

LOCAL PROVISIONS

Between:

**ST. MICHAEL'S HOSPITAL
(hereinafter referred to as "the Hospital")**

And:

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

Combined

Expiry Date: MARCH 31, 2004

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APPENDIX 3

SALARYClassification - Registered Nurse

| | <u>Effective</u> <u>April 1, 2001</u> | <u>Effective</u> <u>April 1, 2002</u> | <u>Effective</u> <u>April 1, 2003</u> |
|---------|--|--|--|
| Start | \$21.12 | \$21.75 | \$22.44 |
| 1 Year | \$21.95 | \$22.61 | \$23.33 |
| 2 Years | \$23.10 | \$23.80 | \$24.56 |
| 3 Years | \$24.25 | \$24.97 | \$25.77 |
| 4 Years | \$25.40 | \$26.16 | \$27.00 |
| 5 Years | \$26.83 | \$27.64 | \$28.52 |
| 6 Years | \$28.26 | \$29.11 | \$30.04 |
| 7 Years | \$29.71 | \$30.60 | \$31.58 |
| 8 Years | \$31.45 | \$32.71 | \$33.75 |

Classification - Graduate Nurse

| | <u>Effective April 1, 2001</u> | <u>Effective April 1, 2002</u> | <u>Effective April 1, 2003</u> |
|----------------|---|---|---|
| Start | \$20.19 | \$20.79 | \$21.45 |
| 1 Year | \$21.02 | \$21.65 | \$22.34 |
| 2 Years | \$22.14 | \$22.80 | \$23.52 |
| 3 Years | \$23.28 | \$23.97 | \$24.73 |
| 4 Years | \$24.42 | \$25.15 | \$25.95 |
| 5 Years | \$25.78 | \$26.55 | \$27.39 |
| 6 Years | \$27.20 | \$28.01 | \$28.90 |
| 7 Years | \$28.58 | \$29.43 | \$30.37 |
| 8 Years | \$30.27 | \$31.48 | \$32.48 |

Classification– Charm Nurse

| | <u>Effective April 1,2001</u> | <u>Effective April 1, 2002</u> | <u>Effective April 1, 2003</u> |
|---------|--|---|---|
| Start | \$21.80 | \$22.45 | \$23.16 |
| 1 Year | \$22.77 | \$23.45 | \$24.20 |
| 2 Years | \$23.83 | \$24.54 | \$25.32 |
| 3 Years | \$25.01 | \$25.76 | \$26.58 |
| 4 Years | \$26.18 | \$26.96 | \$27.82 |
| 5 Years | \$27.65 | \$28.47 | \$29.38 |
| 6 Years | \$29.10 | \$29.97 | \$30.92 |
| 7 Years | \$30.60 | \$31.51 | \$32.51 |
| 8 Years | \$32.39 | \$33.68 | \$34.75 |

**APPENDIX 4 –
(FULL-TIME ONLY)**

(19.09)

ST. MICHAEL'S HOSPITAL

EDUCATIONAL ALLOWANCE

In addition to the salaries prescribed above, the Hospital will pay the monthly educational allowances set forth hereunder to **all** nurses who are covered by this Agreement and who have completed their probationary period subject to the following conditions:

- (a) the additional **qualification** of the degree or certificate held is utilized directly in the job currently being performed;
- (b) proof of the degree or certificate from a school of recognized standing must be submitted by the nurse to the Hospital;
- (c) in accordance with the above, a nurse possessing more than one degree or certificate shall be entitled only to the higher allowance provided hereunder;
- (d) payment of the allowance shall commence at the start of the first full pay period following filing with the Hospital of the required proof of standing.

Monthly Educational Allowances

| | |
|--|----------------------|
| C.H.A. Nursing Unit Administration Course or recognized Post Graduate Course | - \$15.00 per month |
| One Year University Diploma | - \$40.00 per month |
| Bachelor's Degree | - \$80.00 per month |
| Master's Degree | - \$120.00 per month |

A nurse who is covered by this Agreement and who has not completed his/her probationary period but who is otherwise qualified for an educational allowance may in the Hospital's discretion, receive such portion of the foregoing allowances as the Hospital may determine.

Educational allowances shall not be used in the calculation of overtime or other premium for any purpose in this Agreement.

APPENDIX 4

ST. MICHAEL'S HOSPITAL
SICK LEAVE PLAN (IN EFFECT PRIOR TO OCTOBER 23, 1981)

Pay for sick leave is for the sole and only purpose of protecting the nurse against loss of regular income when he/she is legitimately ill and unable to work and will be granted on the following basis:

- (a) sick leave will be allowed for sickness for nurses after the completion of their probationary period on the basis of one and one-half (1-1/2) days per month of active employment to a total of eighteen (18) days sick leave after one year's service;
- (b) it is understood and agreed that no sick leave will be allowed during the nurse's probationary period. Should the nurse remain in the employ of the Hospital after completion of his/her probationary period, his/her entitlements shall date back to the last day of hiring;
- (c) all unused sick leave may be accumulated to the credit of the nurse to a maximum of one hundred and twenty (120) days;
- (d) the nurse may be required to produce proof of sickness for any absence in the form of a medical certificate, and report to the Employee Health Unit when returning to duty;
- (e) nurses shall not be entitled to sick leave for sickness or accident compensable by the Workmen's Compensation Board;
- (f) the Hospital will continue credits for sick leave, until thirty (30) days following the expiry of the sick leave credits;
- (g) a nurse who voluntarily terminates her employment after five years service with the Hospital, will be entitled to receive payment of fifty (50) percent of his/her unused sick leave credits which have accumulated;
- (h) a nurse who retires at age 65 and who has completed five years of service with the Hospital will be entitled to receive 100% of his/her unused sick leave credits which have accumulated;
- (i) payment of sick leave credit during a period of vacation or leave of absence shall be at the sole discretion of the Hospital.

APPENDIX 5

LOCAL PROVISIONS

ARTICLE A – RECOGNITION AND DEFINITIONS

- A.1 The Hospital recognizes the Association as the sole bargaining agent of all Registered and Graduate nurses employed by the St. Michael's Hospital, engaged in a nursing capacity in The City of Toronto, save and except Clinical Leader Managers, persons above the rank of Clinical **Leader/Manager** and part-time nurses. (Full-time Only)
- A.2 The Hospital recognizes the Association as the **sole** bargaining agent of all Registered and Graduate nurses employed by the St. Michael's Hospital, engaged in a nursing capacity in The *City* of Toronto, as part-time nurses, save and except Clinical **Leader/Managers** and persons above the rank of Clinical **Leader/Manager**. (Part-time Only)
- A.3 The word "nurses" whenever used in this Agreement shall mean **only** those employees of the Hospital included in the **above-described** bargaining units.
- A.4 The phrase "Immediate Supervisor" whenever used in this Agreement shall mean Clinical Leader Manager who is excluded from the bargaining unit, to whom the nurse usually answers to and reports for duty.
- A.5 "Local Association" refers to the Ontario Nurses' Association at the St. Michael's Hospital, namely, Local 096.

ARTICLE B – MANAGEMENT RIGHTS

- B.1 The Association recognizes that the management of the Hospital and the direction of the working force are **fixed** exclusively in the Hospital and shall remain solely with the Hospital except as specifically limited by a provision of this Agreement. Without restricting the generality of the foregoing, the Association acknowledges that it is the exclusive function of the Hospital to:
- (a) Maintain order, discipline and **efficiency**;
 - (b) hire, assign, retire, discharge, direct, promote, demote, classify, transfer, lay-off, recall and suspend or otherwise discipline nurses, provided that a claim of discharge, suspension or discipline without just cause by a nurse who has completed his/her probationary period may be the subject of a grievance, and dealt with as hereinafter provided;
 - (c) determine, in the interest of efficient operation and highest standard of service, classifications, the hours of work, work assignments, methods of doing the work and the working establishment for any service;
 - (d) to manage the operation that the Hospital has engaged in, and to determine the number of personnel required, the services to be performed and the methods, procedures and equipment to be used **in** connection therewith;

- (e) Make and enforce and alter from time to time reasonable rules and regulations to be observed by the nurses, provided that such rules and regulations shall not be inconsistent with the provisions of this Agreement. Prior to implementation, the Hospital will advise the Association of changes in rules. The Association may make representations with respect to such rules and regulations.

B.2 It is agreed that these rights shall not be exercised in a manner inconsistent with the provisions of this Agreement.

ARTICLE C UNION COMMITTEES AND UNION REPRESENTATIVES

C.1 There shall be twenty-four (24) Union representatives for both the full-time and part-time bargaining units. Not more than one (1) representative will be from any unit with less than fifty (50) nurses and there shall be no more than two (2) representatives from any unit. A member of the Executive may act in the absence of a Union representative.

C.2 A list of representatives of the Union will be posted on all units within the Hospital.

C.3 The Local Association will determine all Union Representatives. Every effort will be made to ensure each unit has one representative.

C.4 Negotiating Committee

There shall be up to six (6) representatives on the Negotiating Committee including a member from the part-time bargaining unit.

C.5 Grievance Committee

There shall be up to five (5) representatives on the Grievance Committee. This Committee may be supplemented by an additional ONA representative from the area in which the grievance occurred.

C.6 Association Committee

There shall be up to five (5) representatives of each of the parties on the Association Committee. Part-time nurses may serve on this Committee. Part-time members will be permitted providing prior notification is given.

C.7 Professional Development Committee

There shall be three (3) representatives of the Hospital and three (3) representatives of the Union on the Professional Development committee.

C.8 Union Interview

The Union interview shall take place during the orientation period, for the purpose of interviewing newly hired nurses.

The Hospital will continue its practice of issuing to the Local Executive the annual schedule of planned orientation sessions.

On the first day of any such session, the Hospital will provide to the Local Executive a list of the nurses attending, including her/his name, status, and unit to which each nurse is hired.

The **Local** Executive and the Hospital shall schedule the time for the Union **interview**, at a mutually agreeable time.

