union agrees that all nurses to which the foregoing applies shall be given advance notice of the requested adjustment; and the Union further agrees to make refunds to nurses in the event of an overdeduction of dues.

503 When a nurse makes known to the Employer or the Union that she/he is a member of a religious group which has as one of its articles of faith the belief that members of the group are precluded from being members of or financially supporting any union or professional association, the matter shall be dealt with in accordance with section 76(3) of the Labour Relations Act of Manitoba.

504 The Union shall notify the Employer in writing of any change in the amount of dues at least one (1) month in advance of the end of the pay period in which the deductions are to be made; however, such change shall not be made more frequently than once in a twelve (12) month period.

505 The Union shall save the Employer harmless from any claims from nurses covered by this Agreement as a result of dues or special general assessments having been collected in accordance with the terms of this Article.

506 The Union shall provide the Employer with a list of officers and nurse representatives of the Union, and shall provide the Employer with a revised list within four (4) weeks of any changes made. The Employer also agrees to notify the Union when there are changes to relevant management positions.

507 Union activities other than those provided for in this Agreement shall not be conducted during the hours of duty of any nurse, nor in any non-public restricted area of the Employer's premises, without prior authorization by persons designated by the Employer.

508 Union representatives and/or grievants shall be granted necessary time off with basic pay to meet with the Employer for the purpose of processing grievances, provided that such time off does not unduly disrupt department or facility operations, and subject to a maximum cost to the Employer of maintaining salaries for two (2) nurses so engaged.

In the event that a nurse is required to attend arbitration hearings, such nurse shall not lose salary as a result.

Union representatives will be granted necessary time off with basic pay to meet with the Employer for the purpose of conducting negotiations, subject to a maximum cost to the Employer of maintaining salaries for four (4) nurses so engaged.

Union representatives will be granted necessary time off with basic pay to meet with the Employer for the purpose of conducting negotiations involving five (5) or more Employers and the respective unions subject to a maximum cost to the Employer of maintaining the salary of one (1) nurse so engaged.

509 Copies of this agreement shall be provided by the Union, and the Employer will supply a copy to each nurse at the time of hiring.

510 A suitable notice board or notice board space for the use of the Union will be provided by the Employer. Such notice boards shall be located in each building within the site where members of the bargaining unit are regularly employed. The Employer reserves the right to request the removal of posted material if considered damaging to the Employer and the Union agrees to comply with this request.

<u>511</u> The Employer agrees to show on the income tax (T-4) slip of each nurse, the total amount of union dues deducted from her/his earnings and remitted to the Union.

512 A representative of the Union shall be granted not less than thirty (30) minutes during the orientation period in order to familiarize nurses in the bargaining unit with the general conditions and responsibilities with respect to this Collective Agreement and to the Union. A management representative may be present during this period.

<u>513</u> No nurse shall be required to make a written or verbal agreement with the Employer which may conflict with the terms of this Agreement, in accordance with Section 72(1) of the Labour Relations Act of Manitoba.

<u>514</u> In order to facilitate the holding of ward representative meetings, the Employer agrees that ward representatives who are on duty at the time shall be allowed to attend one ward representative meeting per month of up to one hour's duration, subject to the following conditions:

- (a) the time the nurse is absent from the ward shall include the time that she/he would normally use for meal break
- (b) the meeting time utilized in excess of the ward representative's normal meal period shall only be granted if it is not detrimental to patient care as determined by the Manager or nurse in charge of the ward.

ARTICLE 6 -- CONTINUANCE OF OPERATIONS

<u>601</u> The Union agrees that during the life of this Agreement there shall be no strike, and to this end the Union will take affirmative action to prevent any nurse covered by this Agreement from striking. The Employer agrees that for the duration of this Agreement, there shall be no lockout.

ARTICLE 7 -- NON DISCRIMINATION

<u>701</u> The parties agree that there shall be no discrimination, interference, restriction, harassment or coercion based on the applicable characteristics cited in Section 9 of the Human Rights Code of Manitoba.

<u>702</u> The Employer and the Union agree that no form of sexual or workplace harassment shall be condoned in the workplace and it is further agreed that both parties will work together in recognizing and resolving such problems should they arise. Situations involving sexual harassment shall be treated in strict confidence by both the Employer and the Union.

ARTICLE 7A -- HEALTH AND SAFETY

<u>7A01</u> The parties to this Collective Agreement endorse the importance of a safe and secure environment, in which nurses must work. The parties will work together in recognizing and resolving Occupational Health and Safety issues.

<u>7A02</u> In accordance with the Workplace Safety and Health Act, the Employer agrees to make reasonable and proper provisions for the maintenance of a high standard of health and safety in the workplace and will provide safety and personal protective equipment where required and install safety devices where necessary.

<u>7A03</u> The Workplace Safety and Health Committee shall operate with Union representation for the purpose of ensuring health and safety in the workplace and the identification of health and safety hazards.

On an annual basis the Workplace Safety and Health Committee will be provided with a copy of the Critical Incident Stress Management or applicable policies for review.

<u>7A04</u> The Employer and the Union agree that no form of abuse of nurses will be condoned in the workplace. Both parties will work together in recognizing, facilitating the reporting of alleged abuse and resolving such problems as they arise.

Any nurse who believes a situation may become or has become abusive shall report this to the immediate supervisor. The Employer shall notify the Union ninety-six (96) hours after the receipt of the report. Every reasonable effort will be made to rectify the abusive situation to the mutual satisfaction of the parties.

There shall be a policy supporting a Respectful Workplace and zero tolerance of staff abuse which shall be reviewed annually by the Workplace Health and Safety Committee. Such policy shall address the issue of communication strategies, which will include signage. The Employer's Respectful Workplace policy shall include a commitment to conclude the investigation as quickly as is reasonably possible and that the investigation process itself will be conducted in an impartial manner.

<u>7A05</u> At the request of a nurse, the Employer shall provide, at no cost to the nurse, vaccination(s) and/or immunization(s) for occupational illness(es) in accordance with the Canadian Immunization Guide from the Laboratory Centre for Disease for Health Canada.

7A06 Rehabilitation and Return to Work Program - The Employer agrees to actively participate and facilitate the rehabilitation and return to work of ill, injured or disabled nurses even when she/he is not covered under the D & R, WCB or MPI programs. Any such nurse will be supernumerary in nature when reasonably possible. The Union shall be notified by the Employer if there is a request for a Rehabilitation and Return to Work Program for a nurse. The Employer shall include the Union in the initial meeting with the nurse to review the provisions of the program to ensure that the work designated is within her/his restrictions and limitations. If required, the Employer shall schedule subsequent (progress) review(s) with the Union and the nurse and may proceed without the Union's involvement subject to the Union's concurrence. Where appropriate, by agreement between the Employer and the Union, job postings may be waived.

<u>7A07</u> <u>Whistle Blowing Protection</u> - Nurses who exercise their rights in accordance with the Public Interest Disclosure Act shall not be subject to discipline or reprisal.

<u>7A08</u> Basic pay or equivalent time off with a minimum of one (1) hour guaranteed to nurses who are not on duty, will be granted to nurses appointed by the Union to attend meetings of the Workplace Safety and Health Committee or to perform such other duties as may be specified in the Workplace Safety and Health Act or prescribed by regulation.

In accordance with the Workplace Safety and Health Act, a nurse is entitled to take time off from her/his regular work duties in order to carry out her/his duties as a committee member under this Act and the regulations. The nurse shall be paid by the Employer at her/his regular or premium pay, as applicable, for all time spent carrying out her/his duties as a committee member under this Act and the regulations.

Upon application, each nurse on the Workplace Safety and Health Committee shall be granted paid educational leave in accordance with the Workplace Safety and Health Act.

As part of the above paid education days, new Committee Members shall be required to attend a basics course offered by Manitoba Workplace Safety and Health or an equivalent course approved by the Workplace Safety and Health Committee within their first year on the Committee.

ARTICLE 8 -- TECHNOLOGICAL CHANGE

<u>801</u> Technological Change shall mean the introduction by the Employer of equipment or material of a different nature or kind than that previously used by the Employer, and a change in the manner in which the Employer carries on the work, that is directly related to the introduction of that equipment or material.

In the event of a technological change occurring during the life of this Agreement which will displace or adversely affect one or more nurses in the bargaining unit:

- (a) The Employer shall notify the Union at least one hundred and twenty (120) working days before the introduction of the technological change, with a detailed description of the project it intends to carry out, disclosing all foreseeable effects and repercussions on nurse(s).
- (b) The Employer and the Union will meet as soon as possible and not later than ninety (90) working days prior to the intended date of implementation for the purpose of negotiating reasonable provisions to protect the interest of nurse(s) so affected.
- (c) If the Employer and the Union fail to agree upon measures to protect the nurse(s) from any adverse effects, the matter may be referred by either party to arbitration as provided for under the terms of this Agreement.
- **802** A nurse who is displaced from her/his job as a result of technological change:
- (i) shall be entitled to apply for any vacancy, or

(ii) shall have the right to displace a nurse with less seniority in accordance with Article 27 specified in this Agreement.

803 Where newer skills are required than are already possessed by nurse(s) who are affected by a technological change as provided in Article 801, such nurse(s) shall, at the expense of the Employer, be given a reasonable training period during which they may acquire the skills necessitated by the new method of operation or, at the option of the Employer, be trained in a new area in respect of which there is a demand for individuals possessing such skills. There shall be no reduction in wage or salary rates during the training period of any such nurse.

ARTICLE 9 -- CHANGE OF FUNCTION OF NURSING UNIT

<u>901</u> Should the Employer find it necessary in the interest of patient care, reduction of costs, or increased efficiency, to change the general overall function of a nursing unit, the Employer shall provide written notice to the nurses and the Union at least ninety (90) days in advance of the change of function. The Employer and the Union shall enter into discussion within fourteen (14) calendar days of notice being given for the purpose of effecting reasonable provisions to protect the interest of nurse(s) so affected.

ARTICLE 10 -- EMERGENCY, DISASTER, FIRE PLANS

<u>1001</u>

(a) <u>Emergency</u>:

In any emergency or disaster, nurses are required to perform duties as assigned notwithstanding any contrary provision in this Agreement. For purposes of this clause, emergencies will be those situations which directly affect the safety or well-being of patients in the facility.

In the event of the declaration of an emergency, written confirmation of same will be given to the President of the Local by the Employer.

Compensation for unusual working conditions related to such emergency will be determined by later discussions between the Employer and the Union, and/or by means of the grievance procedure if necessary, except that the provisions of Article 16 shall apply to overtime hours worked.

This clause is subject to the Labour Relations Act of Manitoba.

In the event of the issuance of a major health alert such as a possible pandemic occurrence, it is understood that notification will also be provided to the Manitoba Nurses' Union.

(b) <u>Drills</u>:

Facility disaster, emergency, or fire plans brought into effect by drill shall override the provisions of this Agreement provided always that where overtime is worked by reason of a disaster or fire drill, pay, or by mutual agreement equivalent time off will be granted.

The importance of regular disaster plan exercises and fire drills is mutually acknowledged by the Employer and the Union and, to this end, the participation of all nurses is encouraged.

The Employer will ensure that each newly hired nurse shall receive the appropriate information regarding facility emergency disaster and fire plans during orientation to the facility.

(c) Fire drills and equipment testing shall be held in accordance with the Manitoba Fire Code, and a review of written disaster plan exercises will be conducted at least once annually. The Facility will ensure that the telephone fan-out system will be maintained on a perpetual basis. Each newly hired nurse shall receive the appropriate information relative to the emergency, disaster, and fire plans during orientation to the Facility. An inservice session related to evacuation procedures will be conducted at least once annually.

The Workplace Safety and Health Committee will be provided with a copy of the written Disaster Plan annually for their information. The Committee may provide feedback.

ARTICLE 11 -- JOINT COMMITTEES

1101 Release Time

(a) Basic pay or equivalent time off, with a minimum of one (1) hour guaranteed to nurses who are not on duty, will be granted to nurses appointed by the Union to attend meetings of the Union Management Committee and any other Facility joint committee to which the Union is required to appoint representatives.

(b) All reasonable efforts will be made to relieve a nurse who is appointed to attend meetings of the Union Management Committee, Nursing Advisory Committee or any other facility joint committee to which the Union is required to appoint representatives, without loss of salary or benefits. This clause is applicable when the meeting(s) occurs during hours the nurse is otherwise scheduled to work.

<u>1102</u> <u>Union Management Committee</u>

The Employer and the Union agree to establish and maintain a Union Management Committee consisting of not less than two (2) persons appointed by each of the parties. Management representatives shall include the Administrator and/or Director of Nursing; Union representatives shall include the President and/or Vice-President of the Local. Appointments shall be made for a term of one (1) year but without limit on the number of consecutive terms a member may serve. The Committee shall meet at the request of either party subject to five (5) days notice being given but not less than bi-monthly unless otherwise mutually agreed.

The purpose of the Committee shall be to discuss/study/make recommendations to the Employer and the Union regarding matters of mutual concern.

1103 Nursing Advisory Committee

(1) <u>Purpose of the Committee</u>

- (a) At the request of either the Union, or the Employer's senior nursing management representative, a Nursing Advisory Committee (NAC) shall be established to:
 - (i) Review and make recommendations relative to those unresolved issues relating to workload and staffing including documented workload staffing reports.
 - (ii) Provide a forum for discussion and make recommendations on issues relative to nursing professional practice such as nursing standards, nursing functions, physical planning and layout of facilities as they relate to nursing and other matters of concern.
- (b) The parties mutually recognize that resolving nurses' workplace issues supports the delivery of effective patient/resident/client care and contributes to a healthy work environment.
- (c) It is further agreed it is in the best interests of the Employer, the facilities and the nurses to work together to resolve the issues relative to staffing and scheduling, prolonged periods of work (consecutive hours and consecutive shifts), standby assignments, agency nurse utilization and the use of part time additional shifts and casual shifts as it relates to the creation of permanent positions.

- (d) It is further agreed that to facilitate the effective functioning of the NAC, the NAC as a committee may request and obtain data related to use of additional and/or casual shifts, overtime hours, and vacancies, with a view to making recommendations relative to the creation of positions and service delivery strategies to ensure the highest quality of patient/client/resident care and compliance with professional nursing standards.
- (e) The parties further agree that the cost of producing the Workload staffing reports will be shared equally.

A working group will be established and meet within sixty (60) days of ratification for the purpose of reviewing and revising as necessary, the Workload Staffing Report form. Further, the working group will review current use of the form and jointly develop an education plan directed to nurses, managers and employers. The working group shall complete the joint education plan, including situations for the completion of the form, for implementation no more than one hundred and eighty (180) days after ratification.

(f) Any information shared with NAC cannot be used or shared by NAC members for any purpose other than that set out in this article.

(2) <u>Committee Representation and Meeting Processes</u>

- (a) The NAC shall be comprised of at least two (2)* and up to three (3)** nurses appointed by the Union (at least one of whom shall be a registered nurse or registered psychiatric nurse), and senior nursing management representatives appointed by the Employer, the number of whom shall not exceed the number of Union representatives. Other persons may be invited to participate as mutually agreed.
 - * Two (2) at those facilities which have less than three (3) out of scope senior nursing managers.
 - ** Four (4) for those facilities exceeding 400 beds.
- (b) The NAC shall meet at the request of either party subject to five (5) days notice being given but not less than bi-monthly unless otherwise mutually agreed.
- (c) The chair and the secretary of the NAC shall alternate between the parties. The secretary shall be the opposite party to the chair.

- (d) Agendas shall be circulated at least seven (7) calendar days prior to each meeting; however this shall not preclude members from raising issues without prior agenda notice. It is understood that issues may be deferred to future meetings to enable appropriate investigation.
- (e) Minutes of the NAC meetings shall be circulated to members of the committee and shall be approved at the next NAC meeting.
- (f) A regular report outlining the activities and deliberations of the NAC including the number, type and disposition of issues dealt with by the NAC shall be forwarded to the facility's Board of Directors (Board).
- (g) The NAC shall be provided with a copy of that portion of the minutes of the Board's meeting relating to its deliberations of the NAC report. The NAC shall provide the nurse(s) with a copy of that portion of the minutes of the Board's meeting relating to issues raised by a nurse(s) under 1 (a) (i) above.

(3) <u>Nursing Advisory Committee Procedures</u>

- (a) A nurse(s) with a concern as referenced in 1 (a) (i) above shall discuss the matter at the ward/unit level utilizing established lines of communication including the designated out of scope Manager with the objective of resolving the concern. If the matter is not resolved to the satisfaction of the nurse(s), the nurse(s) may complete and submit a Workload Staffing Report. The Manager shall provide a written response as soon as is reasonably possible and no later than 14 days after the form has been submitted to management. The response will outline the action(s) taken and any further actions to be implemented. The Workload Staffing Report will then be reviewed at the next scheduled Nursing Advisory Committee meeting.
- (b) Those issues referenced in 1 (a) (ii) above may be placed on the agenda at any time by any NAC member.
- (c) If the decision of the NAC regarding an issue referenced in 1 (a) (i) or 1 (a) (ii) above is unacceptable to the nurse(s) who submitted the issue, or if the NAC is unable to resolve the issue(s) in 1 (a) (i) or 1 (a) (ii), the matter shall be referred in writing to the facility Administrator/Executive Management Committee. Upon the request of either party, a meeting will be scheduled as soon as is reasonably possible but no later than fourteen (14) days.
- (d) The response of the Administrator/Executive Management Committee shall be provided in writing to the nurse(s) and the NAC within fourteen (14) calendar days of the referral unless otherwise mutually agreed.

(e) Where, in the opinion of the nurse(s) who submitted the issue, the response from the Administrator/Executive Management Committee does not resolve the issue it may be referred to an Independent Assessment Committee (IAC) within twenty-one (21) days following the response.

1104 Independent Assessment Committee

- (a) The IAC shall be composed of three (3) nurses, one (1) of whom shall be appointed by the Manitoba Nurses' Union, and one (1) of whom shall be appointed by the Employer. The third (3rd) nurse shall chair the IAC and shall be selected in the following manner:
 - (i) A list of IAC Chairpersons as agreed between the parties shall be appended to this Collective Agreement.
 - (ii) When a Chairperson is required, the Labour Relations Secretariat and the Manitoba Nurses' Union will be contacted. They will provide the name of the person to be utilized on the alphabetical listing of Chairpersons. The name to be provided shall be the name following that of the last person utilized.
 - (iii) Should the person whose name is so selected be unable to serve, or where the person would be unsuitable due to connections with the parties or geographic community involved, the next person on the list shall be approached to act as Chairperson.
 - (iv) In the event that an individual whose name appears on the list of IAC Chairpersons can no longer serve in that capacity, another individual shall be jointly selected by the Manitoba Nurses' Union and the Labour Relations Secretariat and the list of chairpersons shall be amended accordingly.
 - (v) Appointments to the IAC shall be confirmed within twenty-one (21) calendar days of the referral.
- (b) A meeting of the IAC to investigate and make recommendations shall be held within thirty (30) calendar days of the IAC's appointment unless a longer time frame is otherwise mutually agreed between the Employer and the Union. Such recommendations shall be provided in writing to the nurse(s), the NAC, and the Administrator/Executive Management Committee within a further fourteen (14) calendar days. The Employer shall convene a meeting of Employer representatives, the Union and representative(s) selected by, and from amongst, the nurses who referred the matter/issues to the NAC, subsequent to the receipt of the report, to review and discuss potential implementation of the recommendations.

- (c) Each party shall bear the cost of its own appointee to the IAC and shall jointly bear the cost of the Chairperson.
- (d) Nurses required to attend IAC meetings shall be granted Union leave upon seven (7) calendar days notice in accordance with Article 2409.
- (e) Nurses who are nominees to an IAC shall be granted leave of absence in accordance with 2409.
- (f) A regular report outlining the activities and deliberations of the IAC including the number, type and disposition of issues dealt with by the IAC shall be forwarded to the facility's Board of Directors (Board).
- (g) The NAC shall be provided with a copy of that portion of the minutes of the Board's meeting relating to its deliberations of the IAC report. The NAC shall provide the nurse(s) with a copy of that portion of the minutes of the Board's meeting relating to issues raised by a nurse(s) under 1 (a) (i) above.

1105 Regional Nursing Advisory Committee

(1) <u>Purpose of the Committee</u>

(a) The parties agree that a Regional Nursing Advisory Committee (NAC) will be established for the Winnipeg Regional Health Authority (WRHA) and the facilities/sites affiliated therein which are party to this collective agreement.

Note: facilities/sites to be listed.

- (b) The parties mutually recognize that resolving nurses' workplace issues supports the delivery of effective patient/resident/client care and contributes to a healthy work environment.
- (c) It is further agreed it is in the best interests of the Regional Health Authority, the facilities and the nurses to work together to resolve the issues relative to staffing and scheduling, prolonged periods of work (consecutive hours and consecutive shifts), standby assignments, agency nurse utilization and the use of part-time additional shifts and casual shifts as it relates to the creation of permanent positions.
- (d) It is further agreed that the Regional NAC will review data relative to use of additional and/or casual shifts and agency nurse utilization with a view to making recommendations relative to the creation of positions.

(e) It is agreed this structure shall not preclude issues as noted above being brought forward and/or resolved at the facility NAC in accordance with the provisions of 1103.

(2) RHA NAC Committee Representation and Meeting Processes

- (a) The Regional Health Authority NAC shall be comprised of one (1) nurse from each facility/site and two (2) nursing members at large appointed by the Union, and senior nursing management representatives of the facilities/sites and the Winnipeg Regional Health Authority, the number of whom shall not exceed the number of Union representatives. Other persons may be invited to participate as mutually agreed.
- (b) Where a nurse is required to use her/his own vehicle to travel to attend meetings of this committee at a location other than her/his work site, she/he shall be reimbursed by the Employer in accordance with the prevailing Province of Manitoba mileage rates. It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.
- (c) The RHA NAC shall meet as often as mutually agreed by the parties.
- (d) The chair and the secretary of the RHA NAC shall alternate between the parties. The secretary shall be the opposite party to the chair.
- (e) Agendas shall be circulated at least seven (7) calendar days prior to each meeting; however this shall not preclude members from raising issues without prior agenda notice. It is understood that issues may be deferred to future meetings to enable appropriate investigation.
- (f) Minutes of the RHA NAC meetings shall be circulated to members of the committee and shall be approved at the next RHA NAC meeting.
- (g) A bi-annual report outlining the activities and deliberations of the RHA NAC including the number, type and disposition of issues dealt with by the RHA NAC shall be forwarded to the RHA's Board of Directors (Board) by the RHA NAC Co-Chairs.

(3) <u>RHA NAC Procedures</u>

- (a) A nurse(s) with a concern which may be of regional impact may complete and submit a written report to the Co-Chairs of the RHA NAC.
 - (i) If such issue is determined to be of regional impact it will be placed on the agenda of the RHA NAC. If not, it shall be referred to the appropriate site NAC.

- (b) If the decision of the RHA NAC regarding an issue referenced above is unacceptable to the nurse(s) who submitted the issue, or if the RHA NAC is unable to resolve the issue, the matter shall be referred in writing to the regional senior nursing manager/senior nursing officer. Upon the request of either party, a meeting will be scheduled as soon as is reasonably possible but no later than fourteen (14) days.
- (c) The response of the Regional Health Authority Executive Management Committee shall be provided in writing to the nurse(s) and the RHA NAC within fourteen (14) calendar days of the referral unless otherwise mutually agreed.
- (d) Where in the opinion of the nurse who submitted the issue to the RHA NAC the response from the RHA Executive Management Committee does not resolve the issue it can be referred to an Independent Assessment Committee (IAC) within twenty-one (21) days following the response.

1106 Regional Independent Assessment Committee (IAC)

- (a) The IAC shall be composed of three (3) nurses, one (1) of whom shall be appointed by the Manitoba Nurses' Union, and one (1) of whom shall be appointed by the Employer. The third (3rd) nurse shall chair the IAC and shall be selected in the following manner:
 - (i) A list of IAC Chairpersons as agreed between the parties shall be appended to this Collective Agreement.
 - (ii) When a Chairperson is required, the Labour Relations Secretariat and the Manitoba Nurses' Union will be contacted. They will provide the name of the person to be utilized on the alphabetical listing of Chairpersons. The name to be provided shall be the name following that of the last person utilized.
 - (iii) Should the person whose name is so selected be unable to serve, or where the person would be unsuitable due to connections with the parties or geographic community involved, the next person on the list shall be approached to act as Chairperson.
 - (iv) In the event that an individual whose name appears on the list of IAC Chairpersons can no longer serve in that capacity, another individual shall be jointly selected by the Manitoba Nurses' Union and the Labour Relations Secretariat and the list of Chairpersons shall be amended accordingly.
 - (v) Appointments to the IAC shall be confirmed within twenty-one (21) calendar days of the referral.

- (b) A meeting of the IAC to investigate and make recommendations shall be held within thirty (30) calendar days of the IAC's appointment unless a longer time frame is otherwise mutually agreed between the Employer and the Union. Such recommendations shall be provided in writing to the nurse(s), the Regional Health Authority NAC and the Regional Senior Nursing Manager/Senior Nursing Officer within a further fourteen (14) calendar days. The Employer shall convene a meeting of Employer representatives, the Union and representative(s) selected by, and from amongst, the nurses who referred the matter/issues to the NAC, subsequent to the receipt of the report, to review and discuss potential implementation of the recommendations.
- (c) Each party shall bear the cost of its own appointee to the IAC and shall jointly bear the cost of the Chairperson.
- (d) Nurses required to attend IAC meetings shall be granted Union leave upon seven (7) calendar days notice in accordance with Article 2409.
- (e) Nurses who are nominees to an IAC shall be granted leave of absence in accordance with 2409.
- (f) A regular report outlining the activities and deliberations of the RHA NAC/IAC including the number, type and disposition of issues dealt with by the RHA NAC/IAC shall be forwarded to the RHA's Board of Directors (Board).
- (g) The RHA NAC shall be provided with a copy of that portion of the minutes of the Board's meeting relating to its deliberations of the RHA NAC report. The RHA NAC shall provide the nurse(s) with a copy of that portion of the minutes of the Board's meeting relating to issues raised by a nurse(s) under 1103 (1) (a) (i) above.

ARTICLE 12 -- GRIEVANCE PROCEDURE

1201 For purposes of this Agreement "grievance" shall mean a dispute between a nurse; or between a group of nurses with a similar grievance; or between the Union and the Employer regarding the application, interpretation or alleged violation of this Agreement.

1202 Unless dismissed or suspended by the Employer a nurse shall continue to work in accordance with this Agreement until such time as the dispute has been resolved.

<u>1203</u> A nurse may be accompanied by, or represented by, a Union representative at any stage of the grievance procedure.

1204 A nurse or Union representative shall request permission from her/his immediate supervisor to leave her/his duties in order to process grievances; she/he shall report to her/his immediate supervisor upon her/his return; she/he shall be granted this permission when, in the opinion of her/his immediate supervisor, it will not prejudice care or student education or require any staff replacement in either area. She/he shall not suffer loss of salary when engaged in such activities during regular working hours.

<u>1205</u> <u>Complaint Stage</u>:

A nurse shall, within fifteen (15) days of the occurrence of the grievance, attempt to resolve the grievance through discussion with her/his immediate supervisor outside the bargaining unit, and if the matter is not settled to her/his satisfaction the nurse may proceed with the grievance herself/himself or elect to be represented by a Union representative.

<u>1206</u> <u>Step One</u>:

If the dispute is not resolved within the time period specified in 1205 above, the grievor and/or Union representative may, within a further ten (10) days submit the grievance in writing to the Human Resources Consultant or equivalent. The Human Resources Consultant or equivalent or equivalent shall reply in writing within ten (10) days of receipt of the written grievance.

A grievance concerning general application or interpretation of the Agreement, including the question of whether the matter falls within the scope of this Agreement, or which affects a group of nurses in more than one (1) department, may be submitted as Step 1.

The Employer agrees to notify the Union in writing when there are changes in personnel in these positions.

<u>1207</u> <u>Step Two</u>:

If the dispute remains unresolved, the Union may within a further ten (10) days submit the grievance in writing to the Human Resources Director or equivalent, and the Human Resources Director or equivalent shall reply in writing within ten (10) days of receipt of the written grievance.

The Employer agrees to notify the Union in writing when there are changes in personnel in these positions.

1208 For purposes of determining the lengths of time in the foregoing procedure, Saturdays, Sundays and Recognized Holidays are excluded.

1209 The time limits fixed in the grievance procedure may be extended by the mutual written consent of the Employer and the aggrieved nurse and/or the Union.

1210 Subject to the provision of 1209 above, and subject to Section 121(2) of the Labour Relations Act of Manitoba, failure of the nurse/Union to comply with any of the time limits specified in this Article shall result in the grievance being deemed abandoned, without prejudice.

ARTICLE 13 -- ARBITRATION PROCEDURE

<u>1301</u> In the event of the failure of the parties to settle a grievance by means of the grievance procedure stated in Article 12, within ten (10) days of the date upon which the written reply referred to in Article 12 is received from the Human Resources Director or equivalent, the matter may then be referred to arbitration as hereinafter set forth.

<u>1302</u> If mutual agreement is not reached by both parties to choose a single Arbitrator within ten (10) days from the time that the matter is referred to arbitration as defined in 1301 above, then the procedure stated below will be followed.

1303 Either party may submit the matter in dispute to a Board of Arbitration by giving notice to the other party within a further seven (7) days and by appointing in that notice one (1) nominee of the intended Board of Arbitration. The other party to the dispute shall, within seven (7) days after the receipt of such notice, also appoint a nominee and the two (2) nominees thus appointed shall, within ten (10) days thereafter, select a third member who shall be Chairperson.

<u>1304</u> Should either party fail to appoint an Arbitrator as herein provided, or if any Arbitrator thus appointed should fail or be unable to serve and another Arbitrator not be appointed in her/his place by the party who made the original appointment, then the other party to the dispute may request the Minister of Labour for Manitoba to select a substitute.

<u>1305</u> Should the two (2) appointed nominees fail within ten (10) days to agree upon a Chairperson, the two (2) nominees shall forward a request to the Minister of Labour for Manitoba to select a Chairperson.

1306 It is mutually agreed by both parties to this Collective Agreement that the decision of the Arbitrator, or the decision of the Chairperson in the absence of the majority decision of the Arbitration Board shall be final and binding upon the Employer, the Union and the nurse(s) concerned; however, the Arbitrator or the Arbitration Board shall not be authorized to make any decisions inconsistent with the provisions in this Collective Agreement.

1307 The Board of Arbitration shall determine its own procedure but shall give full opportunity to all parties to present evidence and make representations.

<u>1308</u> In the event of a grievance alleging unjust layoff, suspension or discharge being referred to arbitration, the Arbitrator or Board of Arbitration shall be authorized to rule whether or not the nurse(s) concerned shall be reinstated and, in the event of reinstatement, shall also be authorized to make an award in terms of compensation for regular salary lost or a reasonable alternate award, however, any monetary award shall not exceed the difference between salary lost and any wages that may have been earned from employment with another employer during the period of the layoff, suspension or discharge.

1309 Any costs incurred by either of the parties hereto, preceding or during arbitration proceedings, shall be borne by the respective parties incurring such costs, but the costs of the Arbitrator or of the Chairperson of the Arbitration Board shall be borne by the parties hereto in equal shares.

<u>1310</u> For the purposes of determining lengths of time in the foregoing procedure, Saturdays, Sundays and Recognized Holidays are excluded.

1311 Nothing in this Collective Agreement shall preclude a nurse or the Union committee and the Employer from mutually agreeing to settle a dispute by means other than those described in the grievance and arbitration procedures or to extend any of the stipulated time limits.

1312 Nurses whose attendance is required at arbitration hearings related to the Agreement shall be given permission to be absent from work and shall not suffer any loss of salary as a result.

1313 The Arbitrator shall be requested to provide both parties with a hard (paper) copy as well as a disk/electronic version of an arbitration award.

ARTICLE 14 -- HOURS OF WORK

- **1401** Regular hours of work for all full-time nurses will be:
- (a) seven and three-quarter (7.75) consecutive hours per day, excluding meal periods, and
- (b) an average of seventy-seven and one-half (77.50) hours per bi-weekly period, and
- (c) two thousand and fifteen hours (2015) per year.

- **1402** Regular hours of work shall be deemed to:
- (a) include a rest period of twenty (20) minutes to be scheduled by the Employer, during each continuous three (3) hours of duty. Rest periods shall be taken away from the work area if reasonably possible.
- (b) exclude a meal period of at least thirty (30) minutes and not more than one (1) hour's duration to be scheduled by the Employer, during each regular working day. If a nurse is called back to work during her/his meal period and if she/he has already purchased a meal, the Employer will give her/him a meal allowance and time off during her/his shift in order to have a meal.

1403 This article shall not preclude the implementation of modified daily or biweekly hours of work by mutual agreement in accordance with the agreed upon letter of understanding between a majority of nurses in a work unit and the Employer. The Employer agrees to notify the Union in writing prior to the implementation of a modified shift in any ward or unit.

<u>1404</u> A full-time or part-time nurse who is advised not to report for her/his scheduled shift, or who is sent home because of lack of work, shall receive pay for the scheduled hours not worked.

1405 Where a nurse cannot arrive as scheduled at the Facility due to whiteout/blizzard conditions as declared by Environment Canada or the Employer, or due to road closures as declared by police agencies or the Department of Highways, the nurse shall be rescheduled at a mutually agreeable time if possible during the following two (2) consecutive bi-weekly pay periods to work any hours missed. Where the scheduling of such shift cannot be accommodated or the nurse chooses not to be rescheduled, she/he may take the time from banked time which includes banked overtime, Recognized Holidays or vacation.

1406 Whenever a nurse is called in to work within one (1) hour of the start of the shift and reports for duty within one (1) hour of the start of the shift, she/he shall be entitled to pay for the full shift. In such circumstances the scheduled shift hours shall not be extended to equal a full shift.

ARTICLE 15 -- SHIFT SCHEDULES

1501 Shift schedules for a minimum of a four (4) week period shall be posted at least two (2) weeks in advance of the beginning of the scheduled period. Shifts within the minimum four (4) week period shall not be altered after posting except by mutual agreement between the nurse(s) concerned and the Employer. Requests for specific days off duty shall be submitted in writing at least two (2) weeks prior to posting and granted if possible in the judgment of the Employer.

Requests for interchanges in posted shifts, or a portion thereof, shall be granted if reasonably possible. Such requests are to be submitted in writing, co-signed by the nurses willing to exchange shifts, and shall receive a prompt reply.

1502 Requests for interchanges in posted shifts, or a portion thereof, shall also be submitted in writing, co-signed by the nurse willing to exchange shifts with the applicant. Where reasonably possible, interchanges in posted shifts are to be completed within the posted shift schedule. It is understood that any change in shifts or days off initiated by the nurses and approved by the Employer shall not result in overtime costs to the Employer.

1503 Night shift shall be considered as the first shift of each calendar day.

<u>1504</u> Master rotations for each nursing unit shall be planned by the Employer in meaningful consultation with the nurse(s) concerned.

The process for meaningful consultation shall include:

- Employer proposes a master rotation including the Employer established criteria and provides to Nurses concerned
- Nurses are provided reasonable time to submit feedback and/or an alternate master rotation for consideration.
- The amended or new master rotation is provided to Nurses for review. Nurses are provided with a reasonable time to submit feedback.
- At each step of the consultation process the Union will be provided with the new or revised master rotation to ensure contract compliance.
- Employer has the sole discretion to select the new master rotation and provides rationale for the selection.

Master Rotations shall, unless otherwise mutually agreed between the nurse(s) concerned and the Employer, observe the conditions listed hereinafter:

- (a) at least fifteen (15) consecutive hours off duty between shift changeover; e.g. Nights to Days, etc.
- (b) not more than twenty (20) working days per four week period

- (c) a minimum of eight (8) days off within two (2) consecutive bi-weekly periods
- (d) (i) a minimum of forty-seven (47) hours off at one time, or
 - (ii) where only "8" hour shifts are worked, a single weekday off may be permitted on a changeover from Day shift to Evening shift or in a staffing pattern that provides alternate weekends off. This is subject to meaningful consultation between the nurses affected and the Union.
- (e) not more than seven (7) consecutive working days
- (f) alternate weekends off shall be granted as often as reasonably possible with each nurse receiving a minimum of every third (3rd) weekend off, however, overtime rates of pay shall apply to weekend hours worked on the third (3rd) and any subsequent consecutive weekends unless otherwise mutually agreed between the nurse concerned and the Employer.
- (g) the Employer will make every effort to ensure that no nurse will be required to work more than fifty percent (50%) of her/his shift on Evenings or Nights, calculated three times per year. The Union acknowledges that the Employer may not in all instances be able to comply with this provision and agrees that when compliance is not possible, the number of shifts may be increased, subject to a double payment of the shift premium being applicable to the shifts worked in excess of fifty-two percent (52%). This provision does not apply to nurses who have agreed to work permanent Evenings and/or Nights or who have accepted a position which has been bulletined as having a non-conforming shift pattern.

Nurses who are required to rotate shifts shall be assigned to work either Day shift and Evening shift, or Day shift and Night shift, unless otherwise agreed.

- (h) a nurse will receive consideration in scheduling to allow her/him to pursue academic course(s) to further her/his education. Whenever reasonably possible, subject to patient care requirements, the granting shall be based on the following:
 - (i) she/he submits her/his written request at least eight (8) weeks prior to commencing the academic course(s), and
 - (ii) another nurse(s) on the unit is (are) prepared to interchange her/his 'normally' scheduled shifts for the 'normally' scheduled shifts of the nurse attending the academic course(s), as agreed in writing,

(iii) upon completion of the academic course(s) each nurse shall revert to her/his former rotation pattern.

Proof of registration in such course(s) shall be submitted by the nurse upon request.

ARTICLE 16 -- OVERTIME

1601 Overtime shall be authorized time worked which exceeds the normal daily shift as defined in Article 14 herein or the normal full-time hours in the rotation pattern in effect on each nursing unit for full-time nurses or the normal full-time hours in two (2) consecutive bi-weekly periods for part-time nurses. Overtime hours extending beyond the normal daily shift into the next calendar day shall continue to be paid at the overtime rates in accordance with Article 1602.

Authorization must be obtained prior to the start of any overtime work except in emergency situations. The Employer agrees the authorization in these emergency situations will not be unreasonably withheld. Payment for overtime worked when emergency circumstances prevent prior authorization shall be subject to a claim accompanied by a special written report prepared by the nurse before leaving the Facility substantiating the reason for the overtime work.

1602 Each nurse shall be paid at the rate of one and one-half (1.50) times her/his basic salary for the first three (3) hours of authorized overtime in any one (1) day, and at the rate of double her/his basic salary for hours worked in excess of three (3) hours in any one (1) day. A full-time nurse shall receive two (2) times her/his basic salary for all overtime worked on a scheduled day off. However, notwithstanding section 1601 above, all overtime worked on a Recognized Holiday shall be paid at two and one-half (2.50) times her/his basic salary.

1603 Notwithstanding sections 1601 and 1602 above, where a nurse works two consecutive shifts, the nurse shall be paid the full hours for both shifts and shall not be required to work an additional fifteen (15) minutes. She/he shall receive pay at the rate of double her/his basic salary for the additional shift, except when the additional shift is worked on a Recognized Holiday, she/he shall receive pay at the rate of two and one-half (2.50) times her/his basic salary for the additional shift.

1604 At the nurse's request, overtime shall be banked and shall be compensated by time off at overtime rates to be taken at a time mutually agreed. At the nurse's request, any banked overtime, or portion thereof, shall be paid out on a separate cheque without a surcharge on the dates designated by the Employer. At the nurse's request, any banked overtime or portion thereof shall be paid out at any time on a regular pay cheque. Overtime may be accumulated to a maximum of seventy-seven and one-half (77.50) hours at any one time. Any overtime in excess

of seventy-seven and one-half (77.50) hours shall be paid as earned. All accumulated overtime must be taken as time off or paid out by March thirty-first (31st) of each fiscal year. Accumulated overtime not taken as time off or paid out by this date shall be paid to the nurse in the last pay period of the fiscal year on a separate cheque without a surcharge.

1605 A full-time nurse called back to work after leaving the grounds of the facility following the completion of a shift but before commencement of her/his next shift shall be paid at overtime rates of pay, with a guaranteed minimum of three (3) hours at overtime rates. If the extra time worked under this subsection commences within less than three (3) hours before the start of a shift, the guaranteed minimum in overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time she/he starts to work to the beginning of her/his shift.

<u>1606</u> Overtime worked as a result of the changeover from Daylight Savings Time to Central Standard Time shall be deemed to be authorized overtime.

The changeover from Central Standard Time to Daylight Savings time will be considered as full hours worked for that shift.

<u>1607</u> Overtime shall be distributed as equitably as possible amongst those nurses qualified for the work in accordance with 1601. Preference for such overtime shall be awarded in order by unit, program and then facility.

1608 A nurse required to work overtime without advance notice for a period in excess of two (2) hours immediately following her/his regular shift shall receive a meal voucher for the facility cafeteria to cover the cost of a meal of up to eight dollars (\$8.00), or if this is not possible, a meal allowance of eight dollars (\$8.00) shall be provided.

1609 In every period of overtime, a paid rest period of twenty (20) minutes shall occur during each continuous three (3) hours, unless the overtime worked is a full shift in which case regular meal/rest periods shall occur.

ARTICLE 17 -- SHIFT PREMIUM AND WEEKEND PREMIUM

<u>1701</u>

(a) An evening shift premium of one dollar (\$1.00) [one dollar and seventyfive cents (\$1.75) effective April 1, 2016] per hour shall be paid to a nurse for all hours actually worked on any shift when the majority of the hours on that shift fall between 1800 hours and the next succeeding 2400 hours. (b) A night shift premium of two dollars and five cents (\$2.05) [two dollars and fifty cents (\$2.50) effective April 1, 2016] per hour shall be paid to a nurse for all hours actually worked on any shift when the majority of hours on that shift falls between 2400 hours and 0600 hours.

<u>1702</u> The Evening shift premium shall also be applicable to each hour worked after 1600 hours on a "modified" Day or Evening shift during which at least two (2) hours are worked between 1600 hours and the termination of the shift.

For purposes of application of this provision, a "modified" Day shift shall mean one that commences at a different time than the majority of Day shifts worked by nurses, and a "modified" Evening shift shall mean one that commences at a different time than the majority of Evening shifts worked by nurses. This provision shall be applicable from 1600 hours to the termination of the Day shift on a twelve (12) hour shift pattern.

<u>1703</u> When a nurse is on standby, shift premium and weekend premium are payable only for hours actually worked on a callback.

<u>1704</u> A weekend premium of one dollar and sixty-five cents (\$1.65) [two (\$2.00) dollars effective April 1, 2016] per hour shall be paid to a nurse for all hours actually worked on any shift where the majority of the hours on that shift fall between 0001 hours on the Saturday and 2400 hours on the following Sunday.

<u>1705</u> Shift premium shall not be payable when a nurse is on standby, leave of absence, sick time, Recognized Holiday, paid vacation and Workers' Compensation unless the nurse works a permanent evening or night shift.

ARTICLE 18 -- STANDBY

1801 "Standby" refers to any period of time during which a nurse is required to be available to return to work without undue delay. Callback shall be limited to the unit(s) for which the nurse is on standby. Standby shall be assigned and scheduled in accordance with the provisions of Article 1501 whenever reasonably possible.

1802 Nurses required to be on standby shall receive two (2) hours basic pay per eight (8) hour shift or portion thereof.

1803 A nurse actually called back to work when she/he is on standby shall be paid for hours worked at the overtime rates, or may at the nurse's request, be granted time off which is the equivalent of overtime rates. The nurse will be guaranteed a minimum of three (3) hours at the overtime rate except when called in within three (3) hours of the commencement of her/his next shift. In such cases the nurse shall be paid at the overtime rate from the time she/he started work to the beginning of her/his shift.

<u>1804</u> Standby allowance shall be paid for any time during which a nurse is actually called back to work.

<u>1805</u> Assignment of standby shall be distributed as equitably as possible amongst those nurses qualified for the assignment.

1806 The Employer will provide parking space in near proximity to the site for the use of nurses on standby who are called back.

<u>1807</u> If there is a sufficient number of nurses qualified for assignment to standby, a nurse shall not be assigned to standby on the day immediately preceding or during her/his days off, unless otherwise mutually agreed.

<u>1808</u> A nurse may be required by the Employer to be available for duty for a period of not more than sixteen (16) hours consecutively unless otherwise agreed to between the nurse and the Employer.

1809 Whenever reasonably possible, a pager (or alternate) shall be provided by the Employer to nurses during any period of assigned standby.

