

COLLECTIVE AGREEMENT

BETWEEN

WINNIPEG REGIONAL HEALTH AUTHORITY

Representing:

Pan Am Clinic

Breast Health Centre

Home Care Program

Public Health Program

Clinical Nurse Specialists

Primary Care Nurses

Nurse Practitioners

Regional Programs

AND

THE MANITOBA NURSES' UNION

October 1, 2009 to March 31, 2013

THIS AGREEMENT MADE BETWEEN:

WINNIPEG REGIONAL HEALTH AUTHORITY

(hereinafter referred to as the “Employer”)

– and –

MANITOBA NURSES’ UNION

(hereinafter referred to as the “Union”)

PREAMBLE

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

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

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

ARTICLE 1 -- SCOPE OF RECOGNITION

101 The Employer recognizes the Union as sole bargaining agent for nurses in the bargaining unit defined in the Manitoba Labour Board Certificate MLB-6730

ARTICLE 2 - DURATION

201 This Collective Agreement shall be in full force and effect from the 1st day of October, 2009, up to and including the 31st day of March, 2013.

Applicable for Nurse Practitioners

201 *This Collective Agreement shall be in full force and effect from October 20, 2009 up to and including the 31st day of March, 2013.*

Applicable for Primary Care

201 *This Collective Agreement shall be in full force and effect from November 26, 2009 up to and including the 31st day of March, 2013.*

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

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

ARTICLE 3 -- DEFINITIONS

301 A "nurse" is a Registered Nurse, or a Licensed Practical Nurse, or a Registered Psychiatric Nurse, or a graduate nurse, or a graduate practical nurse or a graduate psychiatric nurse who is employed by the Employer in one of the occupational classifications described in Appendix "C" attached hereto and forming part of this Agreement, subject to 3807 herein.

302 Employment status of nurses shall be defined as:

- (a) A "full-time nurse" is one who works the full prescribed hours of work specified in Article 14.
- (b) A "part-time nurse" is one who works on a regular and continuing basis for less than the full prescribed hours as specified in Article 14 but not less than seven and three-quarter (7.75) hours [**seven and one-quarter (7.25) hours @ Public Health**] per bi-weekly period when averaged over a four (4) week period.
- (c) "Casual nurse" as defined in 3501.

303 "Weekend" shall mean Saturday and Sunday.

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

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

306 A "Registered Nurse" is a person entitled to practice under the Registered Nurses' Act of Manitoba.

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

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

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

310 The term "site(s)" shall mean the program(s)/facility(ies) within the Regional Health Authority as listed in Appendix "D".

ARTICLE 4 -- MANAGEMENT RIGHTS

401 The Union recognizes the sole right of the Employer, unless otherwise provided in this Agreement, to exercise its function of management under which it shall have, among others, the right to maintain efficiency and quality of patient/resident/client care; the right to direct the work of its nurses; the right to hire, classify, assign to nursing positions and promote; the right to determine job content and the number of nurses in a nursing unit; the right to demote, discipline, suspend, layoff and discharge for just cause; the right to make, alter and enforce rules and regulations in a manner that is fair and consistent with the terms of this Agreement.

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

ARTICLE 5 -- UNION SECURITY AND REPRESENTATION

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

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

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

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

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

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

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

506 The Union shall provide the Employer with a list of officers and nurse representatives of the Union, and shall provide the Employer with a revised list within four (4) weeks of any changes made.

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

508 If required in relation to the renewal of this Agreement or any new Agreement which may be negotiated as herein provided, nurse representatives or officers of the Union shall be granted time off duty, without loss of pay, to participate in negotiations in which both the Employer and the Union are represented, subject to a maximum cost as follows:

- (a) Local Negotiations:
Two (2) nurses
- (b) Joint Negotiations:

In the event of joint negotiations involving more than one (1) but less than five (5) Employers and the respective Unions, salaries of two (2) nurses per each site shall be maintained by the respective Employers.

In the case of “Central Table” negotiations, salaries of up to thirteen (13) nurses representing participating Manitoba Nurses’ Union regions/locals shall be maintained by the respective Employers.

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

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

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

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

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

ARTICLE 6 -- CONTINUANCE OF OPERATIONS

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

ARTICLE 7 -- NON DISCRIMINATION

701 It is agreed that there shall be no discrimination, interference, restriction, harassment, or coercion knowingly exercised or practiced by the Employer or any nurse by reason of age, religion, race, colour, national origin, political or religious affiliation, sex, sexual orientation, marital status, place of residence, family relationship, mental/physical handicap, nor by reason of her/his membership or non-membership or activity in the Union.

702 The Employer and the Union agree that no form of sexual or workplace harassment shall be condoned in the workplace and it is further agreed that both parties will work together in recognizing and resolving such problems should they arise.

Situations involving sexual harassment shall be treated in strict confidence by both the Employer and the Union.

ARTICLE 7A -- HEALTH AND SAFETY

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

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

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

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

Any nurse who believes a situation may become or has become abusive shall report this to the immediate supervisor. The Employer shall notify the Union as soon as reasonably possible after the receipt of the report. Every reasonable effort will be made to rectify the abusive situation to the mutual satisfaction of the parties.

There shall be a policy supporting zero tolerance of staff abuse which shall be reviewed annually by the Workplace Health & Safety Committee. Such policy shall address the issue of communication strategies, which will include signage.

A joint committee will be created to study appropriate signage and related prevention and management strategies. The Committee will include equal representation from the Employers and MNU to a maximum of 3 Employer representatives and MNU representatives.

Should there be no agreement by the committee on appropriate signage within 120 days of the date of ratification, the matter shall be referred to the Minister's Joint Council.

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

7A06 **Rehabilitation and Return to Work Program** - The Employer agrees to actively participate and facilitate the rehabilitation and return to work of ill, injured or

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

Nurses may be placed in a rehabilitation program within a 50 kilometre radius of the originating site/office unless a greater distance is mutually agreed between the Employer and the nurse.

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

ARTICLE 8 -- TECHNOLOGICAL CHANGE

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

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

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

802 A nurse who is displaced from her/his job as a result of technological change:

- (i) shall be entitled to apply for any vacancy within the sites comprising the Regional Health Authority, or

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

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

ARTICLE 9 -- CHANGE OF FUNCTION OF NURSING UNIT

Applicable for Pan Am Nurses Only

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

Applicable for Home Care Nurses Only

901 In the event that the Employer transfers the delivery of Home Care services to another employer, the Employer shall notify the Union in writing at least one hundred and twenty (120) days in advance of any transfer of services. The notification to the Union shall identify which services are being transferred, the name of the employer to which the services are being transferred and the names of the nurses within the bargaining unit affected by the transfer of services. At the request of either party, the parties shall meet to discuss the impact of the transfer.

ARTICLE 10 -- EMERGENCY, DISASTER, FIRE PLANS

1001 Emergency

- (a) In any emergency or disaster, nurses are required to perform duties as assigned notwithstanding any contrary provision in this Agreement.

For purposes of this Article, emergencies will be those situations which directly affect the safety or well-being of patients/clients in the site.

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

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

- (b) Compensation for unusual working conditions related to such emergency will be determined by later discussion, between the Employer and the Union, and/or by means of the grievance procedure if necessary, except that the provisions of Article 16 shall apply to overtime hours worked.
- (c) This clause is subject to the Labour Relations Act of Manitoba.

1002 Drills

- (a) Site disaster, emergency or fire plans brought into effect by drill shall override the provisions of this Agreement provided always that where overtime is worked by reason of a disaster or fire drill, pay, or by mutual agreement equivalent time off will be granted.
- (b) The importance of regular disaster plan exercises and fire drills is mutually acknowledged by the Employer and the Union and, to this end, the participation of all nurses is encouraged.
- (c) Fire drills and equipment testing shall be held in accordance with the Manitoba Fire Code, and a review of written disaster plan exercises will be conducted at least once annually. The Employer will ensure that a fan-out system will be maintained on a perpetual basis. Each newly hired nurse shall receive the appropriate information relative to the site emergency, disaster, and fire plans during orientation to the site. An inservice session related to evacuation procedures will be conducted at least once annually.

ARTICLE 11 -- JOINT COMMITTEES

1101

The Employer and the Union agree to establish and maintain a Union Management Committee for the Regional Health Authority consisting of one (1) nurse from each site (as listed in Appendix "D") appointed by the Union and senior management representatives appointed by the Employer, the number of whom shall not exceed the number of Union representatives. Appointments shall be made for a term of one (1) year but without limit on the number of consecutive terms a member may serve. The committee shall meet at the request of either party subject to five (5) days notice being given, but not less than bi-monthly unless otherwise mutually agreed. Other parties may be invited to participate as mutually agreed.

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

This committee shall address concerns as follows:

- (i) Issues that have been referred by any site because they could not be resolved at the site level, or
- (ii) Issues that have region-wide implication.

Where a nurse is required to use her/his vehicle to travel to attend meetings of this committee at a location other than her/his unit/worksite/office, she/he shall be reimbursed by the Employer in accordance with the prevailing Province of Manitoba mileage rates. It is understood that any increases in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

1102

- (a) Basic pay or equivalent time off, with a minimum of one (1) hour guaranteed to nurses who are not on duty, will be granted to nurses appointed by the Union to attend meetings of the Union Management Committee and any other site/regional joint committee to which the Union is required to appoint representatives.
- (b) All reasonable efforts will be made to relieve a nurse who is appointed to attend meetings of the Union Management Committee, Nursing Advisory Committee or any other worksite/regional joint committee to which the Union is required to appoint representatives, without loss of salary or benefits. This clause is applicable when the meeting(s) occurs during hours the nurse is otherwise scheduled to work.
- (c) Basic pay or equivalent time off with a minimum of one (1) hour guaranteed to nurses who are not on duty, will be granted to nurses appointed by the Union to attend meetings of the Workplace Safety & Health Committee or to perform such other duties as may be specified in the Workplace Safety & Health Act or prescribed by regulation.

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

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

1103

Nursing Advisory Committee

- (a) At the request of either the Union or the Employer's senior nursing management, a Nursing Advisory Committee (NAC) shall be established at each site to:

- (i) Review and make recommendations relative to those unresolved issues relating to workload and staffing including documented workload staffing reports.
- (ii) Provide a forum for discussion and make recommendations on issues relative to nursing professional practice such as nursing standards, nursing functions, physical planning and layout of facilities as they relate to nursing and other matters of concern.

The parties mutually recognize that resolving nurses' workplace issues supports the delivery of effective patient/ client care and contributes to a healthy work environment.

It is further agreed it is in the best interests of the Employer, the sites and the nurses to work together to resolve the issues relative to staffing and scheduling, prolonged periods of work (consecutive hours and consecutive shifts), standby assignments, and the use of part time additional shifts and casual shifts as it relates to the creation of permanent positions.

It is further agreed that to facilitate the effective functioning of the NAC, the NAC as a committee may request and obtain data related to use of additional and/or casual shifts, overtime hours, and vacancies, with a view to making recommendations relative to the creation of positions and service delivery strategies to ensure the highest quality of patient/client care and compliance with professional nursing standards.

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

- (b) The NAC shall be comprised of at least two (2) and up to three (3) nurses appointed by the Union (at least one of whom shall be a registered nurse or registered psychiatric nurse), and senior nursing management representatives appointed by the Employer, the number of whom shall not exceed the number of Union representatives. Other persons may be invited to participate as mutually agreed.

Where a nurse is required to use her/his vehicle to travel to attend meetings of this committee at a location other than her/his unit/worksite/office, she/he shall be reimbursed by the Employer in accordance with the prevailing Province of Manitoba mileage rates. It is understood that any increases in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

- (c) The NAC shall meet at the request of either party subject to five (5) days notice being given but not less than bi-monthly unless otherwise mutually agreed.

- (d) The chair and the secretary of the NAC shall alternate between the parties. The secretary shall be the opposite party to the chair.
- (e) Agendas shall be circulated at least seven (7) calendar days prior to each meeting; however this shall not preclude members from raising issues without prior agenda notice. It is understood that issues may be deferred to future meetings to enable appropriate investigation.
- (f) Minutes of the NAC meetings shall be circulated to members of the committee and shall be approved at the next NAC meeting.
- (g)
 - (i) A nurse(s) with a concern as referenced in (a) (i) above shall discuss the matter at the unit/worksite/office level utilizing established lines of communication with the objective of resolving the concern. If the matter is not resolved to the satisfaction of the nurse(s), the nurse(s) may complete and submit a “NAC Summary Report” to the chair of the NAC.
 - (ii) Those issues referenced in (a) (ii) above may be placed on the agenda at any time by any NAC member.
- (h) If the decision of the NAC regarding an issue referenced in (a) (i) or a (ii) above is unacceptable to the nurse(s) who submitted the issues, or if the NAC is unable to resolve the issues in (a) (i) or (a) (ii), the matter shall be referred in writing to the regional senior nursing manager/senior nursing officer. Upon the request of either party, a meeting will be scheduled as soon as reasonably possible.
- (i) The response of regional senior nursing manager/senior nursing officer shall be provided in writing to the nurse(s) and the NAC within fourteen (14) calendar days of the referral unless otherwise mutually agreed.
- (j) Where, in the opinion of the nurse(s) who submitted the issue, the response from the regional senior nursing manager/senior nursing officer does not resolve the issue, it may be referred to an Independent Assessment Committee (IAC) within twenty-one (21) days following the response.
- (k) The IAC shall be composed of three (3) nurses, one (1) of whom shall be appointed by the Manitoba Nurses’ Union, and one (1) of whom shall be appointed by the Employer. The third (3rd) nurse shall chair the IAC and shall be selected in the following manner:
 - (i) A list of IAC Chairpersons as agreed between the parties shall be appended to this Collective Agreement.
 - (ii) When a Chairperson is required, the Labour Relations Secretariat and the Manitoba Nurses’ Union will be contacted. They will provide the name of the person to be utilized on the alphabetical listing of Chairpersons. The name to be provided shall be the name following that of the last person utilized.

- (iii) Should the person whose name is so selected be unable to serve, or where the person would be unsuitable due to connections with the parties or geographic community involved, the next person on the list shall be approached to act as Chairperson.
 - (iv) In the event that an individual whose name appears on the list of IAC Chairpersons can no longer serve in that capacity, another individual shall be jointly selected by the Manitoba Nurses' Union and the Labour Relations Secretariat and the list of Chairpersons shall be amended accordingly.
 - (v) Appointments to the IAC shall be confirmed within twenty-one (21) calendar days of the referral.
- (l) A meeting of the IAC to investigate and make recommendations shall be held within thirty (30) calendar days of the IAC's appointment unless a longer time frame is otherwise mutually agreed between the Employer and the Union. Such recommendations shall be provided in writing to the nurse(s), the NAC and the regional senior nursing manager/senior nursing officer within a further fourteen (14) calendar days. The Employer shall convene a meeting of Employer representatives, the Union and representative(s) selected by, and from amongst, the nurses who referred the matter/issues to the NAC, subsequent to the receipt of the report, to review and discuss potential implementation of the recommendations.
- (m) Each party shall bear the cost of its own appointee to the IAC and shall jointly bear the cost of the Chairperson.
- (n) (i) Nurses required to attend IAC meetings shall be granted Union leave upon seven (7) calendar days notice in accordance with Article 2409.
- (ii) Nurses who are nominees to an IAC shall be granted leave of absence in accordance with 2409.
- (o) A regular report outlining the activities and deliberations of the NAC/IAC including the number, type and disposition of issues dealt with by the NAC/IAC shall be forwarded to the RHA's Board of Directors (Board).
- (p) The NAC shall be provided with a copy of that portion of the minutes of the Board's meeting relating to its deliberations of the NAC report. The NAC shall provide the nurse(s) with a copy of that portion of the minutes of the Board's meeting relating to issues raised by a nurse(s) under (a) (i) above.

ARTICLE 12 -- GRIEVANCE PROCEDURE

1201 For purposes of this Agreement "grievance" shall mean a dispute between a nurse; or between a group of nurses with a similar grievance; or between the Union and

the Employer regarding the application, interpretation or alleged violation of this Agreement.

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

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

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

1205 Complaint Stage:

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

1206 Step One:

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

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

1207 Step Two:

If the dispute remains unresolved, the Union may within a further ten (10) days submit the grievance in writing to the designated senior administrative representative, and the designated senior administrative representative shall reply in writing within ten (10) days of receipt of the written grievance.

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

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

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

ARTICLE 13 -- ARBITRATION PROCEDURE

1301 In the event of the failure of the parties to settle a grievance by means of the grievance procedure stated in Article 12, within ten (10) days of the date upon which the written reply referred to in Article 12 is received from the designated senior administrative representative, the matter may then be referred to arbitration as hereinafter set forth.

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

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

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

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

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

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

1308 In the event of a grievance alleging unjust layoff, suspension or discharge being referred to arbitration, the Arbitrator or Board of Arbitration shall be authorized to rule whether or not the nurse(s) concerned shall be reinstated and, in the event of reinstatement, shall also be authorized to make an award in terms of compensation for

regular salary lost or a reasonable alternate award, however, any monetary award shall not exceed the difference between salary lost and any wages that may have been earned from employment with another employer during the period of the layoff, suspension or discharge.

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

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

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

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

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

ARTICLE 14 -- HOURS OF WORK

1401 Seventy-seven and one-half (77.50) [*seventy-two and one-half (72.5) @ Public Health*] hours shall constitute a bi-weekly period of work, excluding meal periods, but including rest periods.

Additional for Breast Health and CNS

The regular hours of work for nurses shall be 08:00-16:30 hours Monday to Friday.

Applicable for Public Health, Breast Health, CNS, Primary Care, Nurse Practitioners and Regional Programs

(a) *Upon mutual agreement between a nurse and her/his supervisor, a nurse may work alternate hours during the day or in a bi-weekly period in order to facilitate the provision of services and/or to accommodate the nurse's personal schedule. Such alteration of hours, although subject to Employer approval, is voluntary and at the discretion of the nurse. In instances where working alternate hours under these circumstances results in additional hours being worked in a day or bi-weekly pay period, the nurse shall take the equivalent time off at a time mutually agreeable to the nurse and her/his supervisor. To the extent practicable, this time off shall occur within four (4) weeks of the nurse having worked the additional hours.*

Additional for Public Health, Breast Health , Primary Care, Nurse Practitioners and Regional Programs

- (b) *In instances where additional hours are being scheduled in a day or bi-weekly pay period as a result of direction from the supervisor, compensation for the additional hours worked will be in accordance with Article 16 - Overtime.*
- (c) *The provisions of Article 1404, Article 16 and Article 17 shall not apply to a nurse working alternate hours in (a) above.*

Additional for Public Health

- (d) *In order to facilitate the provision of Public Health nursing services, a nurse may periodically elect to work; or upon a minimum two (2) weeks notice may be scheduled to work during the evening in accordance with Article 1505.*

1402 The meal period will be scheduled by the Employer and will be one-half (.50) of an hour [**forty-five (45) minutes @ for Public Health, CNS, Breast Health and Nurse Practitioners**] in duration, unless otherwise mutually agreed between the nurse(s) concerned and the Employer.

Applicable for Home Care

1402 *Where a nurse works for five (5) or more consecutive hours, an unpaid meal period of one-half (.50) hour will be provided.*

1403 A rest period of fifteen (15) minutes will be allocated by the Employer during each continuous three (3) hour period of work.

1404 A shift shall be seven and three-quarter (7.75) [**seven and one-quarter (7.25) @ Public Health**] consecutive hours of work exclusive of meal times and inclusive of two (2) fifteen (15) minute rest periods. This clause shall not, however, prevent trial and implementation of changes in shift length if mutually agreed between a majority of nurses whose schedule is affected, the Union representing those nurses whose schedule is affected, and the Employer. Any change in shift length agreements shall take the form of an addendum attached to and forming part of this Agreement.