C.9 A copy of the Collective Agreement will be provided to each newly hired nurse during her orientation period to the hospital.

C.10 Association-Hospital Meetings

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

ARTICLE D - SCHEDULING - HOURS OF WORK – REGULAR TOUR SYSTEM (EIGHT (8) HOUR TOURS)

- D.1**
- (a) In each two (2) week period, two (2) consecutive days off will be scheduled and nurses may be scheduled to work more than five (5) but no more than seven (7) consecutive days, except by mutual consent. At least two (2) consecutive days off will be scheduled after seven (7) consecutive days of work. Split days off will be kept to a minimum
 - (b) The Hospital will schedule at least every second (2nd) weekend off; in the event of failure to give every second (2nd) weekend off, an overtime premium (in accordance with 14.03) shall be paid for the second (2nd) and every successive weekend until a weekend is scheduled off, save and except where:
 - i) such weekend has been worked by the nurse to satisfy specific days off requested by such nurse, or
 - ii) such nurse has requested weekend work; or
 - iii) such weekend is worked as a result of an exchange of shifts with another nurse.
 - (c) At least two off-tours shall be scheduled between shifts and at least six off-tours shall be scheduled following night duty. A shorter period of time between changes of shift may be agreed upon by mutual consent.
 - (d) Schedules covering a six (6) week period will be posted no less than twenty-eight (28) days in advance.
 - (e) Requests for change in posted schedules may be made in writing provided they are co-signed by the nurse willing to exchange days off or tour of duty. These written requests shall be kept for three (3) months. Such requests shall not be unreasonably denied.

- (9) Split tours will not be scheduled.
- (g) **Christmas/New Year**

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

Time off at Christmas shall include December 24th, 25th, and 26th. Time off at New Year's shall include December 31st and January 1st, unless otherwise mutually agreed.

Time worked at Christmas shall include December 24th, 25th, and 26th. Time worked at New Year's shall include December 31st and January 1st, unless mutually agreed otherwise.

Scheduling regulations may be waived between December 15th and January 10th in order to accommodate this time off.

A nurse who is scheduled to work either Christmas or New Year's shall be permitted to request vacation prior to Christmas in conjunction with Christmas time off ~~or~~ following New Year's in conjunction with New Year's time off subject to operational requirements. (Full-time only)

Vacations may be granted between Christmas and New Year's subject to operational requirements. (Full-time only)

A nurse must indicate her preference for either Christmas or New Year's time off, to the appropriate Clinical Leader/Manager, in writing, no later than November 1st. When a scheduling conflict arises amongst nurses requesting the same time off, priority will be given to the nurse who's requested time off was not granted the previous year. Where a conflict still exists, the deciding factor shall be seniority. Where the Hospital is able to grant time ~~off~~ for both Christmas and New Year's, the most senior nurse(s) will be offered first opportunity to accept or decline. The Hospital will endeavour to post a schedule indicating Christmas and New Year's time off as well as regularly scheduled days off and scheduled shifts to be worked by November 25th, but no later than December 1st.

- (h) The Hospital shall equitably distribute shift work amongst nurses in a unit working the same shift rotation.
- (i) The Hospital will equitably distribute weekends off in each unit among general staff.
- (j) A nurse shall not be required to work more than ~~two~~ (2) different shifts in any seven (7) calendar day period unless otherwise agreed.
- (k) Employees shall be scheduled to rotate between days and shift tours, and where possible at least fifty (50) percent of tours worked shall be on the day shift, except where the employee chooses to work a greater percentage ~~of~~ shifts. This will be balanced over a period of no more than twelve (12) ~~weeks~~ or two (2) tour rotations.

- (l) An individual employee may request to work a straight evening or night shift rotation. Such request shall not be unreasonably denied.

It may be necessary to schedule a nurse that works a straight evening or night shift rotation to a period of not more than ten (10) day shifts for the purpose of assessing their performance, however, every effort will be made to assess a nurse working permanent shifts during his/her regular evening or night shift rotation. The Bargaining Unit President and the affected nurse will be advised of the change in schedule at least six (6) weeks before the schedule change is implemented.

- (m) A weekend is defined as being sixty-four (64) consecutive hours off work commencing at the conclusion of the Friday day shift until the commencement of the Monday day shift. The commencement time will vary in the event an employee works a straight evening or night shift rotation.

- (n) If new starting and stopping times are being introduced by the Hospital, six (6) weeks' notification in writing shall be given to the Association, unless to do so would be impossible in the circumstances. The Hospital shall meet with the Association prior to introduction of new starting and stopping times, so that the reason for the introduction of new starting and stopping times may be discussed and the Association may have the opportunity to make submissions.

- (o) The day shift shall be the first shift of the day.

- (p) Nurses who work and accumulate overtime in accordance with Article 14.06 and 14.09, shall be permitted to take their overtime at the appropriate premium rate, in time off which will be scheduled at a mutually agreeable time. The granting of such time off shall not be unreasonably denied. Effective date of ratification, where there is no mutually agreeable time, such time off must be taken within ninety (90) calendar days of accrual or payment at the appropriate premium rate shall be made.

The nurse will make a written request, as to when he/she wishes to take this overtime. The Hospital will endeavour to reply, in writing, to this request, within forty-eight (48) hours but no later than seventy-two (72) hours following submission of the request to the immediate Supervisor.

- (q) The Hospital intends to continue its present practice of requiring nurses assigned to the Operating Room and to the Recovery Room to work no more than one weekend in six (6). If, however, circumstances warrant a change in this practice, the Hospital will provide six (6) weeks' notice to the Association and to the nurses involved and the Hospital will meet with the Association for discussion prior to implementing any change.

- (r) The Hospital intends to continue its present practice of scheduling every weekend off for all nurses assigned to Diagnostic Imaging, Central Processing Department (CPD), Cysto, Ambulatory Clinics, Medical Day Care and Surgical Day Care. If, however, circumstances warrant a change in this practice, the Hospital will provide six (6) weeks' notice to

the Association and to the nurses involved and will meet with the Association for discussion prior to implementing any change.

- (s) Nurses working in the Operating Room shall be required to work no more than fourteen (14) shifts in any six (6) week schedule.
- (t) Nurses shall **be** permitted to request specific days off, by making such a request in writing to the immediate Supervisor. Such requests shall be made fourteen (14) days in advance of the posting of the schedule. These written requests shall be kept for three (3) months. Such requests shall not be unreasonably withheld.

D.2 A rest period will be granted as per Article 13.01 of the Central Agreement.

D.3 A meal period will be provided as per Article 13.01 of the Central Agreement.

D.4 Any reduction in the number of daily tours as the result of introduction of a longer daily tour by the Hospital must receive approval of the local Association.

D.5 Extended Tour System (12 hour tours)

The Hospital will endeavour to maintain and achieve the following objectives in the formation of extended working schedules.

1. A longer daily tour (extended tour) shall be introduced into any unit when:
 - (a) Seventy-five percent (75%) of the nurses in the unit so indicate by secret ballot and
 - (b) The Hospital **agrees** to implement the extended tours, such agreement shall not be withheld in an unreasonable arbitrary manner.
2.
 - (a) Subsequent to the initial vote, a trial period of at least sixteen (16) consecutive weeks will take place.
 - (b) All nurses on the unit must work the extended tour schedule during the trial period and thereafter, except for nurses on the staff of the unit on the day the vote is taken. These nurses may continue to work the seven and one-half (7-1/2) hour tour.
 - (c) Subsequent to the trial period, a second vote will be taken and must meet the requirements of (1.(a) above) in order to continue the extended tour schedule.
3. A longer daily tour (extended tour) may be discontinued in any unit when:
 - (a) Sixty-six (66%) of the nurses in the unit so indicate by secret ballot;
 - or
 - (b) The Hospital states its intention to discontinue the extended tour schedule **because** of

(i) adverse effects on patient care,

or

(ii) inability of the Hospital to provide a workable **staffing** schedule.

4. When notice of discontinuation is given by either party in accordance with paragraph (3) above, then:

(a) the parties shall meet within **two (2)** weeks of the giving of notice to review the request for discontinuation; and

(b) Where it is determined that the extended tour schedule will be discontinued, affected nurses shall be given sixty (60) days' notice before the schedules are so amended.

5. (a) A nurse shall not be required to work more than three (3) consecutive tours, except by mutual consent or during weeks which contain a paid holiday. At least one (1) extended tour off will be scheduled between shifts.

(b) Nurses shall receive every second (2nd) weekend off duty unless otherwise agreed to between the nurse and the Hospital. A weekend is defined as a minimum of five (5) consecutive extended tours off, which shall commence no later than 1930 hours on Friday.

In the event of failure to give every second (2nd) weekend off, an overtime premium (in accordance with Article 14.03) shall be paid for the second and every successive weekend worked until a weekend is scheduled off, save and except where:

i) Such weekend has been worked by the nurse to satisfy specific days off requested by such nurse; ~~or~~

ii) Such nurse has requested weekend work; or

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

6. The Hospital will endeavour not to require a nurse to change tours more than once during a week, unless otherwise mutually agreed.

At least four (4) off tours shall be scheduled following night duty. A shorter period of time between changes of shift may be agreed upon by mutual consent.

7. Schedules covering a six (6) week period will be posted no less than twenty-eight (28) days in advance.

8. Requests for change in posted schedules may be made in writing, provided they are **co-signed** by the nurse willing to exchange days off or tour of duty. These written requests shall be kept for three (3) months. Such requests shall not be unreasonably denied.

9. **Christmas/New Year**

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

Time off at Christmas shall include December 24th, 25th, and 26th. Time off at New Year's shall include December 31st and January 1st, unless otherwise mutually agreed.

Time worked at Christmas shall include December 24th, 25th, and 26th. Time worked at New Year's shall include December 31st and January 1st, unless mutually agreed otherwise.

Scheduling regulations may be waived between December 15th and January 10th in order to accommodate this time off.