ARTICLE 19 -- RESPONSIBILITY PAY

<u>1901</u> A nurse temporarily assigned to perform all or substantially all of the duties of a more senior classification or a nurse designated as being "in charge" will receive an allowance of one dollar (\$1.00) for each hour worked.

A Licensed Practical Nurse will receive responsibility pay when she/he is assigned charge nurse responsibilities by the Employer.

1902 This allowance shall be paid to one (1) Registered Nurse/Registered Psychiatric Nurse on a nursing unit for any shift, if any of the conditions in the preceding paragraph apply. In addition, this allowance shall be paid to one (1) Registered Nurse/Registered Psychiatric Nurse on each nursing unit on the Night shift, one (1) Registered Nurse/Registered Psychiatric Nurse on each nursing unit on the Evening shift and to one (1) Registered Nurse/Registered Nurse/Registered Psychiatric Nurse on each nursing unit on the Evening shift and to one (1) Registered Nurse/Registered Psychiatric Nurse on each nursing unit on the Day shift on Saturday, Sunday or Recognized Holidays.

<u>1903</u> Assignment of "charge" responsibility shall be equitably distributed amongst those nurses available and qualified for the assignment.

ARTICLE 20 -- TRANSPORTATION ALLOWANCE/ESCORT DUTY

2001 A nurse who is required to terminate or commence her/his shift between the hours of 0001 and 0600 hours and who does not have her/his own transportation, will have transportation provided by the Employer at no cost to the nurse if such transportation is available.

2002 A nurse required to return to the facility on a callback as referenced in 1803 shall receive:

- (a) return transportation provided by the Employer, or
- (b) if she/he elects to use her/his own vehicle, she/he shall be reimbursed for all travel in accordance with the prevailing Province of Manitoba mileage rates, subject to a minimum guarantee of \$4.00.

It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

2003 Where a nurse is required and authorized to use her/his privately owned vehicle on the Employer's business:

(a) she/he shall be reimbursed by the Employer for all travel from the facility and between work locations in accordance with the prevailing Province of Manitoba mileage rates.

> It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

(b) She/he shall be reimbursed for parking expenses incurred away from the facility during the course of the authorized business.

2004 Escort Duty:

- (a) (i) A nurse called in to escort a patient when she/he is not on standby or provided she/he does not qualify for pay at overtime rates in accordance with Article 16, shall be paid for all time involved with the patient assignment including travel time required to return to the facility, subject to a minimum guarantee of three (3) hours pay at regular rates of pay. All hours worked in excess of seven and threequarter (7.75) hours shall be paid in accordance with Article 16.
 - (ii) When a nurse is required to escort a patient while on a scheduled shift, overtime rates of pay will apply in accordance with Article 16 for all hours worked in excess of the scheduled shift length (i.e. 7.75 hours, 11.625 hours).
 - (iii) A full-time or part-time nurse scheduled or called in for escort duty when she/he is not on standby whose escort duty is cancelled, shall be paid or assigned work for a period of three (3) hours.
 - (iv) When a nurse on escort duty is no longer involved with the patient assignment, time and return travel time will be paid as follows:
 - For each subsequent 24 hour period that the nurse is awaiting return travel she/he shall be paid wages for one regular shift (or overtime in accordance with Article 16)
 - For each portion of a 24 hour period that the nurse is awaiting return travel or travelling to return to the facility, the nurse will be paid the greater of hours worked plus actual hours in travel status (or overtime in accordance with Article 16) or a prorated shift based on the portion of the 24 hour period away.
 - (v) Where a nurse is responsible for the care and control of equipment and/or drugs, and such equipment and/or drugs is not readily portable and requires the nurses' full attention, then the nurse shall be considered as being still "on duty" as if she/he was still involved with the patient and shall be paid accordingly.

A casual nurse whose Escort Duty is cancelled prior to her/his arrival at the facility shall not be entitled to the payment or work noted above. If her/his Escort Duty is cancelled after she/he has reported for duty, she/he shall be paid or assigned work for a period of three (3) hours.

It is understood that the full-time, part-time or casual nurse shall have the right to refuse the assigned work and as such she/he shall not be entitled to the minimum payment noted above.

- (b) A nurse going out on escort duty will not suffer any loss in basic salary as a result of missing any portion of a scheduled shift. Therefore, a nurse who is unable to return from escort duty in time to work a scheduled shift or portion thereof shall be paid for the missed hours at her/his basic salary. Where a nurse misses only a portion of her/his scheduled shift while on escort duty, she/he will be expected to work the remainder of her/his shift.
- (c) A nurse required for escort duty on a Recognized Holiday shall be paid in accordance with Article 22, and Article 16 if applicable, for all time involved with the patient assignment including travel time required to return to the facility.
- (d) (i) A nurse on escort duty out of province/country shall be provided with a travel advance for all anticipated travel expenses (transportation, meals, accommodation) before commencing escort duty, unless the nurse chooses to make alternate arrangements.
 - (ii) A nurse on escort duty within the province, shall be provided with a meal allowance/advance of ten (\$10.00) dollars, once per shift. If the escort duty extends over another meal period, meal expenses shall be claimed in accordance with Employer policy. If required, a subsequent travel/expense claim will be submitted in accordance with the Employers travel policy.

ARTICLE 21 -- VACATIONS

<u>2101</u> Unless otherwise agreed between the nurse and the Employer, the Employer will provide for vacation days to be taken on a consecutive basis, recognizing that five (5) vacation days [thirty-eight point seven five (38.75) hours] equals one (1) calendar week. The vacation year shall be from May 1st to April 30th. The dates used to calculate vacation earned shall be from the end of the last full pay period of April in one vacation accrual year to the end of the last full pay period of the following April.

Vacation earned in any vacation year is taken in the following vacation year.

The whole of the calendar year shall be available for the taking of accrued vacation time.

The nurse shall have the right to request which day of the week her/his vacation begins.

Upon request, a nurse may be permitted to retain up to three (3) days of her/his regular vacation for the purpose of taking such time off for personal reasons such as religious observance or special occasion. Any such days not scheduled at the commencement of the vacation year shall be requested and duly considered in accordance with Article 1501.

<u>2102</u> A nurse who has completed less than one (1) year of employment as at the cut-off date shall be entitled to a paid vacation at the rate of one and one-quarter (1.25) days per month worked, however, unless otherwise mutually agreed, the Employer is not obliged to permit earned vacation to be taken until a nurse has completed six (6) months of employment.

<u>2103</u>

(a) Except as provided in subsection (b) hereinafter, nurses shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

Length of Employment	Rate at Which Vacation Earned
In the first three (3) years	Fifteen (15) days/three (3) weeks (116.25 hours) per year
In the fourth (4th) to tenth (10th) year inclusive In the eleventh (11th) to twentieth (20th) year inclusive In the twenty-first (21st) and subsequent years	Twenty (20) days/four (4) weeks (155 hours) per year Twenty-five (25) days/five (5) weeks (193.75 hours) per year Thirty (30) days/six (6) weeks (232.50 hours) per year

(b) In addition to (a) above, all nurses employed in the Nurse IV or Nurse V occupational classifications shall be entitled to paid vacation calculated on the basis of vacation earned at a rate which is five (5) days more than the rates at which vacation is earned in (a).

This provision shall apply to nurses employed in the classification of Nurse IV or higher on April 1, 1998. This Article will not apply to nurses who are newly employed as or reclassified to Nurse IV or higher after April 1, 1998.

(c) Vacation entitlement for the vacation year following completion of the 3rd, 10th and 20th years of continuous employment shall be determined by a pro-rata calculation based upon the two (2) rates of earned vacation. **<u>2104</u>** In recognition of length of service, each nurse shall receive an additional five (5) days of vacation on completion of twenty (20) years of continuous service, and on each subsequent fifth (5th) anniversary of employment (i.e. 25th, 30th, 35th, 40th, etcetera). Such days shall be taken during the vacation year in which the 20th or subsequent 5th anniversary occurs.

<u>2105</u> For the purposes of determining the rate at which vacation entitlement is earned, the term of continuous service of a nurse will be deemed to include:

- (a) any periods when a nurse is receiving income protection benefits, is on paid vacation, is on paid leave of absence, is on unpaid leave of absence related to illness or disability of up to two (2) years
- (b) any period of Workers' Compensation up to two (2) years
- (c) any period of unpaid leave of absence of up to four (4) weeks
- (d) any period of layoff of less than eighteen (18) weeks
- (e) educational leave of up to two (2) years
- (f) any period of parenting leave.

<u>2106</u> Nurses on Workers Compensation will continue to accrue paid vacation for a period of one (1) year from the date of the first absence from work, related to the occurrence of the compensable injury or illness.

<u>2107</u> Terminal vacation pay shall be calculated in accordance with sections 2103 and 2105 and based on the nurse's rate of pay on the date of termination.

<u>2108</u> The Employer shall notify each nurse, prior to her/his vacation, of the date and time upon which she/he is to report back to work following her/his vacation, but this will not preclude the making of a change during the nurse's vacation period if mutual agreement is reached between the Employer and the nurse.

2109 The Employer shall be responsible for posting the vacation entitlement lists, along with a list of the number of nurses in each occupational classification per unit that may be scheduled for vacation at one time, in an accessible location, by February 1st of each year. The vacation entitlement lists shall reflect each nurse's projected vacation entitlement as at April 30th of that year.

Beginning February 15th of each year, the Employer shall arrange an appointment with each nurse, in order of seniority, so that the nurse may indicate her/his choice of vacation dates, in writing. All of the nurse's earned vacation must be chosen at this time except for the three (3) days as per 2101. These appointments shall take place in person, unless otherwise mutually agreed, and shall include reviewing the vacation selected/approved to date.

The selected/approved vacation schedule shall be updated on an ongoing basis and shall be posted daily in an accessible location. Once a nurse's vacation selection has been approved, it shall not be changed unless by mutual agreement and without displacing the request of another nurse.

Except in extenuating circumstances, a nurse who fails to indicate her/his choice of vacation dates in accordance with the above, shall have her/his vacation scheduled by the Employer.

To the extent that it finds possible, the Employer shall give priority to those nurses in each occupational classification within each nursing unit having the most seniority within the facility.

The approved vacation schedule will be posted no later than April 1st. Approved vacation schedules within each nursing unit shall not be changed unless mutually agreed upon by the nurse and the Employer.

A nurse who transfers to another unit after her/his vacation request has been approved, shall have her/his vacation scheduled by the Manager of the new unit in consultation with the nurse within the time periods remaining during that vacation year.

Notwithstanding the above, as much as reasonably possible, the approved vacation of deleted and bumped nurses shall continue to be approved regardless of the unit they are displaced to. This shall not impact previously approved vacation of nurses in the new unit. If the displaced nurse prefers to reschedule the vacation at a time that is mutually agreeable to both the Employer and the nurse, that shall occur.

A nurse must use current annual vacation, (which was earned during the previous vacation year), during the current vacation year. If the current annual vacation is not used or scheduled by January 15th, the Employer has the right to schedule the vacation prior to the end of the current vacation year. Vacation may be paid out only in extenuating circumstances.

ARTICLE 22 -- RECOGNIZED HOLIDAYS

<u>2201</u> The following are Recognized Holidays for purposes of this Agreement:

New Year's Day	August Civic Holiday
Louis Riel Day (la journée Louis Riel)	Labour Day
Good Friday	Thanksgiving Day
Easter Monday	Remembrance Day (November 11 th)
Victoria Day	Christmas Day
Canada Day (July 1 st)	Boxing Day

and any other day proclaimed as a holiday by federal or provincial authorities.

2202 Whenever a Recognized Holiday falls on her/his scheduled days off, it is understood that this day off in lieu shall be banked in accordance with Article 2206, or the nurse may request that a day in lieu of the Recognized Holiday be scheduled on a date mutually agreed between the Employer and the nurse, or the nurse may request that she/he receive an extra day's pay at her/his basic rate of pay.

2203 A nurse required to work on a Recognized Holiday shall be paid at the rate of one and one-half (1.50) times her/his basic pay and in addition it is understood that one (1) day off shall be banked in accordance with Article 2206, or the nurse may request that a day in lieu of the Recognized Holiday be scheduled on a date mutually agreed between the Employer and the nurse, or the nurse may request that she/he receive an extra day's pay at her/his basic rate of pay.

<u>2204</u> A day off given in lieu of a Recognized Holiday shall be added to a weekend off or to scheduled days off unless otherwise mutually agreed.

<u>2205</u> The Employer agrees to assign time off as equitably as possible over Christmas and New Year's, endeavouring to grant each nurse as many consecutive days off as reasonably possible over either Christmas Day or New Year's Day.

As much as reasonably possible, Christmas Eve and Boxing Day shall be assigned with Christmas Day; New Year's Eve shall be assigned with New Year's Day, unless otherwise mutually agreed.

Nurses shall be assigned time off over Christmas or New Years in alternate years unless otherwise mutually agreed.

2206 A nurse may accumulate up to four (4) days off in lieu of Recognized Holidays to be taken with scheduled days off or to complete a partial week of vacation or at such other time as is requested and granted in accordance with 1501. Unless otherwise agreed between the nurse concerned and the Employer, accumulated lieu days must be taken within the fiscal year in which they were earned.

<u>2207</u> The Employer will ensure that all nurses receive at least two (2) other Recognized Holidays besides Christmas or New Year's on the day on which they occur.

ARTICLE 23 -- INCOME PROTECTION AND WORKERS COMPENSATION

<u>2301</u> A nurse having accumulated income protection may claim basic pay for such income protection against such accumulation with respect to periods during which:

- (i) She/he was unable to work because of an incapacitation due to accident or illness, however, a nurse cannot receive income protection benefits for any period of time during which she/he is eligible for wage loss benefits from either the Workers Compensation Board or the Manitoba Public Insurance [subject to 2303] as a result of a motor vehicle accident, or
- (ii) In the opinion of the Employer, her/his presence constituted a health hazard for patients and/or other nurses and she/he was instructed by the Employer to leave her/his place of duty; or
- (iii) She/he attends an appointment related to medical/dental examination and/or treatment, subject to Article 3704.

<u>2302</u> Each nurse shall accumulate income protection at the rate of one and one-quarter (1.25) days for each full month of employment.

Note: For each one and one-quarter (1.25) days of income protection accumulated, one day* (80%) shall be reserved exclusively for the nurse's personal use as outlined in Article 2301. The remaining one-quarter (.25) of a day* (20%) shall be reserved for either the nurse's personal use as outlined in 2301, or for use in the event of family illness as specified in 2312. The Employer shall maintain an up to date record of the balance of income protection credits reserved for each of these purposes.

(*In the nurse's first year of employment, amend "one day" to read "three-quarters of a day" and amend "one-quarter of a day" to read "one-half of a day".)

<u>2303</u>

- (a)
- A nurse who becomes injured or ill in the course of performing her/his duties must report such injury or illness as soon as possible to her/his immediate supervisor.
 - (ii) A nurse unable to work because of a work related injury or illness will inform the Employer immediately, in accordance with established procedures, so that a claim for compensation benefits can be forwarded to the Workers Compensation Board (WCB). Workers Compensation payment will be paid directly to the nurse by WCB

Where a nurse is unable to work because of injuries sustained in a motor vehicle accident she/he must advise her/his supervisor as soon as possible and she/he must submit a claim for benefits to the Manitoba Public Insurance (MPI). The nurse shall be entitled to receive full income protection benefits for any period of time deemed to be a "waiting period" by MPI.

- (iii) Where a nurse has applied for WCB or MPI benefits and where a loss of normal salary would result while awaiting a WCB/MPI decision, the nurse may elect to submit an application to the Employer requesting an advance subject to the following conditions:
- (iv) Advance payment(s) shall not exceed the nurse's basic salary as defined in Article 3802 (exclusive of overtime), less the nurse's usual income tax deductions, Canada Pension Plan contributions, and EI contributions.
- (v) The advance(s) will cover the period of time from the date of injury until the date the final WCB/MPI decision is received, however in no case shall the total amount of the advance exceed seventy percent (70%) of the value of the nurse's accumulated income protection credits.
- (vi) The nurse shall reimburse the Employer by assigning sufficient WCB/MPI payments to be paid directly to the Employer to offset the total amount of the advance or by repayment to the Employer immediately upon receipt of payment made by WCB/MPI directly to the nurse.
- (vii) In the event that the WCB/MPI disallows the claim, including any appeal, the nurse shall be paid for the absence in accordance with the income protection provisions of this Agreement and the Employer shall recover the total amount of the advance by payroll deduction.
- (viii) Upon request, the Employer will provide a statement to the nurse indicating the amount of advance payment(s) made and repayment(s) received by the Employer.

(b) (i) A nurse who has accumulated sufficient income protection credits may elect to submit an application to the Employer requesting that the Employer supplement the WCB/MPI payments. The amount of such supplement will equal ten percent (10%) of the nurse's regular net salary not earned due to the time loss. Regular net salary will be based on the nurse's basic salary as defined in Article 3802 of the Collective Agreement (exclusive of overtime), less the nurse's usual income tax deduction, Canada Pension Plan contributions and Employment Insurance contributions.

The Employer's supplement shall be charged to the nurse's accumulated income protection credits and such supplement shall be paid until the nurse's accumulated income protection credits are exhausted, or until 119 calendar days have elapsed since the first day of supplement, whichever is less.

- (ii) Subject to the provisions of each plan, the nurse may request the Employer to deduct from the supplement, if sufficient, the contributions which would have been paid by the nurse to the Employer's pension plan, dental care plan, *Disability & Rehabilitation Plan, and group life insurance plan as if the nurse was not disabled. If the supplement is not sufficient, or where the nurse elects to receive an advance, the nurse may, subject to the provisions of each plan, forward self-payments to the Employer to ensure the continuation of these benefit plans. The Employer will contribute its usual contributions to these benefit plans while the nurse contributes.
- (iii) Further to this, the Employer shall notify Workers Compensation/Manitoba Public Insurance of salary adjustments at the time they occur.
- (iv) In accordance with Section 41(6)(b) of the Workers Compensation Act of Manitoba, the Employer shall make application to the WCB by January 1, 1994 so that the WCB may determine whether or not the supplements referenced in 2303(b)(i) shall continue in effect after January 1, 1995.
- (v) If at any time it is decided by the WCB/MPI that any payment to be made to the nurse by the Employer must be offset against benefits otherwise payable by the WCB/MPI, then such payment shall not be payable.
- (c) Where the WCB/MPI recommends a work assessment period or a modified return to work period, the provisions of 7A06 shall apply.

(d) A nurse who is on D&R/WCB/MPI prior to the commencement of her/his vacation shall, upon her/his request, have her/his vacation displaced and such vacation shall be re-scheduled at a time mutually agreed between the nurse and the Employer within the available time periods remaining during that vacation year. If the nurse's current annual vacation cannot be reasonably scheduled by the end of the current vacation year the nurse may elect to carry over to the next vacation year up to five (5) days of current annual vacation (pro-rated for part-time).

2304 The Employer shall be entitled to recover any income protection paid to a nurse if her/his employment is not continued beyond her/his probationary period, from the nurse's final termination cheque.

<u>2305</u> A nurse who will be absent due to illness or injury shall inform the Employer prior to the starting time of her/his scheduled shift:

- -- at least one (1) hour for Day Shift.
- -- at least three (3) hours for Evening/Night and twelve (12) hour Night shift.

A nurse not notifying the Employer as indicated above shall be marked absent for that shift unless an explanation satisfactory to the Employer is given for not notifying the Employer within the specified time.

2306 The Employer, either at the time of notification by the nurse of claiming income protection or by contacting the nurse at home, or by advance notice prior to future income protection claims, may require a medical certificate or report as proof of the validity of any claim for income protection and as proof of the nurse's ability to perform her/his regular duties, or to perform her/his normal duties. Failure to provide such a certificate when requested may disqualify a nurse from receiving paid income protection or may result in a refusal of permission for her/him to resume her/his duties.

2307 Days off and Recognized Holidays or days given in lieu of Recognized Holidays which fall within a period of sick leave shall not be considered a part of, or charged to, the nurse's accumulated income protection.

<u>2308</u> At the effective date of this Agreement, each nurse will retain income protection benefits accumulated and not used to that date.

2309 As soon as a nurse is aware of a date upon which surgery will occur, she/he shall notify the Employer, in writing, of this date and any change thereto so that staff coverage for her/his intended absence may be arranged.

Where a nurse has been provided necessary time off due to scheduled surgery and where the surgery is subsequently cancelled, and where the Employer has made arrangements for alternate staffing to cover the anticipated absence, the Employer shall have the right to cancel the relief shifts.

These relief shifts shall be clearly identified as being subject to forty-eight (48) hours notice of cancellation.

2310 If hospitalized due to accident or illness while on scheduled vacation, a nurse may utilize income protection to cover the hospitalization and/or post-hospitalization period, and the displaced vacation shall be re-scheduled at a time mutually agreed between the nurse and the Employer within the available time periods remaining during that vacation year. Proof of such hospitalization shall be provided if requested. Proof of such hospitalization and/or post-hospitalization period shall be provided if requested.

2311 The Employer will annually, on written request, provide each nurse with a statement of her/his accrued income protection credits.

2312 Subject to the provisions of 2302, a nurse may use income protection for the purpose of providing care in the event of an illness of a spouse, child or parent.

2313 A nurse who has completed the probationary period who is unable to perform her/his work by reason of an accident or illness not fully covered by income protection, upon providing an acceptable medical certificate, shall be granted unpaid leave of absence as required for recovery; subject to review at three (3) months, or lesser intervals, at the discretion of the Employer.

2314 Accumulation of income protection will continue during any unpaid leave of absence or layoff of four (4) weeks or less.

ARTICLE 24 -- LEAVE OF ABSENCE

2401 The nurse will be required to submit a written request for any leave of absence unless otherwise herein stipulated. These requests will specify the reason for the leave and will be considered on an individual basis and may be allowed at the discretion of the Employer unless otherwise indicated in the agreement; however, requests for education leave will be given special consideration. Except in emergencies, such requests must be made at least four (4) weeks in advance. The Employer shall notify the nurse of her/his decision in writing, within two (2) weeks of receipt of the request. Requests for extension of educational leave, maternity leave, paternity leave, adoption leave, and bereavement leave will be granted if reasonably possible.

Where a nurse requests to return to work prior to the expiry of the leave of absence as set out in the approved request, the Employer shall have no obligation to return the nurse to work until such time that the leave of absence would have expired, except as per 2408 C.6.

Where a nurse has been granted a leave of absence from her/his entire EFT, she/he shall be eligible to work additional available shifts. However, she/he shall not have preference over part-time nurses or casual nurses who offer to work these shifts. When she/he is awarded additional available shifts, she/he is compensated in accordance with Article 2703 (a) – (e).

Where a nurse has requested and been granted a partial leave of absence, she/he will be entitled to accrual of vacation, income protection credits, pre-retirement leave, and Recognized Holiday pay on a pro-rata basis.

<u>2402</u> Overstaying of leave of absence without valid reason may be deemed as a resignation.

2403 The Employer shall make every reasonable effort to assure that a nurse granted leave of absence for any reason shall return to the same position. For leaves of absence of sixty (60) weeks or less, the nurse is assured of being placed in the same occupational classification and at the same step on her/his salary scale on her/his return, but she/he cannot be assured of being placed in the same nursing unit, position or shift. In the case of longer leaves of absence, a nurse may be placed in any position covered by this Agreement and shall be reinstated at her/his previous salary, provided that such salary shall not exceed the maximum for the position in which she/he is placed. Notwithstanding 3001, a nurse not placed in her/his former position will be given consideration over other nurses for the first vacancy made available to her/him in a similar position.

<u>Note:</u> The following 2 paragraphs are in effect only for nurses who commenced a leave of absence prior to March 27, 2008. They do not apply to nurses who commenced a leave of absence on March 28, 2008 or later:

In cases where a Licensed Practical Nurse is eligible for or obtains a Registered Nurse/Registered Psychiatric Nurse designation, it is understood by the parties that should the nurse not be successful in obtaining a Registered Nurse/Registered Psychiatric Nurse position within the Facility, she/he shall be considered as laid-off.

In cases where a Licensed Practical Nurse has been granted an educational leave of absence to pursue a Registered Nurse/Registered Psychiatric Nurse designation and is unsuccessful, it is understood by the parties that she/he shall be considered as laid-off. **<u>2404</u>** There shall be no loss of income protection accumulations or vacation accumulations up to the date of any leave of absence whether granted with or without pay.

<u>2405</u> Income protection and vacation benefits will continue to accrue during any period of an unpaid leave of absence, approved by the Employer of four (4) weeks or less.

<u>2406</u> <u>Professional Leave</u>: If, in the opinion of the Employer it is in the best interests of patient care, nurses may, whenever practicable, be granted time off with pay in order to attend professional or educational meetings, conventions, workshops and institutes.

<u>2407</u>

A. <u>Educational Development</u>:

- (a) Where the Employer requires a nurse to attend educational conferences, workshops, programs or seminars during working hours, the Employer shall pay registration or tuition fees, and approved expenses and shall ensure that the nurse suffers no loss of salary.
- (b) Where the Employer requires a nurse to attend educational conferences, workshops, programs or seminars during nonworking time, the Employer shall pay registration or tuition fees, and approved expenses and shall pay for the time of such attendance at straight time rates.

(c) <u>Employer Sponsored Educational Development</u>

A nurse shall be granted, upon written request, funding up to a maximum of \$200 per fiscal year, to attend approved workshops, courses, and other programs that are relevant to nursing practice. Such requests must be submitted to the senior nursing manager or designate prior to attendance at such program. The \$200 allowance referenced herein shall be reimbursement of tuition for or registration and shall recommended/required books and occur upon satisfactory completion of the workshop, course, or educational program.

B. <u>Education Leave</u>:

The Employer and the Union mutually recognize that additional and continuing education of nurses is desirable as a means of enhancing patient care and improving the effectiveness of nursing services.

Leave from duty for the purpose of taking post-basic courses may be granted at the discretion of the Employer, subject to the following conditions:

- (a) Application shall be made in writing to the Employer, including a description of the course or courses to be taken; the duration of leave applied for; and whether or not the leave requested qualifies for Employer assistance, subject to the terms of this Article.
- (b) Leave with full salary shall be granted when a nurse is required by the Employer to take an educational course, or courses, unless such courses are conditions of employment.
- (c) Leave with salary may, at the discretion of the Employer, be granted to nurses who apply for leave to take an educational course recognized by the Employer, in order to perform current or anticipated duties more effectively.
- (d) When leave is applied for and assistance is granted as per this regulation, the nurse shall sign a written undertaking to the effect that upon completion of her/his educational course she/he will return to the facility during a period of not less than twice the duration of her/his leave, and that should she/he resign before the expiry of such period, she/he will refund to the Employer that fraction of her/his salary and other financial aid paid to her/him during her/his educational course which is proportionate to the deficiency in the specified period of subsequent service.
- (e) Educational leaves of more than one (1) year are subject to annual review.

2408 Parenting Leave

Parenting Leave consists of Maternity and Parental Leave. Parental Leave includes Paternity and Adoption Leave. A nurse shall be granted leave of absence for up to fifty-four (54) weeks where she/he qualifies for Parenting Leave.

A nurse who qualifies for Maternity Leave may apply for such leave in accordance with either Maternity Leave Plan "A" or Maternity Leave Plan "B" but not both.

- A. <u>Maternity Leave Plan "A"</u>
 - 1. Up to seventeen (17) weeks of Maternity Leave without pay will be granted subject to the following conditions:

- (a) a written request must be submitted not later than the end of the fifth (5th) month of pregnancy and not less than one (1) month before the intended date of the leave.
- (b) if requested by the nurse, unpaid Maternity Leave of shorter duration may be granted at the discretion of the Employer.
- (c) the Employer is entitled to require a nurse to stop work in the case of unsatisfactory job performance or if the state of her health as verified by a qualified medical practitioner becomes incompatible with the requirements of her job.

B. <u>Maternity Leave Plan "B"</u>

- 1. In order to qualify for Plan B, a pregnant nurse must:
 - (a) submit to the Employer an application in writing, for leave under Plan B at least four (4) weeks before the day specified by her in the application as the day on which she intends to commence such leave.
 - (b) provide the Employer with a certificate of a duly qualified medical practitioner certifying that she is pregnant and specifying the estimated date of her delivery.
 - (c) provide the Employer with proof that she has applied for Employment Insurance benefits and that the HRDC has agreed that the nurse has qualified for and is entitled to such Employment Insurance benefits pursuant to the Employment Insurance Act.
 - (d) the Employer is entitled to require a nurse to stop work in the case of unsatisfactory job performance or if the state of her health as verified by a qualified medical practitioner becomes incompatible with the requirements of her job.
- 2. An applicant for Maternity Leave under Plan B must sign an agreement with the Employer providing that:

- (a) she will return to work and remain in the employ of the Employer for at least six (6) months following her return to work, except that where a nurse is the successful applicant for a part-time position which commences on the date of her return from Maternity Leave or at any time during the six (6) months following her return from Maternity Leave, she must remain in the employ of the Employer and work the working hours remaining in the balance of the six (6) months of the full-time employment; and
- (b) she will return to work on the date of the expiry of her maternity leave and where applicable, her parental leave, unless this date is modified as per C.6 below.
- (c) should she fail to return to work as provided under (a) and/or (b) above, she is indebted to the Employer for the full amount of pay received from the Employer as a maternity allowance during her entire period of maternity leave.
- (d) In the event the nurse does not complete the full period of service as required under Part (a) and (b) above, she shall repay a portion of the "top up" as follows:

Monetary value of top up provided (value is based on hours paid at regular rate of pay in 6 months prior to leave) X not worked Hours of service required to be worked (based on monetary value)

- 3. A nurse who qualifies is entitled to a maternity leave consisting of:
 - (a) a period not exceeding seventeen (17) weeks if delivery occurs on or before the date of delivery specified in the certificate, as in (1) (b).
 - (b) a period of seventeen (17) weeks plus an additional period equal to the period between the date of delivery specified in the certificate and the actual date of delivery, if delivery occurs after the date mentioned in that certificate, as in (1) (b).
 - (c) the Employer may, notwithstanding the above, vary the length of maternity leave upon proper certification by the attending physician.

- 4. During the period of maternity leave, a nurse who qualifies is entitled to a maternity leave allowance with the SUB Plan as follows:
 - (a) for the first two (2) weeks a nurse shall receive ninetythree percent (93%) of her weekly rate of pay;
 - (b) for up to a maximum of fifteen (15) additional weeks, payments equivalent to the difference between the El benefits the nurse is eligible to receive and ninety-three percent (93%) of her normal weekly earnings.
 - (c) All other time as may be provided under this Article, shall be on a leave without pay basis.
- 5. Plan B does not apply to a newly hired nurse occupying a term position.
- 6. A leave of absence under Plan B shall be considered to be an unpaid leave of absence. Income protection credits and vacation entitlement shall not accrue.

C. 1. <u>Parental Leave</u>

- (i) In order to qualify for Parental Leave a nurse must be the natural mother of a child; or be the natural father of a child or must assume actual care and custody of his newborn child (Paternity Leave) or adopt a child under the law of the province (Adoption Leave), or be a partner in a same sex relationship who assumes care and custody of a child.
- (ii) A nurse who qualifies for Parental Leave, except in the case of Adoption Leave as specified below, must submit to the Employer an application in writing for Parental Leave at least four (4) weeks before the intended date of the commencement of the leave.
- (iii) In the case of Adoption Leave, the nurse must submit a written request for such leave. The nurse may commence adoption leave upon one (1) day's notice provided that application for such leave is made when the adoption has been approved and the Employer is kept informed of the progress of the adoption proceedings.

- (iv) A nurse who qualifies in accordance with (i), (ii) and (iii) will be granted Parental Leave without pay for a continuous period of up to fifty-four (54) weeks inclusive of vacation as specified in (C.2) below. If requested by the nurse, extensions to leaves under this clause will be granted in accordance with 2401.
- 2. Except as outlined below, any nurse must use current annual vacation, (which was earned during the previous vacation year), during the current vacation year. If the current annual vacation is not used, then the Employer has the right to schedule the vacation prior to the end of the current vacation year or pay out any monies owing.

Where Parenting leave is thirty-seven (37) weeks or less, vacation shall be scheduled and taken in accordance with the provisions of the Collective Agreement. No carry-over of vacation is permitted.

Where Maternity and/or Parental Leave exceeds thirty-seven (37) weeks, the nurse may elect to carry over to the next vacation year, up to five (5) days of current annual vacation. The balance of the current annual vacation will be paid out at a time immediately following the period during which EI benefits were payable (even if this period extends into the following vacation year).

Any vacation earned up to the time of the commencement of leave will be retained and will be available to be taken in the following vacation year.

- 3. Subject to 4. below, Parental Leave must commence no later than the first anniversary date of birth or adoption of the child or of the date on which the child comes into actual care and custody of the nurse.
- 4. Where a nurse takes Parental Leave in addition to Maternity Leave, the nurse must commence the Parental Leave immediately on the expiry of the Maternity Leave without a return to work unless otherwise approved by the Employer.

5. Three (3) days of paid leave of absence (23.25 hours) shall be granted to a full-time nurse prior to the commencement of Maternity, Paternity, or Adoption Leave or at the time of the birth or adoption of a child. If the nurse is taking a Maternity, Paternity, or Adoption Leave, the nurse will use this three (3) days of paid leave to replace scheduled hours of work immediately prior to the Sunday of the week the Maternity, Paternity, or Adoption Leave commences.

Part-time nurses shall be entitled to a pro rata amount of this leave based on their hours paid at regular rate of pay in the previous six (6) months.

6. A nurse may end Maternity or Parental leave earlier than the expiry date of the leave by giving the Employer written notice at least two (2) weeks or one pay period, whichever is longer, before the day the nurse wants to end the leave.

<u>2409</u> <u>Union Leave</u>:

- (a) Subject to at least two (2) or more weeks written notice of request, and no additional costs to the Employer, leave of absence without loss of salary or benefits shall be granted to Union representatives for the purpose of attendance at Manitoba Nurses' Union/Canadian Federation of Nurses' Unions/Canadian Labour Congress meetings or seminars. It is understood that the Manitoba Nurses' Union will reimburse the Employer for salary, benefits and related payroll costs.
- (b) Subject to six (6) weeks notice, a nurse elected or selected to a full-time or part-time position with the Manitoba Nurses' Union or the Canadian Federation of Nurses' Unions/Canadian Labour Congress, or College of Registered Nurses of Manitoba or College of Licensed Practical Nurses of Manitoba or College of Registered Psychiatric Nurses of Manitoba, shall be granted leave of absence without loss of seniority, salary or benefits for a period of up to two (2) years. Such leave shall be renewed each year, on request, during her/his term of office. It is understood that the Manitoba Nurses' Union will reimburse the Employer for the total recovery of payroll and related costs.

Notwithstanding Article 3006, the Employer may elect to post these terms as either fixed terms up to two (2) years or indefinite terms.

a) Legal and Investigative Proceedings A nurse required to attend a course

a) A nurse required to attend a court proceeding, other than a court proceeding occasioned by the nurse's private affairs where she/he is a party to that proceeding, shall receive leave of absence at her/his regular basic rate of pay, and remit to the employer any jury or witness fees received, only for those days she/he was normally scheduled to work. The nurse shall not request reimbursement for, or be required to remit any reimbursement of expenses for such duty.

If a nurse is subpoenaed as a witness in a work related matter on her/his scheduled day off, the Employer and the nurse will mutually agree on alternate time off in lieu.

- b) A nurse required to attend a court proceeding/inquest to provide medical/clinical evidence shall receive a leave of absence at her/his regular basic rate of pay, and shall remit to the employer any witness fees received. The nurse shall not be required to remit any reimbursement of expenses for such duty.
- c) Where a nurse is required to prepare for a court proceeding/inquest where they will provide medical/clinical evidence, during time that the nurse is not scheduled to work, the Employer and the nurse will mutually agree on alternate time off in lieu or compensate for time at regular rates of pay, subject to the Employer's prior approval of the required preparation time.
- d) Where the Employer requires the nurse to participate in a workplace investigation that is required by legislation or Employer policy, and where such investigation meetings cannot be scheduled on the nurse's regular day of work, the Employer will compensate the nurse for the investigation meeting time at regular rates of pay.
- e) A nurse required to attend a court proceeding as a party to that proceeding, occasioned by the nurse's private affairs shall receive a leave of absence without pay for the required absence.

2411Bereavement Leave:(a)Bereavement leave of

(a) Bereavement leave of up to four (4) working days without loss of pay shall be granted in the event of death of a spouse, common-law spouse, child, stepchild, parent, step-parent, sibling, father-in-law, mother-in-law, grandparent, grandparent-in-law, grandchild, brother-in-law, sister-in-law, daughter-in-law, son-in-law, former legal guardian, fiancé, and any other relative who has been residing in the same household. Such days may be taken only in the period which extends from the date of death up to and including the day following interment, or four (4) calendar days following the death, whichever is the greater. Bereavement leave may be extended by up to two (2) additional working days as may be necessitated by reason of travel to attend the funeral.

One (1) bereavement leave day may be retained at the nurse's request for use in the case where actual interment or cremation is at a later date.

(b) Necessary time off up to one day at basic pay will be granted to a nurse to attend a funeral as a pallbearer.

Necessary time off up to one day at basic pay may be granted a nurse to attend either a funeral or initial memorial service as a mourner. Special consideration will be given to requests for leave related to the death of significant other persons under this provision.

(c) For the purpose of this section, a day is defined as a calendar day irrespective of the number of hours per day scheduled for the affected nurse.

<u>2412</u> <u>Election Leave</u>:

Upon written request, the Employer shall allow leave of absence of up to two (2) months without pay and without loss of seniority so that a nurse may be a candidate in federal, provincial, or municipal elections. A nurse who is elected to public office shall be granted leave of absence without pay for the term(s) of her/his office.

- **2413** <u>Pre-Retirement Leave</u>:
- (a) Full-time nurses who:
 - (i) retire at age sixty-five (65) years; or
 - (ii) retire after age sixty-five (65) years; or
 - (iii) have completed at least ten (10) years continuous employment and retire after age fifty-five (55) years but before age sixty-five (65) years; or
 - (iv) have completed at least ten (10) years of continuous employment and who meet the "Magic 80" provisions of the HEPP Retirement Pension Plan; or
 - (v) terminate employment at any time due to permanent disability

shall be granted paid pre-retirement leave on the basis of four (4) days per year of employment.

Subject to the above, pre-retirement leave for any period of layoff up to a maximum of five (5) years will be calculated on a pro rata basis, based on the following formula:

Hours Worked		Entitlement
During Layoff	Х	of a Full-Time
Annual Full-time Hours		Nurse

(b) Part-time nurses who:

- (i) retire at age sixty-five (65) years; or
- (ii) retire after age sixty-five (65) years; or
- (iii) have completed at least ten (10) years continuous employment and retire after age fifty-five (55) years but before age sixty-five (65) years; or
- (iv) have completed at least ten (10) years of continuous employment and who meet the "Magic 80" provisions of the HEPP Retirement Pension Plan; or
- (v) terminate employment at any time due to permanent disability

shall be granted paid pre-retirement leave as specified above on a pro rata basis. Calculation will be based on the following principle:

Average Annual Hours		
Actually Worked From		Entitlement of
Last Date of Employment	Х	a Full-time
Annual Full-time Hours		Nurse

Subject to the above, pre-retirement leave for any period of layoff up to a maximum of five (5) years will be calculated on a pro rata basis, based on the following formula:

Hours Worked		Entitlement
During Layoff	Х	of a Full-Time
Annual Full-time Hours		Nurse

(c) Calculation of pre-retirement leave entitlement shall begin from the date of the nurse's last commencing employment at the facility and shall be based on the nurse's total length of continuous employment on the date of retirement.

- (d) Payment shall, at the option of the nurse, be made in a lump sum or as a continuation of salary until scheduled retirement date, or as a combination of continuation of salary followed by a lump sum payment.
- (e) Effective October 1, 2007, where a nurse is entitled to pre-retirement leave in accordance with the conditions listed above, and the nurse dies prior to receiving this benefit, it is understood that the pre-retirement leave benefit shall be paid to her/his estate.
- **<u>NOTE</u>**: Where a nurse chooses to take a lump sum payment, the retirement date shall be her/his last day worked.

<u>2414</u> <u>Citizenship Leave</u>: Nurses shall be allowed the necessary time off with pay to attend citizenship court to become a Canadian citizen. The nurse shall notify the Employer a minimum of seven (7) days prior to the date this leave is required.

<u>2415</u> Subject to the provisions of each plan, a nurse granted leave of absence without pay for a period exceeding four (4) weeks may prepay all monthly payroll deductions which will become due during such absence, with the exception of Union dues.

<u>2416</u> <u>Compassionate Care Leave</u>:

A nurse shall receive Compassionate Care Leave without pay to provide care or support to a seriously ill family member, subject to the following conditions:

- (a) A nurse must have completed at least thirty (30) days of employment as of the intended date of leave.
- (b) A nurse who wishes to take a leave under this section must give the Employer notice of at least one (1) pay period, unless circumstances necessitate a shorter period.
- (c) A nurse may take no more than two (2) periods of leave, totaling no more than eight (8) weeks, which must end no later than twenty-six (26) weeks after the day the first period of leave began. No period of leave may be less than one (1) week's duration.
- (d) For a nurse to be eligible for leave, a physician who provides care to the family member must issue a certificate stating that:
 - a family member of the nurse has a serious medical condition with a significant risk of death within twenty-six (26) weeks from
 - (i) the day the certificate is issued, or
 - (ii) if the leave was begun before the certificate was issued, the day the leave began; and

(2) the family member requires the care or support of one (1) or more family members.

The nurse must give the Employer a copy of the physician's certificate as soon as possible.

- (e) A family member for the purpose of this article shall be defined as:
 - (i) a spouse or common-law partner of the nurse;
 - (ii) a child of the nurse or a child of the nurse's spouse or commonlaw partner;
 - (iii) a parent of the nurse or a parent of the nurse's spouse or common-law partner;
 - (iv) a brother, sister, step-brother, step-sister, uncle, aunt, nephew, niece, grandchild or grandparent of the nurse or of the nurse's spouse or common-law partner;
 - (v) a current or former foster parent of the nurse or of the nurse's spouse or common-law partner;
 - (vi) a current or former foster child, ward or guardian of the nurse, or of the nurse's spouse or common-law partner;
 - (vii) the spouse or common-law partner of a person mentioned in any of the clauses (iii), (iv) (v) and (vi);
 - (viii) any other person whom the nurse considers to be like a close relative, whether or not they are related by blood, adoption, marriage or common-law relationship.
- (f) Unless otherwise mutually agreed, a nurse may end her/his Compassionate Care Leave earlier than eight (8) weeks by giving the Employer at least forty-eight (48) hours notice. Any additional available shifts resulting from Compassionate Care Leave being granted shall be clearly indicated as "Compassionate Care Leave shifts – subject to fortyeight (48) hours notice of cancellation".
- (g) Seniority shall be retained/accrued as per Article 25.
- (h) Subject to the provisions of 2302, a nurse may apply to utilize income protection to cover part or all of the two (2) week Employment Insurance waiting period.
- (i) In the event that the death of a family member occurs during this period of leave, the nurse shall be eligible for Bereavement Leave as outlined in Article 2411.

2417 Secondment to Educational Institutions

The Parties understand and agree that there may be occasions where it is beneficial to allow a current employee to move, without loss of employment status, seniority or benefit accruals, to work temporarily for nursing educational institutions.

These individuals will be placed on a paid leave of absence for the duration of the educational institution secondment.

ARTICLE 25 -- SENIORITY

<u>2501</u> Seniority is defined as the length of a nurse's continuous service since the last date on which she/he commenced work at the facility. Seniority for part-time nurses shall be pro-rated according to hours worked.

Seniority of a nurse relates to the seniority of other nurses in the same nursing category (e.g. Registered Nurses).

2502 Seniority shall be considered as a factor in vacancy selection (including promotion and transfer), demotion, and if all other posted selection criteria are equal, it shall be considered as the governing factor. Seniority of a nurse relates to the seniority of other nurses in the same occupational classification and shall transfer with the nurse when moving from one classification to another.

NOTE: Memo #34 Re: Transfer – Job Selection shall be in effect for the duration of this Collective Agreement.