Applicable for Home Care

1404 *A shift shall not be less than one (1) paid hour nor more than seven and three-quarter (7.75) paid hours and shall be governed by the following conditions:*

- (a) *a nurse shall receive one (1) hour regular salary for any and all client assignments in the first one (1) hour of her/his work day, and*
- (b) *a nurse shall receive regular salary for all additional time required to complete any further client assignments up to and including seven and three-quarter (7.75) hours in any one (1) day. Nurses may be required to work split shifts, and in so doing shall receive a premium of twelve dollars (\$12.00), and*
- (c) *shifts shall be inclusive of paid rest periods and exclusive of the unpaid meal period except as per 1402 above.*

(d) *This clause shall not, however, prevent trial and implementation of changes in shift length if mutually agreed between a majority of nurses whose schedule is affected, the Union representing those nurses whose schedule is affected, and the Employer. Any change in shift length agreements shall take the form of an addendum attached to and forming part of this Agreement.*

1405 A full-time or part-time nurse who is advised not to report for her/his scheduled shift, or who is sent home because of lack of work, shall receive pay for the scheduled hours not worked.

Applicable for Home Care

1405 *Where a Home Care nurse is unable to complete her/his scheduled shift due to client circumstances, she/he may be reassigned to other clients, or may be reassigned to other work for which she/he is qualified within any of the offices within the Home Care Program. It is understood that such reassignment will only occur within a fifty (50) km. radius of the originating unit/worksites/office, unless a greater distance is mutually agreed between the Employer and the nurse. Travel time and Transportation Allowance as outlined in Article 20 shall be paid to the nurse to travel to the reassigned unit/worksites/office.*

Should reassignment as contemplated above not be possible, the Home Care nurse shall receive pay for the scheduled hours not worked.

1406 Where a nurse cannot arrive as scheduled at work due to whiteout/ blizzard conditions as declared by Environment Canada or the Employer, or due to road closures as declared by police agencies or the Department of Highways, the nurse shall be rescheduled at a mutually agreeable time if possible during the following two (2) consecutive bi-weekly pay periods to work any hours missed. Where the scheduling of such shift cannot be accommodated or the nurse chooses not to be rescheduled, she/he may take the time from banked time which includes banked overtime, Recognized Holidays or vacation.

1407 Whenever a nurse is called in to work within one (1) hour of the start of the shift and reports for duty within one hour of the start of the shift, she/he shall be entitled to pay for the full shift. In such circumstances the scheduled shift hours shall not be extended to equal a full shift.

Additional for Public Health :

1408 *A maximum of thirty (30) nurses, excluding nurses in the Antenatal Home Care and Travel Health programs, will be assigned to work in any office on weekends , on an equitable, rotational basis. With mutual agreement between the Employer and the nurse, the nurse's scheduled days off may be altered to be taken during the one (1) week prior to and/or the two weeks following the assignment. The number of nurses assigned to work weekends may be increased by mutual agreement between the parties, such agreement shall not be unreasonably denied.*

ARTICLE 15 -- SHIFT SCHEDULES

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

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

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

Applicable for Home Care, Pan Am , Primary Care and Regional Programs

1504 Shift patterns shall be planned by the Employer in meaningful consultation with the nurse(s) concerned and shall, unless otherwise mutually agreed between the nurse(s) concerned and the Employer, observe the conditions listed hereinafter:

- (a) a minimum of fifteen hours (15) off between assigned shifts.
- (b)
 - (i) a minimum of forty-seven (47) hours off at one time, or
 - (ii) where only "8" hour shifts are worked, a single weekday off may be permitted on a changeover from Day shift to Evening shift or in a staffing pattern that provides alternate weekends off. This is subject to meaningful consultation between the nurses affected and the Union.
- (c) a minimum of eight (8) days off within each period of four (4) consecutive weeks.
- (d) alternate weekends off shall be granted as often as reasonably possible, with each nurse receiving a minimum of every third weekend off.
- (e) a maximum of seven (7) consecutive days of work and preferably less between days off. It is understood that eight (8) consecutive days of work may be assigned for the purpose of meeting the requirements of sections 2204 and 2207 inclusive herein
- (f) nurses who are required to rotate shifts being assigned to work either Day shift and Evening shift, or Day shift and Night shift. There shall be at least as great a number of Day shifts assigned as there are Night (or Evening) shifts within each standard rotation pattern, whenever reasonably possible.

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

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

ARTICLE 16 -- OVERTIME

Article 16 Not Applicable for CNS

Applicable for Home Care , Pan Am, Primary Care , Nurse Practitioners and Regional Programs:

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

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

Applicable for Public Health and Breast Health:

1601 Overtime shall be authorized time worked which exceeds the normal daily shift as defined in Article 14 herein or the normal full-time hours in the bi-weekly period. Authorization must be obtained prior to the start of any overtime work except in emergency situations. The Employer agrees the authorization in these emergency situations will not be unreasonably withheld. Payment for overtime worked when emergency circumstances prevent prior authorization shall be subject to a claim accompanied by a special written report prepared by the nurse substantiating the reason for the overtime work. Overtime hours extending beyond the normal daily shift

into the next calendar day shall continue to be paid at the overtime rates in accordance with Article 1602.

Applicable for Home Care, Primary Care , Nurse Practitioners and Regional Programs

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

Applicable for Public Health:

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

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

Applicable for Home Care:

1603 Notwithstanding sections 1601 and 1602 above, where a nurse works two consecutive seven and three-quarter (7.75) hour shifts, the nurse shall be paid the full hours for both shifts and shall not be required to work an additional fifteen (15) minutes. She/he shall receive pay at the rate of double her/his basic salary for the additional shift, except when the additional shift is worked on a Recognized Holiday, she/he shall receive pay at the rate of two and one-half (2.50) times her/his basic salary for the additional shift.

1604 At the nurse's request, overtime shall be banked and shall be compensated by time off at overtime rates to be taken at a time mutually agreed. At the nurse's request, any banked overtime, or portion thereof, shall be paid out on a separate cheque without a surcharge on the dates designated by the Employer. At the nurse's request, any banked overtime or portion thereof shall be paid out at any time on a regular pay cheque. Overtime may be accumulated to a maximum of seventy-seven and one-half (77.50) **[seventy-two and one-half (72.50) @ Public Health]** hours at any one time. Any overtime in excess of seventy-seven and one-half (77.50) hours shall be paid as earned. All accumulated overtime must be taken as time off or paid out by March thirty-first (31st) of each fiscal year. Accumulated overtime not taken as time

off or paid out by this date shall be paid to the nurse in the last pay period of the fiscal year on a separate cheque without a surcharge.

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

Applicable for Home Care:

1605 *A full-time nurse reporting back to work upon request after completing the daily client assignment and following completion of a seven and three-quarter (7.75) hour shift but before commencement of her/his next scheduled shift shall be paid at overtime rates of pay with a guaranteed minimum of three (3) hours at overtime rates. If the extra time worked under this subsection commences within less than three (3) hours before the start of a shift, the guaranteed minimum of overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time she/he starts to work to the beginning of her/his shift.*

1606 Overtime worked as a result of the changeover from Daylight Saving Time to Central Standard Time shall be deemed to be authorized overtime.

1607 Overtime shall be distributed as equitably as possible amongst those nurses qualified for the work, in accordance with 1601.

Applicable for Home Care and Nurse Practitioners:

1607 *Overtime shall be distributed as equitably as possible amongst those nurses qualified for the work, and giving consideration to client needs and continuity of care.*

1608 In every period of overtime, a paid rest period of twenty (20) minutes shall occur during each continuous three (3) hours, unless the overtime worked is a full shift in which case regular meal/rest periods shall occur.

1609 A nurse required to work overtime for a period in excess of two (2) hours immediately following her/his regular hours of work shall be provided with a meal allowance of five dollars (\$5.00) [seven dollars (\$7.00) effective June 1, 2010; eight dollars (\$8.00) effective April 1, 2012].

ARTICLE 17 -- SHIFT PREMIUM AND WEEKEND PREMIUM

Article 17 Not Applicable for CNS

1701

(a) An evening shift premium of one dollar (\$1.00) per hour shall be paid to a nurse for all hours actually worked on any shift when the majority of the hours on that shift fall between 1800 hours and the next succeeding 2400 hours.

- (b) A night shift premium of one dollar and seventy-five cents (\$1.75) [one dollar ninety cents (\$1.90) effective October 1, 2011; two dollars and five cents (\$2.05) effective March 31, 2013] per hour shall be paid to a nurse for all hours actually worked on any shift when the majority of hours on that shift falls between 2400 hours and 0600 hours.

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

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

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

1704 A weekend premium of one dollar and thirty-five cents (\$1.35) [one dollar and fifty cents (\$1.50) effective October 1, 2011; one dollar and sixty-five cents (\$1.65) effective March 31, 2013] per hour shall be paid to a nurse for all hours actually worked on any shift where the majority of the hours on that shift fall between 0001 hours on the Saturday and 2400 hours on the following Sunday.

ARTICLE 18 -- STANDBY

Article 18 Not Applicable for CNS

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

1802 Nurses required to be on standby shall receive two (2) hours basic pay per seven and three-quarter (7.75) [***seven and one-quarter (7.25) @ Public Health***] hour shift or portion thereof.

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

Additional for Nurse Practitioners

A nurse who is placed on standby shall, in addition to Standby premium, be paid at the rate of double the nurse's regular hourly rate of pay for any telephone calls received and shall be inclusive of any follow-up required with a minimum payment of fifteen (15) minutes per call.

A nurse not on standby shall be paid at the rate of double the nurse's regular hourly rate of pay for any telephone calls received and shall be inclusive of any follow-up required with a minimum payment of fifteen (15) minutes per call. Accepting any such calls when not receiving the Standby premium shall be at the discretion of the Nurse Practitioner.

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

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

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

1807 Whenever reasonably possible, a pager (or alternate) shall be provided by the Employer to nurses during any period of assigned standby.

ARTICLE 19 – RESPONSIBILITY PAY

Applicable for Home Care, Primary Care and Regional Programs:

1901 *A nurse temporarily assigned to perform all or substantially all of the duties of a more senior classification or a nurse designated as being "in charge" will receive an allowance of seventy cents (\$0.70) [eighty-five cents (\$0.85) effective October 1, 2011; one dollar (\$1.00) effective March 31, 2013] for each hour worked.*

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

Applicable for Public Health, CNS , Breast Health and Nurse Practitioners:

1901 *In the event the Employer or representative temporarily assigns a nurse to substantially all of the duties and responsibilities of a position carrying a higher rate of pay, the nurse shall receive the rate on the salary scale of the higher position which is at least one (1) increment above her/his present rate of pay immediately. When the higher rate of pay is the rate of an out of scope position, it is understood the nurse receiving the higher rate of pay shall remain in the bargaining unit for the duration of assignment.*

Applicable for Pan Am:

1901 *A nurse designated as being "in charge" will receive an allowance of seventy cents (\$0.70) [eighty-five cents (\$0.85) effective October 1, 2011; one dollar (\$1.00) effective March 31, 2013] for each hour worked in accordance with the following provisions:*

- (a) *A nurse will be designated as being "in charge" for the Operating Rooms unit in the absence of the manager for periods in excess of two (2) hours*
- (b) *A nurse will be designated as being "in charge" for the Recovery Room unit during those periods when three or more operating rooms requiring anesthetist coverage are open.*
- (c) *A nurse will be designated as being "in charge" for the Urgent Care unit in the absence of the manager for periods in excess of two (2) hours*

Applicable for Home Care, Pan Am and Primary Care

1902 *Assignment of "charge" responsibility shall be equitably distributed amongst those nurses available and qualified for the assignment.*

Additional for Pan Am:

1903 *This allowance shall be paid to one (1) Registered Nurse on each nursing unit on Day shift except in the case of there being a nurse manager on the unit.*

This allowance is also applicable to one (1) nurse on each nursing unit on Evening shift.

ARTICLE 20 – TRANSPORTATION ALLOWANCE/ESCORT DUTY

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

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

- (a) return transportation provided by the Employer, or
- (b) if she/he elects to use her/his own vehicle, she/he shall be reimbursed for all travel in accordance with the prevailing Province of Manitoba mileage rates, subject to a minimum guarantee of \$4.00 and a maximum payment of \$10.00 (\$15.00 effective October 1, 2010).

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

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

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

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

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

2004

Escort Duty:

- (a) (i) A nurse called in to escort a patient/client when she/he is not on standby or provided she/he does not qualify for pay at overtime rates in accordance with Article 16, shall be paid for all time involved with the patient/client assignment including travel time required to return to the worksite/Team Office, subject to a minimum guarantee of three (3) hours pay at regular rates of pay. All hours worked in excess of seven and three-quarter (7.75) hours **(seven and one-quarter (7.25) hours @ Public Health)** shall be paid in accordance with Article 16.
- (ii) When a nurse is required to escort a patient/client while on a scheduled shift, overtime rates of pay will apply in accordance with Article 16 for all hours worked in excess of the scheduled shift length (i.e. 7.25, 7.75 hours, 11.625 hours).
- (iii) A full-time or part-time nurse scheduled or called in for escort duty when she/he is not on standby whose escort duty is cancelled, shall be paid or assigned work for a period of three (3) hours.
- (iv) When a nurse on escort duty is no longer involved with the patient assignment, time and return travel time will be paid as follows:
- For each subsequent 24 hour period that the nurse is awaiting return travel she/he shall be paid wages for one regular shift (or overtime in accordance with Article 16)
 - For each portion of a 24 hour period that the nurse is awaiting return travel or travelling to return to the facility, the nurse will be paid the greater of hours worked plus actual hours in travel status (or overtime in accordance with Article 16) or a prorated shift based on the portion of the 24 hour period away.

A casual nurse whose Escort Duty is cancelled prior to her/his arrival at the worksite/Team Office shall not be entitled to the payment or work noted above. If her/his Escort Duty is cancelled after she/he has reported for duty, she/he shall be paid or assigned work for a period of four (4) hours.

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

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

Additional for Home Care and Public Health

2005 Applicable to nurses who live within the City of Winnipeg:

Where a nurse is authorized to use her/his privately owned vehicle on the Employer's business, she/he shall be reimbursed in accordance with 2003 above for all travel between work locations and any distance greater than eight (8) kilometers when traveling from home to the first work assignment of the day or traveling home from the last work assignment of the day. Where the nurse is required to report to the designated Community Health Services site at the beginning of the day or at the end of the day, she/he will be reimbursed in accordance with Article 2003 for all travel between the designated Community Health Services site and all client visits.

Applicable to nurses who live outside the City of Winnipeg:

Where a nurse is authorized to use her/his privately owned vehicle on the Employer's business, she/he shall be reimbursed in accordance with 2003 above for all travel between work locations and any distance greater than eight (8) kilometers from her/his closest point of entry to the Perimeter Hwy. (from her/his home) when she/he is directed to report to a client's home as the first work assignment of the day or traveling home from a client's home after the last work assignment of the day. Where the nurse is required to report to the designated Community Health Services site at the beginning of the day or at the end of the day, she/he will be reimbursed in accordance with Article 2003 for all travel between the designated Community Health Services site and all client visits.

Additional for Home Care:

2006 *Where bus and taxi transportation is authorized for travel between work locations, the nurse shall be reimbursed transportation expenses.*

Additional for Home Care:

2007 *Travel time between work locations shall be considered time worked. Travel time from the nurse's home to the first work assignment of the day shall also be considered time worked but only where:*

- (a) *the first assignment is to report to a client's residence, rather than to the Community Health Services site to which the nurse normally reports, and*
- (b) *the client's residence is more than twenty-four (24) kilometers away from the office and from the nurse's home.*

Travel time from the last work assignment of the day to the nurse's home shall also be considered time worked but only where:

- (a) *the last assignment is at a client's residence, rather than at the Community Health Services site to which the nurse normally reports, and*
- (b) *the client's residence is more than twenty-four (24) kilometers away from the office and the nurse's home.*

ARTICLE 21 -- VACATIONS

2101 Unless otherwise agreed between the nurse and the Employer, the Employer will provide for vacation days to be taken on a consecutive basis, recognizing that five (5) vacation days [(thirty-eight point seven five (38.75) hours) **[thirty-six point 25 (36.25) @ Public Health]** equals one (1) calendar week. Effective the 2011/2012 vacation year, the vacation year shall be from April 1st to March 31st. The dates used to calculate vacation earned shall be from the end of the last full pay period of March in one vacation accrual year to the end of the last full pay period of the following March. Vacation earned in any vacation year is taken in the following vacation year.

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

2102 A nurse who has completed less than one (1) year of employment as at the cut-off date shall be entitled to a paid vacation at the rate of one and one-quarter (1.25) **[one point sixty-six (1.66) @ CNS and Nurse Practitioners]** days per month worked, however, unless otherwise mutually agreed, the Employer is not obliged to permit earned vacation to be taken until a nurse has completed six (6) months of employment.

Additional for Home Care , Primary Care and Regional Programs

NOTE: *Rate for Nurse IV and Nurse V occupational classifications shall be "1.66 days per month worked". This provision shall apply to each Nurse IV (where applicable) and Nurse V (where applicable) employed by the*

Employer on April 1, 1998. This provision will not apply to nurses who are newly employed as, or reclassified to, Nurse IV (where applicable) or Nurse V (where applicable) after April 1, 1998.

Applicable for Home Care, Public Health, Pan Am, Primary Care and Regional Programs

2103

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

<u>Length of Employment</u>	<u>Rate at Which Vacation Earned</u>
In the first three (3) years	Fifteen (15) days/three (3) weeks [116.25 hours (for Public Health 108.75 hours)] per year
In the fourth (4th) to tenth (10th) year inclusive	Twenty (20) days/four (4) weeks [155 hours (for Public Health 145 hours)] per year
In the eleventh (11th) to twentieth (20th) year inclusive	Twenty-five (25) days/five (5) weeks [193.75 hours (for Public Health 181.25 hours)] per year
In the twenty-first (21st) and subsequent years	Thirty (30) days/six (6) weeks [232.50 hours (for Public Health 217.50 hours)] per year

Additional for Home Care and Regional Programs

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

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

Additional for Public Health

- (b) In addition to (a) above, all Nurse IV's (Public Health Nurses) and Nurse V's shall receive an additional five (5) days vacation per year. This provision shall only apply to nurses employed prior to October 17, 1996.

This provision shall apply to nurses employed in the classification of Nurse IV or higher on October 17, 1996. This Article will not apply to nurses who are newly employed as or reclassified to Nurse IV or higher after October 17, 1996.

Applicable for CNS and Nurse Practitioners

2103

- (a) A nurse shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

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

2104 In recognition of length of service, each nurse shall receive an additional five (5) days of vacation on completion of twenty (20) years of continuous service, and on each subsequent fifth (5th) anniversary of employment (i.e. 25th, 30th, 35th, 40th, etcetera). Such days shall be taken during the vacation year in which the 20th or subsequent 5th anniversary occurs.

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

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

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

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

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

2109 The Employer shall be responsible for posting the vacation entitlement lists, along with a list of the number of nurses in each occupational classification per unit/worksite/office that may be scheduled for vacation at one time, in an accessible location, by February 1st of each year. The vacation entitlement lists shall reflect each nurse's projected vacation entitlement as at March 31st of that year.

Beginning February 15th of each year, the Employer shall arrange an appointment with each nurse, in order of seniority, so that the nurse may indicate her/his choice of vacation dates, in writing. All of the nurse's earned vacation must be chosen at this

time except for the three (3) days as per 2101. These appointments shall take place in person, unless otherwise mutually agreed, and shall include reviewing the vacation selected/approved to date.

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

Except in extenuating circumstances, a nurse who fails to indicate her/his choice of vacation dates in accordance with the above, shall have her/his vacation scheduled by the Employer. To the extent that it finds possible, the Employer shall give priority to those nurses in each occupational classification within each unit/worksites/office having the most seniority within the office/site.

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

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

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

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

Additional for Public Health

For former Civil Service Nurses who have maintained their pension with the Civil Service Superannuation Plan, vacation days maybe reserved in accordance with the Memorandum of Understanding Supplementary to the Collective Agreement

2110 Any nurse who was granted, at date of employment, vacation entitlement superior to the entitlement schedule in 2103, shall have those entitlements continued.