A nurse must indicate her preference for either Christmas or New Year's time off, to the **appropriate Clinical Leader/Manager**, in writing, no later than November 1st. When a scheduling conflict arises amongst nurses requesting the same time off, priority will be given to the nurse who's requested time off was not granted the **previous year**. Where a conflict still exists, the deciding factor shall be seniority. Where the Hospital is able to grant time off for both Christmas and New Year's, the most senior nurse(s) will be offered first opportunity to accept or decline. The Hospital will endeavour to post a schedule indicating Christmas and New Year's time **off** as well as regularly scheduled days off and scheduled shifts to be worked by November 25th, but no later than December 1st.

A nurse who is scheduled to work either Christmas or New year's shall **be** permitted to request vacation prior to Christmas in conjunction with Christmas time off or following New Year's in conjunction with New Year's time off subject to operational requirements. (Full-time only)

Vacations may be granted between Christmas and New Year's subject to operational requirements. (Full-time only)

10. The Hospital will equitably distribute shift work amongst nurses in a unit working the same shift rotation.
11. Employees shall be scheduled to rotate between days and shift tours, and where possible at least fifty (50) percent of tours worked shall be **on** the day shift, except where the employee chooses to work a greater percentage of shifts. This will be balanced over a period of no more than twelve (12) weeks or two (2) tour rotations.

12. If new **starting** and stopping times are being introduced by the Hospital, six **(6)** weeks' notification in writing shall be given to the Association, unless to do so would be impossible in the circumstances. The Hospital shall meet with the **Association** prior to the introduction of new starting and stopping times, so that the reason **for** the introduction of new starting and stopping times may be discussed and the Association may have the opportunity to make submissions.
13. The day shift shall be the first shift of the day.
14. Nurses who **work** and accumulate overtime in accordance with Article **14.06** and **14.09** shall be permitted to take their overtime at the appropriate premium rate in time **off**, which shall be scheduled at a mutually agreeable time. The granting of such time off shall not be unreasonably denied.
- Effective date of ratification, where there is no mutually agreeable time, such time **off** must be taken within ninety (90) calendar days of accrual or payment at the appropriate premium rate shall be made.
- The nurse will make a written request, as to when **he/she** wishes to take this overtime. The Hospital will endeavour to reply, in writing, to this request, within **forty-eight** (48) hours but no later than **seventy-two (72)** hours following submission of the request to the immediate supervisor.
15. Nurses shall be permitted to request specific days' off, by making such a request, in writing, to the immediate Supervisor. Such requests shall be made fourteen (14) days in advance of the posting of the schedule. These written requests shall be kept for three (3) months. Such requests shall not be unreasonably withheld.
16. A rest period will be granted as per Article 13.02 of the Central Agreement.
17. A meal period will be provided as per Article 13.02 of the Central Agreement.
18. Split tours will not be scheduled.
19. When requested by nurses in each individual unit, a vote shall be conducted among the nurses working extended tours as to whether or not they will continue to work extended tours, or revert to normal tours (7.5 hour tours) between the period December 15th to January 7th.

Where the majority of nurses in a particular nursing unit vote by at least fifty-one percent (51%), then all nurses on the unit shall revert to normal tours (**7.5** hour tours) for the period of December 15th until January 7th. Following this period of time, they shall once again revert to their extended tour schedules.

D.6 Ten (10) Hour Tours

Ten (10) hour tours shall be implemented upon mutual consent of the Hospital and the Association. The Hospital shall not unreasonably refuse to implement a ten (10) hour tour.

There shall be a trial period of six (6) months. This trial period may be terminated upon written notification by either party upon at least sixty (60) days written notice to the other.

The Hospital and the Association shall meet following the completion of the trial period to review and assess the ten (10) hour tour with a view of implementing it on a permanent basis.

Ten (10) hour tours may be implemented when seventy-five percent (75%) of the nurses affected in a particular unit, agree by secret ballot to implement ten (10) hour tours.

The current Collective Agreement shall be amended to reflect ten (10) hour tours as follows:

1. Hours of Work – (Article 13)

For nurses working ten (10) hour tours, a regular day tour shall be comprised of **9.375** paid hours, which shall include **37½** minutes of paid break time and **37½** minutes of unpaid break time:

2. Scheduling Objectives

The following scheduling objectives contained in the Collective Agreement shall apply to all nurses working ten (10) hour tours as follows:

- (a) Nurses on ten (10) hour tours will not be assigned for more than four (4) consecutive tours.
- (b) At least fourteen (14) hours off will be scheduled between tours.
- (c) At least every second weekend off.
- (d) Schedules will be posted twenty-eight (28) days in advance for a six (6) week period.
- (e) Christmas/New Year's
 - i) All nurses shall receive at least five (5) consecutive days off or more at Christmas or New Year's, except in areas which normally are not scheduled to work on weekends or paid holidays.

Time off at Christmas shall include December 24th, 25th, and 26th. Time off at New Year's shall include December 31st and January 1st, unless mutually agreed otherwise.

Time worked at Christmas shall include December 24th, 25th, and 26th. Time worked at New Year's shall include December 31st and January 1st, unless otherwise mutually agreed.

Scheduling regulations may be waived between December 15th and January 10th in order to accommodate this time off.

A nurse must indicate her preference for either Christmas or New Year's time off, to the appropriate Clinical Leader/Manager, in writing, no later than November 1st. When a scheduling conflict arises amongst nurses requesting the same time off, priority will be given to the nurse who's requested time off was not granted the previous year. Where a conflict still exists, the deciding factor shall be seniority. Where the Hospital is able to grant time off for both Christmas and New Year's, the most senior nurse(s) will be offered first opportunity to accept or decline. The Hospital will endeavour to post a schedule indicating Christmas and New Year's time off as well as regularly scheduled days off and scheduled shifts to be worked by November 25th, but no later than December 1st.

ii) A nurse who is scheduled to work either Christmas or New Year's shall be permitted to request vacation prior to Christmas in conjunction with New Year's time off subject to operational requirements. Vacations may be granted between Christmas and New Year's, subject to operational requirements. (Full-time)

(f) Requests for changes in posted time schedules must be submitted in writing and co-signed by a nurse willing to exchange days off or work tours. Each unit will maintain a written record of requests for schedule changes. Such record will be kept for three (3) months.

- (g) A nurse working ten (10) hour tours shall be paid **9.375 hours** in a 24 hour period, exclusive of an unpaid meal period of **37½ minutes**, it being understood that at the change of tour there will normally be additional time required for reporting which shall be considered to be part of the normal daily tour for a period of up to fifteen (15) minutes duration. Should the reporting time extend beyond fifteen (15) minutes, however, the entire period shall be considered overtime for the purposes of payment under Article 14.

3. Vacations

Vacation entitlement for nurses working ten (10) hour tours shall be converted as follows:

| <u>Current Week Entitlement</u> | <u>Working Days Off Off</u> | <u>Equivalent Paid Hours</u> |
|---------------------------------|-----------------------------|------------------------------|
| 3 | 12 | 112.5 |
| 4 | 16 | 150.0 |
| 5 | 20 | 187.5 |
| 6 | 24 | 225.0 |

The vacation guidelines set out in Article F shall apply to nurses working ten hour tours.

D.7

Standby

- (a) The Hospital will notify the Bargaining Unit President or designate no less than six (6) weeks prior to initiating ongoing standby assignments on any unit.
- (b) Standby duty shall be evenly distributed among available experienced nurses in affected units.
- (c) Nurses required to be on standby shall be provided with beeper paging devices. The Hospital shall bear the expense of these devices provided to the nurses. The nurses shall be responsible for informing the Hospital of any device malfunctions or repair concerns.
- (d) Employees shall be entitled to exchange their standby assignments subject to management approval in accordance with clause (b) above and the conditions set out in D.1 (e) and D.5 (8) and provided that no additional premium payment will be due as a result of the exchange.
- (e) A nurse who is called in shall be paid in accordance with Article 14.06, and in addition, shall receive relief and lunch breaks in accordance with Article 13 and I 4 of the Collective Agreement.
- (9) The Hospital will provide access to parking. The Hospital will provide a security escort to or from his or her vehicle if a nurse so requests.

- (g) A nurse who is called in to work and,
- i) works a minimum of four hours and,
 - ii) works to 3:30 a.m. or beyond, and
 - iii) is scheduled for the next day shift following, not to include the late shift,

the nurse will be paid four (4) hours at the nurses regular straight time hourly rate and will be permitted leave for her/his scheduled day shift.

In addition, should operational needs require the **call** back nurse to report at 12:00 hours, the hours worked from 12:00 noon to the end of that scheduled shift will be paid at time and one-half (1%) the nurses' regular straight time hourly rate.

- (h) Nurses working in the Diagnostic Imaging **shall** only be required to take standby one (1) weekend in four (4). **If**, however, circumstances warrant a change in practice, the Hospital will provide six weeks' notice to the Association and to the nurses involved and will meet with the Association for discussion prior to implementing any change.
- (i) The Hospital agrees to continue to provide compensation for standby and phone calls, to nurses working on the Assertive Community Treatment Team in the Mental Health Program in accordance with the Memorandum of Agreement dated January 29th, 1999.

D.8 Master Schedules

When a unit creates a master schedule or when a unit changes a master schedule which is in use, a copy of the proposed master schedule will **be** submitted to the Bargaining Unit President or designate to ensure that the scheduling provisions of the Collective Agreement are adhered to.

All nurses on the unit impacted by a new master schedule or a change in an existing master schedule shall be eligible to vote. The vote shall be by secret ballot and will be conducted solely by the Union. Each schedule must have **seventy-five percent (75%)** approval of the total number of staff eligible to vote and who cast a ballot. All votes will be held on the unit within fourteen (14) days of written submission of the proposed schedule to the Bargaining Unit President or designate. The period of time to cast ballots will be by mutual agreement between the Hospital and the Union. All nurses eligible to vote will **be** notified of this right in advance but no later than three (3) days prior to the vote. All ballots will be counted immediately after the close of the voting period. The Union will post the results of the vote on the unit and advise the Clinical Leader/Manager.