- **<u>2503</u>** The seniority of a nurse will be retained but will not accrue if:
- she/he is on any unpaid leave of absence in excess of four (4) consecutive weeks except those referenced in (ii) below, and those referenced in Article 2504;
- she/he is on an unpaid leave of absence due to injury or illness which may be compensable by Workers Compensation, MPI or D & R, for a period of more than two (2) years from the date of the first absence from work related to the injury or illness;
- (iii) she/he is on an educational leave of absence in excess of two (2) years;
- (iv) she/he is laid off for more than twenty-six (26) weeks and less than five (5) years;
- (v) she/he obtains a term position of fifty-four (54) weeks or less, outside the bargaining unit.
- **<u>2504</u>** The seniority of a nurse will be retained and will accrue if:
- (i) she/he is on any period of paid leave of absence;
- (ii) she/he is on any period of Employer paid income protection;
- (iii) she/he is on an educational leave of absence up to two (2) years;
- (iv) she/he is on an unpaid leave of absence due to injury or illness which may be compensable by Workers Compensation, MPI or D & R for a period of up to two (2) years from the date of the first absence from work related to the injury or illness;

- (v) she/he is on any period of unpaid leave of absence of less than four (4) weeks, except those referenced in (iv) above;
- (vi) she/he is laid off for less than twenty-six (26) weeks;
- (vii) she/he is on parenting leave;
- Note: Accrual under these provisions is based on the nurse's regular EFT.
- **<u>2505</u>** Seniority will terminate if a nurse:
- (i) resigns;
- (ii) is discharged and not reinstated under the grievance procedure;
- (iii) is laid off for more than five (5) years;
- (iv) fails to report for duty within seven (7) days after notification to do so, subject to Article 2706 herein;
- (v) obtains a permanent position outside the bargaining unit; or a term position outside the bargaining unit which is greater than fifty-four (54) weeks.

<u>2506</u> The Employer shall once annually, by January 31st, provide the Union with a seniority listing of names of nurses within the scope of this agreement, together with the length of each nurse's continuous employment with the Employer. Any alleged errors in the list will be reviewed by the Employer and corrected as soon as possible.

<u>2507</u> Seniority may terminate if a nurse fails to report for work as scheduled at the end of a leave of absence, vacation, or suspension without an explanation satisfactory to the Employer.

ARTICLE 26 -- NOTICE OF TERMINATION OF EMPLOYMENT

<u>2601</u> Employment may be terminated voluntarily by a nurse or for just cause by the Employer subject to the following periods of written notice, exclusive of any vacation due:

- (a) for classifications other than Nurse IV or Nurse V -- four (4) weeks, and
- (b) for Nurse IV and Nurse V classifications -- six (6) weeks.
- **<u>2602</u>** Employment may be terminated with less notice or without notice:
- (a) by mutual agreement between the nurse and the Employer for special circumstances, or
- (b) during the probationary period of a newly hired nurse subject to Article 31 herein, or

(c) in the event a nurse is dismissed for sufficient cause to justify lesser or no notice.

<u>2603</u> The Employer may give equivalent basic pay in lieu of notice.

<u>2604</u> Subject to other provisions contained in this Agreement relative to termination of employment, each nurse shall, unless otherwise mutually agreed, upon termination of her/his employment and within five (5) office working days following the completion of her/his last working shift, receive pay in lieu of unused vacation, and all salary earned to date of termination.

ARTICLE 27 -- LAYOFF AND RECALL

<u>2701</u> When a reduction in the working force becomes necessary, nurses will be laid off in reverse order of seniority within their occupational classification, subject only to more senior nurses being qualified and willing to perform the required work.

<u>2702</u> In the event of a layoff, nurses other than probationary nurses shall receive notice or pay in lieu of such notice as follows:

- (a) two (2) weeks notice for layoff up to seven (7) weeks;
- (b) four (4) weeks notice for layoff of more than seven (7) weeks.

A nurse who is on layoff shall not be entitled to notice of layoff when she/he comes back to work on an incidental basis.

2703 No layoff of full-time or part-time nurses shall occur when casual nurses are being employed, unless no full-time or part-time nurses on staff are qualified to fill the position(s) in question.

Notwithstanding Article 3402, additional available shifts shall be offered to a nurse on layoff, before part-time and casual nurses, provided she/he is qualified, competent and willing to perform the required work. During the first three (3) years of a layoff, the nurse on layoff will receive preferential consideration for the assignment of such shifts provided that this will not result in her/him working in excess of her/his regular EFT commitment. During the period between three (3) to five (5) years, a laid off nurse may indicate availability for additional available shifts but will not receive preferential consideration over part-time nurses. Notwithstanding 1404, during the period between three (3) to five (5) years where a nurse does not work all or part of said additional available shift(s), for any reason, payment shall be made only in respect of hours actually worked; this is not applicable to the base EFT of a term position occupied by a laid off nurse. In the event the nurse accepts additional available shifts, the provisions of the Collective Agreement shall be applicable except as modified hereinafter:

- (a) vacation pay shall be calculated in accordance with section 2103 and shall be paid at the prevailing rate for the nurse on each pay cheque, and shall be prorated on the basis of hours paid at regular rate of pay,
- (b) income protection accumulation shall be calculated as follows:

Additional available hours worked by the		
laid-off nurse	Х	Entitlement of
Full-time Hours		Full-time Nurse

- (c) in the event the layoff is longer than twenty-six (26) weeks, seniority shall be calculated in accordance with regular hours worked,
- (d) the nurse shall be paid four point six two percent (4.62%) of the basic rate of pay in lieu of time off on Recognized Holidays. Such holiday pay shall be calculated on all paid hours and shall be included in each pay cheque,
- (e) participation in benefit plans is subject to the provisions of each plan.

Any period of time during the layoff when the nurse works additional available shifts or works in a term position shall not extend the five (5) year period referenced in Article 25.

However, a nurse on layoff who agrees to work in a term position shall retain her/his right to be recalled into a permanent position while working in the term position.

<u>2704</u> No new nurses will be hired when other nurses are on layoff except for reasons of a special skill requirement.

<u>2705</u> All nursing job vacancies, permanent and term, shall be posted in accordance with the terms of this agreement. Nurses on layoff shall be entitled to apply for these vacancies.

2706 Nurses shall be recalled in seniority order to available positions in equal or lower paid occupational classifications provided they are qualified to perform the required work. Such recall shall be made by registered mail or by personal service and shall provide for at least one (1) week's notice to report back to work. Notwithstanding Article 3001, the above mentioned available positions shall not be posted while nurse(s) are on layoff.

The nurses affected will contact the Department of Nursing by telephone not later than four (4) days, excluding Saturdays, Sundays and Recognized Holidays following the notice of recall being delivered. Failure to notify as above shall result in the nurse being placed last on the recall list.

A nurse being placed last on the recall list who is subsequently recalled to work and who fails to report to duty as scheduled, without valid reason, shall have her/his employment terminated.

<u>2707</u> In the event of a deletion of an occupied position, as much notice as possible shall be given to the incumbent, and the incumbent will be entitled to exercise her/his seniority rights subject to her/his ability, performance, and qualifications to displace a nurse in a position of equal or lower classification. Any nurse thus displaced shall also be entitled to a like exercise of seniority rights.

2708 Laid off nurses shall be entitled to apply for nursing job vacancies other than those to which they have recall rights. Copies of job postings will be sent to the President of the Local during the period when any nurses are on layoff.

2709 Accumulated vacation entitlement shall be paid out at time of layoff except where, prior to the date of layoff, a nurse has been awarded a term or permanent position which commences within four (4) weeks of date of layoff.

<u>2710</u> Nurses who are absent from work due to a leave of absence for any reason shall be advised of layoff or deletion of their position in accordance with this Agreement and shall be required to comply with all provisions of this Agreement except that they shall not be expected to return to work prior to the expiry of their leave of absence.

ARTICLE 28 -- PROMOTION AND REASSIGNMENT

2801 Upon promotion, a nurse shall receive a salary applicable to her/his new classification which provides an increase of at least one increment above her/his former salary. A promotion shall mean an increase in classification from one occupational classification to another.

<u>2802</u> The nurse's anniversary date of employment prior to promotion shall continue to govern with respect to increments.

2803 All promotions and voluntary transfers are subject to a three (3) month trial period, which may be extended up to an additional three (3) months at the Employer's discretion, and the Union shall be notified by the Employer. During this trial period, the promoted (or transferred) nurse may revert to her/his former position, or may be returned (or transferred) by the Employer.

<u>2804</u> In the event of a temporary lateral work reassignment being necessitated by an unforeseen staffing shortage on a nursing unit a nurse may be reassigned subject to the following condition:

- Where the reassigned nurse does not have the specific competency for that similar patient/resident/client base, they would only be assigned functional tasks or would work directly with a nurse on that unit.

This lateral work reassignment will be made by the out of scope manager as close to the commencement of the shift as possible. Selection of the nurse to be reassigned shall be based on ability and experience and shared as equally as possible.

Orientation will be provided of sufficient duration to assist the nurse in becoming acquainted with essential information such as policies and procedures, routines, location of supplies and equipment, and fire and disaster plans.

ARTICLE 29 -- DISCIPLINE, DEMOTION AND ACCESS TO PERSONNEL FILE

2901 In all instances where the Employer considers that a nurse warrants disciplinary action, the Employer shall make every effort to take such action at a meeting with the nurse and shall give the nurse advance notice of the nature of the complaint. The nurse may be accompanied at the meeting by a Union representative. The Employer shall inform the nurse of her/his right to have a Union representative present and advise the Union that this has been done.

2902 If the action referred to in the above clause results in a written warning, suspension, demotion or dismissal of a nurse, the Employer shall notify the nurse in writing of the action taken and the reasons either by registered mail or personal service.

2903 A nurse who is demoted due to inadequate performance shall be paid at the step of the lower scale that corresponds to her/his level of experience.

2904 Non-Disciplinary Demotion:

If a nurse is reclassified to a lower category because of changing conditions within the facility, she/he will maintain her/his current salary level until the salary scale of the lower category reaches her/his level of salary.

The application of this provision as it relates to the deletion, layoff/recall procedure shall be limited to a three (3) year period from the date the nurse assumes a position in the lower paid classification or until the salary scale of the lower position reaches her/his level of salary whichever occurs first.

<u>2905</u> A nurse shall be given the opportunity to examine any document expressing dissatisfaction with her/his performance or conduct which is in her/his file and her/his reply to any such document shall also be placed in her/his file. Upon written request, the nurse shall also receive a copy of such a document.

2906 A nurse may examine her/his file upon written request and if she/he so desires, she/he may be accompanied by a Union representative. She/he shall have recourse to the grievance procedure to dispute any derogatory entry in her/his personnel file. Any nurse who has been terminated may consult her/his file and upon written request shall receive copies of specified documents so long as the written request is made within sixty (60) days of her/his termination.

2907 The Employer agrees not to introduce as evidence any such derogatory entry at any hearing unless the nurse has previously been made aware of its contents at the time of filing or a reasonable time thereafter.

2908 There shall be one (1) personnel file maintained by the Employer for each nurse.

ARTICLE 30 -- VACANCIES, TERM POSITIONS AND NEW POSITIONS

3001 Subject to section 3002 herein, the Employer agrees to post notices of vacant, term or new positions covered under this Agreement for at least seven (7) days to enable nurses presently in the employ of the Employer to apply for same. Such posting shall not preclude the Employer from advertising outside the site premises. All postings shall state minimum qualifications required, the equivalent to full-time (E.F.T.) and date of closing of the competition. Job descriptions shall be available to applicants on request.

<u>3002</u> The Employer will be required to post a notice of vacancy for only five (5) days for a vacancy that is created by:

- (a) a nurse terminating employment and not giving the full period of notice as specified in Article 26 herein, or
- (b) a transfer occasioned by posting.
- (c) Where a term position has been created due to a leave of absence where less than four (4) weeks notice has been given.

3003 Provided that equivalent qualifications are met, preference shall be given to nurses presently in the bargaining unit who have submitted a written application for the vacant, term or new position.

Notwithstanding the above, a Nurse will have unit preference when new positions are posted as a result of an Employment Security Notice.

<u>3004</u> The name of the successful applicant and the position awarded will be posted on the bulletin board for a period of seven (7) calendar days with a copy of this information forwarded to the Union.

Any nurse who was interviewed but was not the successful applicant shall be entitled to consult with the hiring Manager. Such consultation will take place within two (2) weeks of the request. The purpose of the consultation shall be to provide the nurse with constructive feedback regarding their application.

An unsuccessful applicant may inquire of the hiring Manager or the Human Resources Consultant to why she/he was not selected for an interview.

In the case of a nurse from the bargaining unit being awarded a position, her/his transfer shall be carried out within the time frame of the period of notice of termination for the position from which she/he is transferring, unless otherwise mutually agreed between the nurse and the Employer.

<u>3005</u> The applicant selected for any position shall receive, within two (2) weeks of the selection being made, written confirmation of the salary scale, her/his placement on such scale, and any special conditions that may be applicable to her/his appointment.

3006 "Term Position":

A position occupied by a full-time or part-time nurse for a specified period of time, up to a maximum of sixty (60) weeks, where patient/client/resident census or workload necessitates a temporary increase in staffing, if mutually agreed, to replace a nurse(s) who is/are on vacation or leave of absence, or to carry out a special short term project or where the Employer has provided notice of permanent deletion of position(s) under the Memorandum of Understanding regarding Employment Security, or as otherwise mutually agreed between the Union and the Employer. If the Employer determines there is a term position to be filled by a nurse, the term position shall be posted in accordance with Article 30. This shall not preclude the Employer from utilizing part-time nurses and/or casual nurses to work available shifts as specified in Articles 34 and 35 when the Employer decides that a term position is not required.

The Employer shall provide written confirmation of the start and expiry dates of the term position prior to the nurse's commencement in the position. This period may be extended if the Employer so requests and the Union agrees.

The maximum duration specified in paragraph 1 above for term positions shall not apply in situations where a nurse is absent indefinitely due to Workers Compensation and/or illness and/or accident or where there is a temporary vacancy due to leave for Public Office. In these cases, the Employer shall state on the job posting that the said term position is an "Indefinite Term" which will expire subject to a minimum of twenty-four (24) hours notice. The "Indefinite Term" will expire upon either the return to work or termination of employment of the nurse on leave. Any term positions directly resulting from the above procedure will be posted in the same manner.

In case a nurse on Maternity or Parental Leave wants to exercise her/his right to return from such leave earlier than anticipated, having given appropriate notice as per 2408 C.6, the Employer shall state on the job posting that the said term position is a "Maternity or Parental Leave of absence term" which may expire sooner than indicated, subject to minimum notice of two (2) weeks or one pay period, whichever is longer. Any term positions directly resulting from the filling of such a term position will be posted in the same manner.

The terms of this Collective Agreement shall be applicable to the nurse in the term position, except that a nurse occupying a term position may be required to complete the term before being considered for other term positions within the bargaining unit.

On expiry of the term position the nurse:

- (a) newly hired from outside the Facility, or a casual nurse from within the facility, shall be entitled to exercise her/his seniority rights to obtain any vacant position for which she/he is qualified, without interruption of seniority or benefits if the position commences within six (6) weeks of the expiry of the term position. During this six (6) week period if a nurse secures casual employment, she/he may work available casual shifts.
- (b) who was employed by the Employer immediately prior to accepting the term position shall return to her/his former position if reasonably possible.
 A nurse not returned to her/his former position shall be returned to her/his former occupational classification and employment status.
- (c) In accordance with the provisions of Article 21, if a nurse's term position ends prior to the start of the vacation year, the nurse shall schedule the next year's vacation on the unit they are returning/going to.

<u>3007</u> In the case of a nurse being awarded a position, her/his transfer shall be carried out within the time frame of the period of notice of termination for the position from which she/he is transferring, unless otherwise mutually agreed.

ARTICLE 31 -- PROBATIONARY PERIOD

3101 The period from the date of last employment to the completion of three (3) calendar months of employment for full-time nurses [and from the date of last employment to the later of completion of four (4) calendar months or thirty (30) shifts worked for part-time nurses] will be recognized as a probationary period. During such period the nurse shall not have recourse to the grievance procedure for reasons of termination of employment for unsuitability or unsatisfactory performance. This clause shall not preclude the Employer from extending the probationary period of a full-time or part-time nurse up to an additional three (3) calendar months providing that the Employer gives written notification to the Union specifying the reason(s) for the extension.

ARTICLE 32 -- PERFORMANCE APPRAISALS

<u>3201</u> The Employer shall complete a written appraisal of a nurse's performance at least bi-annually. Upon request, the nurse shall be given an exact copy of the appraisal.

3202 The nurse shall have an opportunity to read such document.

<u>3203</u> The nurse's signature on such document merely signifies that the contents of the document have been read.

<u>3204</u> If the nurse disputes the appraisal, she/he may file a reply to the document in accordance with Article 29, and/or she/he may file a grievance under Article 12 of this Agreement.

ARTICLE 33 -- DAMAGE TO PERSONAL PROPERTY

<u>3301</u> In recognition of the fact that during the performance of their duties nurses may have their clothing or other personal property damaged, the Employer agrees to make appropriate compensation for same in accordance with Employer policy.

ARTICLE 34 -- SPECIAL UNDERSTANDINGS RE PART-TIME NURSES

<u>3401</u> A part-time nurse shall be assigned and committed to work her/his EFT as agreed to in writing at the time of commencing employment. This written agreement shall only be revised when the nurse secures an alternate position in accordance with the provisions of the Collective Agreement.

<u>3402</u> Part-time nurses who make known to the Centre that they wish to work occasional additional unscheduled shifts shall be given preference for such shifts, unless the part-time nurse has already worked in that day. Said shifts will be distributed as equitably as possible amongst those nurses indicating their wish to work, depending on the nurse having the expertise and skill to match the required work.

3403 A part-time nurse called back to work hours in excess of an assigned shift in any one day shall be paid at overtime rates of pay with a guaranteed minimum of three (3) hours at overtime rates. If the extra time worked under this subsection commences within less than three (3) hours before the start of a shift, the guaranteed minimum in overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time she/he starts to work to the beginning of her/his shift.

<u>3404</u> Except for part-time nurses who agree to work on a greater number of weekends, it is understood that a part-time nurse may be required to work on alternate weekends.

<u>3405</u>

(a) Vacation pay shall be calculated as follows:

Hours Paid at Regular
Rate of PayXEntitlement of a
Full-time HoursKorrent StructureKorrent StructureKorren

(b) Part-time nurses shall receive their entitled vacation over a period of time equivalent to the vacation period of a full-time nurse and shall be paid her/his earned vacation pay proportionately during each week of scheduled vacation.

<u>3406</u> Income protection accumulation for part-time nurses shall be calculated as follows:

Hours Paid at Regular		
Rate of Pay	Х	Entitlement of
Full-time Hours		Full-time Nurses

<u>3407</u> Part-time nurses will be paid four point six two percent (4.62%) of their basic pay in lieu of time off on Recognized Holidays. Such holiday pay shall be calculated on all paid hours (excluding overtime hours as defined in Article 16) and shall be included in each regular pay cheque.

3408 A part-time nurse shall receive increments (calculated from the date of her/his last increment, or her/his starting date as the case may be) on the basis of one (1) increment for each 1343 hours worked or one (1) year's service, whichever occurs later. In the case of the increment being given on the basis of 1343 hours worked, it shall be applied to the pay period next following completion of 1343 hours worked.

3409 Subject to Article 3805, a nurse whose employment status changes from part-time to full-time shall be entitled to receive an increment on the later of:

- (a) one (1) calendar year from the date of his/her last increment, or date of employment as the case may be;
- (b) on completion of 2015 hours calculated under the formula:
 - $B = 2015 (A \times 3/2)$
 - A = number of hours during which seniority was accrued under parttime status since the date of her/his last increment, or starting date as the case may be.
 - B = number of hours remaining to be worked as full-time to earn an increment.

<u>3410</u> Subject to Article 3805, a nurse whose employment status changes from full-time to part-time shall be entitled to receive an increment on the later of:

- (a) one (1) calendar year from the date of her/his last increment, or date of employment as the case may be;
- (b) on completion of 1343 hours calculated under the formula:

 $B = 1343 - (A \times 2/3)$

- A = number of hours during which seniority was accrued under fulltime status since the date of her/his last increment, or starting date as the case may be.
- B = number of hours remaining to be worked as part-time to earn an increment.

3411 No part-time nurses presently in the employ of the Employer may be laid off or discharged to allow for hiring of full-time staff.

<u>3412</u> All part-time nurses shall receive the wage rates and applicable benefits on a pro rata basis according to their paid hours of work, except as otherwise specified herein.

<u>3413</u> Where a Recognized Holiday (or the Employer's designated lieu day) falls on a part-time nurse's normally scheduled day of work but the nurse's department/unit/program is closed, it is recognized that the nurse shall receive an unpaid leave of absence unless she/he requests one of the following options:

- The nurse(s) may request to use one (1) of her/his retained vacation days or banked overtime in accordance with Article 1501; or
- Notwithstanding Article 3402 the nurse may request to be scheduled for an alternate shift, subject to the availability of work and provided she/he is qualified to perform the required work. This alternate shift must be requested a minimum of 2 weeks in advance of, and scheduled within, the posted shift schedule in which the Recognized Holiday falls. It is understood that this rescheduled shift will be payable at the nurse's basic rate of pay.

ARTICLE 35 -- SPECIAL UNDERSTANDINGS RE CASUAL NURSES

3501 A casual nurse is one called in occasionally by the Employer to replace a full-time or part-time nurse or to supplement regular staff coverage in situations of unforeseen staff shortage.

3502 Casual nurses will receive vacation pay at the rate of six percent (6%) of all hours paid at basic salary including hours worked on Recognized Holidays in a biweekly pay period.

3503 Casual nurses are paid in accordance with the salaries specified in Appendices "A" and "B" and receive a starting salary as described in Article 38.

A casual nurse shall receive increments (calculated from the date of her/his last increment, or the nurse's start date as the case may be) on the basis of one (1) increment for each 2015 regular hours worked. Such increment shall be applied on the first day of the first pay period following completion of 2015 hours.

When a nurse elects to terminate her/his full-time or part-time position and immediately requests to have her/his name placed on a casual roster, the following conditions will apply:

- (a) Such casual nurse will be paid in accordance with the salary specified in Appendices "A" and "B";
- (b) She/he will receive the salary of the occupational classification into which she/he is assigned and at the same increment level that had been attained while working as a full-time or part-time nurse.
- **3504** Casual nurses will be entitled to:
 - compensation for overtime worked in accordance with Article 16;
 - shift premium and weekend premium outlined in Article 17;
 - the allowance as outlined in Article 18;
 - Responsibility Pay premium outlined in Article 19;
 - transportation allowance/escort duty outlined in Article 20;
 - the rights outlined in 2905, 2906, 2907;
 - the Employer Sponsored Educational Development allowance in 2407 A(c).
 - the Legal and Investigative Proceedings in Article 2410.

<u>3505</u> Casual nurses required to work on a Recognized Holiday, excluding Remembrance Day, shall be paid at the rate of time and one-half (1.50) their basic rate of pay. Casual nurses required to work on Remembrance Day shall be paid at the rate of double their basic rate of pay.

If there is a change in Manitoba legislation that extends Recognized Holidays to all employees, the parties agree that casual nurses as defined in Article 35 shall receive this benefit.

3506 The Employer agrees to deduct union dues in an amount specified by the Union in any pay period for which the casual nurse receives any payment, and such dues shall be forwarded to the Manitoba Nurses' Union monthly in accordance with Article 501.

In the event that no payment is made during the pay period, the Employer shall have no responsibility to deduct and submit dues for that period.

3507 A casual nurse reporting for work and finding no work available will be guaranteed three (3) hours pay at her/his basic rate of pay.

3508 Articles 12 and 13 herein apply only with respect to the terms of this Article.

3509 Casual nurses shall accrue seniority for hours worked only for the purposes of Article 30 and only in situations where there are no qualified full-time or part-time applicants currently in the bargaining unit. On expiry of a term position, if a casual nurse is not successful in obtaining another term or permanent position in accordance with 3006 (a), she/he shall retain any previous casual seniority and seniority accrued while in the term position shall be converted to casual seniority.

- (a) Subject to (b) and (c) below, casual nurses will receive payment for one
 (1) orientation day following the completion of every four (4) shifts worked.
- (b) Should the above-noted casual nurse, within eighteen (18) calendar months of obtaining a casual employment status, obtain a permanent or term full-time or part-time position in any unit or department, she/he shall be paid her/his outstanding orientation pay at regular rates on her/his first pay cheque subsequent to obtaining the said position.
- (c) When the orientation is six (6) days or greater, the casual nurse shall be paid two-thirds of the orientation period at the time of taking the orientation. The outstanding unpaid orientation period shall be subject to the recovery process outlined above.

ARTICLE 36 -- SPECIAL UNDERSTANDINGS RE GRADUATE NURSES, GRADUATE PRACTICAL NURSES AND GRADUATE PSYCHIATRIC NURSES

The terms of this Agreement shall be applicable to the graduate nurse, graduate practical nurse and graduate psychiatric nurse except as follows:

<u>3601</u> <u>Salaries and Increments of the Graduate Nurse, Graduate Practical</u> <u>Nurse and Graduate Psychiatric Nurse</u>:

- (a) Starting salary of the newly graduated graduate nurse, graduate practical nurse or graduate psychiatric nurse awaiting initial registration as a Registered Nurse, Licensed Practical Nurse or Registered Psychiatric Nurse shall be discounted by eight percent (8%) until such time as registration/license is achieved.
- (b) The anniversary date of a newly graduated graduate nurse or graduate psychiatric nurse who obtains registration within one (1) year of commencing employment shall be the date of her/his commencement of employment.

(c) The anniversary date of a newly graduated graduate practical nurse who obtains her/his license within an eighteen (18) month period of commencing employment (or within the time period as amended in the regulations of the LPN Act) shall be the date of her/his commencement of employment.

<u>3602</u> Out of Province Nurses

- (a) A person in good standing as a Registered Nurse or a Registered Psychiatric Nurse in another province, country or territory whose name appears on the graduate nurse or graduate psychiatric nurse register may commence employment at the Nurse II Start rate and upon providing proof of registration in Manitoba not later than eight (8) months following commencement of her/his employment, shall receive recognition of previous experience as specified in 3803, retroactive to the date of her/his employment.
- (b) When registration of a nurse in good standing as a Registered Nurse or a Registered Psychiatric Nurse in another province, country or territory is obtained later than eight (8) months but before one (1) year the anniversary date shall be the date on which registration is obtained.
- (c) A person in good standing as a Licensed Practical Nurse in another province, country or territory whose name appears on the graduate practical nurse register may commence employment at the LPN start rate and upon providing proof of registration in Manitoba not later than eight (8) months following commencement of her/his employment, shall receive recognition of previous experience as specified in 3804, retroactive to the date of her/his employment.
- When registration of a nurse in good standing as a Licensed Practical Nurse in another province, country or territory is obtained later than eight (8) months but before one (1) year the anniversary date shall be the date on which registration is obtained.

3603 Termination

(a) In accordance with the Registered Nurses Act or the Registered Psychiatric Nurses Act or the relevant regulations to those Acts, failure of the graduate nurse or graduate psychiatric nurse to successfully complete the examination required for registration within a twelve (12) month period will be deemed to be just cause for termination.

(b) Failure of the graduate practical nurse to successfully complete the examination required for licensure within an eighteen (18) month period, or as amended in the regulations of the Licensed Practical Nurses Act will be deemed to be just cause for termination.

ARTICLE 37 -- HEALTH PROGRAM

<u>3701</u> Health examinations required by the Employer shall be provided by the Employer and shall be at the expense of the Employer.

3702 Time off without loss of regular pay shall be allowed at a time determined by the Employer for such medical examinations and laboratory tests, provided that these are performed on the Employer's premises, or at a facility designated by the Employer.

<u>3703</u> With the approval of the Employer, a nurse may choose to be examined by a physician of her/his own choice, at her/his own expense, as long as the Employer receives a statement as to the fitness of the nurse from the physician.

<u>3704</u> Time off for medical and dental examinations and/or treatments, may be granted and such time off including necessary travel time, shall be chargeable against accumulated income protection benefits.

It is understood that nurses should attempt to schedule these appointments on time off.

<u>3705</u> In the event of the reinstatement of health services insurance premiums, the Centre agrees to finance the cost of sixty percent (60%) of such premiums for all members of the bargaining unit, during the life of the Agreement.

ARTICLE 38 -- SALARIES AND INCREMENTS

3801 Nurses shall be paid in accordance with the salary schedule as outlined in Appendix "A", forming part of the Agreement.

<u>3802</u> "Basic or Regular Salary or Pay" shall mean the rates of pay shown in Appendix "A" (Salaries) and Appendix "B" (Academic Allowances).

<u>3803</u> The minimum salary of a newly hired nurse will be determined by nursing experience:

(a) on an equivalent full-time basis, and

- (b) considered by the Employer to be related to the position applied for and held, and
- (c) in accordance with the following table:

Placement of a Registered Nurse or Registered Psychiatric Nurse on the Nurse II scale -

Length of Experience	Starting Rate
Less than 2015 hours	Start Rate
2015 hours within past 4 years	1 Year Rate
4030 hours within past 5 years	2 Year Rate
6045 hours within past 6 years	3 Year Rate
8060 hours within past 6 years	4 Year Rate
10075 hours within past 7 years	5 Year Rate

For all CNS and Nurse Practitioners:

Length of Experience	Starting Rate
Less than 10,075 hours	Start Rate
10,075 hours within past 6 years	1 Year Rate
12,090 hours within past 7 years	2 Year Rate
14,105 hours within past 8 years	3 Year Rate
16,120 hours within past 9 years	4 Year Rate

Placement of an LPN or ORT on scale -

Length of Experience	Starting Rate
Less than 2015 hours	Start Rate
2015 hours within past 4 years	1 Year Rate
4030 hours within past 5 years	2 Year Rate
6045 hours within past 6 years	3 Year Rate
8060 hours within past 6 years	4 Year Rate
10075 hours within past 7 years	5 Year Rate
12090 hours within past 7 years	6 Year Rate

The starting salary of a Registered Nurse or Registered Psychiatric Nurse who has had previous experience as a Licensed Practical Nurse shall commence at the Nurse II 1 Year rate specified in Appendix A, and after not more than three (3) months from the date of commencement of her/his employment as a Registered Nurse or Registered Psychiatric Nurse, the Employer shall, on the basis of written performance appraisal discussed with her/him, grant such additional increments as performance warrants, with a minimum of one (1) increment for each two (2) years worked as a Licensed Practical Nurse within the previous five (5) year period.

(d) <u>Applicable for Graduate Nurse Practitioners</u>

The starting salary of the newly graduated Nurse Practitioner who is employed as a Registered Nurse (Graduate Nurse Extended Practice) [RN(GNEP)] or as a Registered Nurse Graduate Nurse Practitioner [RN(GNP)], shall be at the start rate and, once licensure is obtained as a Nurse Practitioner (Registered Nurse, Extended Practice) [NP(RNEP)], probation, if applicable, shall begin and the Nurse Practitioner will be granted increments in accordance with 3803(a) retroactive to start date.

<u>3804</u> Starting salaries, as specified above, are to be regarded as minimum and shall not prevent the Employer from granting a higher starting salary to any nurse, when, in the judgment of the Employer, additional experience or other qualifications so warrant it.

- 3805 Increments:
- (a) Increments as specified in salary schedule Appendix "A" shall be granted annually on the anniversary date of the nurse's employment, or as altered by the terms of this Agreement, the latter of which shall take precedence, however, the Employer may, with reasonable cause and on the basis of a written performance appraisal previously discussed with the nurse, withhold an annual increment, subject to review within and not later than three (3) months of the date such increment was withheld.
- (b) If a nurse takes an unpaid leave of absence, the annual date on which she/he will be paid an increment will be delayed for one (1) month for every full month she/he is on leave of absence except that salary increases will not be delayed because of educational leave of up to two (2) years.

3806 If new classifications which come under the scope of this Agreement are created during the term of this Agreement, or if there is a substantial change in the job content of an existing classification falling within the bargaining unit, the Employer will inform the Union of the proposed rates of pay for such positions. If the Union wishes to enter into negotiations on these rates of pay it will so inform the Employer within seven (7) days and negotiations will commence within an additional ten (10) days, which time may be extended by mutual agreement between the Employer and the Union. If the parties are unable to reach agreement concerning the rates of pay the dispute shall, at the request of either or both parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at section 1302.

<u>3807</u> <u>Retroactivity</u>:

Should there be retroactive wage and benefit adjustments, such shall be made payable within ninety (90) days of the date of ratification of the Collective Agreement.

Upon written application to the Employer within ninety (90) days of ratification of the Collective Agreement, nurses who have terminated employment with the Employer shall be entitled to retroactive pay.

ARTICLE 39 -- EMPLOYEE BENEFIT PROGRAM

3901 Dental Plan:

The current dental plan will pay a percentage of basic and major dental expenses in accordance with the current Manitoba Dental Association Fee Schedule.

<u>3902</u> <u>Disability & Rehabilitation:</u>

The Employer agrees to participate in the Disability and Rehabilitation Plan. The benefit levels will be as stipulated in the D & R Plan. The current premium for the nurse is one percent (1%) of base salary and the current premium for the Employer is 1.3% of base salary. Effective September 30, 2009, the Employer will pay the entire premium to a maximum of 2.3%.

The parties agree that income protection credits and Workers Compensation benefits will be used where applicable, to offset the elimination period. Once the elimination period has been exhausted, the nurse will commence drawing disability benefits. It is understood that the elimination period for the Disability and Rehabilitation Plan is one hundred and nineteen (119) calendar days. A nurse may claim income protection benefits for the period of time not to exceed this elimination period.

<u>3903</u> Health Spending Account

Effective April 1, 2010, a Health Spending Account (HSA) shall be made available for eligible nurses. The HSA shall only apply and be made available to top up the existing benefits provided in the HEBP "Enhanced" Extended Health Benefit Plan and the HEBP Dental Plan.

The annual HSA benefit amounts shall be:

- April 1, 2010 \$250.00 for full-time nurses - \$125.00 for part-time nurses
- April 1, 2011 \$500.00 for full-time nurses - \$250.00 for part-time nurses

For the purpose of the HSA, a nurse is deemed to qualify for the full-time benefit if she/he has been paid for a minimum of 1,500 hours in the previous calendar year. Hours paid at overtime rates do not count in the annual determination of whether a nurse qualifies for the full-time benefit.

A "year" or "the annual HSA benefit" is defined as the calendar year – January 1st to December 31st.

In order to be eligible for the HSA, a nurse must be enrolled in the "Enhanced" Extended Health Care Plan.

Nurses hired on or after April 1, 2010, who become enrolled in the "Enhanced" Extended Health Care Plan will commence HSA coverage following one (1) year participation in the "Enhanced" Extended Health Care Plan.

Unutilized HSA monies are not carried over to the subsequent year.

ARTICLE 40 -- OVERPAYMENTS

4001 The Employer may not make deductions from wages unless authorized by statute, by Court Order, by Arbitration Award, by this Agreement, by the Union or to correct an overpayment error made in good faith. Where an error has been made in good faith, the Employer shall be entitled to recover any overpayment made, for a period of time that does not extend further back than twelve (12) months from date of discovery, provided:

- (a) Once the error is discovered, notice and a detailed breakdown of the error is given by the Employer to the affected nurse and the Union as soon as practicable;
- (b) The proposed recovery is made in as fair and reasonable a manner as possible; and,
- (c) The proposed recovery is made over a period of time which is no less than the period during which the overpayment was made unless otherwise agreed between the Employer and the nurse.

In the event the nurse retires from, or leaves the employ of the Employer before the Employer is able to fully recover an overpayment as contemplated in this Article, the Employer shall be entitled to make a full recovery at the time of retirement or termination of employment of that nurse and reduce accordingly any payments that might be owing to that nurse to recover the overpayment.

ARTICLE 41 -- STAFF ORIENTATION

<u>4101</u> The Employer shall provide an appropriate orientation program for nurses newly employed. The orientation program shall include such essential information as policies, nursing procedures, the location of supplies and equipment, fire, safety and disaster plans. Where necessary, orientation shall be provided for nurses moving to a new area of practice.

<u>4102</u> The Employer shall provide a program of inservice education for nurses pertinent to patient care.

<u>4103</u> The Employer shall provide, access to reference materials as is required in relation to maintaining current knowledge of general nursing care.

APPENDIX "A" -- SALARIES

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A1. Effective April 1, 2013				ude a 2% gene		2)					
		- Hourly s	salary is calci	lated as (mon	thiy salary x 1	z) ÷ annual ho	urs.				
Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse	2015	Hourly	25.198	26.022	26.836	27.825	28.732	29.745	30.804		31.420
		Monthly	4,231.164	4,369.528	4,506.212	4,672.281	4,824.582	4,994.681	5,172.505		5,275.942
		Annual	50,773.970	52,434.330	54,074.540	56,067.375	57,894.980	59,936.175	62,070.060		63,311.300
LPN - Technician (LPN)	2015	Hourly	25.198	26.022	26.836	27.825	28.732	29.745	30.804		31.420
		Monthly	4,231.164	4,369.528	4,506.212	4,672.281	4,824.582	4,994.681	5,172.505		5,275.942
		Annual	50,773.970	52,434.330	54,074.540	56,067.375	57,894.980	59,936.175	62,070.060		63,311.300
ORT I	2015	Hourly	25.198	26.022	26.836	27.825	28.732	29.745	30.804		31.420
		Monthly	4,231.164	4,369.528	4,506.212	4,672.281	4,824.582	4,994.681	5,172.505		5,275.942
		Annual	50,773.970	52,434.330	54,074.540	56,067.375	57,894.980	59,936.175	62,070.060		63,311.300
ORT II	2015	Hourly	26.836	27.825	28.732	29.753	30.696	31.654	32.630		33.283
		Monthly	4,506.212	4,672.281	4,824.582	4,996.025	5,154.370	5,315.234	5,479.121		5,588.770
		Annual	54,074.540	56,067.375	57,894.980	59,952.295	61,852.440	63,782.810	65,749.450		67,065.245
Nurse II	2015	Hourly	32.917	34.066	35.218	36.419	37.593	38.811			39.587
		Monthly	5,527.313	5,720.249	5,913.689	6,115.357	6,312.491	6,517.014			6,647.317
		Annual	66,327.755	68,642.990	70,964.270	73,384.285	75,749.895	78,204.165			79,767.805
General Duty Nurse (N2)	2015	Hourly	32.917	34.066	35.218	36.419	37.593	38.811			39.587
		Monthly	5,527.313	5,720.249	5,913.689	6,115.357	6,312.491	6,517.014			6,647.317
		Annual	66,327.755	68,642.990	70,964.270	73,384.285	75,749.895	78,204,165			79,767.805
Research Nurse (N2)	2015	Hourly	32.917	34.066	35.218	36.419	37.593	38.811			39.587
		Monthly	5,527.313	5,720.249	5,913.689	6,115.357	6,312.491	6,517.014			6,647.317
		Annual	66,327.755	68.642.990	70,964.270	73.384.285	75,749,895	78,204.165			79,767.805
Allergy/Immunology Nurse (N2)	2015	Hourly	32.917	34.066	35.218	36.419	37.593	38.811			39.587
		Monthly	5,527.313	5,720.249	5,913.689	6,115.357	6,312.491	6,517.014			6,647.317
		Annual	66,327.755	68,642.990	70,964.270	73,384.285	75,749.895	78,204.165			79,767.805
Transplant Clinic Nurse (N2)	2015	Hourly	32.917	34.066	35.218	36.419	37.593	38.811			39.587
		Monthly	5,527.313	5,720.249	5,913.689	6,115.357	6,312.491	6,517.014			6,647.317
		Annual	66,327.755	68,642.990	70,964.270	73,384.285	75,749.895	78,204.165			79,767.805
Registered Psychiatric Nurse (N2)	2015	Hourly	32.917	34.066	35.218	36.419	37.593	38.811			39.587
		Monthly	5,527.313	5,720.249	5,913.689	6,115.357	6,312.491	6,517.014			6,647.317
		Annual	66,327.755	68,642.990	70,964.270	73,384.285	75,749.895	78,204.165			79,767.805
Perioperative Nurse (N2)	2015	Hourly	32.917	34.066	35.218	36.419	37.593	38.811			39.587
		Monthly	5,527.313	5,720.249	5,913.689	6,115.357	6,312.491	6,517.014			6,647.317
		Annual	66,327.755	68,642.990	70,964.270	73,384.285	75,749.895	78,204.165			79,767.805
Vascular Lab/Clinic Nurse (N2)	2015	Hourly	32.917	34.066	35.218	36.419	37.593	38.811			39.587
		Monthly	5,527.313	5,720.249	5,913.689	6,115.357	6,312.491	6,517.014			6,647.317
		Annual	66,327.755	68,642.990	70,964.270	73,384.285	75,749.895	78,204.165			79,767.805
Nurse II (20 Year Scale)	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			
		Annual	67,653.625	70,015.205	72.384.845	74.853.220	77,265.175	79,767,805			
Nurse III	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41.201		42.025
		Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68.848.520	71.171.815	73.593.845	75.959.455	78.155.805	80.549.625	83.020.015		84.680.375
Nurse Clinician (N3)	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41.201		42.025
		Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68,848.520	71.171.815	73.593.845	75.959.455	78,155.805	80.549.625	83.020.015		84,680.375

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Clinical Resource Nurse (N3)	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41.201		42.025
		Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68,848.520	71,171.815	73,593.845	75,959.455	78,155.805	80,549.625	83,020.015		84,680.375
Acute Pain Service Nurse (N3)	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41.201		42.025
		Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68.848.520	71,171,815	73,593,845	75,959,455	78.155.805	80.549.625	83.020.015		84.680.375
Anesthesia Registration Nurse	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41.201		42.025
ŭ		Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6.712.469	6.918.335		7.056.698
		Annual	68,848.520	71,171.815	73,593.845	75,959.455	78,155.805	80,549.625	83,020.015		84,680.375
Asthma Education Nurse (N3)	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41.201		42.02
		Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68,848.520	71,171,815	73.593.845	75.959.455	78.155.805	80.549.625	83,020.015		84.680.375
Community Dialysis Nurse (N3)	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41.201		42.025
		Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68,848.520	71,171.815	73,593.845	75,959.455	78,155.805	80,549.625	83,020.015		84,680.375
Diabetic Education Nurse (N3)	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41,201		42.025
,		Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68.848.520	71.171.815	73.593.845	75.959.455	78.155.805	80.549.625	83.020.015		84.680.375
Enterostomal Therapist (N3)	2015	Hourly	34.168	35.321	36.523	37.697	38.787	39.975	41.201		42.025
	20.0	Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68.848.520	71.171.815	73.593.845	75.959.455	78.155.805	80.549.625	83.020.015		84.680.375
High Risk Anaesthesia Nurse (N3)	2015	Hourly	<u>34.168</u>	<u>35.321</u>	<u>36.523</u>	<u>37.697</u>	<u>38.787</u>	<u>39.975</u>	<u>41.201</u>		<u>42.025</u>
	2010	Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68.848.520	71.171.815	73.593.845	75.959.455	78.155.805	80,549.625	83.020.015		84.680.375
Ped High Risk Anesthesia Nurse (N3)	2015	Hourly	<u>34.168</u>	<u>35.321</u>	<u>36.523</u>	<u>37.697</u>	<u>38.787</u>	<u>39.975</u>	<u>41.201</u>		<u>42.025</u>
	2015	Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68.848.520	71,171.815	73.593.845	75.959.455	78.155.805	80.549.625	83.020.015		84.680.375
Perinatal Nurse (N3)	2015	Hourly	<u>34.168</u>	<u>35.321</u>	<u>36,523</u>	<u>75,959,455</u> 37,697	<u>38,787</u>	<u>39.975</u>	<u>41.201</u>		<u>42.025</u>
Fernala Nuise (NS)	2015	Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		Annual	68,848.520	71.171.815	73.593.845	75.959.455	78.155.805	80.549.625	83.020.015		84,680.375
Psychiatric Emergency Nurse (N3)	2015	Hourly	<u>34.168</u>	<u>35.321</u>	<u>36.523</u>	<u>75,959,455</u> 37.697	<u>38.787</u>	<u>39.975</u>	41.201		<u>42.025</u>
Fsychiatic Energency Nurse (NS)	2015	Monthly	5,737.377	5,930.985	6,132.820	6,329.955	6,512.984	6,712.469	6,918.335		7,056.698
		-	68.848.520	5,930.965 71.171.815	73.593.845	75.959.455	78.155.805	80.549.625	83.020.015		,
Nurse III (20 Year Scale)	2015	Annual Hourly	<u>00,040.520</u> 34.851	<u>71,171.015</u> 36.027	<u>73,593.645</u> 37,254	<u>75,959,455</u> 38,451	<u>70,100,000</u> 39,563	<u>60,549.625</u> 40,775	<u>42.025</u>		84,680.375
Nuise III (20 fear Scale)	2015	Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		
		Annual	5,652.064 70.224.765	72.594.405	75.066.810	77.478.765	79.719.445	82.161.625	7,050.090 84.680.375		
Nurse IV	2015	Hourly	<u>10,224.765</u> 35.340	<u>72,594.405</u> 36.649	<u>75,066,610</u> 37,959	<u>11,476,765</u> 39,387	<u>19,719,445</u> 41.024	<u>62,101.025</u> 42.612	<u>44.345</u>	46.150	47.072
Nuiseiv	2015	Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		,	5,934.175 71.210.100	,	6,373.949 76,487.385	79.364.805	,	85.863.180	89.355.175	92.992.250	94.850.080
Cerebrovascular Nurse (N4)	2015	Annual Hourly	<u>35.340</u>	73,847.735 36,649	<u>70,407.305</u> 37,959	<u>79,364.605</u> 39.387	82,663.360 41.024	<u>42.612</u>	<u>44.345</u>	<u>92,992.250</u> 46,150	<u>94,000.000</u> 47,072
Cerebrovascular Nurse (114)	2015	-	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	44.345 7,446.265	7.749.354	7,904.173
		Monthly	,	,	,	,	,	,	,	,	,
Coordinator Blooding Disard Drag (NA)	2015	Annual	71,210.100	73,847.735	76,487.385	79,364.805	82,663.360	85,863,180	89,355.175	92,992.250	94,850.080
Coordinator - Bleeding Disord Prog (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
		Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
Coordinator Numerica (NIA)	0045	Annual	71,210.100	73,847.735	76,487.385	79,364.805	82,663.360	85,863,180	89,355.175	92,992.250	94,850.080
Coordinator - Nurseries (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.07
		Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71,210.100	73,847.735	76,487.385	79,364.805	82,663.360	85,863.180	89,355.175	92,992.250	94,850.080
CVT Associate (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
		Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71,210.100	73,847.735	76,487.385	79,364.805	82,663.360	85,863.180	89,355.175	92,992.250	94,850.080