Additional for Public Health Nurses

2111 *Where the Employer has been unable to schedule part or all of a nurse's vacation within the vacation year, the nurse may, in lieu of receiving vacation pay out at year end, elect to carry over such vacation leave to the following year.*

ARTICLE 22 -- RECOGNIZED HOLIDAYS

2201 For purposes of this Agreement, Recognized (paid) Holidays shall be New Year's Day (January 1st), Louis Riel Day (la journee Louis Riel), Good Friday, Easter Monday, Victoria Day, Canada Day (July 1st), the first Monday in August, Labour Day, Thanksgiving Day, Remembrance Day (November 11th), Christmas Day (December 25th), and Boxing Day (December 26th); and any other statutory holidays declared by federal or provincial authority.

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

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

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

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

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

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

Additional for Home Care ,Primary Care and Nurse Practitioners:

2207 *Assignment of Recognized Holidays on the actual day of their occurrence shall be made as equitably as reasonably possible.*

Additional for Public Health:

2208 *Where the Employer requires a nurse to work a regular work day on December 24th when that day falls on Monday through Friday inclusive, such nurse shall be entitled to one-half (½) day of compensatory leave with pay to a maximum of four (4) hours.*

ARTICLE 23 -- INCOME PROTECTION AND WORKERS COMPENSATION

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

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

Additional for Public Health and Breast Health:

(iv) *A deduction shall be made from accumulated sick leave of all normal working days absent for sick leave. No deductions for absences on account of illness will be made for periods of two (2) hours or less, to a maximum of six (6) such absences per year.*

A nurse who has had accumulated sick credits and subsequently used all her/his credits will be entitled to the benefit of this Article regarding absence for two (2) hours or less.

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

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

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

2303

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

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

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

- (viii) Upon request, the Employer will provide a statement to the nurse indicating the amount of advance payment(s) made and repayment(s) received by the Employer.
- (b) (i) A nurse who has accumulated sufficient income protection credits may elect to submit an application to the Employer requesting that the Employer supplement the WCB/MPI payments. The amount of such supplement will equal ten percent (10%) of the nurse's regular net salary not earned due to the time loss. Regular net salary will be based on the nurse's basic salary as defined in Article 3802 of the Collective Agreement (exclusive of overtime), less the nurse's usual income tax deduction, Canada Pension Plan contributions and Employment Insurance contributions.
- The Employer's supplement shall be charged to the nurse's accumulated income protection credits and such supplement shall be paid until the nurse's accumulated income protection credits are exhausted, or until 119 calendar days have elapsed since the first day of supplement, whichever is less.
- (ii) Subject to the provisions of each plan, the nurse may request the Employer to deduct from the supplement, if sufficient, the contributions which would have been paid by the nurse to the Employer's pension plan, dental care plan, *Disability and Rehabilitation plan, and group life insurance plan as if the nurse was not disabled. If the supplement is not sufficient, or where the nurse elects to receive an advance, the nurse may, subject to the provisions of each plan, forward self-payments to the Employer to ensure the continuation of these benefit plans. The Employer will contribute its usual contributions to these benefit plans while the nurse contributes.
- (iii) Further to this, the Employer shall notify Workers Compensation/Manitoba Public Insurance of salary adjustments at the time they occur.
- (iv) In accordance with Section 41(6)(b) of the Workers Compensation Act of Manitoba, the Employer shall make application to the WCB by January 1, 1994 so that the WCB may determine whether or not the supplements referenced in 2303(b)(i) shall continue in effect after January 1, 1995.
- (v) If at any time it is decided by the WCB/MPI that any payment to be made to the nurse by the Employer must be offset against benefits otherwise payable by the WCB/MPI, then such payment shall not be payable.

- (c) Where the WCB/MPI recommends a work assessment period or a modified return to work period, the provisions of 7A06 shall apply.

Applicable for Home Care, Pan Am, Breast Health, CNS, Primary Care, Nurse Practitioners and Regional Programs

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

Applicable for Public Health

- (d) A nurse who is on D&R/WCB/MPI prior to the commencement of her/his vacation shall, upon her/his request, have her/his vacation displaced and such vacation shall be re-scheduled at a time mutually agreed between the nurse and the Employer within the available time periods remaining during that vacation year.

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

2305 A nurse who is unable to report for work due to illness shall inform the Employer prior to the commencement of her/his next scheduled shift(s). A nurse who fails, without valid reason, to give notice as specified below will not be entitled to receive income protection benefits for the shift(s) in question.

Prior to Day shift	--	One (1) hour
Prior to Evening shift	--	Three (3) hours
Prior to Night shift	--	Three (3) hours

A nurse returning to work following an absence of one week or more shall inform the Employer by 1200 hours the day prior to returning to work.

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

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

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

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

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

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

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

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

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

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

ARTICLE 24 -- LEAVE OF ABSENCE

2401 The nurse will be required to submit a written request for any leave of absence unless otherwise herein stipulated. These requests will specify the reason for the leave and will be considered on an individual basis and may be allowed at the discretion of the Employer unless otherwise indicated in the agreement; however, requests for education leave will be given special consideration. Except in emergencies, such requests must be made at least four (4) weeks in advance. The Employer shall notify the nurse of her/his decision in writing, within one (1) week of receipt of the request. Requests for extension of educational leave, maternity leave, paternity leave, adoption leave, and bereavement leave will be granted if reasonably possible.

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

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

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

2402 Overstaying of leave of absence without valid reason may be deemed as a resignation.

Applicable for Home Care, Pan Am, CNS and Nurse Practitioners

2403 *The Employer shall make every reasonable effort to assure that a nurse granted leave of absence for any reason shall return to the same position. For leaves of absence of sixty (60) weeks or less, the nurse is assured of being placed in the same occupational classification within the site and at the same step on her/his salary scale on her/his return, but she/he cannot be assured of being placed in the same nursing unit/worksite/office, position or shift. In the case of longer leaves of absence, a nurse may be placed in any position covered by this agreement within a fifty (50) kilometre radius of the originating site, unless a greater distance is mutually agreed between the Employer and the nurse, and shall be reinstated at her/his previous salary, provided that such salary shall not exceed the maximum for the position in which she/he is placed. Notwithstanding 3001, a nurse not placed in her/his former position will be given consideration over other nurses for the first vacancy made available to her/him in a similar position within the sites comprising the Regional Health Authority.*

Additional for Home Care

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

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

In cases where a Licensed Practical Nurse has been granted an educational leave of absence to pursue a Registered Nurse/Registered Psychiatric Nurse designation and is unsuccessful, it is understood by the parties that she/he shall be considered as laid-off.

Applicable for Public Health, Breast Health, Primary Care and Regional Programs

2403 *Without prejudicing the Employer's right to assign and reassign nurses to various Team offices from time to time, the Employer agrees that, where reasonably practical in the opinion of management, nurses returning from maternity/parental leave will be placed in the Team office where they worked immediately preceding the aforementioned leaves.*

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

2404 There shall be no loss of income protection accumulations or vacation accumulations up to the date of any leave of absence whether granted with or without pay.

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

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

2407 Education Leave:

(a) Where the Employer requires a nurse to attend educational conferences, workshops, programs or seminars during working hours, the Employer shall pay registration or tuition fees, and approved expenses and shall ensure that the nurse suffers no loss of salary.

(b) Where the Employer requires a nurse to attend educational conferences, workshops, programs or seminars during non-working time, the Employer shall pay registration or tuition fees, and approved expenses and shall pay for the time of such attendance at straight time rates.

(c) Educational Development:

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

and shall occur upon satisfactory completion of the workshop, course, or educational program.

2408 **Parenting Leave**

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

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

A. **Maternity Leave Plan “A”**

1. Up to seventeen (17) weeks of Maternity Leave without pay will be granted subject to the following conditions:
 - (a) a written request must be submitted not later than the end of the fifth (5th) month of pregnancy and not less than one (1) month before the intended date of the leave.
 - (b) if requested by the nurse, unpaid Maternity Leave of shorter duration may be granted at the discretion of the Employer.
 - (c) the Employer is entitled to require a nurse to stop work in the case of unsatisfactory job performance or if the state of her health as verified by a qualified medical practitioner becomes incompatible with the requirements of her job.

B. **Maternity Leave Plan “B”**

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

health as verified by a qualified medical practitioner becomes incompatible with the requirements of her job.

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

$$\frac{\text{Monetary value of top up provided}}{\text{Hours of service required to be worked (based on monetary value)}} \times \frac{\text{number of hours not worked}}{\text{(value is based on hours paid at regular rate of pay in 6 months prior to leave)}}$$

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

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

C. 1. Parental Leave

- (i) In order to qualify for Parental Leave a nurse must be the natural mother of a child; or be the natural father of a child or must assume actual care and custody of his newborn child (Paternity Leave) or adopt a child under the law of the province (Adoption Leave), or be a partner in a same sex relationship who assumes care and custody of a child.
- (ii) A nurse who qualifies for Parental Leave, except in the case of Adoption Leave as specified below, must submit to the Employer an application in writing for Parental Leave at least four (4) weeks before the intended date of the commencement of the leave.
- (iii) In the case of Adoption Leave, the nurse must submit a written request for such leave. The nurse may commence adoption leave upon one (1) day's notice provided that application for such leave is made when the adoption has been approved and the Employer is kept informed of the progress of the adoption proceedings.
- (iv) A nurse who qualifies in accordance with (i), (ii) and (iii) will be granted Parental Leave without pay for a continuous period of up to fifty-four (54) weeks inclusive of vacation as specified in (c) below. If requested by the nurse, extensions to leaves under this clause will be granted in accordance with 2401.

2. Except as outlined below, any nurse must use current annual vacation, (which was earned during the previous vacation year), during the current vacation year. If the current annual vacation is not used, then the Employer has the right to schedule the vacation prior to the end of the current vacation year or pay out any monies owing.

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

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

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

3. Subject to 4. below, Parental Leave must commence no later than the first anniversary date of birth or adoption of the child or of the date on which the child comes into actual care and custody of the nurse.
4. Where a nurse takes Parental Leave in addition to Maternity Leave, the nurse must commence the Parental Leave immediately on the expiry of the Maternity Leave without a return to work unless otherwise approved by the Employer.
5. Three (3) days of paid leave of absence (23.25 hours) (**21.75 hours for Public Health**) shall be granted to a full-time nurse prior to the commencement of Maternity, Paternity, or Adoption Leave or at the time of the birth or adoption of a child. If the nurse is taking a Maternity, Paternity, or Adoption Leave, the nurse will use this three (3) days of paid leave to replace scheduled hours of work immediately prior to the Sunday of the week the Maternity, Paternity, or Adoption Leave commences.

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

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

2409 Union Leave:

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

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

2410 Jury and Witness Duty: A nurse required to attend a court proceeding, other than a court proceeding occasioned by the nurse's private affairs where she/he is a party to that proceeding, shall receive leave of absence at her/his regular basic rate of pay, and remit to the employer any jury or witness fees received, only for those days she/he was normally scheduled to work. The nurse shall not request reimbursement for, or be required to remit any reimbursement of expenses for such duty.

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

A nurse required to attend a court proceeding as a party to that proceeding, occasioned by the nurse's private affairs shall receive a leave of absence without pay for the required absence.

2411 Bereavement Leave:

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

(2) additional working days as may be necessitated by reason of travel to attend the funeral.

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

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

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

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

Additional for Public Health , CNS , Breast Health and Nurse Practitioners:

A nurse may be granted leave of absence without pay and without loss of seniority for compassionate or other very special reasons on approval of the Director of the Department or her/his designate where, in the opinion of management, such leave will not adversely affect the operation of the Department.

2412 Leave re Public Office: A nurse will be granted unpaid leave of absence to enable her/him, if nominated, to campaign for public office and, if elected, to serve her/his term(s) of office.

2413 Pre-retirement Leave:

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

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

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

$$\frac{\text{Hours Worked During Layoff}}{\text{Annual Full-time Hours}} \quad \times \quad \text{Entitlement of a Full-Time Nurse}$$

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

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

$$\frac{\text{Average Annual Hours Actually Worked From Last Date of Employment}}{\text{Annual Full-time Hours}} \times \text{Entitlement of a Full-time Nurse}$$

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

$$\frac{\text{Hours Worked During Layoff}}{\text{Annual Full-time Hours}} \times \text{Entitlement of a Full-Time Nurse}$$

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

Note: It is understood that for the purposes of calculation of pre-retirement leave entitlement, for nurses employed within two (2) or more sites that now comprise the Regional Health Authority, the earliest of their employment dates will apply.

- (d) Payment shall, at the option of the nurse, be made in a lump sum or as a continuation of salary until scheduled retirement date.

NOTE: Where a nurse chooses to take a lump sum payment, the retirement date shall be her/his last day worked.

- (e) Where a nurse is entitled to pre-retirement leave in accordance with the conditions listed above, and the nurse dies prior to receiving this benefit, it is understood that the pre-retirement leave benefit shall be paid to her/his estate.

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

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

2416 Compassionate Care Leave:

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

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

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

- (e) A family member for the purpose of this article shall be defined as:
 - (i) a spouse or common-law partner of the nurse;
 - (ii) a child of the nurse or a child of the nurse's spouse or common-law partner;
 - (iii) a parent of the nurse or a parent of the nurse's spouse or common-law partner;
 - (iv) a brother, sister, step-brother, step-sister, uncle, aunt, nephew, niece, grandchild or grandparent of the nurse or of the nurse's spouse or common-law partner;
 - (v) a current or former foster parent of the nurse or of the nurse's spouse or common-law partner;
 - (vi) a current or former foster child, ward or guardian of the nurse, or of the nurse's spouse or common-law partner;

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

ARTICLE 25 -- SENIORITY

2501 "Seniority" shall be defined as the length of the nurse's continuous employment from the last date on which she/he commenced work with the Employer, subject to Article 34 herein.

Additional for Home Care: *Seniority accumulated up to September 30, 2002 shall be retained; and effective October 1, 2002, seniority will be calculated in accordance with 2501 above.*

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

2503 The seniority of a nurse will be retained but will not accrue if:

- (i) she/he is on any unpaid leave of absence in excess of four (4) consecutive weeks except those referenced in (ii) below, and those referenced in Article 2504;
- (ii) she/he is on an unpaid leave of absence due to injury or illness which may be compensable by Workers Compensation, MPI or D & R, for a period of more than two (2) years from the date of the first absence from work related to the injury or illness;
- (iii) she/he is on an educational leave of absence in excess of two (2) years;

- (iv) she/he is laid off for more than twenty-six (26) weeks and less than five (5) years;
- (v) she/he obtains a term position of fifty-four (54) weeks or less, outside the bargaining unit.

2504

- The seniority of a nurse will be retained and will accrue if:
- (i) she/he is on any period of paid leave of absence;
 - (ii) she/he is on any period of Employer paid income protection;
 - (iii) she/he is on an educational leave of absence up to two (2) years;
 - (iv) she/he is on an unpaid leave of absence due to injury or illness which may be compensable by Workers Compensation, MPI or D & R for a period of up to two (2) years from the date of the first absence from work related to the injury or illness;
 - (v) she/he is on any period of unpaid leave of absence of less than four (4) weeks, except those referenced in (iv) above;
 - (vi) she/he is laid off for less than twenty-six (26) weeks;
 - (vii) she/he is on parenting leave;
 - (viii) she/he is on Educational Deferred Salary Leave.

Note: Accrual under these provisions is based on the nurse's regular EFT.

2505

- The seniority of a nurse will terminate if:
- (i) she/he resigns;
 - (ii) she/he is discharged, and not reinstated under the grievance procedure;
 - (iii) she/he is laid off for more than five (5) years;
 - (iv) she/he fails to report for duty within seven (7) days after notification to do so, subject to Article 2706;
 - (v) she/he fails to report for work as scheduled at the end of a leave of absence, vacation, or suspension without valid reason;
 - (vi) she/he obtains a permanent position outside the bargaining unit; or a term position outside the bargaining unit which is greater than fifty-four (54) weeks.

2506

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

ARTICLE 26 -- NOTICE OF TERMINATION OF EMPLOYMENT

2601

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

- (a) for classifications other than Nurse IV, Nurse V, CNS and Nurse Practitioner -- four (4) weeks, and

- (b) for Nurse II – Public Health, Nurse IV , Nurse V , CNS and Nurse Practitioner classifications -- six (6) weeks.

2602 Employment may be terminated with less notice or without notice:

- (a) by mutual agreement between the nurse and the Employer for special circumstances, or
 (b) during the probationary period of a newly hired nurse subject to Article 31 herein, or
 (c) in the event a nurse is dismissed for sufficient cause to justify lesser or no notice.

2603 The Employer may give equivalent basic pay in lieu of notice.

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

ARTICLE 27 -- LAYOFF AND RECALL

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

2702 Notice of intention of layoff or equivalent pay thereof shall be given by personal service or by registered mail to the nurse(s) concerned and a copy of the notice forwarded to the Union. Notice shall be as follows:

- Layoffs of six (6) weeks or less - two (2) weeks notice;
- Layoffs of longer than six (6) weeks - four (4) weeks notice.

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

2703 No layoff of full-time or part-time nurses shall occur within a site when casual nurses are being employed within that site, unless no full-time or part-time nurse on staff within that site is qualified, competent and willing to fill the position(s) in question.

Notwithstanding Article 3402, additional available shifts shall be offered to a nurse on layoff, before part-time and casual nurses, provided she/he is qualified, competent and willing to perform the required work. During the first three (3) years of a layoff, the nurse on layoff will receive preferential consideration for the assignment of such shifts at the Team Office/ site of layoff, provided that this will not result in her/him working in excess of her/his regular EFT commitment. In addition, during the first three (3) years

of layoff, if a laid off nurse indicates her/his availability for additional available shifts at any of the other Team Offices/sites comprising the Regional Health Authority, she/he will receive preferential consideration over part-time nurses for the assignment of such shifts, provided that this will not result in her/his working in excess of her/his regular EFT commitment. During the period between three (3) to five (5) years, a laid off nurse may indicate availability for additional available shifts within any of the Team Offices/sites comprising the Regional Health Authority but will not receive preferential consideration over part-time nurses.

Notwithstanding 1405, during the period between three (3) to five (5) years where a nurse does not work all or part of said additional available shift(s), for any reason, payment shall be made only in respect of hours actually worked; this is not applicable to the base EFT of a term position occupied by a laid off nurse.

In the event the nurse accepts additional available shifts, the provisions of the Collective Agreement shall be applicable except as modified hereinafter:

(a) vacation pay shall be calculated in accordance with section 2103 and shall be paid at the prevailing rate for the nurse on each pay cheque, and shall be prorated on the basis of hours paid at regular rate of pay,

(b) income protection accumulation shall be calculated as follows:

$$\frac{\text{Additional available hours worked by the laid-off nurse}}{\text{Full-time hours}} \times \text{Entitlement of Full-time Nurse}$$

(c) in the event the layoff is longer than twenty-six (26) weeks, seniority shall be calculated in accordance with regular hours worked,

(d) the nurse shall be paid four point six two percent (4.62%) of the basic rate of pay in lieu of time off on Recognized Holidays. Such holiday pay shall be calculated on all paid hours and shall be included in each pay cheque,

(e) participation in benefit plans is subject to the provisions of each plan.

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

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

2704 No new nurses will be hired at a site when other nurses are on layoff from that site, except for reasons of a special skill requirement.

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

2706 Nurses shall be recalled in seniority order to available positions in equal or lower paid occupational classifications at the originating site or at other sites within a fifty (50) kilometre radius of the originating site provided they are qualified to perform the required work. In addition, at the time of layoff, nurses may request recall to sites outside the fifty (50) kilometre radius. Such recall shall be made by registered mail or by personal service and shall provide for at least one (1) week's notice to report back to work.

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

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

2707 In the event of a deletion of an occupied position, as much notice as possible shall be given to the incumbent who will be entitled to exercise her/his seniority rights, subject to her/his ability, performance and qualifications, to displace a nurse in a position of equal or lower classification within the site. Where it is not possible due to seniority level or where there are no positions available within .2 of the EFT of the position occupied by the nurse at the time of the deletion, the nurse shall be entitled to exercise her/his seniority rights, subject to her/his ability, performance and qualifications, to displace a nurse in a position of equal or lower classification within any of the other sites comprising the Regional Health Authority. Any nurse thus displaced shall also be entitled to a like exercise of seniority rights.