If the vote is unsuccessful a **revised** schedule will be prepared and another vote will be held on the revised schedule in the manner described above, but no sooner than six (6) weeks from the time of the first vote.

All nurses on the **affected** unit will complete a trial period of at least one complete rotation of the master schedule or not more than six (6) months. Thereafter an opportunity for reassessment by the nurses in accompaniment with the Bargaining Unit President or designate and the Clinical Leader Manager of the

unit shall occur. Any required changes will be documented with the Bargaining Unit President or designate.

D.9 UNIT WEEKEND SCHEDULE,

When the Hospital and the Association agree to a unit weekend schedule the following provisions will apply:

Introduction and Discontinuation of Unit Weekend Schedule

1. When **seventy-five** (75%) percent of the employees on a Unit indicate, by secret ballot, their willingness to participate in a master schedule that accommodates the Unit Weekend Worker in accordance with Article 13.04 of the collective agreement, the Union and the Hospital will meet forthwith to arrange for such a trial.

The secret ballot vote will be conducted solely by the Union. All votes will be held on the unit within fourteen (14) days of written submission of the proposed schedule to the Bargaining Unit President or designate. The period of time to cast ballots will be by mutual agreement between the Hospital and the Union. All nurses eligible to vote will be notified of this right in advance but no later than three (3) days prior to the vote. All ballots will be counted immediately after the close of the voting period. The Union will post the results of the vote on the unit and advise the Clinical Leader/Manager.

The Employer agrees to implement a master schedule that accommodates the Unit Weekend Schedule, such agreement shall not be withheld in an unreasonable or arbitrary manner.

2. The positions required to accommodate the Unit Weekend Schedule will be posted on the Unit and filled by seniority from amongst the full-time nurses on the unit. If the position is from a vacancy it will be filled in accordance with Article 10.06(a). The filling of such positions will not result in the lay-off or loss of hours of work of any full-time or regular part-time nurse.
3. The trial of the Unit Weekend Schedule will run for a six (6) month period agreed upon by the parties. After five (5) months of the trial period, a meeting will be held with the unit, the Hospital and the Union to evaluate the trial period and make recommendations to improve the schedules, if needed. A further vote will then be conducted on the unit. Where the nurses in the positions agree and at least **seventy-five** percent (75%) of the nurses on the unit indicate their willingness to continue with the new master, the arrangement will continue.

ation

Nurses in these positions may discontinue the weekend schedules with thirty (30) days notice. Such position will be posted in accordance with number 2 above. If there is no applicant the unit weekend schedule will be discontinued.

Either party may discontinue the Unit Weekend Schedules with ninety (90) days notice. Upon receipt of such notice, a meeting **will** be held between the parties to discuss discontinuation. It is understood that such discontinuation shall **not** be unreasonable or arbitrary.

Should the Unit Weekend Schedule be discontinued, the nurses in these positions will revert back to their previous positions and the previous master rotation will be put in place.

D.10: 2D/2N Extended Tour Schedule

1. When the Hospital and the Union agree, the 2D 2N extended tour schedule shall be **instituted** when **seventy-five** percent (75%) of the employees on a particular nursing unit have so indicated by secret ballot. For employees who indicate to their Clinical **Leader/Manager** that they do not wish to work extended tours, the Hospital will endeavour to schedule these nurses on a **normal shift** rotation.
2. When less than **seventy-five** percent (75%) of the staff on a particular nursing unit vote, as outlined in paragraph 1, in favour of the 2D 2N extended tour schedule by secret ballot, the Union may approach the Hospital and ask them to consider the implementation of a combination 2D 2N extended tour schedule, other extended tours and normal (7.5 hour) tour in a particular Unit.
3. The **seventy-five** percent (80%) figure above may be varied by mutual agreement between the parties.
4. The period of time to cast ballots will be by mutual agreement between the Hospital and the Union. The secret ballot will be conducted solely by the Union, and the Union will post the results and advise the Clinical **Leader/Manager**,
5. At any meeting with the Hospital to discuss the 2D 2N schedule, a member of the Local executive should be in attendance.
6. The 2D 2N schedule may be discontinued in any unit when:
 - i) **sixty-six** percent (66%) of the nurses in a unit so indicate by secret ballot: or
 - ii) the Hospital decided to do so because of:
 1. adverse effects on patient care, or
 2. inability to provide a workable staffing schedule, or
 3. where the Hospital wishes to do so for other reasons which are neither unreasonable nor arbitrary, and states its intention to discontinue the extended tours in the schedule;

- iii) When notice of discontinuance is given by either party in accordance with number (ii) above, then:
 - 1. the parties shall meet within four (4) weeks of the giving of notice to review the request for discontinuance; and
 - 2. where it is determined that the extended tours will be discontinued, affected nurses shall be given sixty (60) days notice before the schedules are so amended.
7. (a) Employees shall not be required to work more than four (4) consecutive tours. Where schedules do not conform to this, the employee shall be paid a premium pay for the fifth and subsequent day until a day off is scheduled;
- (b) Employees shall receive every third (3rd) weekend off, which shall consist of six (6) consecutive extended tours, which shall commence no later than 1930 hours Friday.
- An employee will receive premium pay as defined in Article 14 for all hours worked on a third (3) consecutive and subsequent consecutive weekend until a weekend is scheduled off, save and except where:
- i) Such weekend has been worked by the employee to satisfy specific days off required by such employee; or
 - ii) Such employee has requested weekend work; or
 - iii) Such weekend is worked as the result of an exchange of shifts with other employees.
- (c) Where a nurse works extended tours on a paid holiday she shall be paid in accordance with Article 15 of the Central Agreement, and Article G of the Local provisions of the Collective Agreement.
8. All schedules will be done on the basis that each full-time employee will be scheduled for 1,950 hours per year.

ARTICLE E – SCHEDULING – HOURS OF WORK (PART-TIME ONLY)

- E.1 A rest period will be granted as per Article 13.01 of the Central Agreement.
- E.2 A meal period will be provided as per Article 13.01 of the Central Agreement.
- E.3 The Hospital will post schedules covering a six (6) week period no less than twenty-eight (28) days in advance for regular part-time nurses. Requests for change in posted schedules shall be made in writing. These written requests shall be kept for three (3) months.
- E.4 The Hospital agrees to offer part-time nurses additional shifts prior to bringing in agency nurses. This offer will be made to those nurses who have notified their Clinical Leader/Manager on a weekly basis of their availability to work additional shifts.

E.5 Any reduction in the number of daily tours as the result of introduction of a longer daily tour by the Hospital must receive approval of the local Association.

E.6 Regular part-time nurses who 'so desire will receive **five (5)** consecutive days off or more at either Christmas or New Year's. Christmas shall be defined as all **shifts** on **December 24th, 25th, and 26th**. New Year's shall be defined as all shifts on December 31st and January 1st. Regular part-time nurses must be available to **work** Christmas (December 24th, 25th & 26th) or New Year's (December 31st and January 1st) in accordance with their Regular Part-time commitment and regular scheduling practice unless mutually agreed **otherwise**.

This Article does not apply to those areas where regularly scheduled work is concentrated on a Monday through Friday basis.

Scheduling regulations may be waived between December 15th and January 10th in order to accommodate this time off.

A nurse must indicate her preference for either Christmas or New Year's time off, to the appropriate Clinical **Leader/Manager**, in writing, no later than November 1st. When a scheduling conflict arises amongst nurses requesting the same time off, priority will be given to the nurse who's requested time off was not granted the previous year. Where a conflict still exists, the deciding factor shall be seniority. Where the Hospital is able to grant time off for both Christmas and New Year's, the most senior nurse(s) will be offered first opportunity to accept or decline. The Hospital will endeavour to post a schedule indicating Christmas and New Year's time off as well as regularly scheduled days off and scheduled **shifts** to be worked by November 25th, but no later than December 1st.

E.7 The Hospital will endeavour to treat part-time nurses equitably with respect to shift assignments given the staff requirements on the nursing unit involved.

It is understood that all regular part-time nurses shall be scheduled up to their committed hours on their unit before any casual nurses are utilized on that unit. Once all regular part-time nurses are scheduled up to their committed hours, then extra available shifts will be distributed amongst available regular part-time and casual nurses on the unit on an equitable basis.

E.8 Regular part-time nurses shall receive weekends on the following basis:

- (a) A nurse working four (4) days per week shall receive at least two (2) weekends off in every four (4) week period, unless requested otherwise by the nurse.
- (b) A nurse working three (3) days per week shall receive at least three (3) weekends off in every six (6) week period.
- (c) A nurse working two (2) days per week shall not be required to work more than two (2) weekends in six (6).
- (d) A nurse working one (1) day per week shall not be required to work more than one (1) weekend in four (4).

The above provisions shall not apply where a nurse requests additional work.

A weekend shall be defined as at least a sixty-four (64) consecutive hour period commencing at the conclusion of the Friday day tour.

E.9 Requests for change in posted schedules may be made in writing, provided they are **co-signed** by the nurse willing to exchange days off or tour of duty. **Such** requests shall not be unreasonably denied. These requests will be kept for three **(3)** months.

E.10 Extended Tour System 12 Hour Tours – Part-time Only

The Hospital will endeavour to maintain and achieve the following **objectives** in the formation of extended working schedules:

1. A longer daily tour (extended tour) shall be introduced into any unit when:
 - (a) Seventy-five percent (75%) of the nurses in the unit so indicate by secret ballot and
 - (b) The Hospital agrees to implement the extended tours. Such agreement shall not be withheld in an unreasonable arbitrary manner.
2.
 - (a) Subsequent to the initial vote, a trial period of at least sixteen (16) consecutive weeks will take place.
 - (b) All nurses on the unit must work the extended tour schedule during the trial period and thereafter, except for nurses on the staff of the unit on the day the vote is taken. These nurses may continue to work the seven and one-half (7-1/2) hour tour.
 - (c) Subsequent to the trial period, a second vote will be taken and must meet the requirements of (1. (a) above) in order to continue the extended tour schedule.
3. A longer daily tour (extended tour) may be discontinued in any unit when:
 - (a) Sixty-six percent (66%) of the nurses in the unit so indicate by secret ballot;
or
 - (b) The Hospital states its intention to discontinue the extended tour schedule because of:
 - i) adverse effects on patient care,
or
 - ii) inability of the Hospital to provide a workable staffing schedule.