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Enterostomal Therapist (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
		Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71.210.100	73.847.735	76.487.385	79.364.805	82.663.360	85.863.180	89.355.175	92,992,250	94,850,080
Multi-Organ Donor Coordinator (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
3 ()		Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71,210.100	73,847.735	76,487.385	79,364.805	82,663.360	85,863.180	89,355.175	92,992.250	94,850.080
Nurse Educator (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
		Monthly	5,934.175	6,153.978	6,373.949	6,613,734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71,210.100	73,847.735	76,487.385	79,364.805	82,663.360	85,863.180	89,355.175	92,992,250	94,850.080
Nurse Therapist (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
		Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71.210.100	73.847.735	76.487.385	79.364.805	82.663.360	85,863,180	89.355.175	92,992,250	94.850.080
Pain Clinic Nurse (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
		Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71.210.100	73.847.735	76.487.385	79.364.805	82.663.360	85.863.180	89.355.175	92,992,250	94.850.080
Planning/Systems Coordinator (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
		Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71,210.100	73.847.735	76.487.385	79,364.805	82.663.360	85,863.180	89,355.175	92.992.250	94.850.080
Primary Nurse Therapist 2 (N4)	2015	Hourly	35.340	36.649	37.959	39.387	41.024	42.612	44.345	46.150	47.072
· · · · · · · · · · · · · · · · · · ·	2010	Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71.210.100	73.847.735	76,487.385	79,364.805	82,663.360	85,863.180	89,355.175	92.992.250	94,850.080
Psych Consultation Nurse (N4)	2015	Hourly	35.340	<u>36.649</u>	37.959	<u>39.387</u>	41.024	42.612	44.345	46.150	<u>47.072</u>
r sych Consultation Nuise (N4)	2010	Monthly	5,934.175	6,153.978	6.373.949	6.613.734	6.888.613	7.155.265	7.446.265	7.749.354	7.904.173
		Annual	71.210.100	73.847.735	76.487.385	79.364.805	82.663.360	85.863.180	89.355.175	92,992.250	94.850.080
Renal Transplant Coordinator (N4)	2015	Hourly	35.340	<u>36.649</u>	<u>37.959</u>	<u>39.387</u>	41.024	42.612	44.345	<u>46.150</u>	<u>47.072</u>
	2010	Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7.749.354	7,904.173
		Annual	71.210.100	73.847.735	76.487.385	79.364.805	82.663.360	85.863.180	89.355.175	92.992.250	94.850.080
RPN Nurse Therapist 2 (N4)	2015	Hourly	<u>35.340</u>	<u>36.649</u>	<u>37.959</u>	<u>39.387</u>	<u>41.024</u>	42.612	44.345	<u>46.150</u>	<u>47.072</u>
	2015	Monthly	5,934.175	6,153.978	6,373.949	6,613.734	6,888.613	7,155.265	7,446.265	7,749.354	7,904.173
		Annual	71.210.100	73.847.735	76,487.385	79,364.805	82.663.360	85,863.180	89,355.175	92.992.250	94,850.080
Utilization Facilitator (N4)	2015	Hourly	35.340	<u>36.649</u>	<u>37.959</u>	<u>39.387</u>	<u>41.024</u>	42.612	44.345	<u>46.150</u>	<u>47.072</u>
	2015	Monthly	5,934.175	6,153.978	6,373.949	6.613.734	6.888.613	7,155.265	7.446.265	7.749.354	7,904.173
		Annual	71.210.100	73.847.735	76.487.385	79,364.805	82.663.360	85.863.180	89.355.175	92,992.250	94.850.080
Nurse IV (20 Year Scale)	2015	Hourly	<u>36.047</u>	<u>37.382</u>	<u>38.718</u>	40.175	<u>41.844</u>	43.464	45.232	<u>47.072</u>	34,030.000
	2010	Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	
		Annual	72.634.705	75.324.730	78.016.770	80,952.625	84.315.660	87.579.960	91.142.480	94,850.080	
Clinical Nurse Specialist	2015	Hourly	42.515	45.635	47.511	<u>49.385</u>	<u>51.408</u>	01,515.500	51,142.400	34,000.000	52.437
onnical Nulse opecialist	2015	Monthly	7.138.977	7,662.877	7.977.889	8.292.565	8.632.260				8.805.046
		Annual	85.667.725	91.954.525	95.734.665	99.510.775	103.587.120				105.660.555
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	43.365	<u>46.548</u>	<u>48.461</u>	<u>50.373</u>	<u>52.437</u>				100,000.000
	2015	Monthly	7,281.706	7,816.185	8,137.410	8,458.466	8,805.046				
		Annual	87,380.475	93.794.220	97,648.915	101,501.595	105,660.555				
Nurse Practitioner	2015	Hourly	<u>42.515</u>	<u>95,794.220</u> 45.635	<u>47.511</u>	<u>49.385</u>	<u>51.408</u>				52.437
	2010	Monthly	7,138.977	7,662.877	7,977.889	8,292.565	8,632.260				8.805.046
		Annual	85,667.725	91,954.525	95,734.665	99,510.775	103,587.120				105,660.555
	0045		,	,	,	,					105,000.555
Nurse Practitioner (20 Year Scale)	2015	Hourly	43.365	46.548	48.461	50.373	52.437				
		Monthly	7,281.706	7,816.185	8,137.410	8,458.466	8,805.046				
		Annual	87,380.475	93,794.220	97,648.915	101,501.595	105,660.555				

Weekend Worker Rates	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Weekend Worker - Licensed Practical Nurse	2015	Hourly	28.977	29.925	30.861	31.999	33.042	34.206	35.425		36.133
		Monthly	4,865.721	5,024.906	5,182.076	5,373.165	5,548.303	5,743.758	5,948.448		6,067.333
		Annual	58,388.655	60,298.875	62,184.915	64,477.985	66,579.630	68,925.090	71,381.375		72,807.995
Weekend Worker - ORT I	2015	Hourly	28.977	29.925	30.861	31.999	33.042	34.206	35.425		36.133
		Monthly	4,865.721	5,024.906	5,182.076	5,373.165	5,548.303	5,743.758	5,948.448		6,067.333
		Annual	58,388.655	60,298.875	62,184.915	64,477.985	66,579.630	68,925.090	71,381.375		72,807.995
Weekend Worker - ORT II	2015	Hourly	30.861	31.999	33.042	34.216	35.301	36.402	37.525		38.275
		Monthly	5,182.076	5,373.165	5,548.303	5,745.437	5,927.626	6,112.503	6,301.073		6,427.010
		Annual	62,184.915	64,477.985	66,579.630	68,945.240	71,131.515	73,350.030	75,612.875		77,124.125
Weekend Worker - Nurse II	2015	Hourly	37.855	39.176	40.501	41.882	43.232	44.633			45.526
		Monthly	6,356.485	6,578.303	6,800.793	7,032.686	7,259.373	7,494.625			7,644.574
		Annual	76,277.825	78,939.640	81,609.515	84,392.230	87,112.480	89,935.495			91,734.890
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	38.612	39.959	41.311	42.720	44.097	45.526			
		Monthly	6,483.598	6,709.782	6,936.805	7,173.400	7,404.621	7,644.574			
		Annual	77,803.180	80,517.385	83,241.665	86,080.800	88,855.455	91,734.890			
Weekend Worker - Nurse III	2015	Hourly	39.293	40.619	42.002	43.352	44.605	45.971	47.381		48.329
		Monthly	6,597.950	6,820.607	7,052.836	7,279.523	7,489.923	7,719.297	7,956.060		8,115.245
		Annual	79,175.395	81,847.285	84,634.030	87,354.280	89,879.075	92,631.565	95,472.715		97,382.935
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	40.079	41.431	42.842	44.219	45.497	46.891	48.329		
		Monthly	6,729.932	6,956.955	7,193.886	7,425.107	7,639.705	7,873.780	8,115.245		
		Annual	80,759.185	83,483.465	86,326.630	89,101.285	91,676.455	94,485.365	97,382.935		
Weekend Worker - Nurse IV	2015	Hourly	40.641	42.146	43.653	45.295	47.177	49.003	50.996	53.072	54.133
		Monthly	6,824.301	7,077.016	7,330.066	7,605.785	7,921.805	8,228.420	8,563.078	8,911.673	9,089.833
		Annual	81,891.615	84,924.190	87,960.795	91,269.425	95,061.655	98,741.045	102,756.940	106,940.080	109,077.995
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	41.454	42.989	44.526	46.201	48.121	49.983	52.016	54.133	,
		Monthly	6,960.818	7,218.570	7,476.658	7,757.918	8,080.318	8,392.979	8,734.353	9,089.833	
		Annual	83,529.810	86,622.835	89.719.890	93.095.015	96.963.815	100.715.745	104,812.240	109,077.995	

A2. Effective April 1, 2014			-	clude a 2% ger culated as (mo			ours				
Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse	2015	Hourly	25.702	26.543	27.373	28.382	29.307	30.340	31.420		32.048
		Monthly	4,315.794	4,457.012	4,596.383	4,765.811	4,921.134	5,094.592	5,275.942		5,381.393
		Annual	51,789.530	53,484.145	55,156.595	57,189.730	59,053.605	61,135.100	63,311.300		64,576.720
LPN - Technician (LPN)	2015	Hourly	25.702	26.543	27.373	28.382	29.307	30.340	31.420		32.048
		Monthly	4,315.794	4,457.012	4,596.383	4,765.811	4,921.134	5,094.592	5,275.942		5,381.393
		Annual	51,789.530	53,484.145	55,156.595	57,189.730	59,053.605	61,135.100	63,311.300		64,576.720
ORTI	2015	Hourly	25.702	26.543	27.373	28.382	29.307	30.340	31.420		32.048
		Monthly	4,315.794	4,457.012	4,596.383	4,765.811	4,921.134	5,094.592	5,275.942		5,381.393
		Annual	51,789.530	53,484.145	55,156.595	57,189.730	59,053.605	61,135.100	63,311.300		64,576.720
ORT II	2015	Hourly	27.373	28.382	29.307	30.348	31.310	32.287	33.283		33.949
		Monthly	4,596.383	4,765.811	4,921.134	5,095.935	5,257.471	5,421.525	5,588.770		5,700.603
		Annual	55,156.595	57,189.730	59,053.605	61,151.220	63,089.650	65,058.305	67,065.245		68,407.235
Nurse II	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			40.379
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			6,780.307
		Annual	67,653.625	70,015.205	72,384.845	74,853.220	77,265.175	79,767.805			81,363.685
General Duty Nurse (N2)	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			40.379
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			6,780.307
		Annual	67,653.625	70,015.205	72,384.845	74,853.220	77,265.175	79,767.805			81,363.685
Research Nurse (N2)	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			40.379
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			6,780.307
		Annual	67,653.625	70,015.205	72,384.845	74,853.220	77,265.175	79,767.805			81,363.685
Allergy/Immunology Nurse (N2)	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			40.379
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			6,780.307
		Annual	67,653.625	70,015.205	72,384.845	74,853.220	77,265.175	79,767.805			81,363.685
Transplant Clinic Nurse (N2)	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			40.379
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			6,780.307
		Annual	67,653.625	70,015.205	72,384.845	74,853.220	77,265.175	79,767.805			81,363.685
Registered Psychiatric Nurse (N2)	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			40.379
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			6,780.307
		Annual	67,653.625	70,015.205	72,384.845	74,853.220	77,265.175	79,767.805			81,363.685
Perioperative Nurse (N2)	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			40.379
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			6,780.307
		Annual	67,653.625	70,015.205	72,384.845	74,853.220	77,265.175	79,767.805			81,363.685
Vascular Lab/Clinic Nurse (N2)	2015	Hourly	33.575	34.747	35.923	37.148	38.345	39.587			40.379
		Monthly	5,637.802	5,834.600	6,032.070	6,237.768	6,438.765	6,647.317			6,780.307
		Annual	67,653.625	70,015.205	72,384.845	74,853.220	77,265.175	79,767.805			81,363.685
Nurse II (20 Year Scale)	2015	Hourly	34.247	35.442	36.641	37.891	39.112	40.379			
		Monthly	5,750.642	5,951.303	6,152.635	6,362.530	6,567.557	6,780.307			
		Annual	69,007.705	71,415.630	73,831.615	76,350.365	78,810.680	81,363.685			
Nurse III	2015	Hourly	34.851	36.027	37.254	38.451	39.563	40.775	42.025		42.866
		Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.916
		Annual	70,224.765	72,594.405	75,066.810	77,478.765	79,719.445	82,161.625	84,680.375		86,374.990
Nurse Clinician (N3)	2015	Hourly	34.851	36.027	37.254	38.451	39.563	40.775	42.025		42.866
		Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.916
		Annual	70,224.765	72,594.405	75,066.810	77,478.765	79,719.445	82,161.625	84,680.375		86,374.990

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Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Clinical Resource Nurse (N3)	2015	Hourly	34.851	36.027	37.254	38.451	39.563	40.775	42.025		42.866
	2010	Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.916
		Annual	70.224.765	72.594.405	75.066.810	77.478.765	79.719.445	82.161.625	84.680.375		86.374.990
Acute Pain Service Nurse (N3)	2015	Hourly	<u>34.851</u>	<u>36.027</u>	37.254	<u>38.451</u>	<u>39,563</u>	40.775	42.025		<u>42.866</u>
	2010	Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.916
		Annual	70.224.765	72.594.405	75,066.810	77,478.765	79.719.445	82,161.625	84,680.375		86.374.990
Anesthesia Registration Nurse	2015	Hourly	34.851	36.027	37.254	38.451	<u>39,563</u>	40.775	42.025		<u>42.866</u>
	2010	Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7.197.916
		Annual	70.224.765	72.594.405	75.066.810	77.478.765	79.719.445	82,161.625	84.680.375		86.374.99
Asthma Education Nurse (N3)	2015	Hourly	34.851	36.027	37.254	38.451	<u>39.563</u>	40.775	42.025		42.86
	2010	Monthly	5,852.064	6.049.534	6,255.568	6,456.564	6,643.287	6.846.802	7,056.698		7.197.91
		Annual	70.224.765	72.594.405	75.066.810	77.478.765	79.719.445	82.161.625	84.680.375		86.374.99
Community Dialysis Nurse (N3)	2015	Hourly	<u>34.851</u>	<u>36.027</u>	37.254	<u>38.451</u>	<u>39.563</u>	40.775	42.025		<u>42.86</u>
	2010	Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.916
		Annual	70.224.765	72.594.405	75.066.810	77.478.765	79.719.445	82.161.625	84.680.375		86.374.99
Diabetic Education Nurse (N3)	2015	Hourly	<u>34.851</u>	<u>72.394.403</u> 36.027	<u>37.254</u>	<u>38.451</u>	<u>39.563</u>	40.775	42.025		<u>42.86</u>
Diabelie Education Mulse (NS)	2015	Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.91
		Annual	70.224.765	72.594.405	75,066.810	77.478.765	79.719.445	82,161.625	84,680.375		86.374.99
Enterostomal Therapist (N3)	2015	Hourly	<u>34.851</u>	<u>72.394.403</u> 36.027	37.254	<u>38.451</u>	<u>39.563</u>	<u>40.775</u>	42.025		<u>42.86</u>
	2015	Monthly	5,852.064	6.049.534	6,255.568	6,456.564	6,643.287	6.846.802	7,056.698		7,197.91
		Annual	5,052.064 70.224.765	72,594.405	75,066.810	0,450.564 77,478.765	0,043.207 79.719.445	82,161.625	84,680.375		86,374.99
High Dick Apparthania Nurse (N2)	2015				<u>75,066,610</u> 37,254						
High Risk Anaesthesia Nurse (N3)	2015	Hourly	34.851	36.027		38.451	39.563	40.775	42.025		42.86
		Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.91
Ded Lligh Diels Anasthasis Numer (N2)	0045	Annual	70,224.765	72,594.405	75,066.810	77,478.765	79,719.445	82,161.625	84.680.375		86.374.99
Ped High Risk Anesthesia Nurse (N3)	2015	Hourly	34.851	36.027	37.254	38.451	39.563	40.775	42.025		42.86
		Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.91
	0045	Annual	70,224.765	72,594.405	75,066.810	77,478.765	79,719,445	82,161.625	84.680.375		86.374.99
Perinatal Nurse (N3)	2015	Hourly	34.851	36.027	37.254	38.451	39.563	40.775	42.025		42.86
		Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.91
	0045	Annual	70,224.765	72,594.405	75,066.810	77,478.765	79,719.445	82,161.625	84.680.375		86.374.99
Psychiatric Emergency Nurse (N3)	2015	Hourly	34.851	36.027	37.254	38.451	39.563	40.775	42.025		42.86
		Monthly	5,852.064	6,049.534	6,255.568	6,456.564	6,643.287	6,846.802	7,056.698		7,197.91
	0045	Annual	70,224.765	72,594.405	75,066.810	77,478.765	79,719,445	82,161.625	84,680.375		86,374.99
Nurse III (20 Year Scale)	2015	Hourly	35.548	36.747	37.999	39.220	40.354	41.590	42.866		
		Monthly	5,969.102	6,170.434	6,380.665	6,585.692	6,776.109	6,983.654	7,197.916		
	0045	Annual	71,629.220	74,045.205	76,567.985	79,028.300	81,313.310	83,803.850	86.374.990		
Nurse IV	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.01
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.35
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.21
Cerebrovascular Nurse (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.01
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.35
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.21
Coordinator - Bleeding Disord Prog (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.01
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.35
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.21
Coordinator - Nurseries (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.01
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.35
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.21
CVT Associate (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.01
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.35
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.21

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Enterostomal Therapist (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.014
		Monthly	6,052.892	6,277.061	6,501.398	6.746.052	7.026.305	7,298.330	7,595.207	7.904.173	8,062.351
		Annual	72.634.705	75.324.730	78.016.770	80.952.625	84.315.660	87.579.960	91.142.480	94.850.080	96.748.210
Multi-Organ Donor Coordinator (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.014
		Monthly	6,052.892	6.277.061	6.501.398	6.746.052	7.026.305	7.298.330	7.595.207	7.904.173	8.062.351
		Annual	72.634.705	75.324.730	78,016.770	80.952.625	84.315.660	87.579.960	91,142,480	94.850.080	96.748.210
Nurse Educator (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.014
	2010	Monthly	6,052.892	6,277.061	6.501.398	6.746.052	7,026.305	7.298.330	7.595.207	7.904.173	8.062.351
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.210
Nurse Therapist (N4)	2015	Hourly	<u>36.047</u>	37.382	<u>38.718</u>	40.175	<u>41.844</u>	<u>43.464</u>	45.232	47.072	<u>48.014</u>
	2015	Monthly	6,052.892	6,277.061	6.501.398	6.746.052	7.026.305	7.298.330	7.595.207	7.904.173	8,062.351
		Annual	72.634.705	75.324.730	78,016.770	80.952.625	84,315.660	87.579.960	91.142.480	94.850.080	96.748.210
Pain Clinic Nurse (N4)	2015	Hourly	<u>36.047</u>	<u>37.382</u>	<u>38.718</u>	40.175	<u>41.844</u>	<u>43.464</u>	45.232	<u>47.072</u>	<u>48.014</u>
	2015	Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.351
			72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96.748.210
Planning/Systems Coordinator (N4)	2015	Annual	<u>12,034.705</u> 36.047	<u>75,524.750</u> 37.382	<u>78,018,770</u> 38,718	<u>40.175</u>	<u>41.844</u>	<u>43.464</u>	<u>45.232</u>	<u>94,630.080</u> 47.072	<u>90,740.210</u> 48.014
Planning/Systems Coordinator (N4)	2015	Hourly									
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.351 96.748.210
Drimon (Numo Thereniet 2 (NI4)	2015	Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	
Primary Nurse Therapist 2 (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.014
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.351
	0045	Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142,480	94,850.080	96,748.210
Psych Consultation Nurse (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.014
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.351
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.210
Renal Transplant Coordinator (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.014
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.351
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.210
RPN Nurse Therapist 2 (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.014
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.351
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87,579.960	91,142.480	94,850.080	96,748.210
Utilization Facilitator (N4)	2015	Hourly	36.047	37.382	38.718	40.175	41.844	43.464	45.232	47.072	48.014
		Monthly	6,052.892	6,277.061	6,501.398	6,746.052	7,026.305	7,298.330	7,595.207	7,904.173	8,062.351
		Annual	72,634.705	75,324.730	78,016.770	80,952.625	84,315.660	87.579.960	91,142.480	94,850.080	96,748.210
Nurse IV (20 Year Scale)	2015	Hourly	36.768	38.129	39.492	40.978	42.681	44.333	46.136	48.014	
		Monthly	6,173.960	6,402.495	6,631.365	6,880.889	7,166.851	7,444.250	7,747.003	8,062.351	
		Annual	74,087.520	76,829.935	79,576.380	82,570.670	86,002.215	89,330.995	92,964.040	96,748.210	
Clinical Nurse Specialist	2015	Hourly	43.365	46.548	48.461	50.373	52.437				53.485
		Monthly	7,281.706	7,816.185	8,137.410	8,458.466	8,805.046				8,981.023
		Annual	87,380.475	93,794.220	97,648.915	101,501.595	105,660.555				107,772.275
Clinical Nurse Specialist (20 Year Scale	e) 2015	Hourly	44.233	47.478	49.431	51.381	53.485				
		Monthly	7,427.458	7,972.348	8,300.289	8,627.726	8,981.023				
		Annual	89,129.495	95,668.170	99,603.465	103,532.715	107,772.275				
Nurse Practitioner	2015	Hourly	43.365	46.548	48.461	50.373	52.437				53.485
		Monthly	7,281.706	7,816.185	8,137.410	8,458.466	8,805.046				8,981.023
		Annual	87,380.475	93.794.220	97,648.915	101,501.595	105,660.555				107,772.275
Nurse Practitioner (20 Year Scale)	2015	Hourly	44.233	47.478	49.431	51.381	53.485				
	2013	-									
			,	,	,	,	,				
	2013	Monthly Annual	44.233 7,427.458 89,129.495	7,972.348 95,668.170	8,300.289 99,603.465	8,627.726	8,981.023 107,772.275				

Weekend Worker Rates	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Weekend Worker - Licensed Practical Nurse	2015	Hourly	29.557	30.524	31.478	32.639	33.703	34.891	36.133		36.856
		Monthly	4,963.113	5,125.488	5,285.681	5,480.632	5,659.295	5,858.780	6,067.333		6,188.737
		Annual	59,557.355	61,505.860	63,428.170	65,767.585	67,911.545	70,305.365	72,807.995		74,264.840
Weekend Worker - ORT I	2015	Hourly	29.557	30.524	31.478	32.639	33.703	34.891	36.133		36.856
		Monthly	4,963.113	5,125.488	5,285.681	5,480.632	5,659.295	5,858.780	6,067.333		6,188.737
		Annual	59,557.355	61,505.860	63,428.170	65,767.585	67,911.545	70,305.365	72,807.995		74,264.840
Weekend Worker - ORT II	2015	Hourly	31.478	32.639	33.703	34.900	36.007	37.130	38.275		39.041
		Monthly	5,285.681	5,480.632	5,659.295	5,860.292	6,046.175	6,234.746	6,427.010		6,555.635
		Annual	63,428.170	65,767.585	67,911.545	70,323.500	72,554.105	74,816.950	77,124.125		78,667.615
Weekend Worker - Nurse II	2015	Hourly	38.612	39.959	41.311	42.720	44.097	45.526			46.436
		Monthly	6,483.598	6,709.782	6,936.805	7,173.400	7,404.621	7,644.574			7,797.378
		Annual	77,803.180	80,517.385	83,241.665	86,080.800	88,855.455	91,734.890			93,568.540
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	39.384	40.759	42.137	43.574	44.979	46.436			
		Monthly	6,613.230	6,844.115	7,075.505	7,316.801	7,552.724	7,797.378			
		Annual	79,358.760	82,129.385	84,906.055	87,801.610	90,632.685	93,568.540			
Weekend Worker - Nurse III	2015	Hourly	40.079	41.431	42.842	44.219	45.497	46.891	48.329		49.295
		Monthly	6,729.932	6,956.955	7,193.886	7,425.107	7,639.705	7,873.780	8,115.245		8,277.452
		Annual	80,759.185	83,483.465	86,326.630	89,101.285	91,676.455	94,485.365	97,382.935		99,329.425
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	40.881	42.260	43.698	45.103	46.407	47.829	49.295		
		Monthly	6,864.601	7,096.158	7,337.623	7,573.545	7,792.509	8,031.286	8,277.452		
		Annual	82,375.215	85,153.900	88,051.470	90,882.545	93,510.105	96,375.435	99,329.425		
Weekend Worker - Nurse IV	2015	Hourly	41.454	42.989	44.526	46.201	48.121	49.983	52.016	54.133	55.216
		Monthly	6,960.818	7,218.570	7,476.658	7,757.918	8,080.318	8,392.979	8,734.353	9,089.833	9,271.687
		Annual	83,529.810	86,622.835	89,719.890	93,095.015	96,963.815	100,715.745	104,812.240	109,077.995	111,260.240
Weekend Worker - Nurse IV (20 Year Scale)) 2015	Hourly	42.283	43.849	45.416	47.125	49.083	50.983	53.057	55.216	
		Monthly	7,100.020	7,362.978	7,626.103	7,913.073	8,241.854	8,560.895	8,909.155	9,271.687	
		Annual	85,200.245	88,355.735	91,513.240	94,956.875	98,902.245	102,730.745	106,909.855	111,260.240	

A3. Effective October 1, 2014			•	clude a 1.1% m culated as (mo	•		ours				
Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse	2015	Hourly	25.984	26.835	27.674	28.694	29.629	30.673	31.766		32.401
		Monthly	4,363.147	4,506.044	4,646.926	4,818.201	4,975.203	5,150.508	5,334.041		5,440.668
		Annual	52,357.760	54,072.525	55,763.110	57,818.410	59,702.435	61,806.095	64,008.490		65,288.015
LPN - Technician (LPN)	2015	Hourly	25.984	26.835	27.674	28.694	29.629	30.673	31.766		32.401
		Monthly	4,363.147	4,506.044	4,646.926	4,818.201	4,975.203	5,150.508	5,334.041		5,440.668
		Annual	52,357.760	54,072.525	55,763.110	57,818.410	59,702.435	61,806.095	64,008.490		65,288.015
ORTI	2015	Hourly	25.984	26.835	27.674	28.694	29.629	30.673	31.766		32.401
		Monthly	4,363.147	4,506.044	4,646.926	4,818.201	4,975.203	5,150.508	5,334.041		5,440.668
		Annual	52,357.760	54,072.525	55,763.110	57,818,410	59,702.435	61,806.095	64,008.490		65,288.015
ORT II	2015	Hourly	27.674	28.694	29.629	30.682	31.655	32.642	33.649		34.322
		Monthly	4,646.926	4,818.201	4,975.203	5,152.019	5,315.402	5,481.136	5,650.228		5,763.236
		Annual	55,763.110	57,818.410	59,702.435	61,824.230	63,784.825	65,773.630	67,802.735		69,158.830
Nurse II	2015	Hourly	33.945	35.129	36.318	37.556	38.767	40.023			40.823
		Monthly	5,699.931	5,898.745	6,098.398	6,306.278	6,509.625	6,720.529			6,854.862
		Annual	68,399.175	70,784.935	73,180.770	75,675.340	78,115.505	80,646.345			82,258.345
General Duty Nurse (N2)	2015	Hourly	33.945	35.129	36.318	37.556	38.767	40.023			40.823
		Monthly	5,699.931	5,898.745	6,098.398	6,306.278	6,509.625	6,720.529			6,854.862
		Annual	68,399.175	70,784.935	73,180.770	75,675.340	78,115.505	80,646.345			82,258.345
Research Nurse (N2)	2015	Hourly	33.945	35.129	36.318	37.556	38.767	40.023			40.823
		Monthly	5,699.931	5,898.745	6,098.398	6,306.278	6,509.625	6,720.529			6,854.862
		Annual	68,399.175	70,784.935	73,180.770	75,675.340	78,115.505	80,646.345			82,258.345
Allergy/Immunology Nurse (N2)	2015	Hourly	33.945	35.129	36.318	37.556	38.767	40.023			40.823
		Monthly	5,699.931	5,898.745	6,098.398	6,306.278	6,509.625	6,720.529			6,854.862
		Annual	68,399.175	70,784.935	73,180.770	75,675.340	78,115.505	80,646.345			82,258.345
Transplant Clinic Nurse (N2)	2015	Hourly	33.945	35.129	36.318	37.556	38.767	40.023			40.823
		Monthly	5,699.931	5,898.745	6,098.398	6,306.278	6,509.625	6,720.529			6,854.862
		Annual	68,399.175	70,784.935	73,180.770	75,675.340	78,115.505	80,646.345			82,258.345
Registered Psychiatric Nurse (N2)	2015	Hourly	33.945	35.129	36.318	37.556	38.767	40.023			40.823
		Monthly	5,699.931	5,898.745	6,098.398	6,306.278	6,509.625	6,720.529			6,854.862
		Annual	68,399.175	70,784.935	73,180.770	75,675.340	78,115.505	80,646.345			82,258.345
Perioperative Nurse (N2)	2015	Hourly	33.945	35.129	36.318	37.556	38.767	40.023			40.823
		Monthly	5,699.931	5,898.745	6,098.398	6,306.278	6,509.625	6,720.529			6,854.862
		Annual	68,399.175	70,784.935	73,180.770	75,675.340	78,115.505	80,646.345			82,258.345
Vascular Lab/Clinic Nurse (N2)	2015	Hourly	33.945	35.129	36.318	37.556	38.767	40.023			40.823
		Monthly	5,699.931	5,898.745	6,098.398	6,306.278	6,509.625	6,720.529			6,854.862
		Annual	68,399.175	70,784.935	73,180.770	75,675.340	78,115.505	80,646.345			82,258.345
Nurse II (20 Year Scale)	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677.130	82,258.345			
Nurse III	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.337
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.005
		Annual	70,998.525	73,392.345	75.890.945	78,331.110	80.595.970	83,064.345	85,611.305		87,324.055
Nurse Clinician (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.337
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.005
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.055

Clinical Resource Nurse (N3)	Hours				Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.337
	2010	Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70.998.525	73.392.345	75.890.945	78.331.110	80.595.970	83.064.345	85.611.305		87.324.05
Acute Pain Service Nurse (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.05
Anesthesia Registration Nurse	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.05
Asthma Education Nurse (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.05
Community Dialysis Nurse (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.05
Diabetic Education Nurse (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.05
Enterostomal Therapist (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.05
High Risk Anaesthesia Nurse (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.05
Ped High Risk Anesthesia Nurse (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70,998.525	73,392.345	75,890.945	78,331.110	80,595.970	83,064.345	85,611.305		87,324.05
Perinatal Nurse (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70.998.525	73.392.345	75.890.945	78.331.110	80.595.970	83.064.345	85.611.305		87.324.05
Psychiatric Emergency Nurse (N3)	2015	Hourly	35.235	36.423	37.663	38.874	39.998	41.223	42.487		43.33
		Monthly	5,916.544	6,116.029	6,324.245	6,527.593	6,716.331	6,922.029	7,134.275		7,277.00
		Annual	70.998.525	73.392.345	75.890.945	78.331.110	80.595.970	83.064.345	85.611.305		87.324.05
Nurse III (20 Year Scale)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		
		Annual	72.419.100	74.861.280	77,410.255	79.896.765	82,207,970	84,726,720	87.324.055		
urse IV	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.54
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.01
		Annual	73.434.660	76.152.895	78.875.160	81.843.255	85,242,560	88,543,130	92,143,935	95.893.850	97.812.13
Cerebrovascular Nurse (N4)	2015	Hourly	36,444	37.793	39.144	40.617	42.304	43,942	45.729	47.590	48.54
	2010	Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.01
		Annual	73,434.660	76,152.895	78.875.160	81,843.255	85.242.560	88.543.130	92.143.935	95.893.850	97,812.13
Coordinator - Bleeding Disord Prog (N4)	2015	Hourly	<u>36.444</u>	37.793	<u>39.144</u>	40.617	42.304	43.942	45.729	47.590	<u>48.54</u>
	20.0	Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7.378.594	7.678.661	7.991.154	8,151.01
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.13
Coordinator - Nurseries (N4)	2015	Hourly	<u>36.444</u>	37.793	<u>39.144</u>	<u>40.617</u>	42.304	43.942	45.729	47.590	<u>48.54</u>
	2010	Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.01
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.13
CVT Associate (N4)	2015	Hourly	<u>73,434.000</u> 36.444	<u>70,152.695</u> 37.793	<u>70,075,160</u> 39,144	<u>40.617</u>	<u>42.304</u>	<u>43.942</u>	<u>92,143.935</u> 45.729	<u>95,695.650</u> 47.590	<u>97.012.13</u> 48.54
	2013	Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.01
CVI ASSOCIATE (194)											

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Enterostomal Therapist (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
	2010	Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.011
		Annual	73,434.660	76.152.895	78.875.160	81.843.255	85.242.560	88.543.130	92.143.935	95.893.850	97.812.130
Multi-Organ Donor Coordinator (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47,590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.011
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Nurse Educator (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.01
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Nurse Therapist (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.01 ⁻
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Pain Clinic Nurse (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.011
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Planning/Systems Coordinator (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.011
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Primary Nurse Therapist 2 (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.01
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Psych Consultation Nurse (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.011
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Renal Transplant Coordinator (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.011
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
RPN Nurse Therapist 2 (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.011
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Utilization Facilitator (N4)	2015	Hourly	36.444	37.793	39.144	40.617	42.304	43.942	45.729	47.590	48.542
		Monthly	6,119.555	6,346.075	6,572.930	6,820.271	7,103.547	7,378.594	7,678.661	7,991.154	8,151.011
		Annual	73,434.660	76,152.895	78,875.160	81,843.255	85,242.560	88,543.130	92,143.935	95,893.850	97,812.130
Nurse IV (20 Year Scale)	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821	46.644	48.542	
		Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	
		Annual	74,901.580	77,676.235	80,452.905	83,479.435	86,947.250	90,314.315	93,987.660	97,812.130	
Clinical Nurse Specialist	2015	Hourly	43.842	47.060	48.994	50.927	53.013				54.074
		Monthly	7,361.803	7,902.158	8,226.909	8,551.492	8,901.766				9,079.926
		Annual	88,341.630	94,825.900	98,722.910	102,617.905	106,821.195				108,959.110
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	44.719	48.001	49.974	51.946	54.074				
		Monthly	7,509.065	8,060.168	8,391.468	8,722.599	9,079.926				
		Annual	90,108.785	96,722.015	100,697.610	104,671.190	108,959.110				
Nurse Practitioner	2015	Hourly	43.842	47.060	48.994	50.927	53.013				54.074
		Monthly	7,361.803	7,902.158	8,226.909	8,551.492	8,901.766				9,079.926
		Annual	88,341.630	94,825.900	98,722.910	102,617.905	106,821.195				108,959.110
Nurse Practitioner (20 Year Scale)	2015	Hourly	44.719	48.001	49.974	51.946	54.074				
		Monthly	7,509.065	8,060.168	8,391.468	8,722.599	9,079.926				
		Annual	90,108.785	96,722.015	100,697.610	104,671.190	108.959.110				

Weekend Worker Rates	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Weekend Worker - Licensed Practical Nurse	2015	Hourly	29.882	30.860	31.825	32.998	34.073	35.274	36.531		37.261
		Monthly	5,017.686	5,181.908	5,343.948	5,540.914	5,721.425	5,923.093	6,134.164		6,256.743
		Annual	60,212.230	62,182.900	64,127.375	66,490.970	68,657.095	71,077.110	73,609.965		75,080.915
Weekend Worker - ORT I	2015	Hourly	29.882	30.860	31.825	32.998	34.073	35.274	36.531		37.261
		Monthly	5,017.686	5,181.908	5,343.948	5,540.914	5,721.425	5,923.093	6,134.164		6,256.743
		Annual	60,212.230	62,182.900	64,127.375	66,490.970	68,657.095	71,077.110	73,609.965		75,080.915
Weekend Worker - ORT II	2015	Hourly	31.825	32.998	34.073	35.284	36.403	37.538	38.696		39.470
		Monthly	5,343.948	5,540.914	5,721.425	5,924.772	6,112.670	6,303.256	6,497.703		6,627.671
		Annual	64,127.375	66,490.970	68,657.095	71,097.260	73,352.045	75,639.070	77,972.440		79,532.050
Weekend Worker - Nurse II	2015	Hourly	39.036	40.399	41.766	43.190	44.582	46.027			46.947
		Monthly	6,554.795	6,783.665	7,013.208	7,252.321	7,486.061	7,728.700			7,883.184
		Annual	78,657.540	81,403.985	84,158.490	87,027.850	89,832.730	92,744.405			94,598.205
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	39.817	41.207	42.601	44.053	45.473	46.947			
		Monthly	6,685.938	6,919.342	7,153.418	7,397.233	7,635.675	7,883.184			
		Annual	80,231.255	83,032.105	85,841.015	88,766.795	91,628.095	94,598.205			
Weekend Worker - Nurse III	2015	Hourly	40.520	41.887	43.313	44.705	45.997	47.407	48.860		49.838
		Monthly	6,803.983	7,033.525	7,272.975	7,506.715	7,723.663	7,960.425	8,204.408		8,368.631
		Annual	81,647.800	84,402.305	87,275.695	90,080.575	92,683.955	95,525.105	98,452.900		100,423.570
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	41.330	42.724	44.179	45.599	46.917	48.355	49.838		
		Monthly	6,939.996	7,174.072	7,418.390	7,656.832	7,878.146	8,119.610	8,368.631		
		Annual	83,279.950	86,088.860	89,020.685	91,881.985	94,537.755	97,435.325	100,423.570		
Weekend Worker - Nurse IV	2015	Hourly	41.910	43.462	45.015	46.709	48.650	50.533	52.589	54.729	55.823
		Monthly	7,037.388	7,297.994	7,558.769	7,843.220	8,169.146	8,485.333	8,830.570	9,189.911	9,373.612
		Annual	84,448.650	87,575.930	90,705.225	94,118.635	98,029.750	101,823.995	105,966.835	110,278.935	112,483.345
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	42.748	44.331	45.916	47.644	49.623	51.544	53.640	55.823	
		Monthly	7,178.102	7,443.914	7,710.062	8,000.222	8,332.529	8,655.097	9,007.050	9,373.612	
		Annual	86,137.220	89,326.965	92,520.740	96,002.660	99,990.345	103,861.160	108,084.600	112,483.345	

A4. Effective April 1, 2015				lude a 2% gen ulated as (mo			ours				
Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse	2015	Hourly	26.504	27.371	28.227	29.268	30.222	31.287	32.401		33.049
	2010	Monthly	4,450.463	4,596.047	4,739.784	4,914.585	5,074.778	5,253.609	5,440.668		5,549.478
		Annual	53,405.560	55,152.565	56.877.405	58.975.020	60.897.330	63.043.305	65.288.015		66.593.735
LPN - Technician (LPN)	2015	Hourly	26.504	27.371	28.227	29.268	30.222	31.287	32.401		33.049
. ,		Monthly	4,450.463	4,596.047	4,739.784	4,914.585	5,074.778	5,253.609	5,440.668		5,549.478
		Annual	53,405.560	55,152.565	56,877.405	58,975.020	60,897.330	63,043.305	65,288.015		66,593.73
ORT I	2015	Hourly	26.504	27.371	28.227	29.268	30.222	31.287	32.401		33.04
		Monthly	4,450.463	4,596.047	4,739.784	4,914.585	5,074.778	5,253.609	5,440.668		5,549.478
		Annual	53,405.560	55,152,565	56,877.405	58,975.020	60.897.330	63.043.305	65,288.015		66,593.73
ORT II	2015	Hourly	28.227	29.268	30.222	31.296	32.288	33.295	34.322		35.00
		Monthly	4,739.784	4,914.585	5,074.778	5,255.120	5,421.693	5,590.785	5,763.236		5,878.427
		Annual	56,877.405	58,975.020	60,897.330	63,061.440	65.060.320	67.089.425	69,158.830		70,541.120
Nurse II	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			41.640
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			6,992.050
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677,130	82,258.345			83,904.600
General Duty Nurse (N2)	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			41.64
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			6,992.050
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677.130	82,258.345			83,904.600
Research Nurse (N2)	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			41.640
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			6,992.050
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677.130	82,258.345			83,904.600
Allergy/Immunology Nurse (N2)	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			41.640
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			6,992.050
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677,130	82,258.345			83,904.600
Transplant Clinic Nurse (N2)	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			41.640
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			6,992.050
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677,130	82,258.345			83,904.600
Registered Psychiatric Nurse (N2)	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			41.640
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			6,992.050
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677.130	82,258.345			83,904.600
Perioperative Nurse (N2)	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			41.64
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			6,992.050
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677.130	82,258.345			83,904.600
Vascular Lab/Clinic Nurse (N2)	2015	Hourly	34.624	35.832	37.044	38.307	39.542	40.823			41.64
		Monthly	5,813.947	6,016.790	6,220.305	6,432.384	6,639.761	6,854.862			6,992.050
		Annual	69,767.360	72,201.480	74,643.660	77,188.605	79,677.130	82,258.345			83,904.600
Nurse II (20 Year Scale)	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41.640			
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6,992.050			
		Annual	71,161.740	73,646.235	76,136.775	78,732.095	81,270.995	83,904.600			
Nurse III	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.204
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.588
		Annual	72,419.100	74,861.280	77,410.255	79,896,765	82,207.970	84,726,720	87,324.055		89,071.060
Nurse Clinician (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.204
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.588
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.060