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

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

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

ARTICLE 28 -- PROMOTION AND SECONDMENT

2801 Upon promotion, a nurse shall receive a salary applicable to her/his new classification which provides an increase of at least one increment above her/his former

salary. A promotion shall mean an increase in classification from one occupational classification to another.

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

2803 The first three (3) calendar months following a nurse's promotion shall be considered to be a trial period, and the Union shall be notified by the Employer. During the first six (6) weeks of this trial period, the nurse may return to her/his former position at her/his request or be returned to her/his former position by the Employer. During the last six (6) weeks of this trial period, she/he may return to her/his former classification at her/his request or be returned to her/his former classification by the Employer.

2804

(a) In the event of a temporary lateral secondment being necessitated by an unforeseen staffing shortage on a nursing unit in any site within the Regional Health Authority, this secondment will be made as close to the commencement of the shift as possible if the secondment is within one (1) site and with as much notice as possible if the secondment is from one (1) site to another within the Regional Health Authority. Selection of the nurse to be seconded shall be based on ability and experience and shared as equally as possible amongst the nurses in each site. It is understood that secondments will only occur within a fifty (50) kilometre radius of the originating site, unless a greater distance is mutually agreed between the Employer and the nurse.

(b) Nurses who are seconded from one site to another within the Regional Health Authority shall be eligible for transportation reimbursement in accordance with the prevailing Province of Manitoba mileage rates subject to a minimum guarantee of four dollars (\$4.00) and in accordance with the following formula:

Distance (in kms) from the nurse's home to the new worksite minus the distance (in kms) from the nurse's home to the nurse's originating worksite.

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

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

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

2901 In all instances where the Employer considers that a nurse warrants disciplinary action, the Employer shall make every effort to take such action at a meeting with the nurse and shall give the nurse advance notice of the nature of the complaint. The nurse may be accompanied at the meeting by a Union representative.

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

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

2904 If a nurse is reclassified to a lower paid position because of changing conditions within the Regional Health Authority, she/he will retain her/his current salary level until the salary scale of the lower position reaches her/his level of salary.

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

2905 A nurse shall be given the opportunity to examine any document which is placed in her/his personnel file, including, but not limited to, those documents which may be utilized to substantiate a disciplinary action against her/him, and her/his reply to any such document shall also be placed in her/his personnel file. Upon written request the nurse shall also receive an exact copy of such document.

2906 A nurse accompanied by a Union representative if she/he so elects may examine her/his personnel file upon request. A nurse shall have recourse to the grievance procedure to dispute any derogatory entry in her/his personnel file. The Employer agrees not to introduce as evidence any such derogatory entry at any hearing unless the nurse has been made aware of its contents at the time of filing or a reasonable time thereafter. Any nurse who has been terminated may consult her/his file and upon written request shall receive copies of specified documents so long as the written request is made within sixty (60) days of her/his termination.

2907 There shall be one (1) personnel file maintained by the Employer for each nurse.

ARTICLE 30 -- VACANCIES, TERM POSITIONS AND NEW POSITIONS

3001 Subject to section 3002 herein, the Employer agrees to post notices of vacant, term or new positions covered under this Agreement at each site comprising the

Regional Health Authority on the same date for at least seven (7) days to enable nurses presently in the employ of the Regional Health Authority to apply for same. Such posting shall not preclude the Employer from advertising outside the Regional Health Authority. All postings shall state minimum qualifications required, the equivalent to full-time (E.F.T.), Team Office(s)/site(s)/unit(s) of the position and date of closing of the competition. Job descriptions shall be available to applicants on request.

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

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

3003 Provided that equivalent qualifications are met, preference shall be given to nurses presently in the bargaining unit who have submitted a written application for the vacant, term or new positions, with first preference being given to applicants from the site where the vacancy occurs.

3004 Each nurse who applies for a posted vacancy will be notified in writing of the disposition of her/his application. The name of the successful applicant and the position awarded will be posted on the bulletin board for a period of seven (7) calendar days with a copy of this information forwarded to the Union.

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

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

3006 "Term Position":

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

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

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

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

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

On expiry of the term position the nurse:

- (a) newly hired from outside the Regional Health Authority or a casual nurse from within the Regional Health Authority shall be entitled to exercise her/his seniority rights to obtain any vacant position within the sites comprising the Regional Health Authority for which she/he is qualified, without interruption of seniority or benefits if the position commences within four (4) weeks of the expiry of the term position.
- (b) who was employed by the Employer immediately prior to accepting the term position shall return to her/his former position if reasonably possible. A nurse not returned to her/his former position shall be returned to her/his former occupational classification and employment status within the site.

ARTICLE 31 – PROBATIONARY PERIOD

Applicable for Breast Health , Pan Am and Primary Care

3101 *The period from the date of last employment to the completion of three (3) calendar months of employment for full-time nurses [and from the date of last employment to the later of completion of four (4) calendar months or thirty (30) shifts worked for part-time nurses] will be recognized as a probationary period. During such period the nurse shall not have recourse to the grievance procedure for reasons of*

termination of employment for unsuitability or unsatisfactory performance. This clause shall not preclude the Employer from extending the probationary period of a full-time or part-time nurse up to an additional three (3) calendar months providing that the Employer gives written notification to the Union specifying the reason(s) for the extension.

Applicable for Home Care , Public Health , CNS, Nurse Practitioners and Regional Programs

3101

- (a) *The period from the date of last employment to the completion of six (6) calendar months of employment for full-time and part-time nurses. During such period the nurse shall not have recourse to the grievance procedure for reasons of termination of employment for unsuitability or unsatisfactory performance. This clause shall not preclude the Employer from extending the probationary period of a full-time or part-time nurse up to an additional three (3) calendar months providing that the Employer gives written notification to the Union specifying the reason(s) for the extension.*
- (b) *The time frames of continuous employment mentioned in subsection (a) above will automatically be extended to adjust for any period of time that the nurse is on compensation for lost wages paid by Workers Compensation Board.*

ARTICLE 32 -- PERFORMANCE APPRAISALS

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

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

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

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

ARTICLE 33 -- DAMAGE TO PERSONAL PROPERTY

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

ARTICLE 34 -- SPECIAL UNDERSTANDINGS RE PART-TIME NURSES

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

3402 Part-time nurses who make known to the Employer that they wish to work occasional additional available shifts shall be given preference for such shifts unless the part-time nurse has already worked in that day with such preference being given on the following basis within the worksites/Programs comprising the Regional Health Authority:

- (i) First, among nurses in each work location (***in a specific Public Health program in each community area or community paired area***) where the shift is available who meet the provisions above, and who have requested additional shifts, if mutually agreed between the Employer and the Union;
- (ii) Second, among those nurses within that site (***in a specific Public Health program from other Team offices***), who meet the provisions above, and who have requested additional shifts;
- (iii) Third, among those nurses from other sites comprising the Regional Health Authority who meet the provisions above and who have requested additional shifts.

Not Applicable for CNS

3403 A part-time nurse called back to work hours in excess of a shift (as defined in 1404) in any one (1) day shall be paid at overtime rates of pay with a guaranteed minimum of three (3) hours at overtime rates. If the extra time worked under this subsection commences within less than three (3) hours before the start of a shift, the guaranteed minimum of overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time she/he starts to work to the beginning of her/his shift.

Applicable for Home Care:

3403 *A part-time nurse called back to work hours in excess of a seven and three-quarter (7.75) hour shift in any one (1) day shall be paid at overtime rates of pay with a guaranteed minimum of one (1) hour at overtime rates. If the extra time worked under this subsection commences within less than one (1) hour before the start of a shift, the guaranteed minimum of overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time she/he starts to work to the beginning of her/his shift.*

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

3405

- (a) Vacation pay shall be calculated as follows:

Hours Paid at Regular Rate of Pay <u>(during vacation year)</u> Full-time Hours	X	Entitlement of a Full-time Nurse
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Not Applicable for Public Health Nurses, CNS and Breast Health Nurses:

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

3406 Income protection accumulation for part-time nurses shall be calculated as follows:

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

3408 A part-time nurse shall receive increments (calculated from the date of her/his last increment, or her/his starting date as the case may be) on the basis of one (1) increment for each 1343 (***1233 for Public Health***) hours worked or one (1) year's service, whichever occurs later. In the case of the increment being given on the basis of 1343 (***1233 for Public Health***) hours worked, it shall be applied to the pay period next following completion of 1343 (***1233 for Public Health***) hours worked.

Applicable for Home Care:

3409 *Seniority accumulated by a part-time nurse up to September 30, 2002 shall be retained; and effective from October 1, 2002 seniority will be calculated in accordance with regular hours worked.*

Applicable for Pan Am:

3409

- (a) *Part-time nurses shall accrue seniority on an annual basis, no matter the nurses' equivalent to full-time status, up to October 31, 2003.*
- (b) *Seniority accumulated by a part-time nurse up to October 31, 2003 shall be retained; and effective from November 1, 2003 seniority will be calculated in accordance with regular hours paid.*

3410 Subject to Article 3806, a nurse whose employment status changes from part-time to full-time shall be entitled to receive an increment on the later of :

(a) one (1) calendar year from the date of his/her last increment, or date of employment as the case may be;

(b) on completion of 2015 (**1885 @ Public Health**) hours calculated under the formula:

$$B = 2015 - (A \times 3/2) \text{ (**1885 - (A x 3/2 @ Public Health)**)}$$

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

B = number of hours remaining to be worked as full-time to earn an increment.

3411 Subject to Article 3806, a nurse whose employment status changes from full-time to part-time shall be entitled to receive an increment on the later of:

(a) one (1) calendar year from the date of her/his last increment, or date of employment as the case may be;

(b) on completion of 1343 (**1233 @ Public Health**) hours calculated under the formula:

$$B = 1343 - (A \times 2/3) \text{ [**1233 - (A x 2/3) @ Public Health**]}$$

A = number of hours during which seniority was accrued under full-time status since the date of her/his last increment, or starting date as the case may be.

B = number of hours remaining to be worked as part-time to earn an increment.

3412 Where a Recognized Holiday (or the Employer's designated lieu day) falls on a part-time nurse's normally scheduled day of work but the nurse's unit/worksites/office is closed, it is recognized that the nurse shall receive an unpaid leave of absence unless she/he requests one of the following options:

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

ARTICLE 35 -- SPECIAL UNDERSTANDINGS RE CASUAL NURSES

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

Applicable for Home Care:

3501 *A casual nurse is called in by the Employer to replace a full-time or part-time nurse or to supplement regular staffing requirements.*

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

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

A casual nurse shall receive increments (calculated from the date of her/his last increment, or the nurse's start date as the case may be) on the basis of one (1) increment for each 2015 regular hours (**1885 regular hours @ Public Health**) worked. Such increment shall be applied on the first day of the first pay period following completion of 2015 hours (**1885 regular hours @ Public Health**).

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

- (a) Such casual nurse will be paid in accordance with the salary specified in Appendices "A" and "B";
- (b) She/he will receive the salary of the occupational classification into which she/he is assigned and at the same increment level that had been attained while working as a full-time or part-time nurse.

3504 Casual nurses will be entitled to:

- compensation for overtime worked in accordance with Article 16;
- shift premium and weekend premium outlined in Article 17;
- the allowance as outlined in Article 18;
- Responsibility Pay premium outlined in Article 19;
- transportation allowance/escort duty outlined in Article 20;
- the rights outlined in 2905, 2906, 2907;
- the Educational Development allowance in 2407(c).

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

of pay. Casual nurses required to work on Remembrance Day shall be paid at the rate of double their basic rate of pay.

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

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

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

Applicable for Home Care:

3507 *Where a Home Care nurse is unable to complete her/his scheduled shift due to client circumstances, she/he may be reassigned to other clients, or may be reassigned to other work for which she/he is qualified within any of the sites comprising the RHA. It is understood that such reassignment will only occur within a fifty (50) km. radius of the originating site, unless a greater distance is mutually agreed between the Employer and the nurse. Travel time and Transportation Allowance as outlined in Article 20 shall be paid to the nurse to travel to the reassigned site.*

Should reassignment as contemplated above not be possible, the Home Care nurse shall receive pay for the scheduled hours not worked.

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

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

3510

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

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

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

3601 Salaries and Increments of the Graduate Nurse, Graduate Practical Nurse and Graduate Psychiatric Nurse:

- (a) Starting salary of the newly graduated graduate nurse, graduate practical nurse or graduate psychiatric nurse awaiting initial registration as a Registered Nurse, Licensed Practical Nurse or Registered Psychiatric Nurse shall be discounted by eight percent (8%) until such time as registration/license is achieved.
- (b) The anniversary date of a newly graduated graduate nurse or graduate psychiatric nurse who obtains registration within one (1) year of commencing employment shall be the date of her/his commencement of employment.
- (c) The anniversary date of a newly graduated graduate practical nurse who obtains her/his license within an eighteen (18) month period of commencing employment (or within the time period as amended in the regulations of the LPN Act) shall be the date of her/his commencement of employment.

3602 Out of Province Nurses

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

- (d) When registration of a nurse in good standing as a Licensed Practical Nurse in another province, country or territory is obtained later than eight (8) months but before one (1) year the anniversary date shall be the date on which registration is obtained.

3603 Termination

- (a) In accordance with the Registered Nurses Act or the Registered Psychiatric Nurses Act or the relevant regulations to those Acts, failure of the graduate nurse or graduate psychiatric nurse to successfully complete the examination required for registration within a twelve (12) month period will be deemed to be just cause for termination.
- (b) Failure of the graduate practical nurse to successfully complete the examination required for licensure within an eighteen (18) month period, or as amended in the regulations of the Licensed Practical Nurses Act will be deemed to be just cause for termination.

ARTICLE 37 -- HEALTH PROGRAM

3701 Health examinations required by the Employer shall be provided by the Employer and shall be at the expense of the Employer.

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

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

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

ARTICLE 38 -- SALARIES AND INCREMENTS

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

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

3803**Applicable to Registered Nurses and Registered Psychiatric Nurses:**

- (a) The starting salary of a Registered Nurse or Registered Psychiatric Nurse newly employed as a Nurse II shall recognize previous experience applicable to the position applied for on the basis of equivalent full-time experience as specified hereinafter:

<u>Length of Experience</u>	<u>Starting Rate</u>
Less than 2015* hours *1885 @ Public Health	Start Rate
2015* hours within past 4 years *1885 @ Public Health	1 Year Rate
4030* hours within past 5 years *3770 @ Public Health	2 Year Rate
6045* hours within past 6 years *5655 @ Public Health	3 Year Rate
8060* hours within past 6 years *7540 @ Public Health	4 Year Rate
10075* hours within past 7 years *9425 @ Public Health	5 Year Rate

- (b) A nurse employed at a Nurse III, IV, V classification shall be granted a starting salary that is not less than one (1) increment step above what her/his starting salary would be if she/he were employed as a Nurse II.
- (c) The starting salary of a Registered Nurse or Registered Psychiatric Nurse who has had previous experience as a Licensed Practical Nurse, shall commence at the Nurse II 1 Year rate as specified in Appendix "A", and after not more than three (3) months from the date of commencement of her/his employment as a Registered Nurse or Registered Psychiatric Nurse, the Employer shall, on the basis of written performance appraisal discussed with her/him, grant such additional increments as performance warrants, with a minimum of one (1) increment for each two (2) years worked as a Licensed Practical Nurse within the previous five (5) year period.

3803**Applicable to CNS and Nurse Practitioners:**

- (a) The starting salary of a Nurse newly employed as a CNS or Nurse Practitioner shall recognize previous experience applicable to the position applied for on the basis of equivalent full-time experience as specified hereinafter:

<u>Length of Experience</u>	<u>Starting Rate</u>
Less than 10,075 hours	Start Rate
10,075 hours within past 6 years	1 Year Rate
12,090 hours within past 7 years	2 Year Rate
14,105 hours within past 8 years	3 Year Rate
16,130 hours within past 9 years	4 Year Rate

Additional for Nurse Practitioners:

- (b) *A Nurse Practitioner shall receive a salary applicable to her/his new classification which provides an increase of at least one increment above her/his former salary. This only applies to nurses who are from within the Province of Manitoba.*

Additional for Nurse Practitioners:

- (c) *The starting salary of the Nurse Practitioner awaiting licensure shall be the start rate and, once licensure is obtained, probation shall begin and the Nurse Practitioner will be granted increments in accordance with 3803 (a) retroactive to start date.*

3804 Applicable to Licensed Practical Nurses:

- (a) The starting salary of a newly employed Licensed Practical Nurse Technician shall recognize previous experience applicable to the position held on the basis of equivalent full-time experience as specified hereinafter:

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

- 3805** Starting salaries, as specified above, are to be regarded as minimum and shall not prevent the Employer from granting a higher starting salary to any nurse, when, in the judgment of the Employer, additional experience or other qualifications so warrant it.

3806 Increments:

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

- 3807** If new classifications which come under the scope of this Agreement are created during the term of this Agreement, or if there is a substantial change in the job content of an existing classification falling within the bargaining unit, the Employer will inform the Union of the proposed rates of pay for such positions. If the Union wishes to

enter into negotiations on these rates of pay it will so inform the Employer within seven (7) days and negotiations will commence within an additional ten (10) days, which time may be extended by mutual agreement between the Employer and the Union. If the parties are unable to reach agreement concerning the rates of pay the dispute shall, at the request of either or both parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at section 1302.

3808 Retroactivity:

Should there be retroactive wage and benefit adjustments, such shall be made payable within one hundred and twenty (120) days of the date of ratification of the Collective Agreement.

Upon written application to the Employer within one hundred and twenty (120) days of ratification of the Collective Agreement, nurses who have terminated employment with the Employer shall be entitled to retroactive pay.

ARTICLE 39 – EMPLOYEE BENEFIT PROGRAM

Not Applicable for Public Health:

3901 The parties agree that the Health Care Employees Benefit Plan sponsored dental plan will be on a 50-50 cost shared basis.

Applicable for Public Health:

3901 Dental Plan:

Commencing January 1, 1981, the Employer shall pay one hundred percent (100%) of the premium cost of a Dental Plan, the terms of which will be supplied by the Employer to W.C.N.A., MNU, Local 1. Pursuant to the terms of the Dental Plan, coverage will be provided to eligible employees and eligible dependents.

Effective December 27, 1992, the current year Manitoba Dental Association fee guide will be implemented as a basis for payment.

The Employer will provide the Union with a summary of the Dental benefit in effect on January 1, 1991 as well as the contract number.

3902 **Disability & Rehabilitation:**

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

The parties agree that income protection credits and Workers Compensation benefits will be used where applicable, to offset the elimination period. Once the elimination period has been exhausted, the nurse will commence drawing disability benefits. It is understood that the elimination period for the Disability and Rehabilitation Plan is one

hundred and nineteen (119) calendar days. A nurse may claim income protection benefits for the period of time not to exceed this elimination period.

3903 Health Spending Account

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

The annual HSA benefit amounts shall be:

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

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

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

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

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

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

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

3904 *Applicable for Public Health:*

All Manitoba Nurses' Union members transitioned to the Regional Health Authorities from the Civil Service will remain in the Government of Manitoba benefit plans consistent with those in place in the Civil Service at the time of the nurse's transition to the RHA. These Benefits programs include the Ambulance & Hospital Semi-Private (AHSP), Dental, Vision, Prescription Drugs, Extended Health, Travel Health, Long-Term Disability (LTD) plans and Health Spending Account and nurses will be "grandparented" to those plans for the duration of their employment.

All future changes to Benefit Plans negotiated in the Civil Service shall be applicable to the MNU members who are “grandparented” to these plans.

Current plan details and claim forms can be reviewed and downloaded at:
<http://www.gov.mb.ca/finance/labour/blue.html>

Note: Those Community Health Nurses that were already MNU members and those who are newly organized into the MNU, will be covered by the Health Care Employees' Benefit Plans (HEBP) and the Health Care Employees' Pension Plan (HEPP).