4. When notice of discontinuation is given by either party in accordance with number (3) above, then:
- (a) the parties shall meet within two (2) weeks of the giving of notice to review the request for discontinuation; and
 - (b) ~~Where~~ it is determined that the extended tour schedule will be discontinued, affected nurses shall be given sixty (60) days' notice before the schedules are so amended.
5. (a) A nurse shall not be required to work more than three (3) consecutive tours, except by mutual consent or during weeks which contain a paid holiday. At least one ~~(1)~~ extended tour off will be scheduled between shifts.
- (b) Nurses shall receive every second (2nd) weekend off duty unless otherwise agreed to between the nurse and the Hospital.

A weekend is defined as a minimum of five (5) extended tours off, which shall commence no later than 1930 hours on Friday.

In the event of failure to give every second weekend off, an overtime premium (in accordance with Article 14.03) shall be paid for the second (2nd) and every successive weekend worked until a weekend is scheduled off, save and except where:

- i) Such weekend has been worked by the nurse to satisfy specific days off requested by such nurse: or
 - ii) Such nurse has requested weekend work; or
 - iii) Such weekend is worked as the result of an exchange of shifts with another nurse.
6. The Hospital will endeavour not to require a nurse to change tours more than once during a week, unless otherwise mutually agreed.

At least four (4) off tours shall be scheduled following night duty. A shorter period of time between changes of shift may be agreed upon by mutual consent.

7. Regular part-time nurses who so desire will receive five (5) consecutive days off or more at either Christmas or New Year's period. Christmas shall be defined as all shifts on December 24th, 25th, and 26th. New Year's shall be defined as all shifts on December 31st and January 1st. Regular part-time nurses must be available to work Christmas (December 24th, 25th & 26th) or New Year's (December 31st and January 1st) in accordance with their Regular Part-time commitment and regular scheduling practice unless mutually agreed otherwise.

This Article does not apply to those areas where regularly scheduled work is concentrated on a Monday through Friday basis.

A nurse must indicate her preference for either Christmas or New Year's time off, to the **appropriate** Clinical **Leader/Manager**, in writing, no later than November 1st. When a scheduling conflict arises amongst nurses requesting the same time off, priority will be given to the nurse who's requested time off was not granted the previous year. **Where** a conflict still exists, the deciding factor shall be seniority. Where the Hospital is able to grant time off for both Christmas and New Year's, the most senior **nurse(s)** will be offered first opportunity to accept or decline. The Hospital will endeavour to post a schedule indicating Christmas and New Year's time **off** as well as regularly scheduled days off and scheduled shifts to be worked by November 25th, but no later than December 1st.

Scheduling regulations **may** be waived between December 15th and January 10th in order to accommodate this time off.

8. If new starting and stopping times are being introduced by the Hospital, six (6) weeks' notification in writing shall be given to the Association, unless to **do** so would be impossible in the circumstances. The Hospital shall meet with the Association prior to the introduction of new starting and stopping times, so that the reason for the introduction of new starting and stopping times may be discussed and the Association may have the opportunity to make submissions.
9. Schedules covering a six (6) week period will be posted no less than twenty-eight (28) days in advance.
10. Requests for change in posted schedules may be made in writing, provided they are **co-signed** by the nurse willing to exchange days off or tour of duty. Such requests shall not be unreasonably denied. These requests shall be kept for three (3) **months**.
11. When requested by nurses in each individual nursing unit, a vote shall be conducted among the nurses working extended tours as to whether or not they will continue to work extended tours, or revert to normal tours (7.5 hour tours) between the period December 15th to January 7th.

Where the majority of nurses in a particular nursing unit vote by at least fifty-one percent (**51%**), then all nurses on the unit shall revert to normal tours (7.5 hour tours) for the period of December 15th until January 7th. Following this period of time, they shall once again revert to their extended tour schedule.
12. The Hospital will endeavour to treat part-time nurses equitably with respect to shift assignments given the staff requirements on the nursing unit involved.
13. The Hospital agrees to offer part-time and casual nurses additional shifts prior to bringing in agency nurses. This offer will be made to those nurses who have notified their Clinical **Leader/Manager** on a weekly basis of their availability to work additional shifts.
14. The day shift shall be the first shift of the day.

15. Nurses shall be permitted to request specific days' off, by making such a request, in writing, to the immediate Supervisor. Such requests shall be made fourteen (14) days in advance of the posting of the schedule. Such requests shall not be unreasonably withheld. These requests shall be kept for three (3) months.
16. A rest-period will be granted as per Article 13.02 of the Central Agreement.
17. A meal period will be provided as per Article 13.02 of the Central Agreement.
18. Split tours will not be scheduled.

E.11 Tours of Less Than 7.5 Hours (Part-Time Only)

Where tours of less than seven and one half (7.5) hours are required, Articles F and G in their entirety will apply except as amended by the following:

- (a) The Hospital will endeavour to keep the number of tours comprised of less than seven and one half (7.5) hours to a minimum (or to a reasonable level):
- (b) Nurses working tours comprised of less than seven and one half (7.5) hours shall be granted a paid rest period;
- (c) No part-time nurse will be scheduled solely on tours which are comprised of less than seven and one half (7.5) hours in any pay period, except where such arrangements are requested by the nurse;
- (d) Nurses working tours comprised of less than seven and one half (7.5) hours, shall not be scheduled to work more than seven (7) consecutive tours. If a nurse is required to work on an eighth (8th) consecutive and subsequent tour, then she/he will receive premium pay for each tour so worked until a day off is scheduled;
- (e) No unit shall have tours of less than seven and one half (7.5) hours introduced into a rotation, without prior notification and discussion with the Union.
- (9) Nurses working tours of less than seven and one-half (7.5) hours will be paid premium rates in accordance with Article 14 for all hours worked in excess of the scheduled short tour.

E.12 Where a part-time nurse has worked and accumulated approved hours for which she or he is entitled to be paid premium pay (other than hours relating to work on paid holidays) such nurse will have the option of taking compensating time off equivalent to the applicable premium rate in accordance with Article 14.09.

ARTICLE F - VACATIONS

- F.1 (a) The date for determining vacation entitlement shall be the anniversary date of the **employee**, and the accrual of vacation will be in accordance with Article 16 of the Collective Agreement.
- (b) Employees may accrue vacation from year to year. The maximum accrual at any one time shall not exceed one and one-half of the employee's entitlement, and by each anniversary date it shall not exceed the employee's yearly entitlement, calculated in accordance with Article 16.

The Hospital will consider requests to carry over additional vacation entitlement under special circumstances. Such requests shall not be unreasonably denied.

- F.2 A week of vacation shall be defined as a seven (7) day period. Vacations may be scheduled to commence on any day of the week. Vacation may be granted at any time during the year. Any vacation entitlement over the maximum will be assigned by the Hospital following consultation with the **nurse(s)** involved.

- F.3 (a) The granting of vacation will not be unduly restrictive. Vacation schedules shall be posted by May 31st of all vacations requested by March 31st for the summer vacation period, from June 15th to October 15th. Requests for vacation outside this period shall be submitted ~~two~~ (2) months, if possible, prior to the requested vacation and acknowledgement will be given within seven (7) days of such request, and a reply will be given as soon as possible.
- (b) When a full-time or a regular part-time nurse requests vacation, the Hospital will endeavour to grant the weekend immediately preceding and the weekend immediately following the vacation as days off. Such request will not be unreasonably denied.
- (c) The Hospital shall notify the nurse prior to leaving on his/her vacation the date and time on which to report for duty following vacation.
- (d) When full-time and regular part-time nurses in a specific nursing unit desire the same or overlapping vacation periods, then the seniority ~~of~~ the nurses in the bargaining unit shall govern the assignment of vacations.

However, a nurse shall be able to exercise his/her seniority only once during the summer vacation period from June 15th to October 15th. (Applies to full-time and part-time nurses).

- (e) Special consideration shall ~~be~~ given in circumstances where a nurse has plans for an extended vacation.

- F.4 The Hospital will not unreasonably deny vacations.

- F.5 Nurses will receive their vacation pay with their regular cheque issued immediately preceding their commencement of vacation provided they have so requested in writing to the Clinical Leader Manager four (4) weeks **before** vacation.

F.6 Employees shall be **permitted** to have advance borrowing of five (5) days vacation credit. Should an employee leave prior to earning those credits, then the Hospital is authorized for all purposes including for purposes of the Employment Standards Act, and Regulations thereunder, to make deductions from the employees outstanding wages for those credits not yet earned.

F.7 Supplementary Vacation

Full-time nurses entitled to supplementary vacation pursuant to article 16.01(f) of the central Collective Agreement will request such vacation as per Article F. Unused supplementary vacation will be carried over to the following vacation year(s).

Part-time nurses entitled to supplementary vacation pursuant to article 16.06 of the central Collective Agreement will request such vacation as per Article F. Unused supplementary vacation will be carried over to the following vacation year(s). The additional 2% vacation pay will be paid out within one (1) month of earning the supplementary vacation.

G - F

G.1 The following shall be paid holidays:

| | |
|------------------------|------------------------|
| New Year's Day (Jan 1) | Labour Day |
| 2nd Monday in February | Civic Holiday |
| Good Friday | Thanksgiving Day |
| Victoria Day | November 11 |
| 2nd Monday in June | Christmas Day (Dec 25) |
| Canada Day (July 1) | Boxing Day (Dec 26) |

- G.2**
- (a) Where possible, paid holidays will be equitably distributed among the full-time nurses in each unit.
 - (b) A regular part-time nurse shall be available for work as listed in G.1 of the Collective Agreement on the following basis:
 - i) four (4) days per week (up to 0.8 FTE) = 5 paid holidays
 - ii) three (3) days per week (up to 0.6 FTE) = 4 paid holidays
 - iii) two (2) days per week (up to 0.4 FTE) = 3 paid holidays
 - iv) One (1) day per week (up to 0.2 FTE) = 2 paid holidays

Any regular part-time nurse may make themselves available for a greater number of the holidays referred to above, by mutual consent between the individual nurse and the Hospital.