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Clinical Resource Nurse (N3)	2015	Hourly	35.940	37.152	38,417	39.651	40.798	42.048	43.337		44.204
	20.0	Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.58
		Annual	72.419.100	74.861.280	77.410.255	79.896.765	82.207.970	84.726.720	87.324.055		89.071.060
Acute Pain Service Nurse (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.204
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.58
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.06
Anesthesia Registration Nurse	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.20
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.58
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.06
Asthma Education Nurse (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.20
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.58
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.06
Community Dialysis Nurse (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.20
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.58
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.06
Diabetic Education Nurse (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.20
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.58
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.0
Enterostomal Therapist (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.2
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.5
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.0
High Risk Anaesthesia Nurse (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.2
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.5
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.0
Ped High Risk Anesthesia Nurse (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.2
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.5
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.0
Perinatal Nurse (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.2
		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.5
		Annual	72,419,100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.0
Psychiatric Emergency Nurse (N3)	2015	Hourly	35.940	37.152	38.417	39.651	40.798	42.048	43.337		44.2
, ,		Monthly	6,034.925	6,238.440	6,450.855	6,658.064	6,850.664	7,060.560	7,277.005		7,422.5
		Annual	72,419.100	74,861.280	77,410.255	79,896.765	82,207.970	84,726.720	87,324.055		89,071.0
Nurse III (20 Year Scale)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		
		Annual	73.865.870	76.358.425	78.957.775	81,496,675	83.852.210	86.421.335	89.071.060		
urse IV	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821	46.644	48.542	49.5
		Monthly	6,241.798	6,473.020	6.704.409	6.956.620	7.245.604	7.526.193	7,832.305	8.151.011	8.314.0
		Annual	74.901.580	77.676.235	80,452,905	83,479,435	86.947.250	90.314.315	93,987,660	97.812.130	99.768.6
Cerebrovascular Nurse (N4)	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821	46.644	48.542	49.5
	20.0	Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526,193	7,832.305	8,151.011	8,314.0
		Annual	74,901.580	77,676.235	80,452.905	83,479.435	86,947.250	90.314.315	93.987.660	97,812.130	99,768.6
Coordinator - Bleeding Disord Prog (N4)	2015	Hourly	37.172	38.549	39.927	41,429	43.150	44.821	46.644	48.542	49.5
	2010	Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526,193	7,832.305	8,151.011	8,314.0
		Annual	74,901.580	77,676.235	80,452.905	83,479.435	86,947.250	90,314.315	93,987.660	97,812.130	99,768.6
Coordinator - Nurseries (N4)	2015	Hourly	<u>37.172</u>	<u>38.549</u>	<u>39.927</u>	<u>41.429</u>	<u>43.150</u>	<u>44.821</u>	<u>46.644</u>	48.542	<u>49.5</u>
	2010	Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.0
		Annual	74,901.580	77,676.235	80,452.905	83,479.435	86,947.250	90,314.315	93,987.660	97,812.130	99,768.6
CVT Associate (N4)	2015	Hourly	<u>74,901.560</u> 37.172	<u>38.549</u>	<u>39.927</u>	<u>41.429</u>	<u>43.150</u>	<u>90,314.315</u> 44.821	<u>93,967.000</u> 46.644	<u>97,012.130</u> 48.542	<u>99,700.0</u> 49.5
UVI ASSUCIALE (144)	2015		6,241.798	6,473.020	39.927 6,704.409	41.429 6,956.620	43.150 7,245.604	44.82 1 7,526.193	40.044 7,832.305	46.542 8,151.011	49.5 8,314.0
		Monthly	,	,	,	,	,	,	,	,	,
		Annual	74,901.580	77,676.235	80,452.905	83,479.435	86,947.250	90,314.315	93,987.660	97,812.130	99,768.6

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Enterostomal Therapist (N4)	2015	Hourly	37.172	38,549	39.927	41.429	43.150	44.821	46.644	48.542	49.513
	2010	Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.058
		Annual	74,901,580	77.676.235	80 452 905	83.479.435	86.947.250	90.314.315	93.987.660	97.812.130	99 768 695
Multi-Organ Donor Coordinator (N4)	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821	46.644	48.542	<u>49.513</u>
······································		Monthly	6,241.798	6,473.020	6.704.409	6.956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.058
		Annual	74,901.580	77,676.235	80,452.905	83,479.435	86,947.250	90,314.315	93.987.660	97,812.130	99,768.695
Nurse Educator (N4)	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821	46.644	48.542	49.513
		Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8.151.011	8,314.058
		Annual	74,901.580	77,676.235	80.452.905	83,479.435	86.947.250	90,314.315	93.987.660	97,812.130	99,768.695
Nurse Therapist (N4)	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821	46.644	48.542	<u>49.513</u>
	2010	Monthly	6,241.798	6,473.020	6.704.409	6,956.620	7.245.604	7.526.193	7,832.305	8,151.011	8.314.058
		Annual	74.901.580	77.676.235	80.452.905	83.479.435	86.947.250	90.314.315	93.987.660	97.812.130	99.768.695
Pain Clinic Nurse (N4)	2015	Hourly	<u>37.172</u>	38.549	<u>39.927</u>	<u>41.429</u>	43.150	44.821	<u>46.644</u>	48.542	<u>49.513</u>
	2010	Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.058
		Annual	74.901.580	77,676.235	80.452.905	83.479.435	86.947.250	90.314.315	93.987.660	97.812.130	99.768.695
Planning/Systems Coordinator (N4)	2015	Hourly	<u>37.172</u>	<u>38.549</u>	<u>39.927</u>	<u>41.429</u>	43.150	<u>44.821</u>	<u>46.644</u>	48.542	<u>49.513</u>
	2010	Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.058
		Annual	74.901.580	77.676.235	80.452.905	83.479.435	86.947.250	90.314.315	93,987,660	97.812.130	99.768.695
Primary Nurse Therapist 2 (N4)	2015	Hourly	<u>37.172</u>	<u>38.549</u>	<u>39.927</u>	<u>41.429</u>	<u>43.150</u>	<u>44.821</u>	<u>46.644</u>	<u>48.542</u>	<u>49.513</u>
	2015	Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.058
			74,901.580	77,676.235	80,452.905	83,479.435	86,947.250	90,314.315	93,987.660	97,812.130	99,768.695
Pouch Consultation Nurse (N4)	2015	Annual Hourly	<u>74,901.000</u> 37,172	<u>38,549</u>	<u>39,927</u>	<u>41,429</u>	<u>43.150</u>	<u>90,314.315</u> 44.821	<u>93,967.000</u> 46.644	<u>48.542</u>	<u>99,700.095</u> 49,513
Psych Consultation Nurse (N4)	2015	Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	46.542 8,151.011	8,314.058
			,	77.676.235	80.452.905	83,479.435	86.947.250	,	93.987.660	97.812.130	99,768.695
Banal Transplant Coordinator (NIA)	2015	Annual	74,901.580					90,314.315	<u>93,967.000</u> 46,644		
Renal Transplant Coordinator (N4)	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821		48.542	49.513
		Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.058
	0045	Annual	74,901.580	77,676.235	80,452.905	83,479.435	86.947.250	90,314.315	93,987.660	97.812.130	99,768.695
RPN Nurse Therapist 2 (N4)	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821	46.644	48.542	49.513
		Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.058
	0045	Annual	74,901.580	77,676.235	80.452.905	83,479.435	86.947.250	90,314.315	93,987.660	97.812.130	99,768.695
Utilization Facilitator (N4)	2015	Hourly	37.172	38.549	39.927	41.429	43.150	44.821	46.644	48.542	49.513
		Monthly	6,241.798	6,473.020	6,704.409	6,956.620	7,245.604	7,526.193	7,832.305	8,151.011	8,314.058
	0045	Annual	74,901.580	77,676.235	80,452.905	83,479.435	86,947.250	90,314.315	93,987.660	97.812.130	99,768.695
Nurse IV (20 Year Scale)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	
		Annual	76,400.740	79,229.800	82,060.875	85,149.870	88,686.195	92,119.755	95,867.655	99,768.695	
Clinical Nurse Specialist	2015	Hourly	44.719	48.001	49.974	51.946	54.074				55.155
		Monthly	7,509.065	8,060.168	8,391.468	8,722.599	9,079.926				9,261.444
		Annual	90,108.785	96,722.015	100,697.610	104.671.190	108,959.110				111,137.325
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	45.614	48.961	50.974	52.985	55.155				
		Monthly	7,659.351	8,221.368	8,559.384	8,897.065	9,261.444				
		Annual	91,912.210	98.656.415	102,712.610		111,137.325				
Nurse Practitioner	2015	Hourly	44.719	48.001	49.974	51.946	54.074				55.155
		Monthly	7,509.065	8,060.168	8,391.468	8,722.599	9,079.926				9,261.444
		Annual	90,108.785	96,722.015	100,697.610	104,671.190	108,959.110				111,137.325
Nurse Practitioner (20 Year Scale)	2015	Hourly	45.614	48.961	50.974	52.985	55.155				
		Monthly	7,659.351	8,221.368	8,559.384	8,897.065	9,261.444				
		Annual	91,912.210	98,656.415	102,712.610	106,764.775	111 137 325				

Weekend Worker Rates	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Weekend Worker - Licensed Practical Nurse	2015	Hourly	30.480	31.477	32.461	33.658	34.755	35.980	37.261		38.006
		Monthly	5,118.100	5,285.513	5,450.743	5,651.739	5,835.944	6,041.642	6,256.743		6,381.841
		Annual	61,417.200	63,426.155	65,408.915	67,820.870	70,031.325	72,499.700	75,080.915		76,582.090
Weekend Worker - ORT I	2015	Hourly	30.480	31.477	32.461	33.658	34.755	35.980	37.261		38.006
		Monthly	5,118.100	5,285.513	5,450.743	5,651.739	5,835.944	6,041.642	6,256.743		6,381.841
		Annual	61,417.200	63,426.155	65,408.915	67,820.870	70,031.325	72,499.700	75,080.915		76,582.090
Weekend Worker - ORT II	2015	Hourly	32.461	33.658	34.755	35.990	37.131	38.289	39.470		40.260
		Monthly	5,450.743	5,651.739	5,835.944	6,043.321	6,234.914	6,429.361	6,627.671		6,760.325
		Annual	65,408.915	67,820.870	70,031.325	72,519.850	74,818.965	77,152.335	79,532.050		81,123.900
Weekend Worker - Nurse II	2015	Hourly	39.817	41.207	42.601	44.053	45.473	46.947			47.886
		Monthly	6,685.938	6,919.342	7,153.418	7,397.233	7,635.675	7,883.184			8,040.858
		Annual	80,231.255	83,032.105	85,841.015	88,766.795	91,628.095	94,598.205			96,490.290
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	40.614	42.031	43.453	44.935	46.383	47.886			
		Monthly	6,819.768	7,057.705	7,296.483	7,545.335	7,788.479	8,040.858			
		Annual	81,837.210	84,692.465	87,557.795	90,544.025	93,461.745	96,490.290			
Weekend Worker - Nurse III	2015	Hourly	41.330	42.724	44.179	45.599	46.917	48.355	49.838		50.834
		Monthly	6,939.996	7,174.072	7,418.390	7,656.832	7,878.146	8,119.610	8,368.631		8,535.876
		Annual	83,279.950	86,088.860	89,020.685	91,881.985	94,537.755	97,435.325	100,423.570		102,430.510
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	42.157	43.579	45.063	46.511	47.856	49.322	50.834		
		Monthly	7,078.863	7,317.640	7,566.829	7,809.972	8,035.820	8,281.986	8,535.876		
		Annual	84,946.355	87,811.685	90,801.945	93,719.665	96,429.840	99,383.830	102,430.510		
Weekend Worker - Nurse IV	2015	Hourly	42.748	44.331	45.916	47.644	49.623	51.544	53.640	55.823	56.940
		Monthly	7,178.102	7,443.914	7,710.062	8,000.222	8,332.529	8,655.097	9,007.050	9,373.612	9,561.175
		Annual	86,137.220	89,326.965	92,520.740	96,002.660	99,990.345	103,861.160	108,084.600	112,483.345	114,734.100
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	43.603	45.218	46.834	48.596	50.615	52.575	54.713	56.940	
		Monthly	7,321.670	7,592.856	7,864.209	8,160.078	8,499.102	8,828.219	9,187.225	9,561.175	
		Annual	87,860.045	91,114.270	94,370.510	97,920.940	101,989.225	105,938.625	110,246.695	114,734.100	

A5. Effective April 1, 2016			•	clude a 2% gen culated as (mo			0.000				
Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse	2015	Hourly	27.034	27.919	28.792	29.853	30.826	31.913	33.049		33.710
Licenseu Practical Nurse	2015	Monthly	4,539.459	4,688.065	4,834.657	5,012.816	5,176.199	5,358.725	5,549.478		5,660.47
		Annual	4,559.459 54,473.510	4,000.005	58.015.880	60.153.795	62.114.390	64.304.695	66.593.735		67.925.650
LPN - Technician (LPN)	2015	Hourly	27.034	27.919	28.792	29.853	<u>30.826</u>	<u>31.913</u>	<u>33.049</u>		<u>33.71</u>
	2010	Monthly	4.539.459	4,688.065	4.834.657	5,012.816	5.176.199	5.358.725	5,549.478		5,660.47 ⁻
		Annual	54,473.510	56,256.785	58,015.880	60,153.795	62,114.390	64.304.695	66,593.735		67,925.650
ORT I	2015	Hourly	<u>27.034</u>	27.919	28.792	<u>29.853</u>	30.826	<u>31.913</u>	33.049		<u>33.71</u>
	20.0	Monthly	4,539.459	4,688.065	4,834.657	5,012.816	5,176.199	5,358.725	5,549.478		5,660.47
		Annual	54,473.510	56,256.785	58,015.880	60,153.795	62,114.390	64.304.695	66,593.735		67,925.650
ORT II	2015	Hourly	28.792	29.853	30.826	31.922	32.934	33.960	35.008		35.709
	20.0	Monthly	4,834.657	5,012.816	5,176.199	5,360.236	5,530.168	5,702.450	5,878.427		5,996.136
		Annual	58.015.880	60.153.795	62,114.390	64,322.830	66,362.010	68,429.400	70,541.120		71,953.635
Nurse II	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41.640	10(011120		42.472
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6,992.050			7,131.757
		Annual	71,161.740	73,646.235	76,136.775	78,732.095	81,270.995	83,904.600			85,581.080
General Duty Nurse (N2)	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41.640			42.472
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6,992.050			7,131.757
		Annual	71.161.740	73,646.235	76,136.775	78,732.095	81.270.995	83.904.600			85.581.080
Research Nurse (N2)	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41.640			42.472
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6.992.050			7,131.757
		Annual	71.161.740	73.646.235	76.136.775	78.732.095	81.270.995	83.904.600			85.581.080
Allergy/Immunology Nurse (N2)	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41,640			42.472
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6,992.050			7,131.757
		Annual	71,161.740	73,646.235	76,136.775	78,732.095	81.270.995	83,904.600			85,581.080
Transplant Clinic Nurse (N2)	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41.640			42.472
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6,992.050			7,131.757
		Annual	71.161.740	73,646.235	76,136.775	78,732.095	81,270.995	83,904.600			85,581.080
Registered Psychiatric Nurse (N2)	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41.640			42.472
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6,992.050			7,131.757
		Annual	71,161.740	73,646.235	76,136.775	78,732.095	81,270.995	83,904.600			85,581.080
Perioperative Nurse (N2)	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41.640			42.472
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6,992.050			7,131.757
		Annual	71,161.740	73,646.235	76,136.775	78,732.095	81,270.995	83,904.600			85,581.080
Vascular Lab/Clinic Nurse (N2)	2015	Hourly	35.316	36.549	37.785	39.073	40.333	41.640			42.472
		Monthly	5,930.145	6,137.186	6,344.731	6,561.008	6,772.583	6,992.050			7,131.757
		Annual	71,161.740	73,646.235	76,136.775	78,732.095	81,270.995	83,904.600			85,581.080
Nurse II (20 Year Scale)	2015	Hourly	36.022	37.280	38.541	39.855	41.140	42.472			
· · ·		Monthly	6,048.694	6,259.933	6,471.676	6,692.319	6,908.092	7,131.757			
		Annual	72,584.330	75,119.200	77,660.115	80,307.825	82,897.100	85,581.080			
Nurse III	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.088
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76,358,425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.320
Nurse Clinician (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.088
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.027
		Annual	73,865.870	76,358.425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.320

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Clinical Resource Nurse (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6.579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73.865.870	76.358.425	78.957.775	81.496.675	83.852.210	86.421.335	89.071.060		90.852.32
Acute Pain Service Nurse (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76,358.425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.32
Anesthesia Registration Nurse	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76,358.425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.32
Asthma Education Nurse (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76,358.425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.32
Community Dialysis Nurse (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76,358.425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.32
Diabetic Education Nurse (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76.358.425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.32
Enterostomal Therapist (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76,358.425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.32
High Risk Anaesthesia Nurse (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73.865.870	76.358.425	78.957.775	81,496,675	83.852.210	86,421,335	89.071.060		90.852.32
Ped High Risk Anesthesia Nurse (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76,358.425	78,957.775	81,496.675	83,852.210	86,421.335	89.071.060		90,852.32
Perinatal Nurse (N3)	2015	Hourly	36.658	37.895	39.185	40.445	41.614	42.889	44.204		45.08
		Monthly	6,155.489	6.363.202	6.579.815	6.791.390	6.987.684	7.201.778	7.422.588		7,571.02
		Annual	73,865.870	76,358.425	78,957.775	81,496,675	83.852.210	86,421.335	89.071.060		90,852.32
Psychiatric Emergency Nurse (N3)	2015	Hourly	36.658	37.895	39,185	40.445	41.614	42.889	44.204	-	45.08
		Monthly	6,155.489	6,363.202	6,579.815	6,791.390	6,987.684	7,201.778	7,422.588		7,571.02
		Annual	73,865.870	76,358.425	78,957.775	81,496.675	83,852.210	86,421.335	89,071.060		90,852.32
Nurse III (20 Year Scale)	2015	Hourly	37.391	38.653	39.969	41.253	42.446	43.746	45.088	-	
		Monthly	6,278.572	6,490.483	6,711.461	6,927.066	7,127.391	7,345.683	7,571.027		
		Annual	75.342.865	77.885.795	80.537.535	83,124,795	85.528.690	88,148,190	90.852.320		
lurse IV	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.50
		Monthly	6,366.728	6,602.483	6.838.406	7,095.823	7,390.516	7,676.646	7,988.971	8.314.058	8,480.29
		Annual	76,400.740	79.229.800	82,060.875	85,149.870	88,686.195	92,119.755	95,867.655	- /	101,763.54
Cerebrovascular Nurse (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.50
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.29
		Annual	76,400.740	79,229.800	82,060.875	85,149.870	88,686.195	92,119.755	95.867.655	99,768.695	
Coordinator - Bleeding Disord Prog (N4)	2015	Hourly	<u>37.916</u>	<u>39.320</u>	40.725	42.258	44.013	45.717	47.577	<u>49.513</u>	<u>50.5</u>
	20.0	Monthly	6,366.728	6,602.483	6.838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.2
		Annual	76.400.740	79,229.800	82,060.875	85,149.870	88,686.195	92.119.755	95.867.655	99,768.695	101,763.54
Coordinator - Nurseries (N4)	2015	Hourly	<u>37.916</u>	<u>39.320</u>	40.725	42.258	<u>44.013</u>	<u>45.717</u>	47.577	<u>49.513</u>	<u>50.50</u>
	2010	Monthly	6,366.728	6.602.483	6.838.406	7,095.823	7.390.516	7.676.646	7,988.971	8,314.058	8.480.29
		Annual	76.400.740	79.229.800	82,060.875	85,149.870	88,686.195	92.119.755	95.867.655	99.768.695	101,763.54
CVT Associate (N4)	2015	Hourly	37 016	30 320	<u> 40 725</u>	12 228	4/ 013	45 717	A7 577	∆ 0 512	50.50
CVT Associate (N4)	2015	Hourly Monthly	37.916 6,366.728	39.320 6,602.483	40.725 6,838.406	42.258 7,095.823	44.013 7,390.516	45.717 7,676.646	47.577 7,988.971	49.513 8,314.058	50.50 8,480.29

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Enterostomal Therapist (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
	2010	Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76.400.740	79.229.800	82.060.875	85.149.870	88.686.195	92.119.755	95.867.655	99.768.695	101.763.545
Multi-Organ Donor Coordinator (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6.366.728	6.602.483	6.838.406	7.095.823	7.390.516	7.676.646	7.988.971	8.314.058	8,480,295
		Annual	76,400.740	79,229.800	82,060.875	85,149.870	88,686.195	92,119.755	95,867.655	99,768.695	101,763.545
Nurse Educator (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400.740	79,229.800	82,060.875	85,149.870	88,686.195	92,119.755	95,867.655	99,768.695	101,763.54
Nurse Therapist (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400.740	79,229.800	82,060.875	85,149.870	88,686.195	92,119.755	95,867.655	99,768.695	101,763.545
Pain Clinic Nurse (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400.740	79,229.800	82,060.875	85,149.870	88,686,195	92,119.755	95,867.655	99,768.695	101,763.545
Planning/Systems Coordinator (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400.740	79,229.800	82,060.875	85,149.870	88,686,195	92,119.755	95,867.655	99,768.695	101,763.545
Primary Nurse Therapist 2 (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400.740	79,229.800	82,060.875	85,149.870	88,686.195	92,119.755	95,867.655	99,768.695	101,763.545
Psych Consultation Nurse (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6.838.406	7.095.823	7,390.516	7.676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400,740	79,229.800	82.060.875	85,149.870	88.686.195	92,119,755	95.867.655	99,768.695	101.763.545
Renal Transplant Coordinator (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400.740	79,229.800	82.060.875	85,149,870	88,686,195	92,119,755	95.867.655	99,768,695	101,763.545
RPN Nurse Therapist 2 (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400,740	79.229.800	82.060.875	85,149,870	88.686.195	92,119,755	95.867.655	99,768,695	101.763.545
Utilization Facilitator (N4)	2015	Hourly	37.916	39.320	40.725	42.258	44.013	45.717	47.577	49.513	50.503
		Monthly	6,366.728	6,602.483	6,838.406	7,095.823	7,390.516	7,676.646	7,988.971	8,314.058	8,480.295
		Annual	76,400,740	79.229.800	82.060.875	85.149.870	88.686.195	92.119.755	95.867.655	99.768.695	101.763.545
Nurse IV (20 Year Scale)	2015	Hourly	38.674	40.106	41.540	43.103	44.894	46.631	48.528	50.503	
		Monthly	6.494.009	6,734,466	6,975.258	7.237.712	7,538.451	7,830.122	8.148.660	8,480.295	
		Annual	77.928.110	80.813.590	83,703,100	86.852.545	90,461.410	93,961.465	97.783.920	101.763.545	
Clinical Nurse Specialist	2015	Hourly	45.614	48.961	50.974	52.985	55.155				56.258
·		Monthly	7,659.351	8,221.368	8,559.384	8,897.065	9,261.444				9,446.656
		Annual	91,912.210	98,656,415	102,712,610	106,764,775	111,137.325				113,359.870
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	46.526	49.940	51.993	54.044	56.258				
		Monthly	7,812.491	8,385.758	8,730.491	9,074.888	9,446.656				
		Annual	93.749.890	100.629.100	104.765.895	108.898.660	113.359.870				
Nurse Practitioner	2015	Hourly	45.614	48.961	50.974	52.985	55.155				56.258
		Monthly	7,659.351	8,221.368	8,559.384	8,897.065	9,261.444				9,446.656
		Annual	91.912.210	98.656.415	102.712.610	106.764.775	111.137.325				113.359.870
Nurse Practitioner (20 Year Scale)	2015	Hourly	46.526	49.940	51.993	54.044	56.258				
		Monthly	7,812.491	8,385.758	8,730.491	9,074.888	9,446.656				
		Annual	,	,	104.765.895	108.898.660	,				

Weekend Worker Rates	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Weekend Worker - Licensed Practical Nurse	2015	Hourly	31.089	32.106	33.110	34.331	35.450	36.699	38.006		38.766
		Monthly	5,220.361	5,391.133	5,559.721	5,764.747	5,952.646	6,162.374	6,381.841		6,509.458
		Annual	62,644.335	64,693.590	66,716.650	69,176.965	71,431.750	73,948.485	76,582.090		78,113.490
Weekend Worker - ORT I	2015	Hourly	31.089	32.106	33.110	34.331	35.450	36.699	38.006		38.766
		Monthly	5,220.361	5,391.133	5,559.721	5,764.747	5,952.646	6,162.374	6,381.841		6,509.458
		Annual	62,644.335	64,693.590	66,716.650	69,176.965	71,431.750	73,948.485	76,582.090		78,113.490
Weekend Worker - ORT II	2015	Hourly	33.110	34.331	35.450	36.710	37.874	39.055	40.260		41.065
		Monthly	5,559.721	5,764.747	5,952.646	6,164.221	6,359.676	6,557.985	6,760.325		6,895.498
		Annual	66,716.650	69,176.965	71,431.750	73,970.650	76,316.110	78,695.825	81,123.900		82,745.975
Weekend Worker - Nurse II	2015	Hourly	40.614	42.031	43.453	44.935	46.383	47.886			48.844
		Monthly	6,819.768	7,057.705	7,296.483	7,545.335	7,788.479	8,040.858			8,201.722
		Annual	81,837.210	84,692.465	87,557.795	90,544.025	93,461.745	96,490.290			98,420.660
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	41.426	42.872	44.322	45.833	47.311	48.844			
		Monthly	6,956.116	7,198.923	7,442.403	7,696.125	7,944.305	8,201.722			
		Annual	83,473.390	86,387.080	89,308.830	92,353.495	95,331.665	98,420.660			
Weekend Worker - Nurse III	2015	Hourly	42.157	43.579	45.063	46.511	47.856	49.322	50.834		51.851
		Monthly	7,078.863	7,317.640	7,566.829	7,809.972	8,035.820	8,281.986	8,535.876		8,706.647
		Annual	84,946.355	87,811.685	90,801.945	93,719.665	96,429.840	99,383.830	102,430.510		104,479.765
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	43.000	44.451	45.964	47.441	48.813	50.308	51.851		
		Monthly	7,220.417	7,464.064	7,718.122	7,966.135	8,196.516	8,447.552	8,706.647		
		Annual	86,645.000	89,568.765	92,617.460	95,593.615	98,358.195	101,370.620	104,479.765		
Weekend Worker - Nurse IV	2015	Hourly	43.603	45.218	46.834	48.596	50.615	52.575	54.713	56.940	58.079
		Monthly	7,321.670	7,592.856	7,864.209	8,160.078	8,499.102	8,828.219	9,187.225	9,561.175	9,752.432
		Annual	87,860.045	91,114.270	94,370.510	97,920.940	101,989.225	105,938.625	110,246.695	114,734.100	117,029.185
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	44.475	46.122	47.771	49.568	51.628	53.626	55.807	58.079	
		Monthly	7,468.094	7,744.653	8,021.547	8,323.293	8,669.202	9,004.699	9,370.925	9,752.432	
		Annual	89,617.125	92,935.830	96,258.565	99,879.520	104,030.420	108,056.390	112,451.105	117,029.185	

A6. Effective October 1, 2016			•		rket adjustmer nthly salary x		ours				
Nurse Classification	Annual Hours	liouny	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse	2015	Hourly	27.304	28.198	29.080	30.152	31.134	32.232	33.380		34.047
		Monthly	4,584.797	4,734.914	4,883.017	5,063.023	5,227.918	5,412.290	5,605.058		5,717.059
		Annual	55,017.560	56,818.970	58,596.200	60,756.280	62,735.010	64,947.480	67,260.700		68,604,705
LPN - Technician (LPN)	2015	Hourly	27.304	28.198	29.080	30.152	31.134	32.232	33.380		34.047
		Monthly	4,584.797	4,734.914	4,883.017	5,063.023	5,227.918	5,412.290	5,605.058		5,717.059
		Annual	55,017.560	56,818.970	58,596.200	60,756.280	62,735.010	64,947.480	67,260.700		68,604.705
ORT I	2015	Hourly	27.304	28.198	29.080	30.152	31.134	32.232	33.380		34.047
		Monthly	4,584.797	4,734.914	4,883.017	5,063.023	5,227.918	5,412.290	5,605.058		5,717.059
		Annual	55,017.560	56,818.970	58,596.200	60,756.280	62,735.010	64,947.480	67,260.700		68,604.705
ORT II	2015	Hourly	29.080	30.152	31.134	32.241	33.263	34.300	35.359		36.066
		Monthly	4,883.017	5,063.023	5,227.918	5,413.801	5,585.412	5,759.542	5,937.365		6,056.083
		Annual	58,596.200	60,756.280	62,735.010	64,965.615	67,024.945	69,114.500	71,248.385		72,672.990
Nurse II	2015	Hourly	35.669	36.914	38.163	39.464	40.736	42.056			42.897
		Monthly	5,989.420	6,198.476	6,408.204	6,626.663	6,840.253	7,061.903			7,203.121
		Annual	71,873.035	74,381.710	76,898.445	79,519.960	82,083.040	84,742.840			86,437.455
General Duty Nurse (N2)	2015	Hourly	35.669	36.914	38.163	39.464	40.736	42.056			42.897
		Monthly	5,989.420	6,198.476	6,408.204	6,626.663	6,840.253	7,061.903			7,203.121
		Annual	71,873.035	74.381.710	76.898.445	79.519.960	82.083.040	84.742.840			86,437.455
Research Nurse (N2)	2015	Hourly	35.669	36.914	38.163	39.464	40.736	42.056			42.897
		Monthly	5,989.420	6,198.476	6,408.204	6.626.663	6,840.253	7,061.903			7,203.121
		Annual	71.873.035	74.381.710	76.898.445	79.519.960	82.083.040	84.742.840			86.437.455
Allergy/Immunology Nurse (N2)	2015	Hourly	35.669	36.914	38.163	39,464	40.736	42.056			42.897
,	20.0	Monthly	5,989.420	6,198.476	6,408.204	6,626.663	6,840.253	7,061.903			7,203.121
		Annual	71.873.035	74.381.710	76.898.445	79.519.960	82.083.040	84.742.840			86.437.455
Transplant Clinic Nurse (N2)	2015	Hourly	35.669	36.914	38.163	39.464	40.736	42.056			42.897
	20.0	Monthly	5,989.420	6,198.476	6,408.204	6,626.663	6,840.253	7,061.903			7,203.121
		Annual	71.873.035	74.381.710	76.898.445	79.519.960	82.083.040	84.742.840			86.437.455
Registered Psychiatric Nurse (N2)	2015	Hourly	35.669	36.914	38.163	39.464	40.736	42.056			42.897
	2010	Monthly	5,989.420	6,198.476	6,408.204	6,626.663	6,840.253	7,061.903			7,203.121
		Annual	71,873.035	74,381.710	76,898.445	79,519.960	82,083.040	84,742.840			86,437.455
Perioperative Nurse (N2)	2015	Hourly	<u>35.669</u>	36.914	38.163	<u>39.464</u>	40.736	42.056			42.897
	2010	Monthly	5,989.420	6,198.476	6,408.204	6,626.663	6,840.253	7,061.903			7,203.121
		Annual	71,873.035	74,381.710	76,898.445	79,519.960	82,083.040	84,742.840			86,437.455
Vascular Lab/Clinic Nurse (N2)	2015	Hourly	<u>35.669</u>	36.914	38.163	<u>39.464</u>	40.736	42.056			42.897
	2010	Monthly	5,989.420	6,198.476	6,408.204	6,626.663	6,840.253	7,061.903			7,203.121
		Annual	71,873.035	74,381.710	76,898.445	79,519.960	82,083.040	84,742.840			86,437.455
Nurse II (20 Year Scale)	2015	Hourly	36.383	37.652	<u>38.926</u>	40.254	<u>41.551</u>	<u>42.897</u>			00,407,400
	2010	Monthly	6,109.312	6,322.398	6,536.324	6,759.318	6,977.105	7,203.121			
		Annual	73,311.745	75.868.780	78.435.890	81.111.810	83.725.265	86.437.455			
Nurse III	2015	Hourly	<u>37.025</u>	<u>38.274</u>	<u>39.577</u>	<u>40.849</u>	<u>42.030</u>	<u>43.317</u>	44.646		45.539
	2010	Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
		Annual	74,605.375	77.122.110	79.747.655	82.310.735	84.690.450	87.283.755	7,490.000 89.961.690		91.761.085
Nurse Clinician (N3)	2015	Hourly	<u>37.025</u>	<u>38.274</u>	<u>19,147.055</u> 39.577	<u>40.849</u>	<u>42.030</u>	<u>43.317</u>	<u>44.646</u>		<u>45.539</u>
	2013	Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
		Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	7,490.000 89.961.690		91,761.085
		Annual	14,000.375	11,122.110	19,141.055	02,310.135	04,090.450	01,203.155	09,901.090		91,701.08

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Clinical Resource Nurse (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.539
	2010	Monthly	6,217.115	6,426.843	6.645.638	6.859.228	7,057.538	7.273.646	7.496.808		7,646.757
		Annual	74,605.375	77.122.110	79,747.655	82.310.735	84.690.450	87.283.755	89.961.690		91,761.08
Acute Pain Service Nurse (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.53
		Monthly	6,217.115	6,426.843	6.645.638	6,859.228	7,057.538	7,273.646	7,496.808		7.646.75
		Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	89,961.690		91,761.08
Anesthesia Registration Nurse	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.539
		Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.75
		Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	89,961.690		91,761.08
Asthma Education Nurse (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.53
\ - /		Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
		Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	89,961.690		91,761.08
Community Dialysis Nurse (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.539
		Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
		Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	89,961.690		91,761.08
Diabetic Education Nurse (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.539
		Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
		Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	89,961.690		91,761.08
Enterostomal Therapist (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.539
		Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
		Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	89,961.690		91,761.08
High Risk Anaesthesia Nurse (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.53
		Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
		Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	89,961.690		91,761.085
Ped High Risk Anesthesia Nurse (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.539
		Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
	0045	Annual	74,605.375	77,122.110	79,747.655	82,310.735	84,690.450	87,283.755	89,961.690		91,761.085
Perinatal Nurse (N3)	2015	Hourly	37.025	38.274	39.577	40.849	42.030	43.317	44.646		45.539
		Monthly	6,217.115	6,426.843	6,645.638	6,859.228	7,057.538	7,273.646	7,496.808		7,646.757
Psychiatric Emergency Nurse (N3)	2015	Annual Hourly	74.605.375 37.025	77,122.110 38.274	<u>79,747.655</u> 39.577	82,310.735 40.849	84,690.450 42.030	87,283.755 43.317	<u>89,961.690</u> 44.646		91,761.085 45.539
Psychiatric Emergency Nurse (NS)	2015	Monthly									
		Annual	6,217.115 74.605.375	6,426.843 77.122.110	6,645.638 79.747.655	6,859.228 82.310.735	7,057.538 84.690.450	7,273.646 87.283.755	7,496.808 89.961.690		7,646.757 91.761.085
Nurse III (20 Year Scale)	2015	Hourly	<u>37.765</u>	<u>39.039</u>	<u>40,368</u>	<u>62,510.755</u> 41,666	<u>42.870</u>	<u>44.184</u>	45.539		91,701.005
Nulse III (20 fear Scale)	2015	Monthly	6,341.373	6,555.299	6,778.460	6,996.416	7,198.588	7,419.230	7,646.757		
		Annual	76.096.475	78.663.585	81.341.520	83.956.990	86.383.050	89.030.760	91.761.085		
Nurse IV	2015	Hourly	<u>38.295</u>	<u>39.713</u>	<u>41.133</u>	<u>42.680</u>	<u>44.454</u>	<u>46.174</u>	48.052	50.008	51.008
NUISEIV	2015	Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77.164.425	80.021.695	82.882.995	86.000.200	89,574.810	93.040.610	96.824.780	100,766.120	,
Cerebrovascular Nurse (N4)	2015	Hourly	<u>38.295</u>	<u>39.713</u>	41.133	42.680	<u>44.454</u>	<u>46.174</u>	48.052	<u>50.008</u>	<u>51.008</u>
	2010	Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77,164.425	80,021.695	82.882.995	86,000.200	89,574.810	93,040.610	96,824.780	100,766.120	102,781.120
Coordinator - Bleeding Disord Prog (N4)	2015	Hourly	38.295	<u>39.713</u>	41.133	42.680	<u>44.454</u>	<u>46.174</u>	48.052	50.008	<u>51.008</u>
	2010	Monthly	6,430.369	6,668.475	6.906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77,164.425	80,021.695	82,882.995	86,000.200	89,574.810	93,040.610	96,824.780	100,766.120	102,781.120
Coordinator - Nurseries (N4)	2015	Hourly	38.295	39.713	41.133	42.680	44.454	46.174	48.052	50.008	51.00
		Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77,164.425	80.021.695	82,882.995	86,000.200	89,574.810	93,040.610	96,824.780	100,766.120	-,
CVT Associate (N4)	2015	Hourly	38.295	39.713	41.133	42.680	44.454	46.174	48.052	50.008	51.00
		Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77.164.425	80.021.695	82.882.995	86.000.200	89.574.810	93.040.610	96.824.780	100.766.120	,

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Enterostomal Therapist (N4)	2015	Hourly	38,295	39.713	41.133	42.680	44.454	46.174	48.052	50.008	51.008
	2010	Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77.164.425	80.021.695	82 882 995	86.000.200	89.574.810	93.040.610	96.824.780	100.766.120	102.781.120
Multi-Organ Donor Coordinator (N4)	2015	Hourly	38.295	39.713	41.133	42.680	44.454	46.174	48.052	50.008	51.008
		Monthly	6,430.369	6.668.475	6.906.916	7.166.683	7,464.568	7,753,384	8.068.732	8,397.177	8.565.093
		Annual	77,164.425	80,021.695	82.882.995	86,000.200	89,574.810	93,040.610	96,824.780	100,766.120	102,781.120
Nurse Educator (N4)	2015	Hourly	38.295	39.713	41.133	42.680	44.454	46.174	48.052	50.008	51.008
		Monthly	6,430.369	6.668.475	6.906.916	7.166.683	7.464.568	7,753,384	8.068.732	8,397.177	8.565.093
		Annual	77,164.425	80,021.695	82.882.995	86,000.200	89.574.810	93,040.610	96.824.780	100,766.120	102,781.120
Nurse Therapist (N4)	2015	Hourly	38.295	39.713	41.133	42.680	44.454	46.174	48.052	50.008	51.008
		Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77.164.425	80.021.695	82.882.995	86,000.200	89.574.810	93.040.610	96.824.780	100.766.120	102.781.120
Pain Clinic Nurse (N4)	2015	Hourly	38.295	39.713	41.133	42.680	44.454	46.174	48.052	50.008	51.008
		Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77.164.425	80.021.695	82.882.995	86.000.200	89.574.810	93.040.610	96.824.780	100.766.120	102,781.120
Planning/Systems Coordinator (N4)	2015	Hourly	38.295	39.713	41.133	42.680	44.454	<u>46.174</u>	48.052	50.008	<u>51.008</u>
	2010	Monthly	6.430.369	6.668.475	6.906.916	7.166.683	7.464.568	7.753.384	8.068.732	8,397.177	8.565.093
		Annual	77,164.425	80,021.695	82,882.995	86,000.200	89,574.810	93,040.610	96,824.780	100,766.120	102,781.120
Primary Nurse Therapist 2 (N4)	2015	Hourly	38.295	<u>39.713</u>	<u>41.133</u>	<u>42.680</u>	<u>44.454</u>	<u>46.174</u>	<u>48.052</u>	<u>50.008</u>	<u>51.008</u>
	2010	Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77.164.425	80.021.695	82.882.995	86.000.200	89.574.810	93,040.610	96.824.780	100,766.120	102.781.120
Psych Consultation Nurse (N4)	2015	Hourly	<u>38.295</u>	<u>39.713</u>	<u>41.133</u>	42.680	<u>44.454</u>	<u>46.174</u>	<u>48.052</u>	<u>50.008</u>	<u>51.008</u>
	2015	Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
		Annual	77.164.425	80.021.695	82.882.995	86.000.200	89.574.810	93.040.610	96.824.780	100.766.120	102,781.120
Renal Transplant Coordinator (N4)	2015	Hourly	<u>38.295</u>	<u>39.713</u>	41.133	42.680	<u>44.454</u>	<u>46.174</u>	<u>48.052</u>	<u>50.008</u>	<u>51.008</u>
	2015	Monthly	6,430.369	6.668.475	6.906.916	7.166.683	7.464.568	7.753.384	8.068.732	8,397.177	8,565.093
		1	77,164.425	80,021.695	82.882.995	86,000.200	89,574.810	93,040.610	96,824.780	100,766.120	0,505.093 102,781.120
RPN Nurse Therapist 2 (N4)	2015	Annual Hourly	<u>77,104.425</u> 38.295	<u>39.713</u>	<u>02,002.995</u> 41,133	<u>42.680</u>	<u>44,454</u>	<u>93,040.610</u> 46.174	<u>90,024.760</u> 48.052	<u>100,766.120</u> 50.008	<u>102,761,120</u> 51,008
REN NUISE I HEIAPISI 2 (N4)	2015			6,668.475	6,906.916	7,166.683	7,464.568		46.032 8,068.732	8,397.177	8,565.093
		Monthly	6,430.369 77.164.425	6,000.475 80.021.695	6,906.916 82.882.995	86.000.200	7,404.500 89.574.810	7,753.384 93.040.610	96.824.780	0,397.177	0,505.093 102.781.120
Litilization Facilitator (NIA)	2015	Annual	<u>77,104.425</u> 38,295	<u>39.713</u>	<u>02,002.995</u> 41,133	<u>42.680</u>	<u>09,574.610</u> 44,454	<u>93,040.610</u> 46,174	<u>90,024.760</u> 48.052	<u>100,766.120</u> 50.008	<u>102,761.120</u> 51.008
Utilization Facilitator (N4)	2015	Hourly									
		Monthly	6,430.369	6,668.475	6,906.916	7,166.683	7,464.568	7,753.384	8,068.732	8,397.177	8,565.093
Nurse N/ (20 Year Coole)	2015	Annual	77,164.425	80,021.695	82,882.995	86,000.200	89,574.810	93,040.610	96,824.780	100,766.120	102,781.120
Nurse IV (20 Year Scale)	2015	Hourly	39.061	40.507	41.955	43.534	45.343	47.098	49.013	51.008	
		Monthly	6,558.993	6,801.800	7,044.944	7,310.084	7,613.845	7,908.539	8,230.100	8,565.093	
Clinical Nurse Specialist	2015	Annual	78,707.915	81,621.605	84.539.325	87,721.010	91,366.145	94,902.470	98,761.195	102,781.120	56.821
	2015	Hourly	46.070	49.450	51.484 8.645.022	53.515	55.707				9.541.193
		Monthly	7,735.921	8,303.479	- /	8,986.060	9,354.134				- ,
Clinical Nurse Specialist (20 Year Scale)	2015	Annual	92,831.050	99,641.750 50,439	<u>103,740.260</u> 52,513		112,249.605				114,494.315
	2015	Hourly	46.991			54.585	56.821				
		Monthly	7,890.572	8,469.549	8,817.808	9,165.731	9,541.193				
Nurse Practitioner	2045	Annual	94,686.865	101.634.585	105,813.695	109,988.775	114,494.315				50.004
	2015	Hourly	46.070	49.450	51.484	53.515	55.707				56.821
		Monthly	7,735.921	8,303.479	8,645.022	8,986.060	9,354.134				9,541.193
		Annual	92.831.050	99.641.750	103.740.260		112.249.605				114.494.315
Nurse Practitioner (20 Year Scale)	2015	Hourly	46.991	50.439	52.513	54.585	56.821				
		Monthly	7,890.572	8,469.549	8,817.808	9,165.731	9,541.193				
		Annual	94.686.865	101.634.585	105.813.695	109.988.775	114,494,315				

Weekend Worker Rates	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Weekend Worker - Licensed Practical Nurse	2015	Hourly	31.400	32.428	33.442	34.674	35.805	37.066	38.386		39.154
		Monthly	5,272.583	5,445.202	5,615.469	5,822.343	6,012.256	6,223.999	6,445.649		6,574.609
		Annual	63,271.000	65,342.420	67,385.630	69,868.110	72,147.075	74,687.990	77,347.790		78,895.310
Weekend Worker - ORT I	2015	Hourly	31.400	32.428	33.442	34.674	35.805	37.066	38.386		39.154
		Monthly	5,272.583	5,445.202	5,615.469	5,822.343	6,012.256	6,223.999	6,445.649		6,574.609
		Annual	63,271.000	65,342.420	67,385.630	69,868.110	72,147.075	74,687.990	77,347.790		78,895.310
Weekend Worker - ORT II	2015	Hourly	33.442	34.674	35.805	37.077	38.252	39.445	40.662		41.476
		Monthly	5,615.469	5,822.343	6,012.256	6,225.846	6,423.148	6,623.473	6,827.828		6,964.512
		Annual	67,385.630	69,868.110	72,147.075	74,710.155	77,077.780	79,481.675	81,933.930		83,574.140
Weekend Worker - Nurse II	2015	Hourly	41.020	42.451	43.887	45.384	46.847	48.365			49.332
		Monthly	6,887.942	7,128.230	7,369.359	7,620.730	7,866.392	8,121.290			8,283.665
		Annual	82,655.300	85,538.765	88,432.305	91,448.760	94,396.705	97,455.475			99,403.980
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	41.840	43.300	44.765	46.292	47.784	49.332			
		Monthly	7,025.633	7,270.792	7,516.790	7,773.198	8,023.730	8,283.665			
		Annual	84,307.600	87,249.500	90,201.475	93,278.380	96,284.760	99,403.980			
Weekend Worker - Nurse III	2015	Hourly	42.579	44.015	45.513	46.976	48.334	49.815	51.343		52.370
		Monthly	7,149.724	7,390.852	7,642.391	7,888.053	8,116.084	8,364.769	8,621.345		8,793.796
		Annual	85,796.685	88,690.225	91,708.695	94,656.640	97,393.010	100,377.225	103,456.145		105,525.550
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	43.430	44.895	46.424	47.916	49.301	50.811	52.370		
		Monthly	7,292.621	7,538.619	7,795.363	8,045.895	8,278.460	8,532.014	8,793.796		
		Annual	87,511.450	90,463.425	93,544.360	96,550.740	99,341.515	102,384.165	105,525.550		
Weekend Worker - Nurse IV	2015	Hourly	44.039	45.670	47.302	49.082	51.122	53.100	55.260	57.509	58.659
		Monthly	7,394.882	7,668.754	7,942.794	8,241.686	8,584.236	8,916.375	9,279.075	9,656.720	9,849.824
		Annual	88,738.585	92,025.050	95,313.530	98,900.230	103,010.830	106,996.500	111,348.900	115,880.635	118,197.885
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	44.920	46.583	48.248	50.064	52.144	54.162	56.365	58.659	
		Monthly	7,542.817	7,822.062	8,101.643	8,406.580	8,755.847	9,094.703	9,464.623	9,849.824	
		Annual	90,513.800	93,864.745	97,219.720	100,878.960	105,070.160	109,136.430	113,575.475	118,197.885	

APPENDIX "B" – ACADEMIC ALLOWANCE

The non-cumulative additional rates of pay hereinafter set forth shall be paid to a nurse for academic attainments herein set forth:

(a) Upon completion of an approved clinical course/program, or CNA Certification in a nursing specialty, or an approved course in Gerontology, or the Nursing Unit Administration Course, or a Registered Nurse with a Registered Psychiatric Nurse Diploma, or an approved midwifery course, or an Operating Room Technician course in addition to a Licensed Practical Nurse Certificate or Registered Nurse Diploma, or the Adult Education Certificate, or an Occupational Health Nursing course, or the University Certificate in Nursing (one year course also called University Diploma in Nursing), or a Baccalaureate Degree in Arts or Science from a recognized university, (or the equivalent), provided such degree (or the equivalent) is relevant to the position held by the nurse:

\$0.298 per hour for all paid hours

(b) For a Baccalaureate Degree in Nursing, or a Baccalaureate Degree in Psychiatric Nursing, or a Baccalaureate Degree in Science-Mental Health, or a University Certificate in Nursing, as described in (a) above, in addition to a Baccalaureate Degree in Arts or Science, or the equivalent in the opinion of the Employer:

\$0.596 per hour for all paid hours

(c) For a Master's Degree in Nursing from a recognized university, or the equivalent in the opinion of the Employer:

\$0.893 per hour for all paid hours

- NOTE: Nurses, as at April 17, 2002, receiving academic allowances in excess of the above specified amounts shall continue to be paid at the higher rate.
- NOTE: Nurses, as at April 17, 2002, receiving academic allowances for courses/ degrees/certificates not listed above shall continue to receive Academic Allowances for these courses/degrees/certificates.