Applicable for Public Health Nurses:

3905 *In the event a reduction in the permanent working force becomes necessary, permanent nurses that are unable to maintain positions in accordance with the bumping provisions of the Collective Agreement and who are severed, will receive dental care and vision care benefits in accordance with this Article for a period of three (3) years from the actual date of termination.*

ARTICLE 40 – OVERPAYMENTS

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

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

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

APPENDIX "A" - SALARIES

A1. Effective October 1, 2009 - Monthly salaries.

Hourly salary calculated as (monthly salary x 12) ÷ annual hours

Annual Hours = 2015

Nurse Classification		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
Licensed Practical Nurse	Annual	47,849.490	49,415.090	50,960.294	52,839.004	54,561.178	56,484.121	58,495.586	
	Monthly	3,987.457	4,117.924	4,246.691	4,403.250	4,546.765	4,707.010	4,874.632	
	Hourly	23.747	24.524	25.290	26.223	27.078	28.032	29.030	
Nurse II	Annual	62,508.308	64,689.919	66,878.354	69,158.695	71,387.979	73,692.138		
	Monthly	5,209.026	5,390.827	5,573.196	5,763.225	5,948.998	6,141.011		
	Hourly	31.021	32.104	33.190	34.322	35.428	36.572		
Nurse III Primary Care Nurse	Annual	64,883.920	67,072.374	69,356.080	71,585.364	73,654.673	75,911.177	78,239.154	
	Monthly	5,406.993	5,589.364	5,779.673	5,965.447	6,137.889	6,325.931	6,519.930	
	Hourly	32.200	33.287	34.420	35.526	36.553	37.673	38.828	
Nurse IV	Annual	67,109.802	69,594.333	72,082.267	74,794.843	77,902.245	80,917.723	84,072.742	
	Monthly	5,592.483	5,799.528	6,006.856	6,232.904	6,491.854	6,743.144	7,006.062	
	Hourly	33.305	34.538	35.773	37.119	38.661	40.158	41.723	
Occupational Health Nurse - current incumbent only	Annual	67,109.802	69,594.333	72,082.267	74,794.843	77,902.245	80,917.723	84,208.882	87,636.161
	Monthly	5,592.483	5,799.528	6,006.856	6,232.904	6,491.854	6,743.144	7,017.407	7,303.013
	Hourly	33.305	34.538	35.773	37.119	38.661	40.158	41.791	43.492
Infection Control Nurse	Annual	67,109.802	69,594.333	72,082.267	74,794.843	77,902.245	80,917.723	84,208.882	87,636.161
	Monthly	5,592.483	5,799.528	6,006.856	6,232.904	6,491.854	6,743.144	7,017.407	7,303.013
	Hourly	33.305	34.538	35.773	37.119	38.661	40.158	41.791	43.492
Nurse V	Annual	70,840.020	73,552.578	76,659.961	79,675.421	82,966.598	86,189.705	89,548.933	
	Monthly	5,903.335	6,129.381	6,388.330	6,639.618	6,913.883	7,182.475	7,462.411	
	Hourly	35.156	36.503	38.045	39.541	41.174	42.774	44.441	
Infection Control Specialist ICP-Clinical Team Leader	Annual	70,695.000	74,760.000	79,248.000	83,733.000	88,217.000	92,703.000		
	Monthly	5,891.250	6,230.000	6,604.000	6,977.750	7,351.417	7,725.250		
	Hourly	35.084	37.102	39.329	41.555	43.780	46.006		
Clinical Nurse Specialist Nurse Practitioner	Annual	80,734.421	86,658.769	90,221.915	93,781.149	97,622.505			
	Monthly	6,727.868	7,221.564	7,518.493	7,815.096	8,135.209			
	Hourly	40.067	43.007	44.775	46.542	48.448			
Weekend Worker Rates:		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
Weekend Worker - Licensed Practical Nurse	Annual	55,026.913	56,827.354	58,604.338	60,764.854	62,745.354	64,956.739	67,269.924	
	Monthly	4,585.576	4,735.613	4,883.695	5,063.738	5,228.780	5,413.062	5,605.827	
	Hourly	27.309	28.202	29.084	30.156	31.139	32.237	33.385	
Weekend Worker - Nurse II	Annual	71,884.554	74,393.407	76,910.107	79,532.499	82,096.176	84,745.958		
	Monthly	5,990.379	6,199.451	6,409.176	6,627.708	6,841.348	7,062.163		
	Hourly	35.675	36.920	38.169	39.470	40.743	42.058		
Weekend Worker - Nurse III Primary Care Nurse	Annual	74,616.509	77,133.230	79,759.492	82,323.169	84,702.874	87,297.854	89,975.027	
	Monthly	6,218.042	6,427.769	6,646.624	6,860.264	7,058.573	7,274.821	7,497.919	
	Hourly	37.031	38.280	39.583	40.855	42.036	43.324	44.653	
Weekend Worker - Nurse IV	Annual	77,176.272	80,033.483	82,894.607	86,014.070	89,587.582	93,055.381	96,683.654	
	Monthly	6,431.356	6,669.457	6,907.884	7,167.839	7,465.632	7,754.615	8,056.971	
	Hourly	38.301	39.719	41.139	42.687	44.460	46.181	47.982	
Weekend Worker - Nurse V	Annual	81,466.022	84,585.464	88,158.955	91,626.734	95,411.587	99,118.161	102,981.273	
	Monthly	6,788.835	7,048.789	7,346.580	7,635.561	7,950.966	8,259.847	8,581.773	
	Hourly	40.430	41.978	43.751	45.472	47.351	49.190	51.107	

APPENDIX "A" - SALARIES

Effective October 1, 2009 - Monthly rates. Hourly salary calculated as (monthly salary x 12) ÷ annual hours
 Annual Hours = 1885 Applicable for Community Health Nurses

Nurse Classification		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Nurse II	Annual	62,508.308	64,689.919	66,878.354	69,158.695	71,387.979	73,692.138	
	Monthly	5,209.026	5,390.827	5,573.196	5,763.225	5,948.998	6,141.011	
	Hourly	33.161	34.318	35.479	36.689	37.872	39.094	
Nurse IV	Annual	67,109.802	69,594.333	72,082.267	74,794.843	77,902.245	80,917.723	84,072.742
	Monthly	5,592.483	5,799.528	6,006.856	6,232.904	6,491.854	6,743.144	7,006.062
	Hourly	35.602	36.920	38.240	39.679	41.327	42.927	44.601
Nurse V	Annual	70,840.020	73,552.578	76,659.961	79,675.421	82,966.598	86,189.705	89,548.933
	Monthly	5,903.335	6,129.381	6,388.330	6,639.618	6,913.883	7,182.475	7,462.411
	Hourly	37.581	39.020	40.668	42.268	44.014	45.724	47.506
Weekend Worker Rates:		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Weekend Worker - Nurse II	Annual	71,884.554	74,393.407	76,910.107	79,532.499	82,096.176	84,745.958	
	Monthly	5,990.379	6,199.451	6,409.176	6,627.708	6,841.348	7,062.163	
	Hourly	38.135	39.466	40.801	42.192	43.552	44.958	
Weekend Worker - Nurse IV	Annual	77,176.272	80,033.483	82,894.607	86,014.070	89,587.582	93,055.381	96,683.654
	Monthly	6,431.356	6,669.457	6,907.884	7,167.839	7,465.632	7,754.615	8,056.971
	Hourly	40.942	42.458	43.976	45.631	47.527	49.366	51.291
Weekend Worker - Nurse V	Annual	81,466.022	84,585.464	88,158.955	91,626.734	95,411.587	99,118.161	102,981.273
	Monthly	6,788.835	7,048.789	7,346.580	7,635.561	7,950.966	8,259.847	8,581.773
	Hourly	43.218	44.873	46.769	48.608	50.616	52.583	54.632

Note: Upon written application to the Employer within one hundred and twenty (120) days of ratification of the Collective Agreement, nurses who have terminated employment with the Employer prior to the date of ratification shall be entitled to the lump sum payment calculated as 0.02 (2%) x the nurse's earnings (exclusive of overtime) for the number of full pay periods she/he was employed with the Employer which fall within the 26 pay periods identified above.

This lump sum payment is not deemed to be pensionable earnings and is not subject to pension plan deductions.

APPENDIX "A" - SALARIES

A2. Effective April 1, 2012 - Monthly salaries include a 3% increase.

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Annual Hours = 2015

Nurse Classification		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
Licensed Practical Nurse	Annual	49,284.974	50,897.543	52,489.103	54,424.174	56,198.013	58,178.645	60,250.453	
	Monthly	4,107.081	4,241.462	4,374.092	4,535.348	4,683.168	4,848.220	5,020.871	
	Hourly	24.459	25.259	26.049	27.010	27.890	28.873	29.901	
Nurse II	Annual	64,383.557	66,630.617	68,884.705	71,233.456	73,529.618	75,902.902		
	Monthly	5,365.296	5,552.551	5,740.392	5,936.121	6,127.468	6,325.242		
	Hourly	31.952	33.067	34.186	35.352	36.491	37.669		
Nurse III Primary Care Nurse	Annual	66,830.438	69,084.545	71,436.763	73,732.925	75,864.313	78,188.513	80,586.329	
	Monthly	5,569.203	5,757.045	5,953.064	6,144.410	6,322.026	6,515.709	6,715.527	
	Hourly	33.166	34.285	35.452	36.592	37.650	38.803	39.993	
Nurse IV	Annual	69,123.096	71,682.163	74,244.735	77,038.689	80,239.312	83,345.254	86,594.925	
	Monthly	5,760.258	5,973.514	6,187.061	6,419.891	6,686.609	6,945.438	7,216.244	
	Hourly	34.304	35.574	36.846	38.233	39.821	41.362	42.975	
Occupational Health Nurse - current incumbent only	Annual	69,123.096	71,682.163	74,244.735	77,038.689	80,239.312	83,345.254	86,735.148	90,265.246
	Monthly	5,760.258	5,973.514	6,187.061	6,419.891	6,686.609	6,945.438	7,227.929	7,522.104
	Hourly	34.304	35.574	36.846	38.233	39.821	41.362	43.045	44.797
Infection Control Nurse	Annual	69,123.096	71,682.163	74,244.735	77,038.689	80,239.312	83,345.254	86,735.148	90,265.246
	Monthly	5,760.258	5,973.514	6,187.061	6,419.891	6,686.609	6,945.438	7,227.929	7,522.104
	Hourly	34.304	35.574	36.846	38.233	39.821	41.362	43.045	44.797
Nurse V	Annual	72,965.220	75,759.155	78,959.760	82,065.683	85,455.596	88,775.396	92,235.401	
	Monthly	6,080.435	6,313.263	6,579.980	6,838.807	7,121.300	7,397.950	7,686.283	
	Hourly	36.211	37.598	39.186	40.727	42.410	44.057	45.774	
Infection Control Specialist ICP-Clinical Team Leader	Annual	72,815.850	77,002.800	81,625.440	86,244.990	90,863.510	95,484.090		
	Monthly	6,067.988	6,416.900	6,802.120	7,187.083	7,571.959	7,957.008		
	Hourly	36.137	38.215	40.509	42.801	45.094	47.387		
Clinical Nurse Specialist Nurse Practitioner	Annual	83,156.453	89,258.532	92,928.572	96,594.583	100,551.180			
	Monthly	6,929.704	7,438.211	7,744.048	8,049.549	8,379.265			
	Hourly	41.269	44.297	46.118	47.938	49.901			
Weekend Worker Rates:									
Weekend Worker - Licensed Practical Nurse	Annual	56,677.720	58,532.174	60,362.468	62,587.800	64,627.715	66,905.441	69,288.021	
	Monthly	4,723.143	4,877.681	5,030.206	5,215.650	5,385.643	5,575.453	5,774.002	
	Hourly	28.128	29.048	29.957	31.061	32.073	33.204	34.386	
Weekend Worker - Nurse II	Annual	74,041.091	76,625.209	79,217.411	81,918.474	84,559.061	87,288.337		
	Monthly	6,170.091	6,385.434	6,601.451	6,826.540	7,046.588	7,274.028		
	Hourly	36.745	38.027	39.314	40.654	41.965	43.319		
Weekend Worker - Nurse III Primary Care Nurse	Annual	76,855.004	79,447.226	82,152.277	84,792.864	87,243.960	89,916.790	92,674.278	
	Monthly	6,404.584	6,620.602	6,846.023	7,066.072	7,270.330	7,493.066	7,722.856	
	Hourly	38.141	39.428	40.770	42.081	43.297	44.624	45.992	
Weekend Worker - Nurse IV	Annual	79,491.560	82,434.488	85,381.445	88,594.492	92,275.209	95,847.043	99,584.163	
	Monthly	6,624.297	6,869.541	7,115.120	7,382.874	7,689.601	7,987.254	8,298.680	
	Hourly	39.450	40.910	42.373	43.967	45.794	47.567	49.421	
Weekend Worker - Nurse V	Annual	83,910.003	87,123.028	90,803.724	94,375.536	98,273.935	102,091.706	106,070.712	
	Monthly	6,992.500	7,260.252	7,566.977	7,864.628	8,189.495	8,507.642	8,839.226	
	Hourly	41.643	43.237	45.064	46.836	48.771	50.666	52.641	

APPENDIX "A" - SALARIES

Effective April 1, 2012 - Monthly rates include a 3% increase (2% general & 1% market; non-compounding). Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Annual Hours = 1885 Applicable for Community Health Nurses

Nurse Classification		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Nurse II	Annual	64,383.557	66,630.617	68,884.705	71,233.456	73,529.618	75,902.902	
	Monthly	5,365.296	5,552.551	5,740.392	5,936.121	6,127.468	6,325.242	
	Hourly	34.156	35.348	36.544	37.790	39.008	40.267	
Nurse IV	Annual	69,123.096	71,682.163	74,244.735	77,038.689	80,239.312	83,345.254	86,594.925
	Monthly	5,760.258	5,973.514	6,187.061	6,419.891	6,686.609	6,945.438	7,216.244
	Hourly	36.670	38.028	39.387	40.869	42.567	44.215	45.939
Nurse V	Annual	72,965.220	75,759.155	78,959.760	82,065.683	85,455.596	88,775.396	92,235.401
	Monthly	6,080.435	6,313.263	6,579.980	6,838.807	7,121.300	7,397.950	7,686.283
	Hourly	38.708	40.191	41.888	43.536	45.335	47.096	48.931
Weekend Worker Rates:		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Weekend Worker - Nurse II	Annual	74,041.091	76,625.209	79,217.411	81,918.474	84,559.061	87,288.337	
	Monthly	6,170.091	6,385.434	6,601.451	6,826.540	7,046.588	7,274.028	
	Hourly	39.279	40.650	42.025	43.458	44.859	46.307	
Weekend Worker - Nurse IV	Annual	79,491.560	82,434.488	85,381.445	88,594.492	92,275.209	95,847.043	99,584.163
	Monthly	6,624.297	6,869.541	7,115.120	7,382.874	7,689.601	7,987.254	8,298.680
	Hourly	42.171	43.732	45.295	47.000	48.952	50.847	52.830
Weekend Worker - Nurse V	Annual	83,910.003	87,123.028	90,803.724	94,375.536	98,273.935	102,091.706	106,070.712
	Monthly	6,992.500	7,260.252	7,566.977	7,864.628	8,189.495	8,507.642	8,839.226
	Hourly	44.515	46.219	48.172	50.067	52.135	54.160	56.271

APPENDIX "A" - SALARIES

A3. Effective October 1, 2012 - Monthly salaries include the addition of a 20 Year Long Service Step.

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Annual Hours = 2015

Nurse Classification		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year ¹
Licensed Practical Nurse	Annual	49,284.974	50,897.543	52,489.103	54,424.174	56,198.013	58,178.645	60,250.453		61,455.462
	Monthly	4,107.081	4,241.462	4,374.092	4,535.348	4,683.168	4,848.220	5,020.871		5,121.289
	Hourly	24.459	25.259	26.049	27.010	27.890	28.873	29.901		30.499
Nurse II	Annual	64,383.557	66,630.617	68,884.705	71,233.456	73,529.618	75,902.902			77,420.960
	Monthly	5,365.296	5,552.551	5,740.392	5,936.121	6,127.468	6,325.242			6,451.747
	Hourly	31.952	33.067	34.186	35.352	36.491	37.669			38.422
Nurse III Primary Care Nurse	Annual	66,830.438	69,084.545	71,436.763	73,732.925	75,864.313	78,188.513	80,586.329		82,198.055
	Monthly	5,569.203	5,757.045	5,953.064	6,144.410	6,322.026	6,515.709	6,715.527		6,849.838
	Hourly	33.166	34.285	35.452	36.592	37.650	38.803	39.993		40.793
Nurse IV	Annual	69,123.096	71,682.163	74,244.735	77,038.689	80,239.312	83,345.254	86,594.925		88,326.823
	Monthly	5,760.258	5,973.514	6,187.061	6,419.891	6,686.609	6,945.438	7,216.244		7,360.569
	Hourly	34.304	35.574	36.846	38.233	39.821	41.362	42.975		43.835
Occupational Health Nurse - current incumbent only	Annual	69,123.096	71,682.163	74,244.735	77,038.689	80,239.312	83,345.254	86,735.148	90,265.246	92,070.551
	Monthly	5,760.258	5,973.514	6,187.061	6,419.891	6,686.609	6,945.438	7,227.929	7,522.104	7,672.546
	Hourly	34.304	35.574	36.846	38.233	39.821	41.362	43.045	44.797	45.693
Infection Control Nurse	Annual	69,123.096	71,682.163	74,244.735	77,038.689	80,239.312	83,345.254	86,735.148	90,265.246	92,070.551
	Monthly	5,760.258	5,973.514	6,187.061	6,419.891	6,686.609	6,945.438	7,227.929	7,522.104	7,672.546
	Hourly	34.304	35.574	36.846	38.233	39.821	41.362	43.045	44.797	45.693
Nurse V	Annual	72,965.220	75,759.155	78,959.760	82,065.683	85,455.596	88,775.396	92,235.401		94,080.110
	Monthly	6,080.435	6,313.263	6,579.980	6,838.807	7,121.300	7,397.950	7,686.283		7,840.009
	Hourly	36.211	37.598	39.186	40.727	42.410	44.057	45.774		46.690
Infection Control Specialist ICP-Clinical Team Leader	Annual	72,815.850	77,002.800	81,625.440	86,244.990	90,863.510	95,484.090			97,393.772
	Monthly	6,067.988	6,416.900	6,802.120	7,187.083	7,571.959	7,957.008			8,116.148
	Hourly	36.137	38.215	40.509	42.801	45.094	47.387			48.334
Clinical Nurse Specialist Nurse Practitioner	Annual	83,156.453	89,258.532	92,928.572	96,594.583	100,551.180				102,562.203
	Monthly	6,929.704	7,438.211	7,744.048	8,049.549	8,379.265				8,546.850
	Hourly	41.269	44.297	46.118	47.938	49.901				50.899
Weekend Worker Rates:										
		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year ¹
Weekend Worker - Licensed Practical Nurse	Annual	56,677.720	58,532.174	60,362.468	62,587.800	64,627.715	66,905.441	69,288.021		70,673.782
	Monthly	4,723.143	4,877.681	5,030.206	5,215.650	5,385.643	5,575.453	5,774.002		5,889.482
	Hourly	28.128	29.048	29.957	31.061	32.073	33.204	34.386		35.074
Weekend Worker - Nurse II	Annual	74,041.091	76,625.209	79,217.411	81,918.474	84,559.061	87,288.337			89,034.104
	Monthly	6,170.091	6,385.434	6,601.451	6,826.540	7,046.588	7,274.028			7,419.509
	Hourly	36.745	38.027	39.314	40.654	41.965	43.319			44.186
Weekend Worker - Nurse III Primary Care Nurse	Annual	76,855.004	79,447.226	82,152.277	84,792.864	87,243.960	89,916.790	92,674.278		94,527.764
	Monthly	6,404.584	6,620.602	6,846.023	7,066.072	7,270.330	7,493.066	7,722.856		7,877.314
	Hourly	38.141	39.428	40.770	42.081	43.297	44.624	45.992		46.912
Weekend Worker - Nurse IV	Annual	79,491.560	82,434.488	85,381.445	88,594.492	92,275.209	95,847.043	99,584.163		101,575.847
	Monthly	6,624.297	6,869.541	7,115.120	7,382.874	7,689.601	7,987.254	8,298.680		8,464.654
	Hourly	39.450	40.910	42.373	43.967	45.794	47.567	49.421		50.410
Weekend Worker - Nurse V	Annual	83,910.003	87,123.028	90,803.724	94,375.536	98,273.935	102,091.706	106,070.712		108,192.126
	Monthly	6,992.500	7,260.252	7,566.977	7,864.628	8,189.495	8,507.642	8,839.226		9,016.010
	Hourly	41.643	43.237	45.064	46.836	48.771	50.666	52.641		53.693