G.3 For the purpose of this Article, a nurse will be considered to have worked on a paid holiday if the majority of hours worked on a tour coinciding with a paid holiday falls within the paid holiday.

G.4 When a nurse is scheduled off on a weekend which is preceded and/or followed by a paid holiday she/he shall be scheduled off the paid holiday(s), if agreed to by the individual nurse.

When a nurse is scheduled to work on a weekend which is preceded and/or followed by a paid holiday she/he shall be scheduled to work the paid holiday(s), if agreed to by the individual nurse.

- G.5** A full-time nurse shall receive at least six (6) of the holidays as scheduled days off in each calendar year.
- G.6** Where a full-time nurse is entitled to a lieu day, such lieu day will be a lieu day off with pay at his/her regular straight time hourly rate of pay, to be taken on a day arranged between the nurse and the Hospital in conjunction with a scheduled weekend off, if possible, such day to be granted within thirty (30) days prior to or following the holiday.

ARTICLE H - BULLETIN BOARDS

- H.1** The Hospital will provide space or bulletin boards on which the Association may post notices of Association meetings and other Association activities.
- The Hospital shall also permit the Association to post notices of meetings and other Association activities on a bulletin board in each nursing unit/department.

ARTICLE I - ASSOCIATION LEAVE

- I.1** Leave of absence for Association business shall be given up to a total of no more than twelve hundred (1200) hours (both full-time and part-time) during any calendar year, provided adequate notice is given to the Hospital. Such leave of absence shall not be arbitrarily withheld. It is agreed that not more than eight (8) nurses shall be absent on such leave at the same time. Additional leave of absence may be granted if mutually agreed by the Hospital and the Association.

ARTICLE J - SENIORITY LIST

- J.1** Seniority lists will be filed with the Bargaining Unit President of the Local Association or her designate, on or before May 1st and December 1st of each year.
- The Hospital will forward a copy of each list to the Association's Labour Relations Officer directly.
- The Hospital agrees to provide additional seniority lists to the Association immediately prior to serving notice of layoff to any nurse and prior to any program transfers.
- J.2** The Hospital will provide each nursing unit with a copy of the seniority list. The seniority list will be clearly accessible to all nursing staff on the unit.

ARTICLE K – AVAILABILITY FOR OVERTIME (FULL-TIME ONLY)

- K.1** Full-time nurses wishing to make themselves available for overtime work will submit their available time to their Clinical Leader Manager, a minimum of one (1) week prior to their availability. Payment for all overtime hours worked will be in accordance with Article 14 of the Collective Agreement.

In the event that overtime is available, full-time nurses will have priority over agency or registry nurses. This will not affect the scheduling of the part-time nurses.

ARTICLE L – PRE-PAID LEAVE

- L.1** The Hospital shall permit ten percent (10%) of the bargaining unit(s) (both full-time and part-time) to be on pre-paid leave each year. It is further understood that no more than five percent (5%) of the nurses in a nursing unit, and no less than one (1) nurse per nursing unit, shall be permitted on leave at one time.

ARTICLE M - MODIFIED WORK

- M.1** The Hospital will notify the Nurses' Association representative of the Occupational Health and Safety Committee monthly, of the names of all nurses who go off work due to a work related injury or when a nurse goes on L.T.D.

- M.2** When it has been medically determined that an employee is unable to return to the full duties of his/her position, due to a disability, the Hospital will notify and meet with a staff representative of the Ontario Nurses' Association and a member of the Local Executive to discuss the circumstances surrounding the employee's return to suitable work.

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

- M.4** Early and Safe Return to Work

The Hospital and the Union are committed to a consistent approach to meeting the needs of employees requiring temporary modified work or permanent accommodation in the workplace due to illness or injury. Returning such employees to work at the earliest opportunity is meaningful and practical for both the employee and the Hospital, and meets the parties' responsibilities under the law.

To that end, the Hospital and the Union agree to cooperate in facilitating the return to work of nurses requiring temporary modified duties or permanent workplace accommodation. The parties therefore agree as follows:

- (a) A joint Return to Work Committee (RWC) comprised of an equal number of Union and Hospital representatives will be established to assist nurses requiring modified work or permanent accommodation in the workplace. One of the Union representatives will be recognized as co-chair. The Committee will meet as necessary with no less than four (4) weeks notice

and no more than six (6) weeks notice (unless otherwise jointly agreed) at the request made by either co-chair to the other.

- (b) The Hospital will provide information to the Union co-chair, prior to a meeting of the RWC to include the following:
- i) nurses absent from work because of disability who are in receipt of Workplace Safety Insurance Board benefits
 - ii) nurses absent from work because of disability who are in receipt of Long Term Disability benefits
 - iii) nurses who have been absent from work because of disability for more than 23 months (in conjunction with the definition change period under LTD benefits.)
 - iv) nurses who are currently on a temporary modified work program
 - v) nurses who are currently permanently accommodated in the workplace
 - vi) nurses who require temporary modified work
 - vii) nurses who require permanent accommodation in the workplace

The parties further agree that information supporting the above will be provided to the RWC or participants of a meeting as described in (d) below.

- (c) A disabled nurse who is ready to return to work will provide the Employee Health Unit with medical verification of her ability to return to work including information regarding any restrictions.
- (d) When a returning nurse is in need of temporary modified duties or a permanent accommodation the Hospital will notify the RWC co-chairs or their designates and will provide to them the information obtained under (b) above. A meeting will be convened to include the nurse, a Union RWC representative, the Clinical Leader/Manager or Manager of the nurse, and a Human Resources representative. The meeting may **also** include an Employee Health Unit representative acting in an advisory capacity. This group will develop a return to work plan designed to facilitate the earliest practical return to full duties or full duties as modified on an individual case basis.
- (e) In creating a return to work plan, the committee and the manager will examine the disabled nurse's abilities and accommodation needs to determine if the nurse can return to her:
- i) original position
 - ii) original unit
 - iii) original unit/position with modifications to the work area and/or equipment and/or the work arrangement.

- iv) alternate positions outside the original unit.
- (9) In creating a return to work plan, the committee will consider the nurse's abilities and accommodation needs, and if she is unable to return to work in accordance with article (e) above, the committee will identify any positions in the Hospital in which the nurse may be accommodated.
- (g) A nurse in need of permanent accommodation may be temporarily accommodated until a permanent arrangement is established. Such a nurse will remain on the list of nurses requiring permanent accommodation provided under article (b) (vii) above.
- (h) The parties recognize that more than one nurse requiring accommodation may be suitable for a particular position or arrangement. In such cases the parties agree that in complying with articles (e) and (9 and (g) above, they must balance additional factors including in no particular order:
- i) skills, ability, and experience
 - ii) ability to acquire skills
 - iii) path of least disruption in the workplace
 - iv) seniority
- (i) When more than one nurse is deemed by the committee to be suitable for a particular position or arrangement, and the factors set out in articles (e), (f), (g) and (h) are relatively equal, seniority shall govern.
- (j) **The committee (or its designates) will** monitor the status of accommodated nurses and the status of nurses awaiting accommodation.
- (k) The Return to Work Committee will also develop and recommend overall strategies for:
- i) integrating accommodated workers back into the workplace
 - ii) educating nurses and managers about the legal, personal, and organizational aspects of returning employees requiring modified work or accommodation to work
- (l) **Alternate Placements**
- i) Before posting, a Human Resources Consultant or designate will examine all potential vacancies to determine if they can be used to accommodate a disabled nurse who requires accommodation but cannot return to her home unit in accordance with section (e) above.

- ii) If a vacancy is identified as suitable for accommodation purposes, the Human Resources Consultant may recommend holding the posting and consult with the union co-chair of the RWC as soon as possible to determine:
 - (A) whether the unit, after considering all factors including the number of accommodated nurses in the unit, the operational needs of the unit, the safety of nurses working in the unit, can reasonably accommodate a nurse
 - (B) whether the posting of the position under the collective agreement between the parties may be waived, subject to the approval of the Labour Relations Officer
 - (C) whether a position outside the bargaining unit may be an appropriate position for accommodating a nurse
- iii) When the parties agree to a permanent accommodation whether or not a job posting is waived, and whether or not the position is inside the bargaining unit, the parties will sign an agreement containing the details of the accommodation.

ARTICLE N - OCCUPATIONAL HEALTH AND SAFETY

- N.1** The Hospital will notify the Association, in writing, within one week of the Hospital becoming formally aware of any nurse who has been assaulted in the line of work.
- The Hospital will consider requests for reimbursement for damages incurred to the nurses' personal property, such as eye glasses, ripped uniforms, personal clothing, as a result of being assaulted while performing his/her work.
- N.2** The Hospital agrees to have in place policies and procedures to deal with violence in the workplace. The policies will address the prevention of violence, the management of violent situations, and support to employees who have faced violence. Such policies will be available through the Hospital Intranet or Unit specific manual.
- (a) The parties agree to the importance of applying the Hospital's policy regarding abuse of staff by patients, clients and/or visitors to support all Hospital employees. This policy may be reviewed from time to time and the Union will be consulted and have the opportunity for input into any revisions to that policy.
 - (b) In accordance with the policy, if incidents involving abusive client action occur, that such action will be recorded and reviewed at the Occupational Health and Safety Committee on a regular basis.

- (c) By agreement between the parties **and/or** other employee representatives outside of the bargaining unit, a task force or special committee may be struck from time to time to review specific safety or security issues common to employees in a unit or department. Any recommendations provided by such a task force or committee will receive full consideration by the Hospital.