APPENDIX "C" – OCCUPATIONAL CLASSIFICATIONS

- **C.1** Occupational classifications are as follows:
- **L.P.N**. -- is a nurse entitled to practice as a Licensed Practical Nurse under the Licensed Practical Nurses' Act of Manitoba.
- **NURSE II** -- is a Registered Nurse/Registered Psychiatric Nurse employed in a general duty position or its equivalent.

NURSE III --

- (a) is a Registered Nurse/Registered Psychiatric Nurse who is permanently assigned responsibility for the nursing activities of a group of nursing staff on a ward or unit and who may assume designated duties of a Manager in her/his absence.
- (b) is a Registered Nurse/Registered Psychiatric Nurse in a position of equivalent responsibility as determined by the Employer.

NURSE IV –

- (a) A Nurse Educator is a Registered Nurse/Registered Psychiatric Nurse in a position of equivalent responsibility as determined by the Employer.
- (b) is a Registered Nurse/Registered Psychiatric Nurse in a position of equivalent responsibility as determined by the Employer.
- CLINICAL NURSE SPECIALIST -- is a Registered Nurse with academic preparation at the Master's level (nursing science), possessing expertise in a clinical nursing speciality, and who is assigned to a position designated by the Employer as Clinical Nurse Specialist.
- **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.
- **OPERATING ROOM TECHNICIAN I** -- is a nurse who has graduated from a formal course in Operating Room Technology approved by the Employer.
- **OPERATING ROOM TECHNICIAN II** -- is a nurse who has graduated from a formal Operating Room Technology course approved by the Employer, with additional responsibilities for evaluating and orientating Operating Room Technicians.

MEMORANDA OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

1. Re: Ratification of Collective Agreement

The ratification date of the current Collective Agreement occurred on April 30, 2014.

2. Re: Representative Workforce

The parties understand that Aboriginal persons are significantly underrepresented in the health care labour force and that additional actions are needed to promote and facilitate employment of Aboriginal persons in health care occupations at all levels. It is therefore mutually agreed that the undersigned parties will work in cooperation to:

- (a) Develop strategic initiatives and programs that:
 - Foster mutual respect, trust, fairness, open communication and understanding;
 - Focus on recruiting, training and career development of Aboriginal workers;
 - Identify workplace barriers that may be discouraging or preventing Aboriginal workers from entering and remaining in the workforce;
 - Facilitate constructive race and cultural relations;
- (b) Promote and publicize initiatives undertaken to encourage, facilitate and support the development of a representative workforce;
- (c) Implement education opportunities for all employees to promote cultural awareness of Aboriginal peoples. This will include enhanced orientation sessions for new employees to ensure better understanding of respectful work practices to achieve a harassment free environment.

3. Re: Manitoba Health Premiums - Not Applicable @ Health Sciences Centre #10 - left blank to be consistent with MNU "Standard" numbering

4. Re: Amnesty From Provincial Wage/Hours Of Work Reduction Legislation

The Employer will not exercise any right it may receive through legislation which enables the Employer to unilaterally reduce the wages specified in the Collective Agreement or the hours of work specified in the Collective Agreement during the life of this Collective Agreement.

5. Re: Shifts of Less than 7.75 Hours

The Employer and the Union mutually agree that the following conditions shall apply to shifts of less than seven and three-quarter (7.75) hours. It is agreed that there shall be no scheduled shifts of less than four (4.0) hours.

- 1. The terms and conditions of the Collective Agreement shall apply to part-time nurses working shifts of less than seven and three-quarter (7.75) hours except as otherwise stated hereinafter.
- 2. The Employer shall notify the Union in writing of its intent to introduce a shift of less than seven and three-quarter (7.75) hours. This notice shall include reasons for the introduction of this shift. The Employer and the Union shall meet within fourteen (14) days to discuss the introduction of the shift and the feasibility of available alternatives to same. If there are no mutually acceptable alternatives, then the following shall apply.
- 3. The Employer shall post all vacant, term or new positions which will include scheduled shifts of less than seven and three-quarter (7.75) hours. Such posting(s) shall specify the shift length(s) for the particular position.
- 4. Shifts of four (4.0) to five (5.0) paid hours shall include one (1) fifteen (15) minute rest period. Shifts of greater than five (5.0) paid hours but less than seven (7.0) paid hours shall include one (1) fifteen (15) minute rest period and exclude one (1) thirty (30) minute unpaid meal period. For shifts of seven (7.0) paid hours to seven and three-quarter (7.75) paid hours rest and meal periods to be the same as per current agreements Article 14 for the "normal" seven and three-quarter (7.75) hour shift.
- 5. In the event that a nurse working such a shift agrees to remain at work beyond the end of her/his scheduled shift, she/he shall be paid for all hours worked beyond the shift at her/his basic salary up to seven and three-quarter (7.75) hours. Overtime rates of pay shall be applicable to time worked in excess of seven and three-quarter (7.75) hours, such time to have been authorized in such manner and by such person as may be directed by the Employer.
- 6. If a part-time nurse agrees to work an additional available shift, as referenced in 3402, she/he shall be paid for those hours at her/his basic salary unless the part-time nurse has already worked in that day, in which case overtime rates of pay shall apply.

7. No nurse shall be scheduled to work more than one (1) shift of less than seven and three-quarter (7.75) hours in any one (1) day.

6. Re: Agency Nurses

The Employer commits to making every reasonable effort to minimize to the greatest degree possible the use of nurses employed by outside agencies ("agency nurses") to fill occasional available shifts.

The Employer affirms its commitment that such shifts, including those which result from not filling term or permanent positions for a period of time, will be offered first to facility nurses in accordance with the provisions of the collective agreement. Only when nurses at the facility are not available, will the facility resort to seeking assistance from outside agencies.

The Employer further agrees to meet with the Union on a quarterly basis to review trends and data (number of agency nurses used, reasons for use and process management used to attempt to obtain facility nurses) and explore alternatives to minimize the use of agency nurses to the greatest degree possible.

7. Re: Group Benefit Plans

The Employer (on behalf of those nurses newly employed, or nurses previously participating in the former MHO benefit plans, or any other nurses who may subsequently join the plans through the Collective Bargaining process) and the Union agree to participate in the Jointly Trusteed Benefit Plans in accordance with the Benefit Trust document established between the parties in 1998. This agreement shall be in accordance with the Collective Agreement, and in accordance with the Trust agreement and the plan texts established by the Board of Trustees of the Healthcare Employees Benefits board (HEBP). This shall include the Group Dental Plan, the Group Life Plan, Group Extended Health Plan, D & R Plan. The newly Jointly Trusteed Plans shall be successor to the former MHO plans.

The parties agree that the plans' assets, liabilities and surplus will be transferred to the new Trust. The contribution rates schedule are indicated in the Collective Agreement of plan text and may only be amended by a process outlined in the Trust or through collective bargaining.

8. Re: Pensions [Participation in Jointly Trusteed Pension Plan (HEPP)]

- (i) The parties agree to participate in the Health Care Employees' Pension Plan Manitoba (HEPP) in accordance with its terms and conditions including an established contributions rate as set out in the HEPP Trust Agreement, HEPP Pension Plan text and other applicable written policies and guidelines.
- (ii) Any disputes with respect to the level of pension entitlement shall not be subject to the grievance and arbitration procedure under this agreement but shall be subject to adjudication in accordance with the terms of HEPP.
- (iii) In the event that the contributions required by the HEPP Plan text are not sufficient to fund the necessary pension benefits, the parties to this agreement shall meet forthwith to determine an appropriate funding mechanism. The contribution rate may only be amended by the process outlined in the Pension Plan text or through collective bargaining.
- (iv) Employer and employee contribution rates for the HealthCare Employees' Pension Plan Manitoba (HEPP) to be increased as follows:
 - January 1, 2011 Employer contribution rate to increase by 1.0% (Employer portion 0.5% and employee portion 0.5%)
 - April 1, 2012 Employee contribution rate to increase by 0.8% (Employer portion 0.4% and employee portion 0.4%)
 - April 1, 2013
 - Employer contribution rate to increase by 0.1% resulting in an overall contribution rate increase of 1.1%
 - Employee contribution rate to increase by 0.3% resulting in an overall contribution rate increase of 1.1%.
 - (resulting in the new rates of 7.9% up to YMPE and 9.5% for earnings in excess of YMPE)

9. Re: Employment Security

Whereas, the Employer is concerned with its employees employment security, and

Whereas, the Union is concerned with its members employment security, and

Whereas, within the Province of Manitoba health care reform continues to be explored, and

Whereas, there may be a need to examine the delivery of health care within the facility, and

Whereas, there may be a need to examine the current complement of nursing staff:

- 1. It will be incumbent upon the Employer to notify the Union, in writing, at least ninety (90) days prior to any alteration in the delivery of health care and/or in the current complement of nursing staff.
- 2. If it becomes necessary to reduce the staffing complement, all avenues relevant to the issue of employment security for the nurses will be examined and discussed between the Employer and the Union, no later than twenty (20) days after the above.
- 3. The Employer and the Union agree to meet to develop the process for the planned reductions within five (5) days after the above.
- 4. The Employer will, wherever reasonably possible, carry out these reductions by way of attrition.
- 5. In keeping with the Employer's commitment to ensure that any affected nurse shall retain employment with the Employer, and where reductions cannot be dealt with through attrition, Article 2707 shall apply. Should the nurse choose to not exercise seniority rights under Article 2707, then layoff in accordance with Article 27 shall apply.
- 6. In the event of #5 above occurring or in the event of the closure of a facility, and in conjunction with #7 below, the Employer will make every reasonable effort to achieve necessary funding for retraining and redeployment of nurses.
- 7. The Employer will also cooperate with other facilities, with the Labour Relations Secretariat, and/or the Government of Manitoba, to participate in the establishment of a broader redeployment and retraining effort.

[This memo applies in all instances where employment security is an issue, except in cases related to 2403 paragraphs two (2) and three (3).]

10. Re: Group Registered Retirement Savings Plan

The Employers and the Union mutually agree to work towards creation of a Group Registered Retirement Savings Plan (GRRSP) by January 1, 2003. Such plan shall provide for payroll deduction, and each nurse shall be responsible for determining her/his own available RRSP contribution under federal law.

11. Re: Joint Nursing Council

- 1. There shall be a Council which shall be known as "The Joint Nursing Council" and shall consist of six (6) members of whom:
 - (a) One shall be the Minister of Health or designate;
 - (b) One shall be appointed by the Executive Council of the Government of Manitoba;
 - (c) One shall be appointed by the Regional Health Authorities of Manitoba;
 - (d) Three shall be appointed by the Manitoba Nurses' Union
- 2. The Joint Nursing Council shall be chaired by the Minister of Health or designate.
- 3. The Joint Nursing Council shall meet at such times as it may determine, and at such other times as may be determined by the Chairperson, in consultation with the members.
- 4. The Joint Nursing Council shall consult on any suggestions or requests made by members of the Council concerning:
 - (a) Working conditions and work-life issues;
 - (b) Recruitment and retention of nurses;
 - (c) Any other issue considered to improve patient care and contribute to the efficient management of the health care system.
- 5. The Joint Nursing Council shall endeavour to promote and maintain good will between Employers and the Manitoba Nurses' Union, and encourage free and frank discussion of all problems, with a view to reaching mutually acceptable resolutions.

12. Re: Buyback of Pension:

Pre-retirement pay may be utilized to directly fund the buyback of pension service in accordance with Revenue Canada limits and restrictions. Contributions for this purpose must also conform to the Healthcare Employees Pension Plan (HEPP) Trust Agreement, HEPP Plan Text, and other applicable written HEPP policies and guidelines.

13. Re: Article 501

The Employer and the Union mutually agree that the Employer will provide the following information regarding Manitoba Nurses' Union members to the Manitoba Nurses' Union along with each monthly dues deduction list or special assessment deduction list:

- First Name
- (Middle Name)
- Last Name
- Amount of dues deducted

Annually, upon written request, a list including the name, address and telephone number of each nurse currently in the bargaining unit shall be sent to the Union. This information may only be used by the Union for the purpose of communicating with its members.

The Union commits to have in place reasonable administrative and physical safeguards to ensure the confidentiality and security of this information in accordance with F.I.P.P.A.

14. Re: Participation in PHCLA/Redeployment

All facilities except St. Amant Centre will agree to participate in the Provincial Health Care Labour Adjustment/Redeployment Program. Letter of Agreement for new participants to be appended to the collective agreement.

LETTER OF UNDERSTANDING

ON REDEPLOYMENT PRINCIPLES

1. PURPOSE:

- 1.01 The parties agree to work to develop employment security strategies to reduce the negative impact on employees affected by the restructuring of the health services system. The parties agree to strive towards consistency and timeliness in implementing this Letter of Understanding.
- 1.02 It is agreed by the parties that this Letter of Understanding shall work in concert with the provisions of the applicable Collective Agreements of the unions involved and shall be supplementary to same.
- 1.03 All terms and conditions of Collective Agreements and personnel policies and procedures of the receiving facility shall apply to the incoming employee except those terms and conditions of the Collective Agreement that have been abridged by this Letter of Understanding.

- 1.04 This Letter of Understanding governs the movement of laid-off employees and/or the movement of positions between bargaining units of the abovementioned unions and employers.
- 1.05 For the purposes of this Letter of Understanding "receiving agreement(s)" shall mean the Collective Agreement applicable to the certified bargaining unit which is the recipient of transferred positions/employees. Conversely, the "sending agreement(s)" shall mean the Collective Agreement applicable to the certified bargaining unit where the position/employee originated.
- 1.06 All particulars of job opportunities at receiving facilities will be made available to the unions as they become known to the above-mentioned employers.
- 1.07 "Central Redeployment List" means a list of employees who have been laid-off from a participating employer. Those on this list may apply for and receive preferential consideration for new and vacant in-scope positions at another participating employer, as set out in 4.02 herein.

Manitoba Council of Health Care Unions (MCHCU) will be provided with a copy of the Central Redeployment List, with an updated list provided on a continuing basis.

1.08 "Provincial Health Care Labour Adjustment Committee" (hereinafter referred to as the "Committee") refers to the committee established by an agreement commencing January 20, 1993 between The Government of Canada, The Government of Manitoba, Labour Relations Secretariat and Manitoba Council of Health Care Unions.

2. SENIORITY:

- 2.01 Employees shall accumulate seniority according to the terms of the applicable Collective Agreement.
- 2.02 Employees without a Collective Agreement shall not have seniority rights.
- 2.03 Transfer of Seniority The affected employer(s) and affected union(s) shall meet to determine any provisions for a transfer of seniority between bargaining units.

3. TRIAL PERIOD:

3.01 Employees who move to a new bargaining unit/employer may be required to serve a trial period in accordance with the Collective Agreement in the receiving facility. If unsuccessful in the trial period, the employee shall return to the Central Redeployment List and to the recall list of the sending employer.

4. NEW AND VACANT POSITIONS:

- 4.01 All new and vacant in-scope positions shall be filled in accordance with the terms of the Collective Agreement and that bargaining unit, unless otherwise mutually agreed between affected employers and affected bargaining units/unions.
- 4.02 When a new or vacant in-scope position is not filled by an internal employee as specified in 4.01, the receiving facility within a region, as defined in Appendix VII, shall give preferential consideration to qualified applicants from the same region who are on the Central Redeployment List.

If there are no applicants/no qualified applicants from the same region, the receiving facility shall provide preferential consideration to qualified applicants from other regions who are on the Central Redeployment List.

The following provisions shall apply in filling the vacancy:

- Employees on the Central Redeployment List shall be listed in order of seniority [as per "sending" Collective Agreement(s)];
- (b) subject to 4.01, selection shall be made from applicants on the Central Redeployment List as described above. Copies of the abovementioned new or vacant in-scope position postings will be sent as they occur to the MCHCU and participating employers (process to be established);
- (c) seniority shall be applicable to the selection in accordance with the receiving Collective Agreement;
- (d) in assessing an employee's history only formally documented material contained in the employee's personnel file will be considered;
- (e) receiving facilities job description applies vis-a-vis qualification requirements;
- (f) Once an employee has been permanently redeployed and has completed the trial period with a receiving employer, she/he shall relinquish any recall rights to her/his former employer unless she/he is laid off from the receiving employer. Should an employee be laid off from the receiving employer, she/he will be placed back on the recall list with the sending employer for the balance of time she/he would have been on the recall list. She/he will also have recall rights in accordance with the Collective Agreement of the receiving employer and be placed back on the Central Redeployment List. For the purposes of the Central Redeployment List, an employee's seniority shall be the cumulative seniority from the original sending employer.

5. TRANSFER OF SERVICE/MERGER/AMALGAMATION:

5.01 In the event of a transfer(s) of service/merger/amalgamation, the affected employer(s) and unions shall meet to determine whether employees should have the opportunity to move with the service or department to the receiving facility, to the extent that such positions are available.

6. **PORTABILITY OF BENEFITS**:

The following benefits are portable:

- 6.01 Accumulated income protection benefits/sick leave credits.
- 6.02 Length of employment applicable to rate at which vacation is earned.
- 6.03 Length of employment applicable to pre-retirement leave. NOTE: Deer Lodge Centre limits payment of pre-retirement leave to service acquired since April 1, 1983. Incoming employees would retain original service date for this purpose.
- 6.04 Length of employment for the purpose of qualifying to join benefit plans, e.g., two (2) year pension requirement.
- 6.05 Benefits An incoming employee is subject to the terms and conditions of the receiving facilities benefit plans, however, normal waiting periods would be waived, subject to the applicable benefit plans' terms and conditions.
- 6.06 Salary Treatments -
 - (a) If range is identical, then placed step-on-step;
 - (b) If the range is not identical, then placement will be at a step on the range which is closest (higher or lower) to the employee's salary at the time of layoff.

NOTE: No red-circling provision except for Deer Lodge Centre employees who were guaranteed provisions as contained in the "Transfer Agreements" for the 1983 and 1987 transfer from federal to provincial jurisdiction and for whom the red circling provisions were in place prior to the inception of this Letter of Understanding.

6.07 Upon hire of an employee from the Central Redeployment List, the receiving employer agrees to confirm in writing to the employee all benefits, including seniority where applicable, which were transferred from the sending employer under this Letter of Understanding.

7. OTHER CONDITIONS:

7.01 Hours of service since last increment is not portable for purposes of calculating next increment, if applicable.

- 7.02 Salary and vacation earned to date to be paid out by sending employer.
- 7.03 Banked time including overtime bank, stat bank, to be paid out by sending employer.

8. TRAINING:

8.01 The parties agree that provisions for training will be dealt with by the Committee.

9. ADMISSION OF NEW MEMBERS:

9.01 The parties hereby authorize the Committee to admit new signatories as participating employers or participating unions in such manner and upon such terms as the Committee in its discretion deems appropriate without the necessary consultation or agreement with existing signatories. Upon admission to this agreement such new signatories will have the same rights and obligations as existing participating unions and participating employers, effective the date of such admission.

10. ACCEPTANCE OF LETTER OF UNDERSTANDING:

10.01 Signatories to this Letter of Understanding agree to accept this letter without amendment. Any subsequent amendment to the Letter of Understanding shall only be implemented if approved pursuant to Article 12.

11. DURATION:

11.01 This Letter of Understanding shall be in full force and effect for an indefinite period commencing in 1993. In the event that any one of the parties signatory to this Letter of Understanding wishes to terminate its participation in this Letter of Understanding it shall give sixty (60) days written notice to the Committee and to the appropriate bargaining agent or Employer in respect of its collective agreement. Such termination shall not invalidate this Letter of Understanding as affects the other signatories except for the specific Employer or bargaining agent that is party to the relevant and affected collective agreement.

12. AMENDMENTS:

12.01 Amendments to this Letter of Understanding shall be effective if passed by the Committee after consultation with the signatories to the Letter of Understanding as outlined herein. All signatories shall receive a copy of the proposed amendment(s). Each signatory shall have thirty (30) calendar days during which to express its concerns (if any) about the proposed amendment(s). Any unresolved concerns must be reconciled by the respective employer/labour caucus prior to a Committee vote being conducted. If there are no concerns raised by signatories to the proposed amendment the Committee shall be empowered to implement the amendment(s).

13. APPEAL PANEL:

13.01 Should a dispute(s) arise between a participating union(s) and a participating employer(s) regarding the application, interpretation or alleged violation of this Letter of Understanding, the parties concerned shall meet and attempt to resolve the dispute(s) through discussion.

Should the dispute remain unresolved, any party to the dispute may refer the matter(s) to an Appeal Panel composed of:

- -- Two (2) persons from Participating Employers who are not directly involved in the dispute.
- -- Two (2) persons from the Participating Unions who are not directly involved in the dispute.

The Appeal Panel shall set its own procedures for hearing the dispute and may accept any evidence that it deems appropriate.

Only lay advocate(s) shall be utilized by each party to the dispute in the presentation of its case.

The Appeal Panel shall make every effort to mediate the dispute to resolution.

Should efforts to mediate fail, the Appeal Panel shall submit its written recommendation(s) for settlement to the parties concerned, within fourteen (14) calendar days.

Any dispute under the Letter of Understanding shall not be resolved by grievance or arbitration pursuant to the collective agreement. The Appeal Panel is intended to be the only vehicle for resolution of such disputes.

This Letter of Agreement confirms that the above-named parties have ratified the Letter of Understanding on Redeployment Principles which is appended to and forms part of this Letter of Agreement.

15. Re: Provisions for Part-time Nurses Occupying More Than One Position Within the Facility

Whereas the parties are in agreement that components of the "Human Resources Policy & Procedure Manual – 60.30 Employment and Training – 60.30.160 – Part time Employees Occupying More Than One Position – dated 99/04/29" has certain sections which may be in violation of the Collective Agreement between the Employer and the Union; and

Whereas the parties are in agreement to allow a nurse to hold more than one position within the bargaining unit;

Therefore the parties are mutually agreed:

- 1. The definition of "position" shall be agreed as being: Occupational Classification, EFT, Unit(s), and rotation (i.e. day/evening, day/night, evening, night, day).
- 2. A part-time nurse shall be eligible to apply for and occupy more than one (1) part-time position. A part-time nurse wishing to apply for an additional part-time position shall be required to indicate same on the application.
- 3. Approval to occupy more than one position shall be based on considerations related to the compatibility of work schedules of the positions and operational requirements and, if not conflicting, the application will be considered as per the MNU Collective Agreement.
- 4. The terms and conditions of employment shall be as provided in the MNU Collective Agreement, except that Article 1504(f) and 3404 shall have separate application for each position held.
- 5. Overtime shall be authorized time worked which exceeds the normal daily shift as defined in Article 14 or the normal full-time hours in two (2) consecutive bi– weekly pay periods.
- 6. The sum total of the equivalent of one (1) EFT for positions occupied will not be exceeded. Should the sum of the positions occupied equal 1.0 EFT, the employment status will continue to be part-time unless a nurse holds more than one part-time position on the same unit and it is possible to amalgamate the positions to increase the employment status of the nurse, to full-time.
- 7. Where applications to occupy more than one position, are awarded, the terms and conditions shall be clearly outlined in the offer of position letter and shall include the following :
- Master rotation and scheduling: In order that the Employer not incur overtime costs, the nurse is not able to be scheduled more than one shift in any one day.

- Requests for scheduling of vacation, paid/unpaid LOA's etc. must be submitted to each Manager of Patient Care and will be considered independently.
- All salary based benefits (e.g. group life, pension, D & R) and accrued benefits including seniority (vacation, income protection etc.), as applicable, will be combined and calculated on the basis of the total of all active positions occupied.
- Should the ability to continue to work in more than one position be later found to be unworkable because of changes to the master rotation or restructuring, the nurse will be required to relinquish one of the occupied part-time positions, upon four (4) weeks notice to the nurse by the Employer.
- Should the nurse determine s/he no longer wishes to work in more than one part-time position, s/he shall provide notice of termination of one of the positions, in accordance with the Collective Agreement.
- Overtime rates shall apply once the combined hours of work in two (2) consecutive biweekly pay periods reach full time hours.
- The nurse shall work with the managers involved to ensure the accuracy and compliance of the scheduling, benefits etc.
- 8. Where an application to occupy more than one (1) position cannot be considered, the nurse shall have the option of having her/his application considered and if awarded, relinquish her/his current position.

16. Re: Nurse Practitioner Positions

The terms of the Collective Agreement shall be applicable to Nurse Practitioner positions except as modified hereinafter. Inclusion of Nurse Practitioners within the scope of the bargaining unit shall have no retroactive effect except as expressly provided for hereinafter.

The following shall apply to all Nurse Practitioner positions.

1. Article 2103(a) - A nurse occupying a Nurse Practitioner position shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

Length of Employment	Rates at Which Vacation Earned
In the first ten (10) years	Twenty (20) days/four (4) weeks
	(155 hours) per year
In the eleventh (11 th) to twentieth (20 th)	Twenty-five (25) days/five (5) weeks
year inclusive	(193.75 hours) per year
In the twenty-first (21 st) and subsequent	Thirty (30) days/six (6) weeks
years	(232.50 hours) per year

- 2. Article 2103(b) shall include those nurses occupying a Nurse Practitioner position.
- 3. Article 2601(b) shall include those nurses occupying a Nurse Practitioner position.

The following shall only apply to Nurse Practitioners working in Community Health/Public Health:

- 4. Seventy-two and one half (72.50) hours shall constitute a bi-weekly pay period of work (1885 hours per annum). The Nurse Practitioner may vary hours worked in order to effectively carry out the accountabilities and responsibilities of the position provided the Nurse Practitioner first obtains the pre-approval, in writing, from his/her immediate supervisor or designate.
- 5. The salary scale for the Nurse Practitioner (Community Health) shall be as set out in APPENDIX "A" SALARIES. It is understood that this is established as a comprehensive salary. Accordingly, Articles 16, 17, 18 and APPENDIX "B" shall not apply.
- 6. This shall be a community nursing position subject to the provisions in the Collective Agreement applicable to community nurses. The position shall have a base of operations as identified by the Employer. A Nurse Practitioner may be required to provide services in other regional locations on a temporary or assigned basis. The nurse shall be entitled to reimbursement for travel expenses as set out in the Collective Agreement.

The following shall only apply to Nurse Practitioners working in Acute Care/Long Term Care:

7. Seventy-seven and one half (77.50) hours shall constitute a bi-weekly pay period of work (2015 hours per annum). The Nurse Practitioner may vary hours worked in order to effectively carry out the accountabilities and responsibilities of the position (Articles 16, 17 and 18 shall not apply).

Articles 16, 17 and 18 shall apply if the Nurse Practitioner has defined/scheduled hours of work.

- 8. The salary scale for the Nurse Practitioner shall be as set out in APPENDIX "A" SALARIES.
- 9. APPENDIX "B" shall not apply.

17. Re: Mentorship

The Employer and the Union acknowledge that Mentorship is every nurse's professional responsibility. In the case of new Graduate Nurses, a more intensive approach to mentorship may be warranted.

The Employer and the Union believe that Mentorship of new Graduate Nurses is necessary and important and will facilitate transition from the student role to the practicing professional role and build a culture of support that will foster the retention of new Graduate Nurses. Further, the Employer and the Union recognize that this may be accomplished in a variety of ways dependant on the unique circumstances and demographics of each workplace. Mentoring may represent an opportunity for late career nurses who are interested in imparting their experience and knowledge.

For the purposes of this Memorandum of Understanding, a "Mentor" is defined as an experienced Registered Nurse, Registered Psychiatric Nurse or Licensed Practical Nurse engaged in a formal relationship of a determined length with a new graduate nurse(s) in order to assist the graduate nurse(s) in successfully adjusting to the working environment and performing her/his new role as a professional nurse.

Prior to the commencement of a mentorship relationship, the Employer and the nurse will discuss work assignment adjustments required in order for successful mentorship completion.

The Employer will identify attributes required for a mentorship role based on leadership skills, clinical expertise, professionalism, interpersonal skills and advocacy of the nursing profession.

A Registered Nurse or Registered Psychiatric Nurse or Licensed Practical Nurse shall receive an additional \$0.70 per hour for each hour assigned by the Employer as a mentor.

18. Re: Portability

The following provisions do not apply to transfers governed by the provisions of the Memorandum of Understanding on Staff Mobility:

- 1. A nurse who is/was employed by an Employer in Manitoba who participates at MNU Central Table negotiations, who is awarded a position with another Employer in Manitoba who participates at MNU Central Table negotiations, and who commences employment with this Employer within six (6) weeks of termination of employment from her/his former Employer, will be entitled to portability of benefits as specified hereinafter:
 - (i) accumulated income protection benefits;
 - (ii) length of employment applicable to rate at which vacation is earned;
 - (iii) length of employment applicable to pre-retirement leave;
 - (iv) length of employment applicable for qualification for the Magic 80 pension provisions;
 - (v) length of employment applicable to next increment date;
 - (vi) continuation of all Benefit Plans;
 - (vii) seniority credits (in accordance with receiving Collective Agreement).

The following Portability Guidelines are not part of the Collective Agreement but are here for guidance in interpretation

Guidelines for the Implementation of the Memorandum re: Portability

- 1. The provisions of the Portability Memorandum shall be effective [retroactive to] April 1, 2002.
- 2. Where portability is implemented retroactively, the items ported shall be on a "go forward" basis. No processes [e.g. vacation selection, vacancy selection] or access to benefits [e.g. income protection] shall be adjusted retroactively.
- 3. The onus is on the nurse to advise her/his new Employer that there are benefits/seniority to port.
- 4. The provisions of the memorandum only apply where a nurse terminates from one Employer and commences employment with another Employer. It does not apply to "merge" employment/benefits etc. from two or more Employers to one of those Employers.
- 5. Once notified of portability of benefits/seniority, the receiving Employer shall notify the sending Employer by forwarding a "Portability Form" to the sending facility. That facility will complete the form as soon as possible and forward to the receiving facility. The Portability Benefits Transfer Form shall be provided in its entirety to the receiving Union.
- 6. Portability applies for employment into either a permanent or term position. In the case of a term position, all benefits/seniority, etc. are ported at the time of employment. Should the nurse not obtain a permanent position in accordance with the new Employer's collective agreement, all seniority and benefits shall terminate, unless she/he in turn obtains employment with another MNU Employer where portability applies, and within the time lines specified.
- 7. Employment terminates with the sending facility and commences with the receiving facility, in order for Portability to apply. Therefore, accrued vacation is paid out by the sending facility; only the accrual rate is ported.
- 8. A nurse who occupies a casual position at a receiving facility AND a permanent or term position at a sending facility, AND who subsequently obtains a permanent or term position at a receiving facility, will be allowed to transfer seniority and benefits accrued in the permanent or term position at the sending facility, to the newly acquired permanent or term position in the receiving facility. The seniority accrued as a casual at a receiving facility cannot be added to the seniority being transferred with the permanent/term position.

NOTE: Current contract provisions re placement on salary scale when nurses resign a permanent or term position and remain on the casual roster continue to apply.

19. *Re Nurse Weekend Worker* (Hereinafter referred to as Weekend Worker)

Where the Employer chooses to implement a Weekend Worker position(s) the Employer and the Union mutually agree that the following shall apply:

- (a) All provisions of the Collective Agreement shall apply except as noted herein.
- (b) Occupied positions will not be deleted in order to create a Weekend Worker position(s).
- (c) A nurse working a weekend schedule will be scheduled to work on every weekend. This may include working one or all days on the weekend as well as shifts during the week. Article 1504(f) and 3404 shall not apply to Weekend Workers.
- (d) Weekend Workers positions shall be posted in accordance with the provisions of the Collective Agreement.
- (e) A nurse replacing a Weekend Worker shall not be entitled to the rate of pay applicable to the Weekend Worker. However, the Weekend Worker who interchanges a shift with a non Weekend Worker shall be paid at her/his Weekend Worker rate of pay for the interchanged shift.
- (f) A Weekend Worker who picks up additional available shifts shall not receive the Weekend Worker rate of pay for such shifts.
- (g) The establishment and/or existence of a Weekend Worker shall not form the basis for reclassification and/or pay adjustments of any classification under the Collective Agreement.
- (h) The Employer maintains the right to discontinue a Weekend Worker schedule with a minimum of six (6) weeks notice, at which time the schedule may be converted to normal scheduling requirements pursuant to the Collective Agreement and the rate of pay shall revert to the prevailing rate of pay for that occupational classification. Deletion of Weekend Worker incumbents is not required for schedule conversions where there are no other changes in the position except the conversion from a Weekend Worker rotation to a regular rotation.
- (i) Appendix "A" Salaries for Weekend Worker positions shall be fifteen percent (15%) higher than the prevailing rate for that occupational classification.

20. Re: Increase of EFT

Notwithstanding Article 30, the EFT of a part-time nurse may be increased in accordance with the following process:

The parties agree that it may be of mutual benefit to the nurses and the Employer to allow part-time nurses, who request to do so, to increase their EFT.

- (a) The process will commence at a date determined by the parties at the Site/Local Nursing Advisory Committee. The Employer shall inform the Site/Local Nursing Advisory Committee of the total EFT and shift patterns available per nursing unit.
- (b) The Employer shall communicate to all part time Nurses on a nursing unit the predetermined EFT and shift pattern(s) available for the increase of EFT process. Requests to permanently increase EFTs shall be made in writing by part-time nurses. The nurses shall indicate the maximum EFT to which they wish to increase. A nurse may increase her/his EFT up to a 1.0 EFT.
- (c) In considering requests, the Employer shall consider such factors as current EFTs, shift assignments, shift schedules, the unit(s) needs and the requirements of Article 15. If the request by nurses within a unit exceed the availability within that unit as determined by the Employer, the Employer shall offer in order of seniority.
- (d) A part-time nurse shall not be permitted to increase her/his EFT while other nurses are on layoff from that unit unless such laid off nurses have been recalled or have declined recall.
- (e) Where any request to change EFT has been approved, the Employer shall issue a letter to the nurse confirming the nurse's new EFT in accordance with this Collective Agreement along with an effective date.
- (f) Copies of all requests and responses to requests to adjust EFT shall be provided to the Union.
- (g) Any changes to a master rotation as a result of changing EFTs shall be done in accordance with the provisions of 1504.
- (h) The Employer is not prevented from exercising any of its normal management rights as a result of this Memorandum of Understanding including, without limitation, the right to post vacant positions.
- (i) The Site/Local Nursing Advisory Committee shall be advised of the outcome in the Increase of EFT Process of each nursing unit.

This Memorandum of Understanding shall remain in effect for the duration of this Collective Agreement.

21. Re: Secondment of a Nurse Elected to Serve as President of the Manitoba Nurses' Union

The Employer and the Union agree each with the other as follows:

- 1. A nurse employed by the Employer who is elected to the full-time position of President of the Manitoba Nurses' Union, shall be considered as continuing in the employ of the Employer during the nurse's term of office as President of the Manitoba Nurses' Union and shall be considered to be seconded to the Manitoba Nurses' Union during the term of office.
- 2. For the purposes of administering the period of secondment, the Accounting and Information Technology Coordinator of the Manitoba Nurses' Union shall function as the official contact person in any dealings with the Employer. In addition the Accounting and Information Technology Coordinator of the Manitoba Nurses' Union shall be accountable for:
 - (i) notifying the Employer, in writing, of the official commencement and termination date of the President's term of office;
 - (ii) determining the bi-weekly payroll record of the President and notifying the Employer of same.

The Union shall save the Employer harmless from any claim from the President arising from alleged error(s) in the payroll record.

3. Reimbursement of Employer Costs

The Manitoba Nurses' Union shall assume the responsibility for reimbursing the Employer for total recovery of payroll and related costs associated with the President's term of office, as follows:

- gross salary, including paid vacation, income protection and any other paid leave of absence authorized by the Accounting and Information Technology Coordinator
- (ii) Employer portion of C.P.P.;
- (iii) Employer portion of E.I.;
- (iv) Workers Compensation premiums;
- (v) Payroll tax;
- (vi) Employer portion of Benefit Plan premiums (pension plan, group life insurance plan, dental plan);
- (vii) Pre-retirement leave.

The Employer shall provide the Accounting and Information Technology Coordinator with a monthly statement of the above-referenced payroll expenses incurred during the nurse's period of secondment to President of the Manitoba Nurses' Union.

- 4. Income Protection
 - (i) The Union President will accumulate income protection credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Manitoba Nurses' Union President is absent during the secondment period due to accident or illness and the income protection credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Manitoba Nurses' Union President from income protection credits accumulated prior to the secondment period and bill the costs to the Manitoba Nurses' Union, subject to paragraphs (ii) and (iii) below.
 - (ii) Upon the nurse's return to work following the period of secondment the amount of income protection accumulated during the period of secondment will be reconciled against the amount of income protection utilized during this same period. In the event the difference is positive i.e. the amount accumulated is greater than the amount utilized, the nurse will be eligible to utilize the difference (unutilized income protection credits) at a future date. It is understood that utilization of these income protection credits may only occur once the nurse exhausts all income protection credits accumulated during her/his normal course of employment with the Employer.
 - (iii) It is further understood that these income protection credits shall not be stored in the nurse's income protection bank within the computerized payroll system. Following the period of secondment, a record of these credits will be provided to the nurse along with a copy in the personnel file of the nurse. In the event and at the point that the nurse wishes to utilize these income protection credits, she/he will advise the Human Resources Department. The Employer will pay said income protection and bill the Manitoba Nurses' Union for the cost.
- 5. Disability & Rehabilitation Plan (D & R)

The President will have coverage under the HEBP Disability & Rehabilitation (D & R) Plan. During the D & R elimination period, if income protection credits earned during the period of secondment are insufficient to cover full payment, the Employer will pay the Manitoba Nurses' Union President from income protection credits accumulated prior to the secondment period and bill the costs to the Manitoba Nurses' Union, subject to paragraphs 4.(ii) and 4.(iii) above.

6. Accumulation of Paid Vacation

The President will accumulate vacation credits at the rate of six (6) weeks per year.

For the purposes of reconciliation, the Employer is financially responsible for the vacation earned by the nurse while she/he is engaged in her/his normal course of employment with the Employer and the Manitoba Nurses' Union is financially responsible for the vacation earned by the nurse during the period of secondment.

- 7. Seniority/Service
 - (i) Seniority shall continue to accrue during the period of secondment.
 - (ii) Following the expiry of the period of secondment, the Manitoba Nurses' Union President's normal increment date will be delayed for a period of time equivalent to the period of secondment. The time worked between the date of the last increment to the date that the nurse assumed the office of Manitoba Nurses' Union President shall count toward the granting of the next increment.
- 8. This Memorandum of Understanding shall remain in force until revised by mutual agreement between the parties or until terminated by either party.

22. Re: Letter of Understanding – HEPP COLA Fund

The Parties have reached agreement concerning the establishment of a HEPP COLA Fund in accordance with the following:

- 1. COLA Fund A "COLA" Fund(s) will be established effective April 1, 2014.
- 2. Dedicated COLA Monies The monies contributed to the "COLA" Fund(s) will be "dedicated" monies for the specific purpose of providing ad hoc COLA adjustments to HEPP Retirees.
- 3. Equal Contributions The "COLA" Fund(s) will be funded by equal contributions from Employers and Employees.
- 4. Funding: Effective the following dates COLA contributions, in the amounts per year, listed following from each of the Employer(s) and Employee(s) shall apply.

Employer:

- April 1, 2014 = 0.80% of regular pensionable earnings to increase effective
- April 1, 2015 = 1.00% of regular pensionable earnings.

Employee:

- April 1, 2014 = 0.80% of regular pensionable earnings to increase effective
- April 1, 2015 = 1.00% of regular pensionable earnings.
- All contributions to the Fund(s) shall be allocated using a method that is in compliance with applicable legislation, the HEPP Plan Text and HEPP Trust Agreement.

- It is understood and agreed that these contributions shall continue at the specified rates notwithstanding the realization of any surplus funds in any HEPP account unless otherwise agreed by the Plan Settlors
- 5. Cola Funds The COLA monies shall be reserved solely for the creation of two, distinct and dedicated COLA Funds with specific allocation as follows:
 - HEPP COLA Fund # 1 effective April1, 2014 for Employees who retire on or after October 1, 2009 shall have an allocation of 0.80% and, effective April1, 2015, shall have an allocation of 0.90% of regular pensionable earnings from each active Employee and each participating Employer, (hereinafter referred to as the "Active Employees Fund").
 - HEPP COLA Fund # 2 effective April1, 2015 for Employees who retired on or before September 30, 2009 shall have an allocation of 0.10% of regular pensionable earnings from each active Employee and each participating Employer, (hereinafter referred to as the "Past Retirees Fund").
- 6. Segregated Fund(s) it is the intent of the Parties to establish segregated COLA Fund(s), accordingly:
 - It is understood that statutory exemption may be required to establish the COLA Funds as intended and the Plan Settlors agree to make joint application to the Province of Manitoba to seek changes and or exemptions as may be required.
 - The Plan Settlors also agree to make all reasonable efforts to address and resolve any additional statutory or regulatory issues that may pose a barrier to establishing the COLA Fund(s) as intended - including whether the Plan's status as a Specified Multi-Employer Pension Plan (SMEPP) is affected and in need of any changes as a result of additional contributions to the COLA Fund(s).
- 7. There shall not be any transfer or allocation of monies from the Active Employees Fund to the Past Retirees Fund without the express agreement of the Plan Settlors.
- 8. Surplus monies from the Past Retirees Fund may be transferred to the Active Employees Fund at the discretion of the Plan Trustees.
- 9. Contributions to the Past Retirees Fund shall continue as long as required to pay benefits to eligible pensioners. Thereafter, the contributions dedicated to the Past Retirees Fund shall be allocated to the Active Employees Fund.
- 10. COLA Payment Earliest Start Date April 1, 2018.
 - Maximum = 2/3 CPI (Canada) per year.
 - Ad hoc as Fund will allow.
- 11. Implementation Committee immediately following conclusion of collective bargaining:
 - An Implementation Committee shall be formed consisting of Employer Settlors, Union Settlors and HEPP Administration.
 - The role of the Implementation Committee shall be to discuss, research and develop a model for the implementation of COLA as per the principles set out in this agreement.