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

APPENDIX "A" - SALARIES

Effective October 1, 2012 - Monthly rates include the addition of a 20 Year Long Service Step. Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Annual Hours = 1885 Applicable for Community Health Nurses

Nurse Classification		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	20 Year ¹
Nurse II	Annual	64,383.557	66,630.617	68,884.705	71,233.456	73,529.618	75,902.902		77,420.960
	Monthly	5,365.296	5,552.551	5,740.392	5,936.121	6,127.468	6,325.242		6,451.747
	Hourly	34.156	35.348	36.544	37.790	39.008	40.267		41.072
Nurse IV	Annual	69,123.096	71,682.163	74,244.735	77,038.689	80,239.312	83,345.254	86,594.925	88,326.823
	Monthly	5,760.258	5,973.514	6,187.061	6,419.891	6,686.609	6,945.438	7,216.244	7,360.569
	Hourly	36.670	38.028	39.387	40.869	42.567	44.215	45.939	46.858
Nurse V	Annual	72,965.220	75,759.155	78,959.760	82,065.683	85,455.596	88,775.396	92,235.401	94,080.110
	Monthly	6,080.435	6,313.263	6,579.980	6,838.807	7,121.300	7,397.950	7,686.283	7,840.009
	Hourly	38.708	40.191	41.888	43.536	45.335	47.096	48.931	49.910
Weekend Worker Rates:		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	20 Year ¹
Weekend Worker - Nurse II	Annual	74,041.091	76,625.209	79,217.411	81,918.474	84,559.061	87,288.337		89,034.104
	Monthly	6,170.091	6,385.434	6,601.451	6,826.540	7,046.588	7,274.028		7,419.509
	Hourly	39.279	40.650	42.025	43.458	44.859	46.307		47.233
Weekend Worker - Nurse IV	Annual	79,491.560	82,434.488	85,381.445	88,594.492	92,275.209	95,847.043	99,584.163	101,575.847
	Monthly	6,624.297	6,869.541	7,115.120	7,382.874	7,689.601	7,987.254	8,298.680	8,464.654
	Hourly	42.171	43.732	45.295	47.000	48.952	50.847	52.830	53.886
Weekend Worker - Nurse V	Annual	83,910.003	87,123.028	90,803.724	94,375.536	98,273.935	102,091.706	106,070.712	108,192.126
	Monthly	6,992.500	7,260.252	7,566.977	7,864.628	8,189.495	8,507.642	8,839.226	9,016.010
	Hourly	44.515	46.219	48.172	50.067	52.135	54.160	56.271	57.396

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

APPENDIX "A" - SALARIES

A4. Effective December 31, 2012 - Monthly salaries include a 1% increase.

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Annual Hours = 2015

Nurse Classification		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year ¹
Licensed Practical Nurse	Annual	49,777.824	51,406.518	53,013.994	54,968.416	56,759.993	58,760.431	60,852.958		62,070.017
	Monthly	4,148.152	4,283.877	4,417.833	4,580.701	4,729.999	4,896.703	5,071.080		5,172.501
	Hourly	24.704	25.512	26.310	27.280	28.169	29.162	30.200		30.804
Nurse II	Annual	65,027.393	67,296.923	69,573.552	71,945.790	74,264.914	76,661.931			78,195.169
	Monthly	5,418.949	5,608.077	5,797.796	5,995.483	6,188.743	6,388.494			6,516.264
	Hourly	32.272	33.398	34.528	35.705	36.856	38.046			38.807
Nurse III Primary Care Nurse	Annual	67,498.742	69,775.390	72,151.130	74,470.255	76,622.956	78,970.398	81,392.192		83,020.036
	Monthly	5,624.895	5,814.616	6,012.594	6,205.855	6,385.246	6,580.866	6,782.683		6,918.336
	Hourly	33.498	34.628	35.807	36.958	38.026	39.191	40.393		41.201
Nurse IV	Annual	69,814.327	72,398.985	74,987.182	77,809.075	81,041.705	84,178.707	87,460.874		89,210.091
	Monthly	5,817.861	6,033.249	6,248.932	6,484.090	6,753.475	7,014.892	7,288.406		7,434.174
	Hourly	34.647	35.930	37.214	38.615	40.219	41.776	43.405		44.273
Occupational Health Nurse - current incumbent only	Annual	69,814.327	72,398.985	74,987.182	77,809.075	81,041.705	84,178.707	87,602.500	91,167.899	92,991.257
	Monthly	5,817.861	6,033.249	6,248.932	6,484.090	6,753.475	7,014.892	7,300.208	7,597.325	7,749.271
	Hourly	34.647	35.930	37.214	38.615	40.219	41.776	43.475	45.245	46.150
Infection Control Nurse	Annual	69,814.327	72,398.985	74,987.182	77,809.075	81,041.705	84,178.707	87,602.500	91,167.899	92,991.257
	Monthly	5,817.861	6,033.249	6,248.932	6,484.090	6,753.475	7,014.892	7,300.208	7,597.325	7,749.271
	Hourly	34.647	35.930	37.214	38.615	40.219	41.776	43.475	45.245	46.150
Nurse V	Annual	73,694.872	76,516.746	79,749.358	82,886.340	86,310.152	89,663.150	93,157.755		95,020.911
	Monthly	6,141.239	6,376.396	6,645.780	6,907.195	7,192.513	7,471.929	7,763.146		7,918.409
	Hourly	36.573	37.974	39.578	41.135	42.834	44.498	46.232		47.157
Infection Control Specialist ICP-Clinical Team Leader	Annual	73,544.009	77,772.828	82,441.694	87,107.440	91,772.145	96,438.931			98,367.710
	Monthly	6,128.667	6,481.069	6,870.141	7,258.953	7,647.679	8,036.578			8,197.309
	Hourly	36.498	38.597	40.914	43.229	45.544	47.861			48.818
Clinical Nurse Specialist Nurse Practitioner	Annual	83,988.018	90,151.117	93,857.858	97,560.529	101,556.692				103,587.826
	Monthly	6,999.001	7,512.593	7,821.488	8,130.044	8,463.058				8,632.319
	Hourly	41.681	44.740	46.580	48.417	50.400				51.408
Weekend Worker Rates:		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year¹
Weekend Worker - Licensed Practical Nurse	Annual	57,244.498	59,117.496	60,966.093	63,213.678	65,273.992	67,574.496	69,980.902		71,380.520
	Monthly	4,770.375	4,926.458	5,080.508	5,267.807	5,439.499	5,631.208	5,831.742		5,948.377
	Hourly	28.409	29.339	30.256	31.372	32.394	33.536	34.730		35.425
Weekend Worker - Nurse II	Annual	74,781.501	77,391.462	80,009.585	82,737.659	85,404.652	88,161.220			89,924.445
	Monthly	6,231.792	6,449.288	6,667.465	6,894.805	7,117.054	7,346.768			7,493.704
	Hourly	37.112	38.408	39.707	41.061	42.384	43.752			44.628
Weekend Worker - Nurse III Primary Care Nurse	Annual	77,623.554	80,241.699	82,973.800	85,640.793	88,116.400	90,815.958	93,601.021		95,473.041
	Monthly	6,468.629	6,686.808	6,914.483	7,136.733	7,343.033	7,567.996	7,800.085		7,956.087
	Hourly	38.523	39.822	41.178	42.502	43.730	45.070	46.452		47.381
Weekend Worker - Nurse IV	Annual	80,286.476	83,258.832	86,235.260	89,480.437	93,197.961	96,805.513	100,580.005		102,591.605
	Monthly	6,690.540	6,938.236	7,186.272	7,456.703	7,766.497	8,067.126	8,381.667		8,549.300
	Hourly	39.844	41.320	42.797	44.407	46.252	48.042	49.916		50.914
Weekend Worker - Nurse V	Annual	84,749.103	87,994.258	91,711.761	95,319.291	99,256.674	103,112.623	107,131.419		109,274.047
	Monthly	7,062.425	7,332.855	7,642.647	7,943.274	8,271.390	8,592.719	8,927.618		9,106.171
	Hourly	42.059	43.670	45.515	47.305	49.259	51.173	53.167		54.230

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

APPENDIX "A" - SALARIES

Effective December 31, 2012 - Monthly rates include a 1% market adjustment. Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Annual Hours = 1885 Applicable for Community Health Nurses

Nurse Classification		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	20 Year ¹
Nurse II	Annual	65,027.393	67,296.923	69,573.552	71,945.790	74,264.914	76,661.931		78,195.169
	Monthly	5,418.949	5,608.077	5,797.796	5,995.483	6,188.743	6,388.494		6,516.264
	Hourly	34.497	35.701	36.909	38.168	39.398	40.669		41.483
Nurse IV	Annual	69,814.327	72,398.985	74,987.182	77,809.075	81,041.705	84,178.707	87,460.874	89,210.091
	Monthly	5,817.861	6,033.249	6,248.932	6,484.090	6,753.475	7,014.892	7,288.406	7,434.174
	Hourly	37.037	38.408	39.781	41.278	42.993	44.657	46.398	47.326
Nurse V	Annual	73,694.872	76,516.746	79,749.358	82,886.340	86,310.152	89,663.150	93,157.755	95,020.911
	Monthly	6,141.239	6,376.396	6,645.780	6,907.195	7,192.513	7,471.929	7,763.146	7,918.409
	Hourly	39.095	40.592	42.307	43.972	45.788	47.567	49.421	50.409
Weekend Worker Rates:		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	20 Year ¹
Weekend Worker - Nurse II	Annual	74,781.501	77,391.462	80,009.585	82,737.659	85,404.652	88,161.220		89,924.445
	Monthly	6,231.792	6,449.288	6,667.465	6,894.805	7,117.054	7,346.768		7,493.704
	Hourly	39.672	41.056	42.445	43.893	45.308	46.770		47.705
Weekend Worker - Nurse IV	Annual	80,286.476	83,258.832	86,235.260	89,480.437	93,197.961	96,805.513	100,580.005	102,591.605
	Monthly	6,690.540	6,938.236	7,186.272	7,456.703	7,766.497	8,067.126	8,381.667	8,549.300
	Hourly	42.592	44.169	45.748	47.470	49.442	51.356	53.358	54.425
Weekend Worker - Nurse V	Annual	84,749.103	87,994.258	91,711.761	95,319.291	99,256.674	103,112.623	107,131.419	109,274.047
	Monthly	7,062.425	7,332.855	7,642.647	7,943.274	8,271.390	8,592.719	8,927.618	9,106.171
	Hourly	44.960	46.681	48.653	50.567	52.656	54.702	56.834	57.970

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

Not Applicable for CNS & NP
APPENDIX “B” – ACADEMIC ALLOWANCE

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

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

\$0.298 per hour for all paid hours (2015 annual hours)

\$0.318 per hour for all paid hours (1885 annual hours)

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

\$0.596 per hour for all paid hours (2015 annual hours)

\$0.637 per hour for all paid hours (1885 annual hours)

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

\$0.893 per hour for all paid hours (2015 annual hours)

\$0.955 per hour for all paid hours (1885 annual hours)

NOTE: Nurses, as at April 17, 2002, receiving academic allowances in excess of the above specified amounts shall continue to be paid at the higher rate.

NOTE: Nurses, as at April 17, 2002, receiving academic allowances for courses/degrees/certificates not listed above shall continue to receive Academic Allowances for these courses/degrees/certificates.

APPENDIX "C" -- OCCUPATIONAL CLASSIFICATIONS

C.1 Occupational classifications are as follows:

L.P.N. -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.

NURSE II -- A Registered Nurse or a Registered Psychiatric Nurse employed in a general duty position or its equivalent; or a Registered Nurse employed as an Immunization Nurse, STD Clinic Liaison Nurse or Community Based Direct Service Nurse.

NURSE III -- A nurse employed as a Primary Care Nurse or a nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in her/his absence or a nurse employed as a Clinical Resource Nurse

NURSE IV - A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor); or a nurse employed as a Public Health Nurse or Occupational Health Nurse

NURSE V - A Public Health Nurse employed as a Team Leader or Coordinator

CLINICAL NURSE SPECIALIST - A Registered Nurse with academic preparation at the Master's level (nursing science), possessing expertise in a clinical nursing speciality, and who is employed in a position designated by the Employer as Clinical Nurse Specialist.

NURSE PRACTITIONER -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Re: Joint Committee to Review Appendix "C"

The parties agree to establish a joint Manitoba Nurses' Union/Employer committee to review Appendix "C" in all Central Table Collective Agreements. The committee will be struck and commence work within ninety (90) days of ratification and shall conclude its review prior to the expiry of the Collective Agreement.

The parties agree that this joint committee shall have no jurisdiction in determining the current or future classification of positions.

APPENDIX “D” – SITE LIST

WINNIPEG REGIONAL HEALTH AUTHORITY

Pan Am Clinic
Breast Health Centre
Home Care Program
Public Health Program
Clinical Nurse Specialists
Primary Care Nurses
Nurse Practitioners
Regional Programs

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDA OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
THE MANITOBA NURSES' UNION**

1. Re: Ratification of Collective Agreement

The ratification date of the current Collective Agreement occurred on June 16, 2010.

2. Re: Representative Workforce

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

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

Not Applicable for Public Health, Breast Health and CNS

3. Re: Manitoba Health Premiums

It is agreed that if Manitoba Health premiums are introduced during the life of this Agreement, the parties will meet to discuss and decide on an equitable sharing of the cost of these premiums.

Not Applicable for Public Health, Breast Health and CNS

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

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

Not Applicable for Public Health, Home Care ,Breast Health and CNS

5. Re: Shifts of Less than 7.75 Hours

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

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

seven and three-quarter (7.75) hours, such time to have been authorized in such manner and by such person as may be directed by the Employer.

6. If a part-time nurse agrees to work an additional available shift, as referenced in 3402, she/he shall be paid for those hours at her/his basic salary unless the part-time nurse has already worked in that day, in which case overtime rates of pay shall apply.
7. No nurse shall be scheduled to work more than one (1) shift of less than seven and three-quarter (7.75) hours in any one (1) day.

Not Applicable for Public Health, Pan Am, Breast Health and CNS

6. Re: Agency Nurses

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

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

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

7. Re: Group Benefit Plans

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

The parties agree that the plans’ assets, liabilities and surplus will be transferred to the new Trust. The contribution rates schedule are indicated in the Collective Agreement of

plan text and may only be amended by a process outlined in the Trust or through collective bargaining.

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

- (i) The parties agree to participate in the Health Care Employees' Pension Plan – Manitoba (HEPP) in accordance with its terms and conditions including an established contributions rate as set out in the HEPP Trust Agreement, HEPP Pension Plan text and other applicable written policies and guidelines.
- (ii) Any disputes with respect to the level of pension entitlement shall not be subject to the grievance and arbitration procedure under this agreement but shall be subject to adjudication in accordance with the terms of HEPP.
- (iii) In the event that the contributions required by the HEPP Plan text are not sufficient to fund the necessary pension benefits, the parties to this agreement shall meet forthwith to determine an appropriate funding mechanism. The contribution rate may only be amended by the process outlined in the Pension Plan text or through collective bargaining.

9. Re: Employment Security

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

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

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

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

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

1. It will be incumbent upon the Employer to notify the Union, in writing, at least ninety (90) days prior to any alteration in the delivery of health care and/or in the current complement of nursing staff.
2. If it becomes necessary to reduce the staffing complement, all avenues relevant to the issue of employment security for the nurses will be examined and discussed between the Employer and the Union, no later than twenty (20) days after the above.

3. The Employer and the Union agree to meet to develop the process for the planned reductions within five (5) days after the above.
4. The Employer will, wherever reasonably possible, carry out these reductions by way of attrition.
5. In keeping with the Employer's commitment to ensure that any affected nurse shall retain employment with the Employer, and where reductions cannot be dealt with through attrition, Article 2707 shall apply. Should the nurse choose to not exercise seniority rights under Article 2707, then layoff in accordance with Article 27 shall apply.
6. In the event of #5 above occurring or in the event of the closure of a facility, and in conjunction with #7 below, the Employer will make every reasonable effort to achieve necessary funding for retraining and redeployment of nurses.
7. The Employer will also cooperate with other facilities, with the Labour Relations Secretariat, and/or the Government of Manitoba, to participate in the establishment of a broader redeployment and retraining effort.

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

10. Re: Group Registered Retirement Savings Plan

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

11. Re: Joint Nursing Council

1. There shall be a Council which shall be known as "The Joint Nursing Council" and shall consist of six (6) members of whom:
 - (a) One shall be the Minister of Health or designate;
 - (b) One shall be appointed by the Executive Council of the Government of Manitoba;
 - (c) One shall be appointed by the Regional Health Authorities of Manitoba;
 - (d) Three shall be appointed by the Manitoba Nurses' Union
2. The Joint Nursing Council shall be chaired by the Minister of Health or designate.

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

12. Re: Buyback of Pension Service

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

13. Re: Article 501

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

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

14. Re: Participation in PHCLA/Redeployment

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

LETTER OF UNDERSTANDING
ON REDEPLOYMENT PRINCIPLES

1. PURPOSE:

- 1.01 The parties agree to work to develop employment security strategies to reduce the negative impact on employees affected by the restructuring of the health services system. The parties agree to strive towards consistency and timeliness in implementing this Letter of Understanding.
- 1.02 It is agreed by the parties that this Letter of Understanding shall work in concert with the provisions of the applicable Collective Agreements of the unions involved and shall be supplementary to same.
- 1.03 All terms and conditions of Collective Agreements and personnel policies and procedures of the receiving facility shall apply to the incoming employee except those terms and conditions of the Collective Agreement that have been abridged by this Letter of Understanding.
- 1.04 This Letter of Understanding governs the movement of laid-off employees and/or the movement of positions between bargaining units of the above-mentioned unions and employers.
- 1.05 For the purposes of this Letter of Understanding "receiving agreement(s)" shall mean the Collective Agreement applicable to the certified bargaining unit which is the recipient of transferred positions/employees. Conversely, the "sending agreement(s)" shall mean the Collective Agreement applicable to the certified bargaining unit where the position/employee originated.
- 1.06 All particulars of job opportunities at receiving facilities will be made available to the unions as they become known to the above-mentioned employers.
- 1.07 "Central Redeployment List" means a list of employees who have been laid-off from a participating employer. Those on this list may apply for and receive preferential consideration for new and vacant in-scope positions at another participating employer, as set out in 4.02 herein.
- Manitoba Council of Health Care Unions (MCHCU) will be provided with a copy of the Central Redeployment List, with an updated list provided on a continuing basis.
- 1.08 "Provincial Health Care Labour Adjustment Committee" (hereinafter referred to as the "Committee") refers to the committee established by an agreement

commencing January 20, 1993 between The Government of Canada, The Government of Manitoba, Labour Relations Secretariat, and Manitoba Council of Health Care Unions.