N.3 The Hospital will provide a copy of the employee incident report to a nurse at the time that he or she **completes it**.

I O - SELF ING

O.1 The Association and the Hospital agree in principle to the concept of self-scheduling. Should the Hospital or the nurses wish to implement self scheduling on a particular unit, they shall do so according to the following criteria, initially on a test basis.

1. Seventy-five percent (75%) of the nursing staff must indicate by secret ballot their willingness to participate in self scheduling prior to the commencement of the test. It is understood that there will be a separate vote conducted for full-time and part-time nurses.
2. The test period shall be for six (6) months, after which the full-time and part-time nurses will again indicate by a seventy-five percent (75%) vote by secret ballot their desire to continue or discontinue self scheduling.
3. If seventy-five percent (75%) of the nursing staff indicate a willingness to participate in self-scheduling, all nurses on that unit will be expected to participate in the test for the ~~six~~ **(6) month period**.
4. Nurses participating in self scheduling shall be responsible for scheduling their hours including paid holidays and lieu days.
5. The prepared schedules shall be submitted to the Clinical Leader/Manager for review and approval to ensure that appropriate nursing coverage is maintained. The Clinical Leader/Manager's approval of the prepared schedule shall not be unreasonably withheld.
6. Self scheduling may be cancelled by either the Hospital or the Union upon a minimum of eight (8) weeks' written notice to the other party.
7. Self scheduling, including scheduling regulations, shall comply with all the provisions of the full-time and part-time Collective Agreements in all respects.
8. In the event that self scheduling is continued following the test, the Hospital and the Union shall meet prior to the end of the test period in **order** to discuss and mutually agree upon the terms of the continuation.
9. Prior to instituting self scheduling on a continuing basis in a unit, the Association will be provided with a copy of the self scheduling guidelines.

ARTICLE P - JOB SHARING

P.1 Introduction and Discontinuance

Although the introduction of a job sharing arrangement will be at the discretion of the Hospital, the Hospital shall not arbitrarily or unreasonably refuse to implement job sharing. Should a job sharing arrangement be implemented, the Hospital reserves the right to determine the number of job share arrangements on any one unit at any one time.

If the Hospital agrees to a **job** sharing arrangement, the following terms and conditions shall apply unless **otherwise** agreed to by the Hospital and the Association.

Implementation

1. Where the job sharing arrangement arises **out** of the filling of a vacant full-time position, the full-time position will be posted first, and, in the event that there are no successful applicants, then both job sharing positions will be posted and selection will **be** based on the criteria set out in the Collective Agreement
2. Job sharing requests with regard to full-time positions shall be considered on an individual basis. Staff members seeking a **job** sharing position must submit a written application to the relevant Clinical **Leader/Manager**. The Hospital shall reserve the right to determine the appropriateness of such arrangement.
3. An incumbent full-time nurse wishing to share his/her position may do so without having his/her half of the position posted. The other half of the job sharing position will be posted and selection will be made on the basis of the criteria set out in the Collective Agreement,
4. Where **two** (2) full-time employees on one unit wish to job share one **(1)** position, neither half will be posted.
5. Should one job sharing partner voluntarily transfer or resign, the remaining partner will continue his/her own schedule for a maximum of six weeks from the effective date of the transfer **or** resignation. The Hospital will determine the need, based on operational requirements, to replace such a vacancy. If the Hospital so determines to replace such a vacancy, the vacancy created will be posted. If no replacement partner is recruited, the position will revert back to a full-time position. If the position reverts back to full-time, and the remaining partner was previously full-time, the remaining partner will revert to his/her former status and the shared position will become his/her position. If the position reverts back to full-time and the remaining employee was previously part-time and there is no part-time position available on the same Unit, she/he **will** be laid off in accordance with the layoff provisions of the Collective Agreement. The shared position would then revert to a full-time position and be posted according to the Collective Agreement.

6. Total hours worked by the **two** (2) job sharers shall equal one (1) full-time position. The division of these hours over the schedule shall be determined by mutual agreement between the two (2) nurses.
7. The above schedules shall conform to the scheduling provisions of the Full-time Collective Agreement. Posted schedules shall be based on the schedule that would apply to a full-time nurse holding that position.
8. The job sharers involved will have the right to determine which partner works on scheduled paid holidays and job sharers shall only be required to work the number of paid holidays that a full-time nurse would be required to work unless mutually agreed otherwise.
9. (a) Job sharers will be expected to cover each other's incidental illnesses and vacations. If, because of unavoidable circumstances, one cannot cover for the other, the **Clinical Leader/Manager** must be notified and the Hospital will assume responsibility for filling the **shift**. Job sharers are not required to cover for their partner in the case of prolonged or extended absences due to illness.

A **job** sharer may exchange shifts with **her/his** partner, as well as with other nurses as provided by the Collective Agreement. Job sharers will be offered additional unscheduled tours only if they have made their availability known. It is understood that **job** sharers may only make themselves available on tours when neither job share partner is scheduled, unless otherwise agreed to by the **Clinical Leader/Manager**, and where such would not result in premium payment.

- (b) Pregnancy Parental Leave and other Leaves pursuant to Article 11 of the Central Agreement

In the event that one member of the job sharing arrangement goes on any of the above leaves of absence exceeding thirty (30) days, the Hospital will determine the need, based on operational requirements, to replace such a vacancy. If the Hospital so determines to replace such a vacancy, the remaining job share partner will have the option of covering all of the absent partner's **shifts** for the duration of the absence. If the remaining partner is unable to cover the entire leave of absence, he/she must inform the **Clinical Leader/Manager** of his/her intentions to cover all/some of the absent partner's shifts at least **two** (2) weeks prior to the posting of each schedule. If the remaining partner cannot cover for his/her partner, the Hospital will fill the shifts, as needed, from its part-time or casual pool, in accordance with Article E.7, part-time or post for a temporary replacement.

10. In the event that layoffs are required, the job sharers will be laid off in accordance with the layoff provisions of the Collective Agreement. It is understood that the layoff of one or more of the **job-sharers** will be viewed as eliminating the job-Shared position. For purposes of layoff, each job-sharer will be deemed to be .5 of an FTE.
11. Either the Hospital or the Association may discontinue the job sharing arrangement with ninety (90) days' written notice. Upon receipt of such notice a meeting shall be held between the Hospital and the Association within fifteen (15) days to discuss the discontinuation. It is understood and agreed that such discontinuation shall not be unreasonable or arbitrary.

In the event that a job share arrangement is discontinued due to operational requirements, the job sharer(s) will maintain their part-time status and will continue their part-time schedule.

ARTICLE Q – MISCELLANEOUS

- Q.1 The Hospital shall provide the Association with copies of changes to the standard charting and the standard ward policy manuals at the time of distribution within the Hospital. One completed copy of each manual will be provided to the Association.
- Q.2 The Hospital shall continue its present policy of paying nurses by bank deposit system. The Hospital will make its best efforts to ensure that this deposit shall be available not later than Friday of every second week by 7:00 a.m.
- Pay stubs should be available to nurses every second Thursday by noon.
- Q.3 The Hospital agrees to maintain its policy with regard to laundering and supplying of scrub clothing to nurses working in the Operating Room, Recovery Room, Cardiac Cath Lab, Renal Dialysis Unit, MS-ICU, CV-ICU, Emergency, Neuro-Trauma ICU, GE Unit and Labour and Birth. This scrub clothing shall be laundered and supplied to the nurses at no cost.
- Q.4 Paycheque Underpayment
- In the event of underpayment to a nurse equivalent to one (1), seven and one-half (7 %) hour shift or more, the Hospital shall pay the outstanding monies as soon as possible, but no later than three (3) business days after notification of the error is made to the Payroll Department.
- Q.5 The Bargaining Unit President of Local 96 will be scheduled to work days for his/her term of office. The Hospital shall pay the Bargaining Unit President seven (7) days salary each month. This salary is in lieu of all time spent attending meetings with the Hospital including all committees mandated by the Collective Agreement and time spent preparing for these committee meetings, for negotiating and implementing program transfers, for investigating and/or processing grievances, and for negotiating a renewal Collective Agreement up to but not including, arbitration.

- Q.6** The Hospital will review workload measurement data with the Bargaining Unit President-if circumstances require. The workload measurement system results may also be discussed at the Association-Hospital Committee meetings.
- Q.7** The Hospital will endeavour to provide a locker and change area for each nurse as close as possible to the nurses area of work. At a minimum the Hospital agrees to provide purse lockers or a secured area on each unit for employees personal valuables.
- Q.8** The Hospital will endeavour to provide an on call room for any nurse that is scheduled for standby duty. The Hospital is committed to providing permanent on call space for nurses upon completion of restructuring related construction.
- Q.9** The Hospital will endeavour to provide a staff lounge for all nurses to utilize while on rest and meal breaks as provided for in the Collective Agreement.
- Q.10** The Hospital shall endeavour to accommodate nurses' requests for schedule alterations for the purpose of education leave. Such requests shall not be unreasonably denied.
- Q.11**
- (a) Where the Hospital requires re-certification course(s) specific to clinical programs and/or services, the Hospital shall reimburse each nurse for the cost of such course(s) re-certification. Each nurse shall be paid his/her regular straight time hourly rate of pay for such course time subject to Article 9 of the Collective Agreement. Where practicable, the Hospital will provide on-site re-certification.
 - (b) The Hospital will reimburse a nurse for one re-certification per course per term of re-certification.
 - (c) Where the Hospital deems changes to existing certification requirements are essential to allow a nurse to practice in a specific unit, program or service, any such change will be discussed at the Association-Hospital Committee prior to implementation.
 - (d) It is understood that the above provisions do not apply to initial certification to meet requirements on a unit, program or service to which a nurse wishes to transfer.
- Q.12** Notification to Unsuccessful Job Applicants
- The parties agree that members of the bargaining unit who are unsuccessful candidate(s) for a posted position within the bargaining unit will be notified, in writing, within ten (10) days of the successful candidate accepting an offer and prior to the posting of the name of the successful candidate(s). Written notification to the successful candidate(s), the unsuccessful candidate(s) who are members of the bargaining unit and the Bargaining Unit President will be completed at the same time.