- It is understood that the Committee may be required to seek legal and/or actuarial advice in doing their work.
- Following completion of their work the Committee will make recommendations to the HEPP Board of Trustees for their consideration and implementation.

23. Re: Regional Nursing Advisory Committee

WINNIPEG REGIONAL NURSING ADVISORY COMMITTEE (NAC) PARTICIPANTS

Riverview Health Centre Nurses Local 1a Health Sciences Centre Local 10 St. Boniface Nurses Local 5 Concordia Nurses Local 27 Grace Nurses Local 41 Victoria Nurses Local 3 Misericordia Nurses Local 2 Seven Oaks Nurses Local 72 Pan Am Nurses Worksite 135 Regional Programs Nurses Worksite 153

24. Re: Inter-facility Position(s)

<u>Applicable only to Health Sciences Centre, St. Boniface, Grace, Seven Oaks,</u> <u>Concordia, Victoria, Misericordia, Riverview, WRHA Public Health, WRHA Home</u> <u>Care, Breast Health Centre, WRHA CNS, Pan Am Clinic, Primary Care and Nurse</u> <u>Practitioners</u>:

Whereas, periodically it may be appropriate to create positions higher than a Nurse II which fall under the scope of this Collective Agreement which are inter-facility in nature; and

Whereas, the creation of inter-facility position(s) must recognize the existence of separate Collective Agreements;

The parties agree as follows:

- 1. Where an inter-facility position(s) is contemplated, the Employers commit to contacting MNU and the respective Local/Worksite(s). The affected parties shall meet to discuss the specifics of the situation, in keeping with the principles as outlined in the Memorandum.
- 2. Should there not be mutual agreement between the affected parties, the interfacility position(s) will not be posted as an inter-facility position(s).
- 3. In the event there is mutual agreement on a specific inter-facility position(s), such agreement shall be set out in a separate Memorandum of Understanding between the affected parties.

- 4. The positions contemplated in this memorandum will be either:
 - (i) a position(s) shared between two (2) or more Employers;
 - (ii) a position primarily located at one (1) site but requiring the performance of duties at each of the facilities.
- 5. The position(s) shall be posted in accordance with the respective Collective Agreement of both parties.
- 6. (a) For those position(s) outlined in 4 (i) above, all applicants from each of the facilities will be considered and shall be treated as internal candidates. Mobility seniority will be the seniority utilized for the purpose of selection into the shared position(s). An internal applicant awarded the position(s) will remain an employee of her/his current Employer.
 - (b) Those positions outlined in 4 (ii) above shall be awarded in accordance with the Collective Agreement of the facility where the position is primarily located.
- 7. The affected parties will determine and commit to writing, in the separate memorandum, which facility will be considered the Employer of record, in the event the successful applicant is external to the facilities.
- 8. The successful applicant(s) will be required to comply with the policies and procedures of each facility in which she/he will practice. Resolution of professional practice and/or any other disputes arising under the Collective Agreement shall be the responsibility of the Employer of record.
- 9. To cover the cost of parking at each facility, one deduction from the nurse's pay cheque will be made by the Employer of record. A reciprocal pass will be provided, if possible. It is understood the nurse(s) shall not incur parking costs exceeding the parking rate as determined by the Employer of record.

25. Re: Nurses in Inter-facility Positions

The Employer and the Union agree they will work together to identify nurses who are currently in inter-facility positions. Memorandum(s) [as referenced in #7 of the Memo Re: Inter-facility Position(s)] will be developed to cover these nurses and the conditions that apply.

26. Re: Staff Mobility Within the Following Facilities/Programs of the WRHA System

<u>Applicable only to Health Sciences Centre, St. Boniface, Grace, Seven Oaks,</u> <u>Concordia, Victoria, Misericordia, Riverview, Deer Lodge, WRHA Public Health,</u> <u>WRHA Home Care, Breast Health Centre, WRHA CNS, Pan Am Clinic, Primary</u> <u>Care, Nurse Practitioners and Regional Programs:</u>

WHEREAS it is the desire of, and in the best interest of, the parties to work toward the avoidance of job loss by providing for the mobility of employees within the WRHA system;

AND WHEREAS the parties recognize that it is in the best interest of patient care to retain the knowledge and expertise of health care providers within the programs;

AND WHEREAS the parties wish to promote career opportunities by removing systemic barriers;

NOW THEREFORE the parties agree as follows:

- 1. This memorandum is attached to and forms part of the Collective Agreement between the undersigned parties.
- 2. The parties agree to work towards a systemic labour adjustment plan utilizing a regional attrition model where reasonable, and utilizing any other programs as agreed to by the parties, (e.g. VSIPs, ERIPs, Training, EAP, etc.).
- 3. In the event that this Memorandum of Understanding conflicts with the terms of any existing Collective Agreement between the parties, the terms of this memorandum shall prevail over the terms of the Collective Agreement (unless otherwise specified).
- 4. (a) In the event of a transfer/closure/consolidation/merger of one or more of the programs and/or facilities, the Employer(s) will notify the unions, where possible*, at least ninety (90) days prior to the implementation date unless otherwise provided for in the applicable Collective Agreement. The Employer(s) will determine the estimated number and types of positions available, and update such data as the reconfiguration/implementation plans are defined.

*lesser notice may be given only in exceptional circumstances.

(b) The Employer(s) and Union(s) shall meet within thirty (30) days of notice provided for in 4 (a) to discuss issues arising out of the transfer of employees.

- (c) The Employer(s) shall prepare and provide the following data relative to the transfer/closure/consolidation/merger to the Union(s):
 - positions affected at the sending facility/program.
 - number of vacancies and new positions created at the receiving facility/program
 - up to date seniority lists
 - pertinent classification information
 - relevant time frames

5 Staff Mobility

- A. <u>Transfers with Programs</u>
 - (i) When programs are transferred, consolidated, or merged from one facility/program or facilities/programs to another, the Employer(s) will determine the number of staff required by classification.

Qualified employees within the transferring program will be given the opportunity to move with the program. Where excess numbers of staff wish to move, staff will be selected based on mobility seniority. Where an insufficient number of staff by classification volunteer to move, the sending facility(s)/program(s) shall fill the remaining positions in the program by utilizing the job posting/recall procedures in the applicable Collective Agreement(s).

If vacancies continue to exist after the job competition, the Employer(s) reserves the right to transfer employees from the sending facility/program to fill the vacancies commencing with the most junior qualified employee.

- (ii) Employees who are transferred in accordance with this memorandum shall retain seniority as described in (6) below, service and other portable benefits as set out in the Letter of Understanding on Redeployment Principles, and will be treated in all respects as if they had always been employees of the receiving facility/program.
- (iii) The receiving facility/program will provide an orientation period to employees transferring to a new program site. The orientation period shall be of sufficient duration to assist the employee in becoming familiarized with essential information such as policies and procedures, routines, location of supplies and equipment, and fire and disaster plans.
- (iv) No new probationary/trial period will be served by transferring employees. Any transferring employee who had not yet completed their probationary period at the sending facility will complete the balance of the period required at the receiving facility.

Should the transferred employee decide not to remain at the receiving facility/program, such employee shall provide written notice to the receiving facility/program no later than sixty (60) days following the date of transfer. The employee shall be entitled to be placed on the Central Redeployment list and the recall list of the sending facility/program.

B. <u>Temporary Transfer of Employees</u>

- (i) To facilitate temporary transfers to facilities/programs experiencing a need for additional employees on a sporadic or episodic basis, qualified employees from another facility/program shall be offered the opportunity to work in the facility(s) /program(s) experiencing the need for additional employees.
- (ii) Temporary transfers shall not be implemented until the applicable provisions of the Collective Agreement of the receiving facility/program relating to the assigning of occasional additional shifts are fulfilled.
- (iii) The temporarily transferred employees will continue to be covered by the terms of the sending facility's/program's Collective Agreement.
- (iv) Where an insufficient number of qualified employees volunteer to be temporarily transferred, the facility(s) /program(s) reserve the right to transfer employees, commencing with the most junior qualified employee at the sending facility/program.
- (v) Orientation as set out in (5)(a)(iii) above will be provided if reasonably possible.

C. <u>Voluntary Transfers to Vacancies</u>

As bargaining unit vacancies arise that any of the Facilities/Programs intend to fill, the following procedures will apply:

- (i) Vacancies will be filled in accordance with the provisions of the applicable Collective Agreement.
- (ii) An internal and city-wide posting may occur simultaneously. Employees from other facilities/programs will have the right to apply for said vacancy.

If the selected employee is a current employee of one of the facilities/programs of the WRHA System, that employee will be entitled to transfer all seniority, service and other benefits as set out in the Letter of Understanding on Redeployment Principles and will be treated in all respects as if they had always been an employee of the receiving facility/program. In addition, hours worked since the last increment shall be credited towards the next increment level.

- (iii) Where there are no qualified internal applicants, positions will be awarded in the following order:
 - Recall of laid off workers from the facility/program posting the vacancy (unless otherwise stipulated in the applicable collective agreement);
 - Applicants from the Redeployment List;
 - Applicants from one of the other facilities/programs of the WRHA System;
 - Applicants external to the facilities/programs of the WRHA System.

6. <u>Seniority</u>

- A. Seniority lists will be maintained in accordance with the Collective Agreements for internal purposes at each facility/program.
- B. Mobility seniority for the purposes of this memorandum will be calculated as follows:

"Seniority shall be defined as the total accumulated regular paid hours calculated from the date the employee last entered the service of the Employer".

- C. Transferring employees will be treated in all respects as though they had always been employed at the receiving facility/program.
- D. To ensure the accuracy of the calculation of the mobility seniority, the Employer(s) will provide sufficient information to verify an accurate calculation has been made.
- E. Any employee who:
 - (i) has utilized a redeployment number in the past to obtain a position but was not permitted to transfer seniority credits at the receiving facility/program, or

(ii) has voluntarily transferred to another facility/program between 01 January 1998 and the effective date of this memorandum,

shall be entitled to an adjustment of seniority which will reflect cumulative seniority earned both at the sending and receiving facilities. Processes contingent on seniority implemented prior to date of signing will not be adjusted retroactively, (e.g. bumping, vacation preference).

7. <u>Staff Mobility Dispute Resolution Mechanism</u>

This dispute resolution mechanism shall not be utilized to resolve disputes which could be addressed through the grievance arbitration procedure(s) set out in the applicable Collective Agreement.

Should a dispute(s) arise between a signatory Union(s) and a signatory employer(s) regarding the application, interpretation or alleged violation of this Memorandum of Understanding, the parties concerned shall meet within twenty (20) calendar days and attempt to resolve the dispute(s) through discussion.

Should the dispute remain unresolved after such meetings, any party to the dispute may within a further ten (10) calendar days refer the matter(s) to arbitration.

The parties to the dispute shall select a mutually agreed Arbitrator within ten (10) calendar days following such referral to arbitration. Should the parties fail to agree upon an Arbitrator, either party may forward a request to the Manitoba Labour Board.

The above time limits may be extended by mutual agreement and shall be confirmed in writing.

The Arbitrator shall set his/her own procedures for hearing the dispute and may accept any evidence he/she deems appropriate.

The decision of the Arbitrator shall be final and binding upon the parties to the dispute.

Any costs incurred by either of the parties to the dispute, preceding or during arbitration proceedings, shall be borne by the parties incurring such costs, but cost of the Arbitrator shall be borne by the parties in equal shares.

27. Re: Memo of Interpretation re Staff Mobility Within the Following Facilities/Programs of the WRHA System

<u>Applicable only to Health Sciences Centre, St. Boniface, Grace, Seven Oaks, Concordia, Victoria, Misericordia, Riverview, Deer Lodge, WRHA Public Health, WRHA Home Care, Breast Health Centre, WRHA CNS, Pan Am Clinic, Primary Care, Nurse Practitioners and Regional Programs:</u>

The parties agree that for the purposes of implementing the Memorandum of Understanding Regarding Staff Mobility Within the above-listed Facilities/Programs of the WRHA System, interpretation shall be as follows:

It is agreed that should it be necessary to transfer nurses with programs from one facility/program to another in accordance with the provisions of Article 5 (A), the Employer shall endeavour to the greatest degree possible, to transfer such nurse into a position which is within .2 of the EFT of the position occupied by the nurse at the sending facility/program.

It is further agreed that should it be necessary to temporarily transfer nurses from one facility/program to another, in accordance with Article 5(B), as much notice as possible shall be provided to such nurse. Should the temporary transfer be required during the course of a scheduled shift, travel time from the sending to the receiving facility/program shall be considered time worked. If personal transportation is not available, transportation will be provided.

It is further agreed that periods of orientation in Article 5A(iii) and 5B(v) shall be considered time worked.

28. Re: Mobility

<u>Applicable only to Health Sciences Centre, St. Boniface, Grace, Seven Oaks,</u> <u>Concordia, Victoria, Misericordia, Riverview, Deer Lodge, WRHA Public Health,</u> <u>WRHA Home Care, Breast Health Centre, WRHA CNS, Pan Am Clinic, Primary</u> <u>Care, Nurse Practitioners and Regional Programs:</u>

The parties agree that for the purposes of implementing the Memorandum Regarding Staff Mobility Within the listed Facilities/Programs of the WRHA System and the Memorandum Regarding Interpretation re Staff Mobility Within the listed Facilities/Programs of the WRHA System, the following shall apply:

- 1. The primary emphasis of the Mobility Agreement is to facilitate the <u>voluntary</u> transfer of nurses with programs, to vacancies, or on a temporary basis.
- 2. The Employer agrees that the provisions of Section 5 (B) (iv) of the Mobility Agreement shall be utilized only under extenuating and emergency circumstances, and further, shall be implemented only in accordance with the provisions of Article 1001 of the Collective Agreement.

- 3. (a) Issues related to orientation will be referred immediately to the Regional Nursing Advisory Committee (WHA), in order to ensure a standardized, effective orientation structure, duration and content across the WHA system.
 - (b) Orientation for nurse(s) transferring with programs shall be provided in accordance with Section 5 A (iii) of the Mobility Agreement and shall take into consideration the individual needs of the transferring nurse(s).
 - (c) Orientation for nurse(s) temporarily transferring to another facility in accordance with the provisions of Section 5 B of the Mobility Agreement and section #2 of this Memorandum, shall be provided in accordance with 5 A (iii) of the Mobility Agreement, if reasonably possible.
- 4. (a) It is agreed that 5 A (ii) of the Mobility Agreement shall include portability of hours of service since the last increment for purposes of calculating the next increment.
 - (b) It is agreed that vacation earned at the sending facility shall not be paid out upon transfer unless the nurse requests.
- 5. The statement re: "personal transportation" in the Memorandum of Interpretation re: Staff Mobility will be expanded to include the following:

Return transportation will be provided by the Employer, if the nurse requests transportation or if personal transportation is not available. If personal transportation is utilized, the following shall apply:

- (a) Parking in close proximity to the "receiving facility" will be made available.
- (b) Parking expenses shall be reimbursed to the nurse by the Employer.
- (c) The nurse shall be eligible for transportation reimbursement in accordance with the prevailing Province of Manitoba mileage rates in accordance with the following formula, subject to a minimum guarantee of four dollars (\$4.00):

Distance (in kms) from the nurse's home to the "receiving facility" minus the distance (in kms) from the nurse's home to the "sending facility".

It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

29. Letter of Understanding Supplementary to the Collective Agreement Re: Guidelines for the Implementation of the Memorandum re: Mobility

Agreed Between the Manitoba Nurses' Union and Employers in Winnipeg Hospitals - October 29, 1999 – and as amended subsequently in 2002, 2004 and 2008

- 1. **Increments:** Nurses having a permanent or term position in a sending facility, will be allowed to transfer their "hours worked" for purposes of determining when they are entitled to their next increment, when they secure a permanent or term position at a receiving facility. Casual nurses are NOT allowed to transfer such hours.
- 2. <u>Vacation</u>: Vacation earned at the sending facility shall not be paid out upon transfer unless the nurse requests. If a person elects to have vacation transferred, it does not mean that the previously approved vacation dates will be honored at the receiving facility. Only the amount of time which has to be taken in accordance with the new facility's Collective Agreement will be honored and operational requirements will be taken into account.
- 3. **Probationarv Period:** As with any other voluntary transfer to a permanent position in a facility other than one in which a nurse is currently working, she/he is subject to a probationary period. When a nurse transfers with a program, as per Section 5A (iv) of the Mobility Memo, she/he is not subject to a probationary period unless she/he has not yet completed her/his probationary period at the sending facility.
- 4. <u>Trial Period</u>: Section 5A (iv) of the Mobility Memo specifically states there will be no new trial period or probationary period for nurses who are transferring with programs. As stated above, only nurses who have not completed their probationary period with a sending facility will be expected to complete it at the receiving facility. If a nurse voluntarily transfers from a sending to a receiving facility, she/he is subject to a probationary period in accordance with the collective agreement. She/he is not subject to a trial period as a "new" employee.
- 5. **<u>Pre-Retirement Credits</u>**: To be calculated in days at the sending facility.
- 6. <u>Terms</u>: Mobility applies for employment into either a permanent or term position. In the case of a term position, all benefits/seniority, etc. are ported at the time of employment. Should the nurse not obtain a permanent position in accordance with the new Employer's collective agreement, all seniority and benefits shall terminate, unless she/he in turn obtains employment with another MNU Employer where mobility or portability applies, and within the time lines specified.

7. <u>More Than One Position at Same Facility</u>: As of January 1, 1998, nurses moving from a sending facility shall have portability of seniority* and benefits when transferring to a receiving facility, regardless of the bargaining unit(s) involved.

* Full seniority as defined in 6B of the memo re Mobility Seniority

8. **Positions at More Than One Facility:**

There can only be one sending and one receiving facility. Even if a nurse has more than two (2) permanent positions, (at more than one facility) she/he will only be able to port the seniority and benefits from one of the facilities when she/he voluntarily transfers to a receiving facility.

Transfer of seniority and benefits shall be applicable to all nurses, including those who are on lay off, currently employed in a permanent or term position who secure a permanent or term position in a receiving facility in which they don't currently hold a permanent position.

Section 5C(ii) means a nurse who is/was employed by an Employer who is awarded a position with another Employer covered by the Mobility Memorandum and who commences employment with her/his new Employer covered by the Mobility Memorandum within six (6) weeks of termination of employment from her/his former Employer, will be entitled to transfer all seniority, service and other benefits as per the Mobility Memorandum.

9. A nurse who occupies a casual position at a receiving facility AND a permanent or term position at a sending facility, AND who subsequently obtains a permanent or term position at a receiving facility, will be allowed to transfer seniority and benefits accrued in the permanent or term position at the sending facility, to the newly acquired permanent or term position in the receiving facility. The seniority accrued as a casual at a receiving facility cannot be added to the seniority being transferred with the permanent/term position.

NOTE: Current contract provisions re placement on salary scale when nurses resign a permanent or term position and remain on the casual roster continue to apply.

- 10. The Local President at a receiving facility will be provided with written notification regarding each nurse's mobility seniority at the time of her/his transfer. In that regard, the following specific data shall be provided:
 - Start date at sending facility
 - Seniority (hours)
 - Seniority date at <u>sending facility</u>
 - Termination date at sending facility
 - Start date at receiving facility.

- 11. Bridging Time for the Purposes of Mobility: A nurse who commences employment with the receiving facility within six (6) weeks of termination of employment with the sending facility will be entitled to mobility of seniority, service and benefits as above.
- 12. Program Transfers: Posting Positions at Sending Site: Job postings under Section 5A(i) shall only occur if there are deletions or layoffs at the sending facility(s) associated with the transferred program and shall only be available to those staff at the sending facility that hold a permanent position.
- 13. The Mobility Benefits Transfer Form shall be provided to the receiving Union in its entirety.
- 14. A nurse shall be placed at the greater of her/his salary level at the sending facility, or in accordance with the recognition of previous experience clause(s) in Article 38.
- 15. The parties agree that seniority shall not transfer across sectors.

30. Joint Nursing Position Classification Process

The Parties have mutually agreed to the development and implementation of a "Joint Nursing Position Classification System" based on the following agreed to principles:

- 1. This "Position Classification Process" will promote standardization and consistency in nursing position classifications provincially by applying standardized evidence informed criteria.
- 2. A Joint Committee will be struck within 90 days of ratification of the MNU Collective Agreement.
 - Committee membership shall be six (6) MNU and six (6) Employer representatives.
 - > The MNU representatives will be as selected/appointed as follows:
 - President, Manitoba Nurses Union
 - 2 MNU members (appointed by MNU)
 - o Director of Labour Relations, MNU
 - o 2 Labour Relations officers (appointed by MNU)"
 - > The Employer representatives will be as selected/appointed as follows:
 - Director, Labour Relations Secretariat (LRS)
 - 2 Nursing Leadership (appointed by WRHA)
 - 1 Nursing Leadership (appointed by HPSEN)
 - 1 Human Resources Leader (appointed by WRHA)
 - 1 Human Resources (appointed by PHRC)

- 3. The "Position Classification Process" will exist without prejudice to any position either party may take with regard to the classification of any position within the bargaining unit.
- 4. The classification system process will not vary or alter the Collective Agreement nor does it change the language, application or intent of the Collective Agreement.
- 5. The "Position Classification Process" will include a dispute mechanism to address a disagreement by either party on a classification decision.
- 6. The initial focus of the "Position Classification Process" will be a review of;
 - > newly created positions; and
 - requests for reclassification of existing positions by the Employer and/or the MNU and/or the nurse.
- 7. The next step for the "Position Classification Process" would be a review of all positions within the system.
- 8. The parties agree that there will be no declassification of occupied existing positions. If the outcome of the "Position Classification Process" results in a decrease to the classification of an occupied existing position(s), the incumbent(s) would be "PIO'd" for as long as they remain in that specific position.
- 9. The "Position Classification Process" will be based on the principles that it is the job that is evaluated not the individual's performance of the job.
- 10. All parties commit to ensuring the integrity and validity of the process is maintained at all times.

Provincial Joint Nursing Position Classification Committee Guiding Principles

- All parties commit to the development and implementation of a joint nursing position classification system.
- > This system will promote standardization and consistency in nursing position classifications provincially by applying standardized evidence informed criteria.
- > Committee will be struck within 90 days of ratification of the Collective Agreement.
- > The process exists without prejudice to any position either party may take with regard to the classification of any position within the bargaining unit.
- > The process will not vary or alter the Collective Agreement nor does it change the language, application or intent of the Collective Agreement.

- > The position classification process will include a dispute mechanism to address a disagreement by either party on a classification decision.
- > Initial focus will be a review of:
 - Newly created positions
 - Requests for reclassification of existing positions by Employer and/or MNU and/or the nurse.
- > Next step would be a review of all positions.
- > No declassification of occupied existing positions.
 - If decision is to decrease class, incumbent would be PIO'd
- > It is the job that is evaluated not the individual's performance of the job.
- All parties commit to ensuring the integrity and validity of the process is maintained.

31. Grievance Investigation Process

The process is intended to create a harmonious relationship in order to promptly resolve grievances in an economical fashion.

On this basis, the parties are committed to the utilization of the following process where it is mutually agreed to be appropriate.

In the event that either party states that it is inappropriate to utilize the process and prior to a failure to utilize the process, the Director of Labour Relations of the MNU and the Director of the LRS shall review the matter and exchange the positions of the parties.

The parties hereto agree that the following conditions shall apply to the implementation and operation of the Grievance Investigation Process:

Part 1 GENERAL

1. It is understood that this process and the appointment of the Grievance Investigator is to continue concurrent with the Collective Agreement. The Collective Agreement is for the period September 1, 2014 to the date of ratification of a new collective agreement, and subject to the Term of the Agreement.

- 2. The Grievance Investigator shall be an individual jointly approved by the MNU and representatives of the employer (Labour Relations Secretariat). The terms of appointment of the Grievance Investigator shall be set out in a separate document between the MNU, the LRS and the Grievance Investigator.
- 3. It is recognized that Grievance Investigation is a voluntary process and either party may request that any grievance be submitted to grievance Investigation, however both parties must agree on each case to be so submitted. Where such mutual agreement cannot be reached then the provisions of the Collective Agreement regarding Arbitration shall apply.
- 4. It is understood that the opinion of the Grievance Investigator is advisory in nature and is non-binding on either party. Where one or both of the parties does not accept the opinion of the Investigator then the option shall remain to utilize the Arbitration procedure contained in the Collective Agreement.
- 5. a) It is understood that where the parties agree to abide by the opinion of the Investigator, it is done so on a without precedent or prejudice basis.
 - b) An opinion expressed by the Grievance Investigator regarding any issue shall not be submitted to any future Grievance Investigation nor to any Arbitrator.
- 6. The Grievance Investigator shall conduct an investigation into each grievance jointly submitted to her/him. It is expected that a hearing will be required in the normal course of the investigation. Within seven (7) days of a grievance being submitted to her/him, the Grievance Investigator shall schedule a hearing to be held within the thirty (30) day period following submission to her/him. The Grievance Investigator is empowered to fulfil her/his role in any manner deemed by her/him to be most effective given the individual circumstances of each case. The Grievance Investigator's general role is to:
 - a) Investigate each grievance jointly submitted
 - b) define the issue(s) in dispute
 - c) provide an opinion as to an appropriate resolution of the dispute.
 - d) otherwise assist the parties in reaching a resolution.
- 7. The Grievance Investigator is expected to give a verbal opinion at the conclusion of a hearing, and to submit a brief written opinion to each of the parties within seven (7) calendar days following a hearing. Where no hearing is held, it is expected that the Grievance Investigator will provide her/his written opinion within seven (7) calendar days following completion of her/his investigation.
- 8. Where either or both parties choose not to accept the opinion of the Grievance Investigator, they shall, within seven (7) calendar days following receipt of the Investigator's written opinion, submit it in writing to both the Investigator and the other party, their reasons for non-acceptance. Such reasons shall not be admissible at any future arbitration hearing or Grievance Investigation proceeding.

- 9. The parties shall jointly prepare guidelines to assist the Grievance Investigator in meeting the expectations of the parties. These guidelines may be amended from time to time during the collective agreement as circumstances warrant and as mutually agreed. The parties shall meet on a province wide basis through staff representatives of the MNU and the LRS at the request of either of these two bodies, but not less frequently than every six (6) months to review the operation and utilization of the Grievance Investigation Process.
- 10. Nothing shall preclude the parties from resolving any grievance in any mutually agreed manner either before, during or after its referral to the Grievance Investigation Process.
- 11. It is expressly understood that the Grievance Investigation Process is intended to provide a cost-effective, informal, and timely alternative to conventional arbitration.

Part 2 SUBMISSION OF GRIEVANCE

- 1. In all cases the grievance procedure contained in the Collective Agreement will continue to apply, however, where the grievance procedure has been exhausted and a party has certain time limits to refer the matter to arbitration, that party might instead within this time limit, advise the other party in writing of its desire to refer the matter to the Grievance Investigation Process. Where such a request is made, the time limits referenced in the grievance/arbitration procedure shall be temporarily suspended until:
 - a) the other party advises the party who has made such a request that it does not agree to refer the matter to the Grievance Investigation Process, or
 - b) fourteen (14) calendar days have elapsed from the date the request was made and the other party has failed to respond, or
 - c) fourteen (14) calendar days have elapsed from the date upon which the Grievance Investigator issued his written opinion.

When any one of the events referred to in a), b) or c) above occur the time limits for referring the matter to arbitration shall commence as if the grievance procedure had been exhausted on that date.

Part 3 HEARINGS

1. Hearings will normally be held on the premises of the facility where the grievance originated from, however, the Investigator may, with the consent of both parties, choose a more appropriate location in such instances as where several grievances originating from different locations can be heard at the same hearing.

- 2. The parties agree not to be represented at any Grievance Investigation hearing by legal counsel. Attendance at hearings shall be limited to a maximum of four (4) employees from the bargaining unit and/or the Union, and four (4) Employer and/or LRS representatives. This stipulation shall not prevent the Grievance Investigator from requesting the attendance of any other person who can assist in clarifying the issue in dispute.
- 3. The parties agree to provide the Investigator with a jointly prepared statement of facts in an effort to narrow the scope of any dispute and to minimize the need to present evidence through witnesses. The Grievance Investigator may through the course of her/his investigation determine additional facts relevant to the resolution of the matter and shall advise the parties accordingly.
- 4. Hearings shall be held in an informal manner, however, the Investigator shall conduct any hearing in a manner deemed by her/him to be effective. Witnesses will not give evidence under oath but the Investigator may act as a participant in attempting to resolve areas of conflicting evidence.
- 5. Each party shall pay for their own costs associated with any witnesses (wages, payroll costs and expenses) that are used to provide information as part of their evidence.

The Employer will be responsible for paying the grievor for the time of attendance at the GIP hearing at straight time rates.

Part 4 GUIDELINES FOR GRIEVANCE INVESTIGATOR

- 1. The Grievance Investigator shall be expected to accept the role for the life of the collective agreement.
- 2. While appointed the Grievance Investigator may not act on behalf of one of the parties either as counsel or nominee at conventional arbitration. She/he may serve as sole arbitrator or chairman of an arbitration board hearing a dispute involving one or both of the parties except in the case of a dispute which has previously been referred to her/him in her/his capacity as Grievance Investigator.
- 3. While it is not expected to be as detailed as an arbitrator's award, the parties do expect the written opinion to be a concise statement of the reasoning followed in reaching her/his conclusions. A detailed review of the positions of the parties or arbitral jurisprudence is not expected nor is any recounting of non-germane fact or argument. The opinion should contain sufficient information to assist the parties in preventing similar future disputes.
- 4. The parties shall each pay for their own costs associated with referring and processing a grievance through the Grievance Investigation Process except that the parties shall jointly and equally share the fees and expenses of the Grievance Investigator.

- 5. The Grievance Investigator is empowered to consider any grievable matter put to her/him by the parties including a question of whether or not an issue is grievable.
- 6. The opinion of the Grievance Investigator is expected to be an informed estimate of the likelihood of the grievance being sustained or denied in the event of it being referred to arbitration.
- 7. The Grievance Investigator will be provided with any documentation which might provide assistance to her/him carrying out her/his role.

32. Group Self Scheduling

The Employer and the Union mutually agree that the following conditions and understandings apply to group self-scheduling:

- 1. The procedure to be followed for the trial and implementation of group selfscheduling shall be as follows:
 - (a) A meeting of all nurses on the unit who wish to participate in group selfscheduling and senior nursing management will be held to discuss tentative group self-scheduling guidelines, a Master Rotation and proposed date of commencement of the trial period. A letter will be forwarded to the Local/Worksite President to inform her/him of the proposed changes.
 - (b) The length of the trial period for group self-scheduling shall be six (6) months in length or for a shorter period as mutually agreed between the Union and the Employer.
 - (c) Six (6) weeks prior to the completion of the trial period, a meeting of all participating nurses on the unit and senior nurse management will be held to evaluate group self-scheduling.
- 2. There must be mutual agreement between the Employer and the Union and senior nursing management to continue with group self-scheduling, otherwise the Collective Agreement provision on Hours of Work, Article 14 shall apply. Group self-scheduling may be cancelled by either the Employer or the Union by giving written notice of at least six (6) weeks to the other party of its desire to terminate the agreement. The notice shall coincide with the effective date of the implementation of the existing/new master rotation for the unit. This date must commence with the beginning of a new pay period.
- 3. Group self-scheduling shall not result in any additional costs to the Employer.
- 4. All full-time and part-time nurses on a unit may participate in Group Self-Scheduling.

- 5. Terms and conditions of the Collective Agreement, Appendices and Supplementary Memorandums of Understanding shall remain in full force and effect.
- 6. Unit specific guidelines for self-scheduling shall be established/revised for each unit in consultation with the Union. All self-scheduling groups shall follow the attached general guidelines and are subject to approval by both the Union and the Employer. The provisions of the Collective Agreement including hours of work, shift schedules and overtime shall be adhered to.
- 7. The Master Rotation must be in place for each unit in accordance with the provisions of Article 1504 of the MNU Collective Agreement. It is understood that any nurse(s) who requests to be scheduled in accordance with her/his line on the Master Rotation shall be permitted to do so. All nurses hired into a position(s) on the unit shall be provided with the option of following the Master Rotation or Self-Scheduling, however, the nurse(s) shall complete the self-scheduling for the remainder of the posted shift schedule.
- 8. A nurse who is participating in group self-scheduling has the option of reverting to being assigned her/his shift schedule in accordance with her/his line on the Master Rotation and a nurse who has a Master Rotation has the option of participating in a self-scheduling group. The nurse must advise her/his out-of-scope manager in writing of this request two (2) weeks prior to the next round of shift selection. This scheduling preference, Master Rotation or Group Self-Scheduling, must be worked for a minimum of six (6) months before making another change.
- 9. It is understood that this memo shall apply to any nurse or group of nurses whether or not they have a master rotation.

Note: See attached for Group Self-Scheduling Guidelines

GROUP SELF-SCHEDULING GUIDELINES

* REMEMBER: The Key to success is co-operation. We must also remember to be fair, responsible and keep an open mind. The Group Self-Scheduling Process will benefit each one of us by allowing more freedom of choice. At the same time we must keep in mind that first and foremost the unit must be staffed properly.

General Information

- 1. The group self-scheduling guidelines must follow the provisions of the Collective Agreement.
- 2. The guidelines are generic and are used on all units that practice group selfscheduling.

- 3. Group self-scheduling is a process whereby a group of 2 or more nurses agree to work together and take responsibility for coordinating and selecting their scheduled shifts within the combined master rotation schedules of the group over the scheduling period. Each nurse must meet their current EFT requirement and the additional requirements contained herein.
- 4. The out-of-scope Manager has the responsibility of overseeing the process and has final authority in resolving issues.
- 5. Any nurse within a unit may opt for group self-scheduling or a master rotation.
- 6. A nurse opting for group self-scheduling has the option of changing to the master rotation and a nurse opting for a master rotation has the option of changing to group self-scheduling. The timing of these changes is prior to the next set of selection of hours and is subject to #8 of the Group Self Scheduling MOU.
- 7. To form a self-scheduling group, nurses must be of equal competency and skill sets. Where necessary, consideration must also be given to ensuring that there are nurses who are able to take charge/special skill assignments (e.g. triage, LDRP, OR, clinic etc.) based on the Employer master rotation requirements.
- 8. Group self-scheduling meetings should be held at least once a year so that there is a forum for all participating nurses to voice concerns or make suggestions for change.

GUIDELINES

- 1. The Employer established master rotation will be used as the basis for each nurse within the group self-scheduling unit.
- 2. Nurses within the self-scheduling group are not allowed to schedule themselves in a way that would incur any overtime costs, unless pre-approved by their out of scope Manager.
- 3. Each nurse must work a minimum of one (1) shift within each pay period.
- 4. Shifts can be interchanged once selections are completed, however all nurses may be recommended to work a minimum of four (4) week day shifts in a six (6) week period in order to maintain adequate experience and for evaluation purposes.
- 5. The self-scheduling group must comply with the provisions of the Collective Agreement and meet the deadlines of these guidelines and the current posting practices.
- 6. Terms and conditions of the Collective Agreement, Appendices and Supplementary Memorandums of Understanding shall remain in full force and effect.

- 7. EFT requirements will be averaged over the three (3) consecutive bi-weekly periods in the shift schedule pattern or two (2) biweekly periods where it exists.
- 8. Out of scope Managers will receive the proposed schedule of the self-scheduling group no later than two (2) weeks prior to the required posting date for the schedule period. The out of scope Manager must approve the proposed schedule prior to it being posted as part of the unit posted schedule.
- 9. Vacation scheduling will be done in accordance with Article 21.
- 10. Each nurse within the self-scheduling group must fulfill their base EFT for the posting period.
- 11. All changes to the self-scheduling group schedule must be confirmed with the out of scope Manager in accordance with Article 1502.

33. Joint Safe Patient Care Committee

In the interest of safe patient care and safe nursing practice, the parties agree to establish a Tripartite Manitoba Nurses Union/Employer/Manitoba Health Committee to review and make recommendations on issues of mutual interest to ensure effective and safe health care service delivery.

Topics will include but are not limited to:

- a) Nursing practice conditions
- b) Safety of patients and nurses
- c) Safe staffing model(s)
- d) Role of Charge Nurse
- e) Patient Care hours
- f) Community nursing

The Committee will be struck and will commence work within ninety (90) days of ratification. The parties shall create terms of reference for the Committee. Such terms of reference shall include a process whereby agreed recommendations may be implemented within the duration of the Collective Agreement.

34. Transfer – Job Selection

1. The Employer and the Union mutually agree that the following understandings apply to Article 30 Vacancies, Term Positions, and New Positions with respect to Nurses transferring to posted vacancies, term positions, and new positions for the duration of the Collective Agreement. The following criteria will be utilized to determine if the nurse(s) are eligible for transfer;

- i. meet the qualifications of the posted position including the relevant experience required for that specific position;
- ii. Nurse III, IV and V positions in Acute Care/Long Term Care and all Clinical Nurse Specialists and Nurse Practitioners are excluded
- 2. If more than one candidate meets the transfer criteria, the most senior nurse will be awarded the position.
- 3. If no candidates meet the transfer criteria, the successful candidate will be determined through a competitive process as per Article 2502.
- 4. The continuation of this MOU beyond the term of the Collective Agreement will only be on the mutual agreement of the parties.

35. Collaborative Discussions to Optimize Patient Care

WHEREAS it is the desire of the Manitoba Government to ensure that quality health care services are delivered to Manitobans through a system which is, to the fullest extent possible, sustainable, accessible, cost-effective, efficient and effective;

AND WHEREAS Nurses are an integral part of the delivery of health care services in facilities, programs and communities throughout the province, and have a shared commitment and responsibility for the provision of appropriate, quality health care to Manitobans;

AND WHEREAS the Employers are responsible for the provision of health care services and programs for Manitobans, and as such desire to attract and retain nurses to work as part of the delivery of those services;

AND WHEREAS the parties recognize that it is in the best interest of the health care delivery system to have all parties working together towards these mutual goals, and the parties wish to enter into this Memorandum of Understanding to work towards the achievement of these goals through collaborative discussions to optimize patient care;

The parties do hereby agree to work together with Manitoba Health, during the term of this Collective Agreement, to make recommendations to the Deputy Minister of Health regarding the identification, development and implementation of system delivery changes that are intended to improve the effectiveness and efficiency of health care service delivery in Manitoba.

Recommendations will include but are not limited to:

- 1. improving scheduling practices to reduce the use of overtime and agency nurses;
- 2. create a balance of full-time and part-time positions;
- 3. improve the quality of work-life balance through the implementation of the group self-scheduling guidelines;
- 4. improving weekend staffing resources through broader implementation of the weekend worker;
- 5. focusing on safe practices and the reduction of WCB injuries;
- 6. ensuring the skill sets of specialty nurses are used to maximum effect in the delivery of quality health services.

The parties further agree to commit the necessary resources and expertise to this work.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION AND ST. BONIFACE HOSPITAL AND ST. BONIFACE NURSES LOCAL 5 OF THE MANITOBA NURSES' UNION

Re: Asthma Education Nurse(s)

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Asthma Education Nurse position at Health Sciences Centre and St. Boniface General Hospital.

This is without prejudice and precedent to existing/future St. Boniface Educator occupational classification.

- 1. The nurse will be an employee of Health Sciences Centre and will be a member of MNU Local 10.
- 2. An Asthma Education Nurse would be available to meet with families referred by the St. Boniface Pediatric Ambulatory Care Facility (ACF) team at St. Boniface General Hospital to discuss management of the child's asthma using an established asthma education program.

Duties performed by the Certified Asthma Educator would include:

- Gathering a focused asthma history
- Providing education based on the needs of the family, including problemsolving around family specific asthma issues and skill building, and based on content recognized by national asthma guidelines
- Assisting with the development of patient specific Asthma Action Plans
- Administering Spirometry where developmentally appropriate
- Providing written patient feedback to the ACF team
- Arranging follow up asthma education if required
- Ensuring the family is on the Children's Asthma Education Centre (CAEC) contact list for asthma education updates
- Evaluating the initiative based on family, ACF team members and educator satisfaction
- Serving as a resource for the ACF team on current approaches to pediatric asthma management

- 3. The terms of the Collective Agreement between Health Sciences Centre and MNU Local 10 shall be applicable to the Asthma Education Nurse.
- 4. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 5. Any disputes/grievances arising under the Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 6. The cost of parking at St. Boniface Hospital will be reimbursed to the nurse per the Health Sciences Centre/Manitoba Nurses' Union Local 10 Collective Agreement, in the event the nurse does not have a "reciprocal pass" supplied. It is understood that the nurse will be reimbursed for any additional costs she/he is charged for a reciprocal pass.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent and that Health Sciences Centre Nurses.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

Re: 10 Hour Shift

The Employer and the Union mutually agree that the following conditions and understandings are applicable to the 9.69 ("10") hour shift.

- 1. Each bi-weekly period is to provide eight (8) shifts of 9.687 ("10") hours duration; or a combination of 7.75 hour shifts and 9.687 hours that equal 77.50 hours in a biweekly period.
- Each shift of 9.687 ("10") hours duration is to be inclusive of two (2) twenty (20) minute rest periods and exclusive of one (1) meal period of at least thirty (30) minutes.

The official shift length is 9.687 hours, however the parties have agreed that due to exigencies of the payroll system that 9.69 hours shall apply until such time as the payroll system is able to accommodate three (3) decimal points.

3. Income Protection is accrued at the rate of 9.69 hours per month. It is utilized in hours of absence due to illness, e.g.,

- (a) absence due to illness for one (1) 9.69 ("10") hour shift utilizes 9.69 hours of accumulated income protection credits;
- (b) absence due to illness for two (2) 9.69 ("10") hour shift utilizes 19.374 hours of accumulated income protection credits.
- 4. Pay for Bereavement Leave will be calculated according to the amount of scheduled hours of work missed within the four (4) days following a death, e.g.:

one (1) scheduled 9.69 ("10") hour shift = 9.69 hours; two (2) scheduled 9.69 ("10") hour shifts = 19.38 hours.

- 5. The paid vacation entitlement that a nurse receives under the 9.687 ("10") hour shift pattern shall be equivalent in hours to the paid vacation entitlement on a seven and three-quarter (7.75) hour shift schedule pattern calculated in accordance with Article 21. Vacation shall be assigned on the nurse's scheduled shifts in the master rotation in effect on the nursing unit.
- 6. <u>Recognized Holidays</u>: A nurse required to work on a Recognized Holiday shall be paid in accordance with the collective agreement for all hours worked and in addition shall receive an alternate 7.75 hour shift off at her/his basic rate of pay in accordance with Article 2203.
- 7. <u>Standby</u>: Article 18 is applicable with the following amendments to Clauses 1807 and 1808 for the 10 hour shift memo.

1807 - Unless there is an insufficient number of nurses qualified for assignment for standby, the Employer shall assign standby on the Day/Night shift immediately following the nurse's last Day/Night shift, unless otherwise mutually agreed.

1808 – An employee may be required by the Centre to be available for duty for a period of not more than ten (10) hours consecutively unless otherwise agreed to between the employee and the Centre.

- 8. Where payroll limitations exist such that only two decimal points can be entered in regard to shift length, the shift length shall be rounded up to two decimal points.
- 9. There must be mutual agreement between the Employer and the Union to continue the 9.69 ("10") hour shift schedule pattern, otherwise the Collective Agreement or some other mutually agreeable variation of the Collective Agreement shall apply.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

Re: 12 Hour Shifts

FOR THE IMPLEMENTATION OF TWELVE (12) HOUR SHIFTS FOR REGISTERED NURSES AND LICENSED PRACTICAL NURSES:

Objective of Shifts

The objective of a change in shift for an extended work day is primarily to increase the effectiveness and efficiency of delivering patient care and/or an improvement in that care to the benefit of the patient.

Agreement

The Employer and the Union mutually agree that the procedures outlined below shall be followed in establishing twelve (12) hour shifts.

Protocol

Managers will notify the Director of Patient Services of any area interested in the twelve (12) hour shift.