2. SENIORITY:

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

3. TRIAL PERIOD:

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

4. NEW AND VACANT POSITIONS:

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

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

The following provisions shall apply in filling the vacancy:

- (a) Employees on the Central Redeployment List shall be listed in order of seniority [as per "sending" Collective Agreement(s)];
- (b) subject to 4.01, selection shall be made from applicants on the Central Redeployment List as described above. Copies of the above-mentioned new or vacant in-scope position postings will be sent as

they occur to the MCHCU and participating employers (process to be established);

- (c) seniority shall be applicable to the selection in accordance with the receiving Collective Agreement;
- (d) in assessing an employee's history only formally documented material contained in the employee's personnel file will be considered;
- (e) receiving facilities job description applies vis-a-vis qualification requirements;
- (f) Once an employee has been permanently redeployed and has completed the trial period with a receiving employer, she/he shall relinquish any recall rights to her/his former employer unless she/he is laid off from the receiving employer. Should an employee be laid off from the receiving employer, she/he will be placed back on the recall list with the sending employer for the balance of time she/he would have been on the recall list. She/he will also have recall rights in accordance with the Collective Agreement of the receiving employer and be placed back on the Central Redeployment List. For the purposes of the Central Redeployment List, an employee's seniority shall be the cumulative seniority from the original sending employer and the original receiving employer.

5. TRANSFER OF SERVICE/MERGER/AMALGAMATION:

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

6. PORTABILITY OF BENEFITS:

The following benefits are portable:

- 6.01 Accumulated income protection benefits/sick leave credits.
- 6.02 Length of employment applicable to rate at which vacation is earned.
- 6.03 Length of employment applicable to pre-retirement leave. NOTE: Deer Lodge Centre limits payment of pre-retirement leave to service acquired since April 1, 1983. Incoming employees would retain original service date for this purpose.
- 6.04 Length of employment for the purpose of qualifying to join benefit plans, e.g., two (2) year pension requirement.

6.05 Benefits - An incoming employee is subject to the terms and conditions of the receiving facilities benefit plans, however, normal waiting periods would be waived, subject to the applicable benefit plans' terms and conditions.

6.06 Salary Treatments -

(a) If range is identical, then placed step-on-step;

(b) If the range is not identical, then placement will be at a step on the range which is closest (higher or lower) to the employee's salary at the time of layoff.

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

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

7. OTHER CONDITIONS:

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

7.02 Salary and vacation earned to date to be paid out by sending employer.

7.03 Banked time including overtime bank, stat bank, to be paid out by sending employer.

8. TRAINING:

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

9. ADMISSION OF NEW MEMBERS:

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

and obligations as existing participating unions and participating employers, effective the date of such admission.

10. ACCEPTANCE OF LETTER OF UNDERSTANDING:

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

11. DURATION:

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

12. AMENDMENTS:

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

13. APPEAL PANEL:

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

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

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

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

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

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

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

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

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

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

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

- (a) Part-time nurses shall be eligible to apply for and occupy more than one (1) part-time position within the sites comprising the Regional Health Authority. Where it is determined that it is not feasible for the nurse to work in more than one (1) position, the nurse will have the option of assuming the position applied for and relinquishing their former position.
- (b) The terms and conditions of employment shall be as provided in the MNU Collective Agreement, except that Article 1504 (d) and 3404 shall have separate application for each position held.
- (c) At no time shall the sum of the positions occupied exceed the equivalent of one (1.0) EFT. However, it is agreed that daily hours within the two positions may be scheduled, to a maximum of twelve (12) hours in any one day, at the nurse's regular rate of pay, with mutual agreement between the Employer, the nurse and the Union. Notwithstanding the above, it is understood that a nurse who works more than the equivalent of full-time hours in the rotation pattern shall be compensated for the excess hours in accordance with Article 16.

- (d) Where the sum of the positions occupied equal one (1.0) EFT, the status of the nurse will continue to be part-time, (i.e. status will not be converted to full-time), and the provisions of Article 34 will apply based on the total of all active positions occupied, unless specified in this article.
- (e) All salary based benefits, i.e. Group Life, Pension, D & R, as applicable, will be combined and calculated on the basis of the total of all active positions occupied.
- (f) All accrued benefits, i.e. vacation, income protection, shall be maintained and utilized on the basis of the total of all active positions occupied.
- (g) Requests for scheduling of vacation shall be submitted to each Team Office/site supervisor/manager. Said requests will be considered by both Team Office/site supervisor(s)/manager(s), and shall be granted in accordance with the provisions of Article 2109, based on the nurse's seniority within each work site.
- (h) Requests for unpaid or paid leaves of absence shall be submitted to each Team Office/site supervisor/manager, and shall be considered and granted at each work site, in accordance with the appropriate provisions of the Collective Agreement.
- (i) Nurses taking on an additional position, which represents a promotion, will be subject to a trial period in accordance with Article 2803. If unsuccessful in the trial period, the nurse shall retain her/his previously held position(s).
- (j) Where an approved arrangement is later found to be unworkable, the affected nurse may be required to relinquish one of the positions occupied.

16. *Left Blank To Agree With "Central" numbering*

Not Applicable for Nurse Practitioners

17. Re: Mentorship

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

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

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

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

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

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

18. Re: Portability

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

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

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

Guidelines for the Implementation of the Memorandum re: Portability

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

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

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

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

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

20. Re: Increase of EFT

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

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

- (a) Requests to permanently increase EFTs shall be made in writing by part-time nurses at a date determined by the parties which shall be set no earlier than September 1, 2010. The nurses shall indicate the maximum EFT to which they wish to increase.
- (b) A nurse may increase her/his EFT up to a 1.0 EFT.
- (c) In considering requests, the Employer shall consider such factors as current EFTs, shift assignments, shift schedules, the unit(s) needs and the requirements of Article 15. If the request by nurses within a unit exceed the availability within that unit as determined by the Employer, the Employer shall offer in order of seniority. The final determination shall be made no later than December 31, 2010.
- (d) A part-time nurse shall not be permitted to increase her/his EFT while other nurses are on layoff from that unit unless such laid off nurses have been recalled or have declined recall.
- (e) Where any request to change EFT has been approved, the Employer shall issue a letter to the nurse confirming the nurse's new EFT in accordance with this Collective Agreement along with an effective date.
- (f) Copies of all requests and responses to requests to adjust EFT shall be provided to the Union.
- (g) Any changes to a master rotation as a result of changing EFTs shall be done in accordance with the provisions of 1504 and shall be completed prior to the commencement of the vacation scheduling period.
- (h) The Employer is not prevented from exercising any of its normal management rights as a result of this Memorandum of Understanding including, without limitation, the right to post vacant positions.

For the duration of this Collective Agreement, the Employer and the Union shall meet on or before May 31st annually to determine if they wish to repeat the EFT adjustment process in the following year. There must be mutual agreement to repeat this process.

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

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

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

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

3. Reimbursement of Employer Costs

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

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

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

4. Income Protection

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

5. Disability & Rehabilitation Plan (D & R)

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

6. Accumulation of Paid Vacation

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

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

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

22. Re: Letter of Understanding – HEPP COLA Fund

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

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

Employer:

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

Employee:

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

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

- An Implementation Committee shall be formed consisting of Employer Settlers, Union Settlers and HEPP Administration.
- The role of the Implementation Committee shall be to discuss, research and develop a model for the implementation of COLA as per the principles set out in this agreement.
- It is understood that that the Committee may be required to seek legal and/or actuarial advice in doing their work.
- Following completion of their work the Committee will make recommendations to the HEPP Board of Trustees for their consideration and implementation.

23. Re: Regional Nursing Advisory Committee

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

The parties mutually recognize that resolving nurses' workplace issues supports the delivery of effective patient/resident/client care and contributes to a healthy work environment.

It is further agreed it is in the best interests of the Regional Health Authority, the facilities and the nurses to work together to resolve the issues relative to staffing and scheduling, prolonged periods of work (consecutive hours and consecutive shifts), standby assignments, and the use of part time additional shifts and casual shifts as it relates to the creation of permanent positions.

It is further agreed that the Regional NAC will review data relative to use of additional and/or casual shifts, with a view to making recommendations relative to the creation of positions.

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

The Regional Nursing Advisory Committee shall be established and will function in accordance with the following:

- (a) The Regional Health Authority NAC shall be comprised of one (1) nurse from each facility/site and two (2) nursing members at large appointed by the Union, and senior nursing management representatives of the facilities/sites and the Winnipeg Regional Health Authority, the number of whom shall not exceed the number of Union representatives. Other persons may be invited to participate as mutually agreed.

- (b) Where a nurse is required to use her/his own vehicle to travel to attend meetings of this committee at a location other than her/his work site, she/he shall be reimbursed by the Employer in accordance with the prevailing Province of Manitoba mileage rates. It is understood that any increases in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.
- (c) The RHA NAC shall meet as often as mutually agreed by the parties.
- (d) The chair and the secretary of the RHA NAC shall alternate between the parties. The secretary shall be the opposite party to the chair.
- (e) Agendas shall be circulated at least seven (7) calendar days prior to each meeting; however this shall not preclude members from raising issues without prior agenda notice. It is understood that issues may be deferred to future meetings to enable appropriate investigation.
- (f) Minutes of the RHA NAC meetings shall be circulated to members of the committee and shall be approved at the next RHA NAC meeting.
- (g)
 - (i) A nurse(s) with a concern which may be of regional impact may complete and submit a NAC summary report to the Chair of the RHA NAC
 - (ii) If such issue is determined to be of regional impact it will be placed on the agenda of the RHA NAC. If not, it shall be referred to the appropriate site NAC.
- (h) If the decision of the RHA NAC regarding an issue referenced above is unacceptable to the nurse(s) who submitted the issue, or if the RHA NAC is unable to resolve the issue, the matter shall be referred in writing to the Regional Health Authority/ Executive Management Committee. Upon the request of either party, a meeting will be scheduled as soon as reasonably possible.
- (i) The response of the Regional Health Authority Executive Management Committee shall be provided in writing to the nurse(s) and the RHA NAC within fourteen (14) calendar days of the referral unless otherwise mutually agreed.
- (j) Where in the opinion of the nurse who submitted the issue to the RHA NAC the response from the RHA Executive Management Committee does not resolve the issue it can be referred to an Independent Assessment Committee (IAC) within twenty-one (21) days following the response.
- (k) The IAC shall be composed of three (3) nurses, one (1) of whom shall be appointed by the Manitoba Nurses' Union, and one (1) of whom shall be appointed by the Employer. The third (3rd) nurse shall chair the IAC and shall be selected in the following manner:

- (i) A list of IAC Chairpersons as agreed between the parties shall be appended to this Collective Agreement.
 - (ii) When a Chairperson is required, the Labour Relations Secretariat and the Manitoba Nurses' Union will be contacted. They will provide the name of the person to be utilized on the alphabetical listing of Chairpersons. The name to be provided shall be the name following that of the last person utilized.
 - (iii) Should the person whose name is so selected be unable to serve, or where the person would be unsuitable due to connections with the parties or geographic community involved, the next person on the list shall be approached to act as Chairperson.
 - (iv) In the event that an individual whose name appears on the list of IAC Chairpersons can no longer serve in that capacity, another individual shall be jointly selected by the Manitoba Nurses' Union and the Labour Relations Secretariat and the list of Chairpersons shall be amended accordingly.
 - (v) Appointments to the IAC shall be confirmed within twenty-one (21) calendar days of the referral.
- (l) A meeting of the IAC to investigate and make recommendations shall be held within thirty (30) calendar days of the IAC's appointment unless a longer time frame is otherwise mutually agreed between the Employer and the Union. Such recommendations shall be provided in writing to the nurse(s), the Regional Health Authority NAC and the Regional Senior Nursing Manager/Senior Nursing Officer within a further fourteen (14) calendar days. The Employer shall convene a meeting of Employer representatives, the Union and representative(s) selected by, and from amongst, the nurses who referred the matter/issues to the NAC, subsequent to the receipt of the report, to review and discuss potential implementation of the recommendations.
- (m) Each party shall bear the cost of its own appointee to the IAC and shall jointly bear the cost of the Chairperson.
- (n)
- (i) Nurses required to attend IAC meetings shall be granted Union leave upon seven (7) calendar days notice in accordance with Article 2409.
 - (ii) Nurses who are nominees to an IAC shall be granted leave of absence in accordance with 2409.
- (o) A regular report outlining the activities and deliberations of the RHA NAC/IAC including the number, type and disposition of issues dealt with by the RHA NAC/IAC shall be forwarded to the RHA's Board of Directors (Board).
- (p) The RHA NAC shall be provided with a copy of that portion of the minutes of the Board's meeting relating to its deliberations of the RHA NAC report. The RHA

NAC shall provide the nurse(s) with a copy of that portion of the minutes of the Board's meeting relating to issues raised by a nurse(s) under (a) (i) above.

24. Re: Inter-facility Position(s)

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

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

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

The parties agree as follows:

1. Where an inter-facility position(s) is contemplated, the Employers commit to contacting MNU and the respective Local/Worksite(s). The affected parties shall meet to discuss the specifics of the situation, in keeping with the principles as outlined in the Memorandum.
2. Should there not be mutual agreement between the affected parties, the inter-facility position(s) will not be posted as an inter-facility position(s).
3. In the event there is mutual agreement on a specific inter-facility position(s), such agreement shall be set out in a separate Memorandum of Understanding between the affected parties.
4. The positions contemplated in this memorandum will be either:
 - (i) a position(s) shared between two (2) or more Employers;
 - (ii) a position primarily located at one (1) site but requiring the performance of duties at each of the facilities.
5. The position(s) shall be posted in accordance with the respective Collective Agreement of both parties.
6. (a) For those position(s) outlined in 4 (i) above, all applicants from each of the facilities will be considered and shall be treated as internal candidates. Mobility seniority will be the seniority utilized for the purpose of selection into the shared position(s). An internal applicant awarded the position(s) will remain an employee of her/his current Employer.

- (b) Those positions outlined in 4 (ii) above shall be awarded in accordance with the Collective Agreement of the facility where the position is primarily located.
7. The affected parties will determine and commit to writing, in the separate memorandum, which facility will be considered the Employer of record, in the event the successful applicant is external to the facilities.
 8. The successful applicant(s) will be required to comply with the policies and procedures of each facility in which she/he will practice. Resolution of professional practice and/or any other disputes arising under the Collective Agreement shall be the responsibility of the Employer of record.
 9. To cover the cost of parking at each facility, one deduction from the nurse's pay cheque will be made by the Employer of record. A reciprocal pass will be provided, if possible. It is understood the nurse(s) shall not incur parking costs exceeding the parking rate as determined by the Employer of record.

25. *Re: Nurses in Inter-facility Positions*

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

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

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

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

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

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

NOW THEREFORE the parties agree as follows:

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

*lesser notice may be given only in exceptional circumstances.

- (b) The Employer(s) and Union(s) shall meet within thirty (30) days of notice provided for in 4 (a) to discuss issues arising out of the transfer of employees.
- (c) The Employer(s) shall prepare and provide the following data relative to the transfer/closure/consolidation/merger to the Union(s):
 - positions affected at the sending facility/program.
 - number of vacancies and new positions created at the receiving facility/program
 - up to date seniority lists
 - pertinent classification information
 - relevant time frames

5 **Staff Mobility**

A. **Transfers with Programs**

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

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

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

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

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

B. Temporary Transfer of Employees

- (i) To facilitate temporary transfers to facilities/programs experiencing a need for additional employees on a sporadic or episodic basis, qualified employees from another facility/program shall be offered the opportunity to work in the facility(s) /program(s) experiencing the need for additional employees.

- (ii) Temporary transfers shall not be implemented until the applicable provisions of the Collective Agreement of the receiving facility/program relating to the assigning of occasional additional shifts are fulfilled.
- (iii) The temporarily transferred employees will continue to be covered by the terms of the sending facility's/program's Collective Agreement.
- (iv) Where an insufficient number of qualified employees volunteer to be temporarily transferred, the facility(s) /program(s) reserve the right to transfer employees, commencing with the most junior qualified employee at the sending facility/program.
- (v) Orientation as set out in (5)(a)(iii) above will be provided if reasonably possible.

C. Voluntary Transfers to Vacancies

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

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

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

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

- Applicants from one of the other facilities/programs of the WRHA System;
- Applicants external to the facilities/programs of the WRHA System.

6. **Seniority**

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

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

- C. Transferring employees will be treated in all respects as though they had always been employed at the receiving facility/program.
- D. To ensure the accuracy of the calculation of the mobility seniority, the Employer(s) will provide sufficient information to verify an accurate calculation has been made.
- E. Any employee who:
 - (i) has utilized a redeployment number in the past to obtain a position but was not permitted to transfer seniority credits at the receiving facility/program, or
 - (ii) has voluntarily transferred to another facility/program between 01 January 1998 and the effective date of this memorandum,

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

7. **Staff Mobility Dispute Resolution Mechanism**

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

Should a dispute(s) arise between a signatory Union(s) and a signatory employer(s) regarding the application, interpretation or alleged violation of this

Memorandum of Understanding, the parties concerned shall meet within twenty (20) calendar days and attempt to resolve the dispute(s) through discussion.

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

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

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

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

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

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

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

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

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

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

It is further agreed that should it be necessary to temporarily transfer nurses from one facility/program to another, in accordance with Article 5(B), as much notice as possible

shall be provided to such nurse. Should the temporary transfer be required during the course of a scheduled shift, travel time from the sending to the receiving facility/program shall be considered time worked. If personal transportation is not available, transportation will be provided.

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

28. Re: Mobility

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

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

1. The primary emphasis of the Mobility Agreement is to facilitate the voluntary transfer of nurses with programs, to vacancies, or on a temporary basis.
2. The Employer agrees that the provisions of Section 5 (B) (iv) of the Mobility Agreement shall be utilized only under extenuating and emergency circumstances, and further, shall be implemented only in accordance with the provisions of Article 1001 of the Collective Agreement.
3.
 - (a) Issues related to orientation will be referred immediately to the Regional Nursing Advisory Committee (WHA), in order to ensure a standardized, effective orientation structure, duration and content across the WHA system.
 - (b) Orientation for nurse(s) transferring with programs shall be provided in accordance with Section 5 A (iii) of the Mobility Agreement and shall take into consideration the individual needs of the transferring nurse(s).
 - (c) Orientation for nurse(s) temporarily transferring to another facility in accordance with the provisions of Section 5 B of the Mobility Agreement and section #2 of this Memorandum, shall be provided in accordance with 5 A (iii) of the Mobility Agreement, if reasonably possible.
4.
 - (a) It is agreed that 5 A (ii) of the Mobility Agreement shall include portability of hours of service since the last increment for purposes of calculating the next increment.

(b) It is agreed that vacation earned at the sending facility shall not be paid out upon transfer unless the nurse requests.

5. The statement re: "personal transportation" in the Memorandum of Interpretation re: Staff Mobility will be expanded to include the following:

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

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

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

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

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

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

1. **Increments:** Nurses having a permanent or term position in a sending facility, will be allowed to transfer their "hours worked" for purposes of determining when they are entitled to their next increment, when they secure a permanent or term position at a receiving facility. Casual nurses are NOT allowed to transfer such hours.
2. **Vacation:** Vacation earned at the sending facility shall not be paid out upon transfer unless the nurse requests. If a person elects to have vacation transferred, it does not mean that the previously approved vacation dates will be honored at the receiving facility. Only the amount of time which has to be taken in accordance with the new facility's Collective Agreement will be honored and operational requirements will be taken into account.

3. **Probationary Period:** As with any other voluntary transfer to a permanent position in a facility other than one in which a nurse is currently working, she/he is subject to a probationary period. When a nurse transfers with a program, as per Section 5A (iv) of the Mobility Memo, she/he is not subject to a probationary period unless she/he has not yet completed her/his probationary period at the sending facility.
4. **Trial Period:** Section 5A (iv) of the Mobility Memo specifically states there will be no new trial period or probationary period for nurses who are transferring with programs. As stated above, only nurses who have not completed their probationary period with a sending facility will be expected to complete it at the receiving facility. If a nurse voluntarily transfers from a sending to a receiving facility, she/he is subject to a probationary period in accordance with the collective agreement. She/he is not subject to a trial period as a "new" employee.
5. **Pre-Retirement Credits:** To be calculated in days at the sending facility.
6. **Terms:** Mobility applies for employment into either a permanent or term position. In the case of a term position, all benefits/seniority, etc. are ported at the time of employment. Should the nurse not obtain a permanent position in accordance with the new Employer's collective agreement, all seniority and benefits shall terminate, unless she/he in turn obtains employment with another MNU Employer where mobility or portability applies, and within the time lines specified.
7. **More Than One Position at Same Facility/Site:** As of January 1, 1998, nurses moving from a sending facility shall have portability of seniority* and benefits when transferring to a receiving facility, regardless of the bargaining unit(s) involved.