Q.13 Retiree Benefits – Process for Payment

Any bargaining unit nurse who retires and wishes to participate in the **benefit** plans as outlined in article 17.01(h) will provide advance payment of the benefits either through **post-dated** cheques provided on a yearly basis or through a **preauthorized** withdrawal process.

it is understood that any transaction would be dated the first of each and every month.

The Hospital will notify the Union of the **benefit** costs to retired nurses in January of each year, and each time the **benefit** costs are renegotiated by the Hospital.

ARTICLE R – SECURITY SERVICE

R.1 The Hospital agrees to establish a security task force to address personal safety issues of nurses and other Hospital staff at the change of evening and night tours.

Additionally, the Hospital and the Association **will** continue to have ongoing discussions as necessary regarding security for all nurses through the Hospital-Association Committee.

DATED AT Toronto, ONTARIO THIS 29th DAY OF May, 2002.

FOR THE HOSPITAL

FOR THE UNION

[Signature]

Lorraine Harper
Labour Relations Officer

[Signature]
[Signature]

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[Signature]

LETTER OF UNDERSTANDING

Between:

ST. MICHAEL'S HOSPITAL
(hereinafter referred to as "the Hospital")

And:

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

Re: Appendix 4 - EDUCATION ALLOWANCE (Full-time only)

The parties agree that effective the first day of the month following the date of ratification all current full-time employees at the Wellesley-Central site will be eligible to apply for the Education Allowance in accordance with the process described in Appendix 4 (Superior Conditions). The Hospital agrees to notify all current full-time nurses at the Wellesley-Central site of this entitlement, and the nurses will have a three (3) month window of time after receiving the notice from the Hospital to make an application in writing for the Education Allowance.

Dated at Toronto, Ontario, this 29th day of May, 2002.

FOR THE HOSPITAL

[Handwritten signatures for the Hospital]

FOR THE UNION

[Handwritten signatures for the Union]
Lorraine Harper
Labour Relations Officer

LETTER OF UNDERSTANDING

Between:

ST. MICHAEL'S HOSPITAL

And:

ONTARIO NURSES' ASSOCIATION

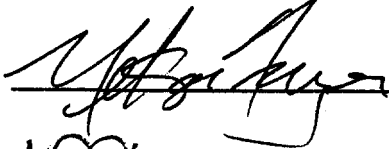
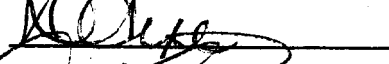


Re: Innovative Schedule

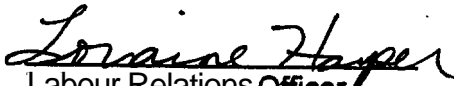


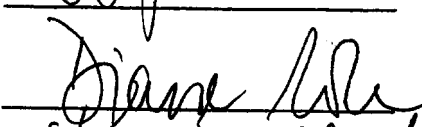


The parties agree to meet to discuss innovative scheduling concepts and processes for their application within ninety (90) days of ratification.

Dated at Toronto, Ontario, this 29th day of May, 2002.

FOR THE HOSPITAL

FOR THE UNION


 Labour Relations Officer






LETTER OF UNDERSTANDING

Between:

ST. MICHAEL'S HOSPITAL
(hereinafter referred to as "the Hospital")

And:

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

Re: Superior Condition - Regular Part-time Nurses Weekend Availability

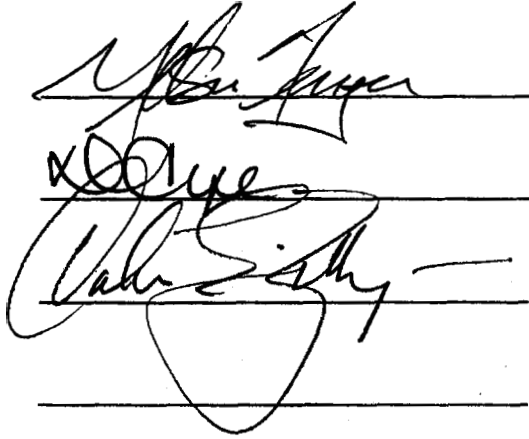
The parties agree that all Regular Part-time nurses formerly employed at the Wellesley-Central site of St. Michael's Hospital, hired prior to October 24, 1984, as Regular Part-time nurses with a commitment to three (3) tours or more per week must be available three (3) weekends out of ~~six~~ (6). Work on a Saturday or Sunday shall constitute a weekend worked in this case.

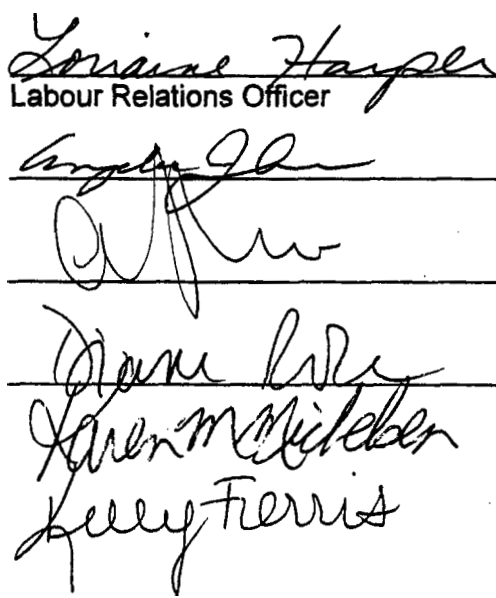
This agreement between the parties is attached to and forms part of the provisions of the Local Collective Agreement.

Dated at Toronto, Ontario this 29th day of May, 2002.

FOR THE HOSPITAL

FOR THE UNION

Three handwritten signatures for the Hospital are written over horizontal lines. The first signature is the most legible, appearing to be 'John Jones'. The second signature is less legible, and the third is a large, stylized signature.

Five handwritten signatures for the Union are written over horizontal lines. The first signature is 'Lorraine Harper', with 'Labour Relations Officer' printed below it. The other four signatures are less legible but appear to be 'Angela...', 'A. K.', 'Diane...', 'Loren M....', and 'Kelly Ferris'.

LETTER OF UNDERSTANDING

Between:

ST. MICHAEL'S HOSPITAL
(hereinafter referred to as "the Hospital")

And:

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

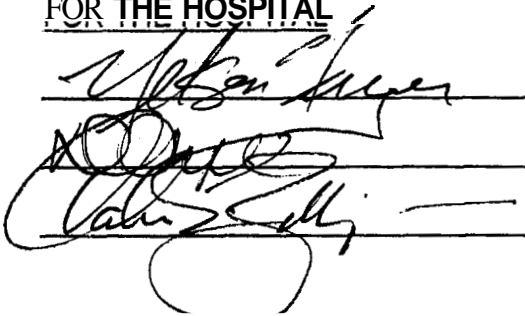
Re: Paid Professional Leave Days

The Hospital agrees to discuss the application of Paid Professional Leave Days with the Chief Nursing Officer within thirty (30) days of the date of ratification. The parties agree to meet to discuss the application of Paid Professional Leave Days within ninety (90) days of the date of ratification.

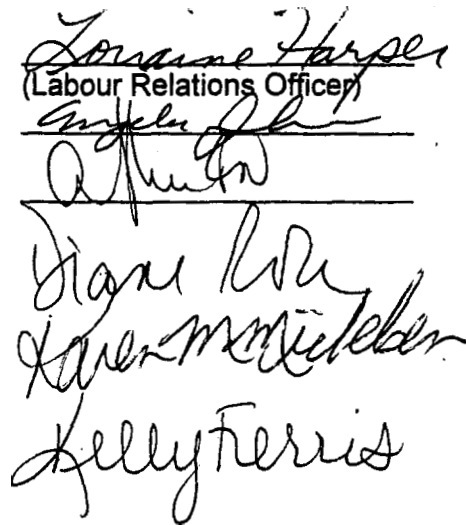
The parties agree that any mutually agreed to language with respect to Paid Professional Leave Days shall form part of the collective agreement.

Dated at Toronto, Ontario, this 29th day of May 2002.

FOR THE HOSPITAL


Three handwritten signatures are present, each written over a horizontal line. The signatures are in cursive and appear to be: 1. A signature starting with 'V' and ending with 'uper'. 2. A signature starting with 'A' and ending with 'S'. 3. A signature starting with 'C' and ending with 'S'.

FOR THE UNION


Five handwritten signatures are present, each written over a horizontal line. The signatures are in cursive and appear to be: 1. A signature starting with 'Lorraine' and ending with 'Harper'. 2. A signature starting with 'C' and ending with 'h'. 3. A signature starting with 'A' and ending with 'n'. 4. A signature starting with 'Diane' and ending with 'Du'. 5. A signature starting with 'Karen' and ending with 'M'.

LETTER OF UNDERSTANDING

Between:

ST. MICHAEL'S HOSPITAL
(hereinafter referred to as "the Hospital")

And:

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

Re: Lieu Banks

Within 60 days of ratification of this agreement, nurses who have banked lieu time prior to the date of ratification in accordance with Articles 14.06 and 14.09 of the collective agreement will meet with their Clinical Leader/Manager or Manager to reach agreement on a schedule to eliminate that banked lieu time through a combination of agreed time off and/or payment. The granting of time off for this purpose shall not be unreasonably denied.

Where there is no mutually agreeable time or if a nurse fails to take his/her lieu time off within one (1) year of the date of ratification, all time remaining in the lieu bank dating prior to the date of ratification shall be paid out at the appropriate premium rate.

Dated at Toronto, Ontario, this 29th day of May, 2002.

FOR THE HOSPITAL

[Handwritten signatures for the Hospital]

FOR THE UNION

[Handwritten signatures for the Union]
Lorraine Harper
(Labour Relations Officer)