The Manager will proceed as follows:

- (1) Hold staff conferences with the Registered Nurses, Registered Psychiatric Nurses and Licensed Practical Nurses;
- (2) Establish the fact that a majority of seventy percent (70%) wish to work the twelve (12) hour shift;
- (3) Set objectives;
- (4) Plan master rotation for the unit;
- (5) Plan twenty-four (24) hour nursing care plan to help staff organize their work over a longer period;

(6) The appropriate Director of Patient Services and Human Resources resource people will meet with the Manager and staff if requested.

The resource people will then submit the objectives, roster, and twenty-four (24) hour nursing care plan to the Director of Patient Services and Director of Human Resources for approval, not less than four (4) weeks before the area concerned wishes to commence the twelve (12) hour shift.

When approval has been given for an area to commence working the twelve (12) hour shift, the Employer must notify the President of Health Sciences Centre Nurses Local 10 and forward a copy of the approved rotation pattern.

During the eight (8) week period, the following should be monitored:

- (1) Absenteeism
- (2) Staff Replacement whether from DON floats or own staff
- (3) Overtime
- (4) Unusual Incidents
- (5) Drug Errors
- (6) Communications
- (7) Comments from the following:
 - -- Attending Doctors
 - -- Interns
 - -- Patients
 - -- Visitors
 - -- Staff
 - -- Other Departments

These, together with objectives, will be needed for evaluation at the end of the eight (8) week period.

PROVISIONS APPLICABLE TO THE TWELVE (12) HOUR SHIFT:

I <u>Definition</u>:

Each "twelve (12) hour" shift shall be eleven (11) hours thirty-seven and onehalf (37.5) minutes (11.625 hours) per day including no less than sixty (60) minutes of paid rest periods and excluding no less than thirty-seven and onehalf (37.50) minutes in unpaid time.

The official shift length is 11.625 hours, however the parties have agreed that due to exigencies of the payroll system that 11.63 hours shall apply until such time as the payroll system is able to accommodate three (3) decimal points.

"Twelve (12) hour" shifts may be scheduled as:

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- (a) Twelve (12) hours and twenty-five (25) minutes; or Twelve (12) hours and fifteen (15) minutes.
- (b) Two (2) rest periods of twenty (20) minutes each will be allocated by the Employer during a twelve (12) hour shift.
- (c) 1. In each shift of twelve (12) hours twenty-five (25) minutes there shall be two (2) meal periods of thirty-five (35) minutes and thirty-two and one-half (32.50) minutes respectively as allocated by the Employer.

The total meal period time of sixty-seven and one-half (67.50) minutes includes forty-seven and one-half (47.50) minutes of unpaid time and twenty (20) minutes of paid time.

2. In each twelve (12) hour and fifteen (15) minute shift there shall be two (2) meal periods of thirty (30) minutes and twenty-seven and one-half (27.50) minutes respectively as allocated by the Employer. The total meal period of fifty-seven and one-half (57.50) minutes includes thirty-seven and one-half (37.50) minutes of unpaid time and twenty (20) minutes of paid time.

III Hours of Work and Shift Schedules:

Full-time hours of work shall provide:

- (a) An average of six (6) shifts of 11.625 hours duration, and one (1) shift of seven and three-quarter (7.75) hours duration in each biweekly period; or
- (b) Twenty (20) shifts of 11.625 hours duration in each three (3) consecutive bi-weekly period.
- (c) That there shall be a combination of shifts of 11.625 ("12") hours duration and 7.75 hours duration that equal an average of seventy-seven and one-half (77.50) hours bi-weekly averaged over the three (3) consecutive bi-weekly periods in the shift schedule pattern.

- (d) Shift schedules shall be based on Master Rotation patterns planned in consultation with the nurses concerned, and provide for a minimum of forty-seven (47) hours off duty at one time, unless otherwise mutually agreed.
- (e) Overtime for full-time nurses shall be authorized time worked in excess of a scheduled shift as defined in (I) above or Article 1401(a), or in excess of the full-time hours defined in III (a) or III (b) above.

Overtime for part-time nurses shall be authorized time worked in excess of a scheduled 11.625 ("12") shift or seven and threequarter (7.75) hours respectively or hours worked in excess of the normal full-time hours in two (2) consecutive bi-weekly periods, in accordance with Article 16.

IV <u>Recognized Holidays</u>:

- (a) A nurse required to work on a Recognized Holiday shall be paid in accordance with the Collective Agreement for all hours worked and, in addition, shall receive an alternate 7.75 hour shift off at her/his basic rate of pay in accordance with Article 2203.
- (b) A nurse may accumulate three (3) days off given in lieu of Recognized Holidays in order to take two (2) consecutive 11.625 hour shifts off with pay. Such shifts shall be added to a weekend off or to scheduled days off or used to complete a partial week of vacation in accordance with Article 2206.

V Income Protection:

Income protection is accrued at the rate of 9.69 hours per month. It is utilized in hours of absence due to illness, e.g.:

- -- absence through illness for one (1) twelve (12) hour shift utilizes 11.625 hours of accumulated income protection credits.
- -- absence through illness for two (2) twelve (12) hour shifts utilizes 23.25 hours of accumulated income protection credits.
- -- absence through illness for one (1) twelve (12) hour shift plus one (1) eight (8) hour shift utilizes 19.375 hours of accumulated income protection credits.

VI <u>Bereavement Leave</u>:

Pay for bereavement leave will be calculated according to the amount of scheduled hours of work missed within the four (4) days following a death:

- -- four (4) scheduled twelve (12) hour days off = full pay for 46.5 hours.
- -- three (3) scheduled twelve (12) hour days off = full pay for 34.875 hours.
- -- two (2) scheduled twelve (12) hour days off = full pay for 23.25 hours.
- -- one (1) scheduled twelve (12) hour day off plus one (1) scheduled eight (8) hour day off = full pay for 19.375 hours.

VII <u>Vacation</u>:

The paid vacation entitlement that a nurse receives under the twelve (12) hour shift schedule pattern shall be equivalent in hours to the paid vacation entitlement on a seven and three-quarter (7.75) hour shift schedule pattern, calculated in accordance with Article 21. Vacation shall be assigned on the nurse's scheduled shifts in the master rotation in effect on the nursing unit.

VIII <u>Standby</u>: Article 18 is applicable with the following amendment to Clauses 1807 and 1808 for the 12 hour shift memo.

1807 - Unless there is an insufficient number of nurses qualified for assignment for standby, the Employer shall assign standby on the Day/Night shift immediately following the nurse's last Day/Night shift, unless otherwise mutually agreed.

1808 – An employee may be required by the Centre to be available for duty for a period of not more than twelve (12) hours consecutively unless otherwise agreed to between the employee and the Centre.

- IX A "weekend" shall mean the period from 2345 hours on Friday until 2330 hours on the immediately following Sunday.
- X Where payroll limitations exist such that only two decimal points can be entered in regard to shift length, the shift length shall be rounded up to two decimal points.
- XI The terms of 1504(h) shall be applicable.

PROCEDURES FOR AREAS DISCONTINUING THE TWELVE (12) HOUR SHIFT:

- A. When a majority of seventy percent (70%) of nurses in an area working the twelve (12) hour shift decide to return to the eight (8) hour shift, the following procedure must be carried out:
 - (1) The Manager is to notify the Director of Patient Services.
 - (2) The Director of Patient Services should hold a staff conference.
 - (3) The reasons for returning to the eight (8) hour shift should be documented.
 - (4) Establish the fact that a majority of seventy percent (70%) of the staff wish to return to the eight (8) hour shift.
 - (5) Set a tentative date for returning to the eight (8) hour shift. This must commence with the beginning of a new pay period.
 - (6) The Manager will then submit in writing to the Director of Patient Services and Human Resources, the area's intention with reasons for returning to the eight (8) hour shift for their approval.
- B. Management retains the right to discontinue the "12" hour shift rotation, subject to, amongst others, the following:
 - (i) patient care is adversely affected; or
 - (ii) performance and productivity deteriorate due to fatigue; or
 - (iii) if there are demonstrated increased costs.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

Re: Participation in Pension Plan

The Employer and the Union agree to participate in the Jointly Trusteed/Merged Pension Plan in accordance with the Trust Agreement and Plan Text as established by the Board of Trustees as anticipated and in accordance with the September, 1996 Memorandum of Understanding for Amalgamation of the Pension Plan for Nurses of Participating Health Care Organizations in Manitoba ("MHO Plan") and the Retirement Plan for Nurses of the Health Sciences Centre and St. Boniface General Hospital et al (HSC/SBGH Plan).

The parties agree that the plans' liabilities and assets, including surpluses, will be transferred from the existing plans to the successor plan. The contribution rate schedule as indicated in the Memorandum of Understanding of September, 1996 may only be amended by the process outlined in the Trust Agreement or through collective bargaining.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

Re: Secondment of a Health Sciences Centre Nurse Elected to Serve as President of the Local 10

The Employer and the Union agree each with the other as follows:

- 1. A nurse employed by the Employer who is elected to the full-time position of President of the Union, shall be considered as continuing in the employ of the Employer during the nurse's term of office as President of the Union and shall be considered to be seconded to the Union during the term of office. It is understood that the position vacated by the nurse seconded to the position of Union President shall be posted and maintained and/or replaced as an indefinite term.
- 2. For the purposes of administering the period of secondment, the Treasurer of the Union shall function as the official contact person in any dealings with the Employer. In addition the Treasurer of the Union shall be accountable for:
 - (i) notifying the Employer, in writing, of the official commencement and termination date of the President's term of office;
 - (ii) determining the bi-weekly payroll record of the President and notifying the Employer of same.

The Union shall save the Employer harmless from any claim from the President arising from alleged error(s) in the payroll record.

3. <u>Reimbursement of Employer Costs</u>

The Union shall assume the responsibility for reimbursing the Employer for total recovery of payroll and related costs associated with the President's term of office, as follows:

- (i) gross salary, including paid vacation, income protection and any other paid leave of absence authorized by the Treasurer;
- (ii) Employer portion of C.P.P.;
- (iii) Employer portion of E.I.;
- (iv) Workers Compensation premiums;
- (v) Payroll tax;
- (vi) Employer portion of Benefit Plan premiums (pension plan, group life insurance plan, dental plan);
- (vii) Pre-retirement leave.

The Employer shall provide the Union Treasurer with a monthly statement of the above-referenced payroll expenses incurred during the nurse's period of secondment to President of the Union.

- 4. It is understood that the Employer shall reimburse the Union for all travel expenses, i.e. parking, mileage from the facility to the meeting site incurred by the President when attending Regional NAC meetings, other regional joint committee meetings or any other regional meetings which the President is required or requested to attend.
- 5. Income Protection
 - (i) The Union President will accumulate sick pay credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Union President is absent during the secondment period due to accident or illness and the sick pay credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Union President out of sick leave credits accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.
 - (ii) Upon the nurse's return to work following the period of secondment the amount of income protection accumulated during the period of secondment will be reconciled against the amount of income protection utilized during this same period. In the event the difference is positive i.e. the amount accumulated is greater than the amount utilized, the nurse will be eligible to utilize the difference (unutilized income protection credits) at a future date. It is understood that utilization of these income protection credits may only occur once the nurse exhausts all income protection credits accumulated during her/his normal course of employment with the Employer.

(iii) It is further understood that these income protection credits shall not be stored in the nurse's income protection bank within the computerized payroll system. Following the period of secondment a record of these credits will be provided to the nurse along with a copy in the personnel file of the nurse. In the event and at the point that the nurse wishes to utilize these income protection credits she/he will advise the Human Resources Department. The Employer will pay said income protection and bill the Union for the cost.

6. <u>Disability & Rehabilitation Plan (D & R)</u>

The President will have coverage under the HEB Disability & Rehabilitation (D & R) Plan. During the D & R elimination period only unutilized income protection credits earned during the period of secondment will be paid.

7. Accumulation of Paid Vacation

The President will accumulate vacation credits on the same earning rate as she/he would have accumulated vacation credits had she/he not been seconded.

For the purposes of reconciliation, the Employer is financially responsible for the vacation earned by the nurse while she/he is engaged in her/his normal course of employment with the Employer; and the Union is financially responsible for the vacation earned by the nurse during the period of secondment.

8. <u>Seniority/Service</u>

- (i) Seniority shall continue to accrue during the period of secondment.
- (ii) Following the expiry of the period of secondment, the President's normal increment date will be delayed for a period of time equivalent to the period of secondment. The time worked between the date of the last increment to the date that the nurse assumed the office of President shall count toward the granting of the next increment.
- 9. This Letter of Understanding shall remain in force until revised by mutual agreement between the parties or until terminated by either party.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

Re: Secondment of a Health Sciences Centre Nurse Elected To Serve As Vice-President of Local #10

The Employer and the Union mutually agree as follows:

- 1. A nurse employed by the Employer who is elected to the position of Vice President of the Union, shall be considered as continuing in the employ of the Employer during the nurse's term of office as Vice President of the Union and shall be considered to be seconded to the Union on a full time basis during the term of office. It is understood that the position vacated by the nurse seconded to the position of Union Vice-President shall be posted and maintained and/or replaced as an indefinite term.
- 2. For the purposes of administering the period of secondment, the Treasurer of the Union shall function as the official contact person in any dealings with the Employer. In addition the Treasurer of the Union shall be accountable for:
 - (i) notifying the Employer, in writing, of the official commencement and termination date of the Vice President's term of office;
 - (ii) determining the bi-weekly payroll record of the Vice President and notifying the Employer of same.

The Union shall save the Employer harmless from any claim from the Vice President arising from alleged error(s) in the payroll record.

3. <u>Reimbursement of Employer Costs</u>

The Union shall assume the responsibility for reimbursing the Employer for total recovery of payroll and related costs associated with the Vice President's term of office, as follows:

- (i) gross salary, including paid vacation, income protection and any other paid leave of absence authorized by the Treasurer;
- (ii) Employer portion of C.P.P.;
- (iii) Employer portion of E.I.;
- (iv) Workers Compensation premiums;
- (v) Payroll tax;
- (vi) Employer portion of Benefit Plan premiums (pension plan, group life insurance plan, dental plan);
- (vii) Pre-retirement leave.

It is understood that the Employer shall reimburse the Union for all travel expenses, i.e. parking, mileage from the facility to the meeting site incurred by the Vice President when attending Regional NAC meetings, other regional joint committee meetings or any other regional meetings when he/she is designated by the President to attend.

The Employer shall provide the Union Treasurer with a monthly statement of the above-referenced payroll expenses incurred during the nurse's period of secondment to Vice President of the Union.

- 4. <u>Income Protection</u>
 - (i) The Union Vice-President will accumulate sick pay credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Union Vice-President is absent during the secondment period due to accident or illness and the sick pay credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Union Vice-President out of sick leave credits accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.
 - (ii) Upon the nurse's return to work following the period of secondment the amount of income protection accumulated during the period of secondment will be reconciled against the amount of income protection utilized during this same period. In the event the difference is positive i.e. the amount accumulated is greater than the amount utilized, the nurse will be eligible to utilize the difference (unutilized income protection credits) at a future date. It is understood that utilization of these income protection credits may only occur once the nurse exhausts all income protection credits accumulated during her/his normal course of employment with the Employer.
 - (iii) It is further understood that the income protection credits earned during the period of secondment shall not be stored in the nurse's income protection bank within the computerized payroll system. Following the period of secondment a record of these credits will be provided to the nurse along with a copy in the personnel file of the nurse. In the event and at the point that the nurse wishes to utilize these income protection credits she/he will advise the Human Resources Department. The Employer will pay said income protection and bill the Union for the cost.

5. <u>Disability & Rehabilitation Plan (D & R)</u>

The Vice President will have coverage under the HEB Disability & Rehabilitation (D & R) Plan. During the D & R elimination period unutilized income protection credits earned during the period of secondment will be paid for those days that the Vice President would have been at the Local 10. The remaining EFT if applicable will be covered as per 3902.

6. <u>Accumulation of Paid Vacation</u>

The Vice President will accumulate vacation credits on the same earning rate as she/he would have accumulated vacation credits had she/he not been seconded.

For the purposes of reconciliation, the Employer is financially responsible for the vacation earned by the nurse while she/he is engaged in her/his normal course of employment with the Employer; and the Union is financially responsible for the vacation earned by the nurse during the period of secondment.

- 7. <u>Seniority/Service</u>
 - (i) Seniority shall continue to accrue during the period of secondment.
 - (ii) Following the expiry of the period of secondment, the Vice President's normal increment date will be delayed on a pro rata basis for a period of time equivalent to the period of secondment. The time worked between the date of the last increment to the date that the nurse assumed the office of Vice President shall count toward the granting of the next increment.
- 8. This Letter of Understanding shall remain in force until revised by mutual agreement between the parties or until terminated by either party.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

Re: Special Understandings - Clinical Nurse Specialists (CNS)

The terms of the Collective Agreement shall be applicable to the Clinical Nurse Specialists except as modified hereinafter. Inclusion of Clinical Nurse Specialists within the scope of the bargaining unit shall have no retroactive effect except as expressly provided for hereinafter.

- 1. The salary scale referenced herein (APPENDIX "A"-SALARIES) is established as a comprehensive salary. Accordingly, Articles 16, 17, 18 and Appendix "B" shall not apply.
- 2. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Clinical Nurse Specialist may vary hours worked in order to effectively carry out the accountabilities of the position.

3. Article 2103(a) - A nurse occupying a CNS position shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

Length of Employment	Rate at Which Vacation Earned
In the first ten (10) years In the eleventh (11th) to	Twenty (20) days per year
twentieth (20th) year inclusive In the twenty-first (21st) and subsequent years	Twenty-five (25) days per year
	Thirty (30) days per year

This provision shall apply to each Nurse IV (where applicable) and Nurse V (where applicable) employed by the Employer on date of signing. This article will not apply to nurses who are newly employed as, or reclassified to, Nurse IV (where applicable) or Nurse V (where applicable) after date of signing.

- 4. Article 2103(b) To include Clinical Nurse Specialists, effective April 26, 1991.
- 5. Article 2601(b) To include Clinical Nurse Specialists.
- 6. APPENDIX "A" SALARIES: See body of agreement.
- 7. APPENDIX "C" OCCUPATIONAL CLASSIFICATIONS

Added as new definition at the end of Appendix "C":

Clinical Nurse Specialist - is a Registered Nurse with academic preparation at the Master's level (nursing science), possessing expertise in a clinical nursing specialty, and who is assigned to a position designated by the Employer as a Clinical Nurse Specialist.

8. Seniority

Seniority within the bargaining unit shall be deemed to commence from the date that each incumbent last commenced continuous employment with the Health Sciences Centre.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

Re: Manitoba Nurses' Union's Process for Unfilled Positions [*Vacancies, Term Positions, New Positions*]

1. Vacancies will be posted as per the Collective Agreement. The posting will include the following statement:

"If there are no applicants meeting the posted qualifications, the Employer MAY CONSIDER an applicant who does not meet the posted qualifications."

- 2. Positions remaining unfilled following one (1) posting will be listed on an "Unfilled Position List". This list will be posted on the posting board. Positions on this list will be available on a first come, first served, basis. Any inquiry into a position on the list initiates discussion on that position. No further inquiries/applications on the position will be considered until the original inquiry has been completed. Applications/inquiries will continue to be received until the original application has been finalized. Anyone interested in applying for one of these positions should contact the Human Resources Services. If the Human Resources Services is not available, then a form setting out the requisition number, position, date, and time of the inquiry, including who is making the inquiry, will be left in the Employment Office at Human Resources. The Human Resources Services will confirm with the relevant Manager whether any discussions are underway. If an inquiry is under discussion, the nurse making the subsequent inquiry will be informed of this along with the expected decision date; he/she will have the opportunity to have his/her inquiry/application considered for other position(s) that remain unfilled.
- 3. If a position is removed from the Unfilled Position List for any reason, for more than two (2) weeks, it will be reposted as per the Collective Agreement. In order to award a position, it must either be posted as per Article 30 or be on the Unfilled Position List. A position will not be filled in any other manner. Positions which have been awarded from the Unfilled Position List and subsequently declined will be reposted pursuant to Article 30.
- 4. If an applicant is interested in an EFT different than what was posted, and the Employer can accommodate the request (i.e. .5 + .2 reconfigured to a .7) the reconfigured position is a new vacancy and must be posted as per the Collective Agreement. If unfilled, the position will be processed as in #2 above.

- 5. In the event that the Employer is prepared to award an unfilled position to an applicant who does not meet the posted qualifications, preference shall be given to the internal applicant who applied for the position when it was initially posted. If there were more than two (2) internal applicants, the selection process will be followed should those nurses continue to be interested in the position.
- 6. Positions will not be placed on the Unfilled Positions List unless and until they have first been posted in accordance with #1 above.
- 7. The Unfilled Positions List will be updated weekly and a copy will be provided to the Union.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSE LOCAL 10 OF THE MANITOBA NURSES' UNION AND ST. BONIFACE HOSPITAL AND ST. BONIFACE NURSES LOCAL 5 OF THE MANITOBA NURSES' UNION

Re: Pediatric Nurse Clinicians-Electrophysiology ("EP")

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Pediatric Nurse Clinicians-Electrophysiology ("EP") positions at Health Sciences Centre:

- 1. The Pediatric Nurse Clinicians EP will be employees of Health Sciences Centre and will be members of MNU Local 10.
- 2. Due to the nature of the work to be performed, the incumbents will accompany and provide care to pediatric patients undergoing EP procedures at St. Boniface General Hospital (SBGH).
- 3. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 4. Any disputes/grievances arising under the collective agreement shall be referred to and are the responsibility of the Health Sciences Centre.

- 5. When at SBGH, the Pediatric Nurse Clinicians EP, will be under the general direction of the Program Team Manager Electrophysiology and Special Procedures Unit, Cardiac Sciences Program.
- 6. The cost of parking at St. Boniface Hospital will be reimbursed the nurse per the Health Sciences Centre/Manitoba Nurses' Union Local 10 Collective Agreement, in the event the nurse does not have a "reciprocal pass" supplied. It is understood that the nurse will be reimbursed for any additional costs she/he is charged for a reciprocal pass.

In the event it is determined further pediatric patient related position(s) are required in the future, the position(s) shall be Health Sciences Centre positions.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent and that Health Sciences Centre Nurses Local 10 and St. Boniface Nurses Local 5 are separate bargaining agents.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN THE WINNIPEG REGIONAL HEALTH AUTHORITY (HEALTH SCIENCES CENTRE SITE) AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES' UNION

Re: Research Nurse Positions

The parties recognize the uncertain nature of funding for Research Nurse positions. Accordingly, it is agreed that:

 Term Research Nurse position(s) posted in accordance with Article 3006 will not require the reposting of position(s) upon receipt of further grant funding up to a maximum of two (2) years. This agreement will apply to all existing Research Nurse positions and to future Research Nurse positions which may be created after the date of signing of this Letter of Understanding. Any further extensions shall be the subject of discussion and mutual agreement between the Union and the Employer.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSE LOCAL 10 OF THE MANITOBA NURSES' UNION AND ST. BONIFACE HOSPITAL AND ST. BONIFACE NURSES LOCAL 5 OF THE MANITOBA NURSES UNION

Re: Cerebrovascular Nurse(s)

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Cerebrovascular Nurse positions at Health Sciences Centre and St. Boniface General Hospital.

- 1. The two (2) Cerebrovascular Nurse positions shall be posted - one (1) at SBGH and one (1) at HSC, and the successful applicants will be employees of the site in which the positions were posted.
- 2. Due to the nature of the work to be performed, the incumbents will perform their duties primarily at the site where they were awarded positions, but there will be a requirement to work, and provide consultation and/or relief in both facilities.
- 3. The terms of the respective collective agreements shall be applicable to the Cerebrovascular Nurse(s) except as modified hereinafter;
 - (a) Cerebrovascular Nurse(s) may, by mutual consent, work a variation in length of shifts and periods of time between shifts within a seventy-seven and one-half (77.50) hour, two-week period, in order to effectively carry out the duties and responsibilities of the position.
 - (b) Cerebrovascular Nurse(s) shall be paid at the Nurse IV rate as set out in Appendix A.
- 4. Should the nurse be required to work at the alternate facility, the cost of parking and travel expenses will be reimbursed as per the collective agreement in the event that the nurse does not have a "reciprocal pass".

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSE LOCAL 10 OF THE MANITOBA NURSES' UNION AND ST. BONIFACE HOSPITAL AND ST. BONIFACE NURSES LOCAL 5 OF THE MANITOBA NURSES UNION

Re: Therapeutic Aphoresis Program

The parties have mutually agreed that the following will occur regarding the therapeutic aphoresis program position(s) at Health Sciences Centre:

- 1. The nurses awarded the three (3) positions, equaling 2.0 EFT, will be employees of the Health Sciences Centre and will remain as employees of Health Sciences Centre and as members of Manitoba Nurses' Union Local 10.
- 2. Due to the nature of the work to be performed, incumbents will perform therapeutic aphoresis at both the Health Sciences Centre and St. Boniface Hospital.
- 3. All professional practice issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 4. Any disputes/grievances arising under the collective agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 5. The cost of parking at St. Boniface Hospital will be reimbursed the nurse per the Health Sciences Centre / Manitoba Nurses' Union Local 10 collective agreement, in the event the nurse does not have a "reciprocal pass" supplied.

In the event that it is determined further positions in the program are required the parties will meet to determine the employer of the additional positions.

It is agreed between the parties that this memorandum of understanding is without prejudice or precedent and that Health Sciences Centre Nurses Local 10 and St. Boniface Nurses Local 5 are separate bargaining agents.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN

HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES UNION

AND

CANCER CARE MANITOBA AND CANCER CARE NURSES LOCAL 36 OF THE MANITOBA NURSES UNION

Re: Child Health Program Nurses and Critical Care Program Nurses

The Employer(s) and the Union agree that the following conditions and understandings apply re nursing services provided through the Child Health Program Nurses, Critical Care Program Nurses, and Adult Ambulatory Care Nurses.

- 1. Child Health Program Nurses, Critical Care Program Nurses and Adult Ambulatory Care Nurses providing nursing services at CancerCare Manitoba are employees of the Health Sciences Centre and the terms and conditions of the Collective Agreement between the Winnipeg Regional Health Authority, Health Sciences Centre Site and Health Sciences Centre Nurses Local 10 shall be applicable to them.
- 2. Professional practice issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 3. Any other disputes/grievances arising under the WRHA HSC/HSC Nurses Local 10 Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 4. It is agreed that Child Health Program Nurses and Critical Care Program Nurses shall continue to provide the following nursing services in accordance with past practice:
 - CK5 Nurses assigned to Paediatric Clinics at CancerCare Manitoba
 - PICU nurses responding to Code Blue and Code 25 calls at CancerCare Manitoba
 - Code Blue nurses responding to "codes" for adult patients at CancerCare Manitoba
 - Adult Ambulatory Care Plastic Surgery Clinic nurses providing pre-op teaching and complex dressing changes for adult patients at CancerCare Manitoba

- CHOR nurses providing support to patients under anaesthesia receiving radiation treatment, including High Risk Anaethesia Nurse Clinician IIIs
- Adult Medicine Nurse IIIs providing care in the CancerCare Manitoba Hematology Clinic
- 5. Should any party to this agreement wish to alter any provision of this Memorandum, ninety (90) days' notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the parties are unable to reach agreement concerning the alternation(s), the dispute shall, at the request of any or all parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at Section 1302.
- 6. Should any party to this agreement wish to terminate this Memorandum, ninety (90) days' notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the concerns cannot be resolved or addressed at the above-mentioned meeting, then the notice to terminate will be accepted by all parties.
- 7. It is understood that this Memorandum of Understanding is for the duration of this Collective Agreement only.

MEMORANDUM OF UNDERSTANDING

SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN

HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES UNION

AND

CANCER CARE MANITOBA AND CANCER CARE NURSES LOCAL 36 OF THE MANITOBA NURSES UNION

Re: Nurse Practitioners CancerCare/Health Sciences Centre

The Employer(s) and the Union agree that the following conditions and understandings apply re Advanced Practice Nursing services provided through the CancerCare Manitoba Haematology, Medical, Surgical and Radiation Oncology programs by Nurse Practitioners:

- 1. Nurse Practitioners providing nursing services at WRHA Health Sciences Centre through the programs of CancerCare Manitoba Haematology, Medical, Surgical and Radiation Oncology are employees of CancerCare Manitoba and the terms and conditions of the Collective Agreement between the CancerCare Manitoba and the CancerCare Nurses Local 36 shall be applicable to them.
- 2. Professional practice issues shall be referred to and are the responsibility of CancerCare Manitoba.
- 3. Any other disputes/grievances arising under the CancerCare Manitoba/CancerCare Nurses Local 36 Collective Agreement shall be referred to and are the responsibility of CancerCare Manitoba.
- 4. Should any party to this agreement wish to alter any provision of this memorandum, ninety (90) days' notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the parties are unable to reach agreement concerning the alternation(s), the dispute shall, at the request of any or all parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at Section 1302.
- 5. Should any party to this agreement wish to terminate this memorandum, ninety (90) days' notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the concerns cannot be resolved or addressed at the above-mentioned meeting, then the notice to terminate will be accepted by all parties.
- 6. It is understood that this Memorandum of Understanding is for the duration of this Collective Agreement only

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES UNION AND WINNIPEG REGIONAL HEALTH AUTHORITY (Home Care) AND HOME CARE NURSES LOCAL 97 OF THE MANITOBA NURSES' UNION

Re: Nurse Clinician – Bleeding Disorder Program

The Employer(s) and the Union agree that the following conditions and understandings apply re nursing services provided by the Nurse Clinician-Bleeding Disorder Program in the Home Care Program.

- 1. The Nurse Clinician-Bleeding Disorder Program providing nursing services in the Home Care Program is an employee of the Health Sciences Centre and the terms and conditions of the Collective Agreement between the Winnipeg Regional Health Authority, Health Sciences Centre Site and Health Sciences Centre Nurses Local 10 shall be applicable to her/him.
- 2. Professional practice issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 3. Any other disputes/grievances arising under the WRHA HSC/HSC Nurses Local 10 Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 4. It is agreed that the Nurse Clinician-Bleeding Disorder Program shall continue to provide the following nursing services in accordance with past practice:
 - Following the patient into the community and providing education to Bleeding Disorder patients;
 - Providing education to the Home Care Nurses responsible for the care of the patient(s) including demonstrating skills, accessing veins, developing the appropriate therapy, IV techniques;
 - Providing education to the educational facilities that the patient(s) attend.

- 5. Should any party to this agreement wish to alter any provision of this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the parties are unable to reach agreement concerning the alteration(s), the dispute shall, at the request of any or all parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at Section 1302.
- 6. Should any party to this agreement wish to terminate this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the concerns cannot be resolved or addressed at the above-mentioned meeting, then the notice to terminate will be accepted by all parties.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN

HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES UNION

AND

WINNIPEG REGIONAL HEALTH AUTHORITY (Home Care) AND HOME CARE NURSES LOCAL 97 OF THE MANITOBA NURSES' UNION

Re: Child Health Program Nurses

The Employer(s) and the Union agree that the following conditions and understandings apply re nursing services provided by Child Health Program Nurses in the Home Care Palliative Program.

- 1. Child Health Program Nurses providing nursing services in the Home Care Palliative Program are employees of the Health Sciences Centre and the terms and conditions of the Collective Agreement between the Winnipeg Regional Health Authority, Health Sciences Centre Site and Health Sciences Centre Nurses Local 10 shall be applicable to them.
- 2. Professional practice issues shall be referred to and are the responsibility of the Health Sciences Centre.

- Any other disputes/grievances arising under the WRHA HSC/HSC Nurses Local 10 Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 4. It is agreed that the Child Health Program Nurses (CK5 Oncology) shall continue to provide the following nursing services in accordance with past practice:

Transition plans for terminally ill children to the WRHA Home Care Palliative Program from CK5 may result in one or more CK5 Nurses providing direct assistance with the care of the terminally ill child in the Community for a temporary period after transition and/or having CK5 Nurses available on a consultative basis to the WRHA Home Care Palliative Program with regard to the care of the terminally ill child.

- 5. Should any party to this agreement wish to alter any provision of this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the parties are unable to reach agreement concerning the alteration(s), the dispute shall, at the request of any or all parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at Section 1302.
- 6. Should any party to this agreement wish to terminate this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the concerns cannot be resolved or addressed at the above-mentioned meeting, then the notice to terminate will be accepted by all parties.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN

HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF THE MANITOBA NURSES UNION

AND

REHABILITATION CENTRE FOR CHILDREN AND CHILDREN'S REHAB NURSES LOCAL 58 OF THE MANITOBA NURSES UNION

Re: Child Health Program Nurses

The Employer(s) and the Union agree that the following conditions and understandings apply re nursing services provided through the Child Health Program Nurses:

- 1. Child Health Program Nurses providing nursing services at the Rehabilitation Centre for Children are employees of the Health Sciences Centre and the terms and conditions of the Collective Agreement between the Winnipeg Regional Health Authority, Health Sciences Centre Site and Health Sciences Centre Nurses Local 10 shall be applicable to them.
- 2. Professional practice issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 3. Any other disputes/grievances arising under the WRHA HSC/HSC Nurses Local 10 Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 4. It is agreed that Child Health Program Nurses shall continue to provide the following nursing services in accordance with past practice:
 - Children's Urology Clinic Nurse(s) will continue to attend and provide nursing services for Urology Clinic at the Rehabilitation Centre for Children on a (frequency of current clinics) basis
 - Children's Muscular Dystrophy Clinic Nurse(s) will continue to attend and provide nursing services for Muscular Dystrophy Clinic at the Rehabilitation Centre for Children on a (frequency of current clinics) basis.
- 5. The cost of parking at Rehabilitation Centre for Children will be reimbursed to the nurse per the Health Sciences Centre/Manitoba Nurses' Union Local 10 collective agreement, in the event the nurse does not have a "reciprocal pass" supplied.

- 6. The nurse shall be reimbursed for all travel between Health Sciences Centre and The Rehabilitation Centre for Children in accordance with the provisions of Article 2003 (a) of the Collective Agreement.
- 7. Should any party to this agreement wish to alter any provision of this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the parties are unable to reach agreement concerning the alteration(s), the dispute shall, at the request of any or all parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at Section 1302.
- 8. Should any party to this agreement wish to terminate this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the concerns cannot be resolved or addressed at the above-mentioned meeting, then the notice to terminate will be accepted by all parties.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN WINNIPEG REGIONAL HEALTH AUTHORITY HEALTH SCIENCES CENTRE SITE AND HEALTH SCIENCES CENTRE NURSE LOCAL 10 OF THE MANITOBA NURSES' UNION AND ST. BONIFACE HOSPITAL AND ST. BONIFACE NURSES LOCAL 5 OF THE MANITOBA NURSES UNION

Re: Clinical Nurse Specialist (CNS) HIV Program

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the 1.0 EFT Clinical Nurse Specialist – HIV Program position at Health Sciences Centre and St. Boniface General Hospital.

- 1. The nurse will be an employee of Health Sciences Centre and will be a member of MNU Local 10.
- 2. The incumbent will perform their duties primarily at Health Sciences Centre but there will be a requirement to work and provide consultation in both facilities.
- 3. The terms of the Collective Agreement between Health Sciences Centre and MNU Local 10 shall be applicable to the Clinical Nurse Specialist HIV Program except as modified hereinafter;

- (a) Clinical Nurse Specialist HIV Program shall be paid at the CNS rate as set out in Appendix A.
- (b) Memorandum of Understanding Supplementary to the Collective Agreement Re: Special Understandings - Clinical Nurse Specialists shall be applicable
- 4. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 5. Any disputes/grievances arising under the collective agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 6. The cost of parking at St. Boniface Hospital will be reimbursed the nurse per the Health Sciences Centre / Manitoba Nurses' Union Local 10 collective agreement, in the event the nurse does not have a "reciprocal pass" supplied. It is understood that the nurse will be reimbursed for any additional costs she/he is charged for a reciprocal pass.

It is agreed between the parties that this memorandum of understanding is without prejudice or precedent and that Health Sciences Centre Nurses Local 10 and St. Boniface Nurses Local 5 are separate bargaining agents.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSE LOCAL 10 OF THE MANITOBA NURSES' UNION AND ST. BONIFACE HOSPITAL AND ST. BONIFACE NURSES LOCAL 5 OF THE MANITOBA NURSES' UNION

Re: Renal Transplant Coordinator/Multi Organ Donor Coordinator

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the 1.0 EFT Renal Transplant Coordinators/Multi Organ Donor Coordinators positions at Health Sciences Centre and St. Boniface General Hospital.

1. The nurses will be employees of Health Sciences Centre and will be members of MNU Local 10.

- 2. The incumbents will perform their duties primarily at Health Sciences Centre but there will be a requirement to work and provide consultation in both facilities.
- 3. The terms of the Collective Agreement between Health Sciences Centre and MNU Local 10 shall be applicable to the Renal Transplant Coordinators/Multi Organ Donor Coordinators except as modified hereinafter;
 - (a) Renal Transplant Coordinator/Multi Organ Donor Coordinator shall be paid at the Nurse IV rate as set out in Appendix A.
- 4. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 5. Any disputes/grievances arising under the collective agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 6. The cost of parking at St. Boniface Hospital will be reimbursed the nurse per the Health Sciences Centre/Manitoba Nurses' Union Local 10 collective agreement, in the event the nurse does not have a "reciprocal pass" supplied. It is understood that the nurse will be reimbursed for any additional costs she/he is charged for a reciprocal pass.

It is agreed between the parties that this memorandum of understanding is without prejudice or precedent and that Health Sciences Centre Nurses Local 10 and St. Boniface Nurses Local 5 are separate bargaining agents.

MEMORANDUM OF UNDERSTANDING BETWEEN HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSE LOCAL 10 OF THE MANITOBA NURSES' UNION AND SEVEN OAKS HOSPITAL AND SEVEN OAKS NURSES LOCAL 72 OF THE MANITOBA NURSES' UNION

Re: Renal Transplant Coordinator/Multi Organ Donor Coordinator

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the 1.0 EFT Renal Transplant Coordinators/Multi Organ Donor Coordinators positions at Health Sciences Centre and Seven Oaks Hospital.

- 1. The nurses will be employees of Health Sciences Centre and will be members of MNU Local 10.
- 2. The incumbents will perform their duties primarily at Health Sciences Centre but there will be a requirement to work and provide consultation in both facilities.
- 3. The terms of the Collective Agreement between Health Sciences Centre and MNU Local 10 shall be applicable to the Renal Transplant Coordinators/Multi Organ Donor Coordinators except as modified hereinafter;
 - (a) Renal Transplant Coordinator/Multi Organ Donor Coordinator shall be paid at the Nurse IV rate as set out in Appendix A.
- 4. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 5. Any disputes/grievances arising under the collective agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 6. The cost of parking at Seven Oaks Hospital will be reimbursed the nurse per the Health Sciences Centre/Manitoba Nurses' Union Local 10 collective agreement, in the event the nurse does not have a "reciprocal pass" supplied. It is understood that the nurse will be reimbursed for any additional costs she/he is charged for a reciprocal pass.

It is agreed between the parties that this memorandum of understanding is without prejudice or precedent and that Health Sciences Centre Nurses Local 10 and Seven Oaks Nurses Local 72 are separate bargaining agents.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN

HEALTH SCIENCES CENTRE AND HEALTH SCIENCES CENTRE NURSE LOCAL 10 OF THE MANITOBA NURSES' UNION

AND

ST. BONIFACE HOSPITAL AND ST. BONIFACE NURSES LOCAL 5 OF THE MANITOBA NURSES' UNION

Re: Pediatric High Risk Anesthesia Nurse

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Pediatric High Risk Anesthesia Nurse position at Health Sciences Centre.

- 1. The Pediatric High Risk Anesthesia Nurse will be an employee of Health Sciences Centre and will be a member of MNU Local 10.
- 2. Due to the nature of the work to be performed, the incumbent will accompany and provide care to pediatric patients undergoing EP procedures at SBGH as follows:
 - Assisting Anesthetist with intubation, IV starts, infusions;
 - Providing environmental orientation for anesthesia (orientating new Anesthetists to the Operating Room set up);
 - Providing post operative recovery to patients including responding to emergency situations.
- 3. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
- 4. Any disputes/grievances arising under the Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
- 5. When at SBGH, the Pediatric High Risk Anesthesia Nurse, will be under the general direction of the Pediatric Anesthetist.

6. The cost of parking at St. Boniface Hospital will be reimbursed the nurse per the Health Sciences Centre/Manitoba Nurses' Union Local 10 Collective Agreement, in the event the nurse does not have a "reciprocal pass" supplied. It is understood that the nurse will be reimbursed for any additional costs she/he is charged for a reciprocal pass.

In the event it is determined further pediatric patient related position(s) are required in the future, the position(s) shall be Health Sciences Centre positions.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent and that Health Sciences Centre Nurses Local 10 and St. Boniface Nurses Local 5 are separate bargaining agents.

MEMORANDUM OF UNDERSTANDING SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT BETWEEN ST.BONIFACE GENERAL HOSPITAL AND **ST. BONIFACE NURSES LOCAL 5** OF THE MANITOBA NURSES' UNION AND THE WINNIPEG REGIONAL HEALTH AUTHORITY HEALTH SCIENCES CENTRE SITE AND **HEALTH SCIENCES CENTRE NURSES LOCAL 10** OF THE MANITOBA NURSES' UNION AND CONCORDIA GENERAL HOSPITAL AND **CONCORDIA NURSES LOCAL 27** OF THE MANITOBA NURSES' UNION AND VICTORIA GENERAL HOSPITAL AND **VICTORIA NURSES LOCAL 3** OF THE MANITOBA NURSES' UNION AND **GRACE GENERAL HOSPITAL** AND **GRACE NURSES LOCAL 41** OF THE MANITOBA NURSES' UNION AND SEVEN OAKS GENERAL HOSPITAL AND **SEVEN OAKS NURSES LOCAL 72** OF THE MANITOBA NURSES' UNION AND MISERICORDIA GENERAL HOSPITAL AND MISERICORDIA NURSES LOCAL 2 OF THE MANITOBA NURSES UNION AND **RIVERVIEW HEALTH CENTRE** AND **RIVERVIEW HEALTH CENTRE NURSES LOCAL 1A** OF THE MANITOBA NURSES'UNION

Re: Pacemaker Clinic Nurses (Nurse III)

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Pacemaker Clinic Nurse positions at St. Boniface General Hospital:

- 1. The Pacemaker Clinic Nurses will be employees of St. Boniface General Hospital Centre and will be members of MNU Local 5.
- 2. Due to the nature of the work to be performed the incumbents may be required to provide care at listed sites as follows:
 - To provide assessment, interrogation and adjustment of pacemakers and/or defibrillators for in-patients who are unable to attend the Pacemaker Clinic or
 - To discontinue a defibrillator prior to a surgical procedure and/or in conjunction with end of life treatment.
- 3. The terms of the Collective Agreement between St. Boniface General Hospital and MNU Local 5 shall be applicable to the Pacemaker Clinic Nurses except as modified hereinafter;
 - (a) Pacemaker Clinic Nurses shall be paid at the Nurse III rate as set out in Appendix A.
- 4. All professional practice issues and performance management issues shall be referred to and are the responsibility of St. Boniface General Hospital.
- 5 Any disputes/grievances arising under the collective agreement shall be referred to and are the responsibility of St. Boniface General Hospital.
- 6. The nurse shall be issued a "reciprocal pass". In the event that such a pass is not issued or pending receipt of same, the cost of parking at the Health Sciences Centre, Victoria General Hospital, Grace General Hospital, Seven Oaks General Hospital, Misericordia General Hospital and Riverview Health Centre shall be reimbursed to the nurse.
- 7. The nurse shall be reimbursed for all travel between St. Boniface General Hospital to Health Sciences Centre, Victoria General Hospital, Grace General Hospital, Seven Oaks General Hospital, Misericordia General Hospital and Riverview Health Centre in accordance with the provisions of Article 2003 (a) of the Collective Agreement.

It is agreed between the parties that this memorandum of understanding is without prejudice or precedent and that St. Boniface Nurses Local 5, Health Sciences Centre Nurses Local 10, Concordia Nurses Local 27, Victoria Nurses Local 3, Grace Nurses Local 41, Seven Oaks Nurses Local 72, Misericordia Nurses Local 2 and Riverview Nurses Local 1A are separate bargaining agents.

INDEPENDENT ASSESSMENT COMMITTEE (I.A.C.)

Chairpersons as per 1104(a)(i):

Nancy Brown Jan Currie Judy Kaprowy Brenda Lesyk

Yvonne Oxer Laverne Sturtevant

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