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

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

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

Section 5C(ii) means a nurse who is/was employed by an Employer who is awarded a position with another Employer covered by the Mobility Memorandum and who commences employment with her/his new Employer covered by the

Mobility Memorandum within six (6) weeks of termination of employment from her/his former Employer, will be entitled to transfer all seniority, service and other benefits as per the Mobility Memorandum.

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

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

10. The Local President at a receiving facility will be provided with written notification regarding each nurse's mobility seniority at the time of her/his transfer. In that regard, the following specific data shall be provided:
 - Start date at sending facility
 - Seniority (hours)
 - Seniority date at sending facility
 - Termination date at sending facility
 - Start date at receiving facility.
11. Bridging Time for the Purposes of Mobility: A nurse who commences employment with the receiving facility within six (6) weeks of termination of employment with the sending facility will be entitled to mobility of seniority, service and benefits as above.
12. Program Transfers: Posting Positions at Sending Site: Job postings under Section 5A(i) shall only occur if there are deletions or layoffs at the sending facility(s) associated with the transferred program and shall only be available to those staff at the sending facility that hold a permanent position.
13. The Mobility Benefits Transfer Form shall be provided to the receiving Union in its entirety effective March 27, 2008.
14. A nurse shall be placed at the greater of her/his salary level at the sending facility, or in accordance with the recognition of previous experience clause(s) in Article 38.

**MEMORANDA OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
THE MANITOBA NURSES' UNION**

1. Re: Ratification of Collective Agreement
2. Re: Representative Workforce
3. Re: Manitoba Health Premiums- *Not Applicable for Public Health, Breast Health and CNS*
4. Re: Amnesty From Provincial Wage/Hours Of Work Reduction Legislation - *Not Applicable for Public Health, Breast Health and CNS*
5. Re: Shifts of Less than 7.75 Hours - *Not Applicable for Public Health, Home Care, Breast Health and CNS*
6. Re: Agency Nurses - *Not Applicable for Public Health, Pan Am, Breast Health and CNS*
7. Re: Group Benefit Plans
8. Re: Pensions [Re: Participation in Jointly Trusteed Pension Plan (HEPP)]
9. Re: Employment Security
10. Re: Group Registered Retirement Savings Plan
11. Re: Joint Nursing Council
12. Re: Buyback of Pension Service
13. Re: Article 501
14. Re: Participation in PHCLA/Redeployment
15. Re: Provisions for Part-time Nurses Occupying More Than One Position Within the Sites Comprising the RHA -
16. Left Blank
17. Re: Mentorship - *Not Applicable Nurse Practitioners*
18. Re: Portability
19. Re Nurse Weekend Worker
20. Re: Increase of EFT
21. Re: Secondment of a Nurse Elected to Serve as President of the Manitoba Nurses' Union
22. Re: Letter of Understanding – HEPP COLA Fund
23. Re: Regional Nursing Advisory Committee
24. Re: Inter-facility Position(s)
25. Re: Nurses in Inter-facility Positions
26. Re: Staff Mobility Within the Following Facilities/Programs of the WRHA System
27. Re: Memo of Interpretation re Staff Mobility Within the Following Facilities/Programs of the WRHA System
28. Re: Mobility
29. Letter of Understanding Supplementary to the Collective Agreement Re: Guidelines for the Implementation of the Memorandum re: Mobility

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
MANITOBA NURSES' UNION**

***Re: Former Civil Service Nurses Who Have Maintained Their Pension
With the Civil Service Superannuation Plan***

1. Nurses who have maintained their pension with the Civil Service Superannuation Plan, may elect to accrue vacation benefits for retirement purposes.
2. For purposes of retirement, a nurse may request to carry over up to a maximum of one (1) year of vacation entitlement to be cashed out upon retirement. A maximum of up to 50 vacation days may be counted as pensionable service in accordance with the terms and conditions of the Civil Service Superannuation Act.
3. Nurses electing to carry over vacation entitlement for retirement purposes shall:
 - 3.1 Provide a written letter of retirement intent with a specified retirement day within the next four (4) fiscal years.
Example:
 - Nurse submits retirement notice on March 1, 2008
 - 4 fiscal years = the fiscal year of 2012/2013
 - Nurse must retire prior to March 31, 2013
 - 3.2 Indicate the intended number of vacation days per year to be reserved prior to retirement (during the last four fiscal years).
 - 3.3 Indicate the total number of vacation days to be cashed out upon retirement.
 - 3.4 Receive approval from their Manager for vacation carry over for retirement purposes.
4. Nurses may request to extend their retirement date and provide an alternate date provided that they give the Employer ninety (90) days notice of their intention to do so. Such requests shall be subject to the reasonable discretion of the Employer. Should the request to extend the retirement date be approved by the Employer, the nurse may be required to utilize a portion of the accrued vacation referenced in 2. in accordance with Province of Manitoba rules.

If requested a nurse may retire earlier than the retirement date indicated and as approved by their Manager.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
MANITOBA NURSES' UNION**

Applicable for Pan Am Nurses

Re: Article 15 – Shift Schedule

This memorandum is applicable to the following nurses [the “nurse(s)”]

Wendy Christenson
Dawn Christenson
Merlyn Aya

The parties agree that Article 1503 (d) and (f) shall apply as follows to the nurses on staff on October 1, 2003:

- (i) 1504 (d) and (f) shall not apply to the nurse(s) for the period October 1, 2003 to September 30, 2008 unless the nurse(s) applies for and secures another position with the Employer.
- (ii) 1504 (d) and (f) shall apply to the nurse(s) from the date the nurse(s) secures another position with the Employer.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
MANITOBA NURSES' UNION**

Applicable for Public Health Nurses

Re: Immunization Nurses Hours of Work

Subject to client needs and service delivery requirements, a permanent immunization nurse may, upon request, be permitted to bank any hours above her/his EFT. By March 31st of each year, the nurse and the Employer shall mutually agree as to when the nurse shall take such banked hours. If no such agreement is reached, this bank of hours shall be paid in accordance with the provisions of the Collective Agreement.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
MANITOBA NURSES' UNION**

Applicable for Public Health Nurses

Re: Community-Based Direct Service Nurses

Applicable to Part-time Nurses:

The Employer and the Union mutually agree that all provisions of the Collective Agreement shall be applicable to a part-time nurse occupying a position as a Community-Based Direct Service Nurse except for the provisions regarding hours of work as outlined below.

It is understood that a part-time Community-Based Direct Service Nurse will be permitted to bank the hours from any shifts/hours she/he works above her/his EFT and that this banked time shall be used to provide salary and benefits for periods when there is no work available in the school – i.e. Christmas Break, Spring Break, and certain shifts/hours during July and August. It is understood that a shift shall be seven and one-quarter (7.25) consecutive hours of work exclusive of a meal period of forty-five (45) minutes and inclusive of two (2) fifteen (15) minute rest periods. Any hours worked in excess of a shift in any one day shall be paid in accordance with the provisions of Article 16 and the nurse may request to bank these hours. It is understood that the provisions of Article 1604 re: maximum banked overtime hours and payout of overtime banks at fiscal year end shall not be applicable.

In any situation where a Community-Based Direct Service Nurse has insufficient banked hours to cover any period of time where there is no work available – i.e. Christmas Break, Spring Break, and certain shifts/hours during July and August, it is understood that the nurse shall be granted vacation and/or an unpaid leave of absence in order to maintain her/his EFT.

Applicable to Full-time Nurses:

The Employer and the Union mutually agree that all provisions of the Collective Agreement shall be applicable to a full-time nurse occupying a position as a Community-Based Direct Service Nurse except for the provisions regarding hours of work as outlined below.

It is understood that a full-time Community-Based Direct Service Nurse will be permitted to bank any overtime hours from any shifts/hours she/he works above her/his EFT and that this banked time shall be used to provide salary and benefits for periods when there

is no work available in the school – i.e. Christmas Break, Spring Break, and certain shifts/hours during July and August. It is understood that a shift shall be seven and one-quarter (7.25) consecutive hours of work exclusive of a meal period of forty-five (45) minutes and inclusive of two (2) fifteen (15) minute rest periods. Any hours worked in excess of a shift in any one day shall be paid in accordance with the provisions of Article 16 and the nurse may request to bank these hours. It is understood that the provisions of Article 1604 re: maximum banked overtime hours and payout of overtime banks at fiscal year end shall not be applicable.

In any situation where a Community-Based Direct Service Nurse has insufficient banked hours to cover any period of time where there is no work available – i.e. Christmas Break, Spring Break, and certain shifts/hours during July and August, it is understood that the nurse shall be granted vacation and/or an unpaid leave of absence in order to maintain her/his EFT.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
MANITOBA NURSES' UNION**

Applicable for CNS

Re: Vacation Entitlement

It is agreed that the following nurse will have her current superior rate of earning vacation protected and will continue to earn vacation at the rate of twenty-five (25) days per year during her first ten (10) years of employment:

Michelle Todoruk-Orchard

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
MANITOBA NURSES' UNION**

Applicable for Home Care, Primary Care and Nurse Practitioners

Re: Job Sharing

In the event the Employer authorizes a job sharing arrangement between two (2) nurses, the terms and conditions thereof shall be in accordance with the following: Job sharing is defined as an arrangement whereby two (2) permanent part-time nurses share hours of work of one (1) permanent full-time position.

- (a) The Employer will determine the suitability and number of job sharing positions.
- (b) Requests to job share permanent full-time positions must be submitted in writing and may be originated by one (1) interested nurse or two (2) nurses jointly.

Requests shall be considered on an individual basis.

- (c) Total hours worked by the nurses shall equal one (1) full-time position. The schedule shall be determined by mutual agreement between the two (2) nurses and the nurse manager in accordance with the scheduling provisions of the Collective Agreement.
- (d) Scheduling of weekends shall be subject to Article 1504, unless otherwise mutually agreed.
- (e) When one (1) nurse in a job share is authorized to be away from work for any reason, it is expected the other nurse shall cover during her/his partner's absence providing such coverage will not result in overtime without the authorization of the supervisor.

If due to unforeseen circumstances, a job share nurse cannot cover in her/his partner's absence, she/he must notify the nurse manager to arrange alternate coverage. Job share nurses are not required to cover for extended periods of absence, but will be offered an opportunity to do so.

Nothing in this paragraph releases the nurse from her/his obligation to advise the nurse manager of her/his absence, notwithstanding the shift(s) is covered by the other job share nurse.

- (f) Two (2) permanent part-time nurses shall be able to enter into a job share arrangement for a vacant full-time position. Selection will be made in accordance with the Collective Agreement.

Subject to paragraph one above:

- (i) When a full-time position is posted, two (2) nurses may apply to equally share that position. Both nurses sharing the position shall be given part-time employment status and shall earn benefits as provided for in the Collective Agreement.
 - (ii) Where the job sharing arrangements arise out of the filling of a vacant full-time position, both job sharing positions will be posted and selection of the applicants will be made in accordance with the provisions of the Collective Agreement.
- (g) If a vacancy is created by one (1) nurse leaving the job share arrangement the Employer will have the option of posting the remaining position as a job share or revert position to a full time position. If the position is not posted as a job share, the remaining nurse will have the option of filling the full-time position or reverting to a part-time position for which she/he is qualified when a vacancy exists. If no vacancy is available, she/he shall be dealt with in accordance with Article 27, excluding 2701, 2704, 2706 paragraph 3 and 2707. If she/he does not continue full-time, the position must be posted in accordance with the provisions of the Collective Agreement.
- (h) Each job shared position will be evaluated by the nurse manager and job sharers after a period of thirty (30) days and on an ongoing basis against the following criteria:
- (i) client satisfaction
 - (ii) continuity of care
 - (iii) administrative time
 - (iv) desire by both job sharers to continue
 - (v) co-workers satisfaction and compatibility
 - (vi) cost effectiveness

If a job sharing arrangement is not successfully evaluated by all of the evaluators referred to herein, against the established criteria, the arrangement may be discontinued with one (1) month's notice by either party.

- (i) In the event that a job share arrangement is terminated by the Employer as a result of the evaluation referred to in paragraph (h) above, the job sharers shall have the option of returning to the EFT held prior to assuming the job share arrangement or applying for a position for which she/he is qualified when a vacancy exists.
- (j) An individual job share agreement shall be established for each job share specifying the nurses who are sharing the position, the position they occupy and

the EFT of each nurse. Copies of the job share agreement shall be signed by both nurses and the Employer. Copies of all agreements will be provided to the Union upon signing.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
MANITOBA NURSES' UNION**

RE: 10 Hour Shifts

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

1. Each bi-weekly period is to provide eight (8) shifts of 9.69 ("10") hours duration.
2. Each shift of 9.69 ("10") hours duration is to be inclusive of two (2) fifteen (15) minute rest periods and exclusive of one (1) meal period of at least thirty (30) minutes.
3. Overtime for full-time nurses shall be authorized time worked in excess of a scheduled 9.69 ("10") shift or in excess of the full time hours in the rotation pattern in effect on each nursing unit/worksites/office for full-time nurses.

Overtime for part-time nurses shall be authorized time worked in excess of a scheduled 9.69 ("10") shift or hours worked in excess of the normal full-time hours in two (2) consecutive bi-weekly periods, in accordance with Article 16.

4. Income Protection is accrued at the rate of 9.69 hours per month. It is utilized in hours of absence due to illness, e.g.,
 - (a) absence due to illness for one (1) 9.69 ("10") hour shift utilizes 9.69 hours of accumulated income protection credits;
 - (b) absence due to illness for two (2) 9.69 ("10") hour shift utilizes 19.38 hours of accumulated income protection credits.
5. Pay for Bereavement Leave will be calculated according to scheduled hours of work missed in accordance with the provisions of Article 2411

one (1) scheduled 9.69 ("10") hour shift = 9.69 hours;

two (2) scheduled 9.69 ("10") hour shifts = 19.38 hours.
6. The paid vacation entitlement that a nurse receives under the 9.69 ("10") hour shift pattern shall be equivalent in hours to the paid vacation entitlement on a seven and three-quarters (7.75) hour shift schedule pattern calculated in accordance with Article 21. Vacation shall be scheduled in accordance with Article 2101.

7. Recognized Holidays: A nurse required to work on a Recognized Holiday shall be paid at the rate of one and one-half (1.50) times her/his basic rate of pay for all hours worked and in addition shall receive an alternate 7.75 hour shift off at her/his basic rate of pay in accordance with Article 2203. Overtime worked on a Recognized Holiday shall be paid at two and one-half (2.50) times her/his basic salary.

A nurse may accumulate up 22.25 hours given in lieu of recognized holidays in order to take two (2) consecutive shifts off with pay. Such shifts shall be added to a weekend off or to scheduled days off or used to complete a partial week of vacation in accordance with Article 2206.

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

Memorandum Re: "10" Hour Shifts for Home IV Therapy Program to be applicable to the following: Gayle Gerbrandt, Alice Brown, Dianne Sluis

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
MANITOBA NURSES' UNION**

RE: 12 Hour Shifts

The Employer and the Union mutually agree that the following conditions and understandings apply re: the 11.625 ("12") hour shift scheduling pattern:

1. The procedure to be followed for the trial and implementation of the twelve hour shift schedule pattern shall be as follows:
 - (a) A meeting of all nurses on the unit/worksite/office and senior nursing management will be held to discuss a tentative shift schedule pattern and proposed date of commencement of the trial period. A date will be determined for a secret ballot vote to occur to establish that the majority of nurses are in favor of the shift change. A letter will be forwarded to the Worksite President to inform her/him of the proposed changes.
 - (b) A majority will be sixty percent (60%) of all nurses on the unit. Nurses who have given notice of termination of employment in the area affected will not be entitled to vote.
 - (c) The length of the trial period for the twelve ("12") hour shift shall be six (6) months in length or for a shorter period as mutually agreed between the Union and the Employer.
 - (d) Six (6) weeks prior to the completion of the trial period, a meeting of all nurses on the unit and senior nursing management will be held to evaluate the twelve ("12") hour shift.
2. There must be mutual agreement between the Employer and the Union and senior nursing management to continue with the 11.625 ("12") hour shift schedule pattern, otherwise the Collective Agreement provision on Hours of Work, Article 14 shall apply.
3. Each shift of 11.625 ("12") hours duration is to be inclusive of two (2) fifteen (15) minute rest periods and one (1) thirty (30) minute meal period. Each shift of 11.625 ("12") hours shall be exclusive of one (1) meal period not exceeding thirty-seven (37) minutes in length.

Each 7.75 hour shift shall be inclusive of two (2) fifteen minute rest periods and exclusive of one (1) thirty (30) minute meal break.

4 Hours of Work and Shift Schedules:

Full-time hours of work shall provide:

- (a) An average of six (6) shifts of 11.625 hours duration, and one (1) shift of seven and three-quarter (7.75) hours duration in each bi-weekly period; or
 - (b) Twenty (20) shifts of 11.625 hours duration in each three (3) consecutive bi-weekly period.
 - (c) A combination of shifts of 11.625 ("12") hours duration and 7.75 hours duration that equal an average of seventy-seven and one-half (77.50) hours bi-weekly averaged over the three (3) consecutive bi-weekly periods in the shift schedule pattern.
 - (d) Shift schedules shall be based on Master Rotation patterns planned in consultation with the nurses concerned, and provide for a minimum of forty-seven (47) hours off duty at one time, unless otherwise mutually agreed and shall provide nurses with a minimum of alternate weekends off duty whenever reasonably possible, or three (3) weekends off in each six (6) week period of the shift schedule with a maximum of two (2) weekends worked between weekends off.
5. Overtime for full-time nurses shall be authorized time worked in excess of a scheduled shift as defined in (I) above or Article 1401(a), or in excess of the full-time hours defined in II (a) (b) or (c) above.

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

6. Recognized Holidays:

- (a) A nurse required to work on a Recognized Holiday shall be paid at the rate of one and one-half (1.50) times her/his basic rate of pay for all hours worked and, in addition, shall receive an alternate 7.75 hour shift off at her/his basic rate of pay in accordance with Article 2203. Overtime worked on a Recognized Holiday shall be paid at two and one-half (2.50) times her/his basic salary.

- (b) A nurse may accumulate up to 38.75 hours given in lieu of recognized holidays in order to take three (3) consecutive shifts off with pay. Such shifts shall be added to a weekend off or to scheduled days off or used to complete a partial week of vacation in accordance with Article 2206.
7. Income Protection:
Income protection is accrued at the rate of 9.69 hours per month. It is utilized in hours of absence due to the nurse's own illness or the illness of a family member, e.g.:
- absence through illness for one (1) twelve (12) hour shift utilizes 11.625 hours of accumulated income protection credits.
 - absence through illness for two (2) twelve (12) hour shifts utilizes 23.25 hours of accumulated income protection credits.
 - absence through illness for one (1) twelve (12) hour shift plus one (1) eight (8) hour shift utilizes 19.375 hours of accumulated income protection credits.
8. Bereavement Leave:
- Pay for bereavement leave will be calculated according to scheduled hours of work missed in accordance with the provisions of Article 2411. It is agreed that the term "working day" shall be deemed to mean a scheduled 11.625 (12) hour or 7.75 hour shift.
- four (4) scheduled twelve (12) hour days off = pay for 46.5 hours.
 - three (3) scheduled twelve (12) hour days off = pay for 34.875 hours.
 - two (2) scheduled twelve (12) hour days off = pay for 23.25 hours.
 - one (1) scheduled twelve (12) hour day off plus one (1) scheduled eight (8) hour day off = pay for 19.375 hours.
9. Vacation:
The paid vacation entitlement that a nurse receives under the twelve (12) hour shift schedule pattern shall be equivalent in hours to the paid vacation entitlement on a seven and three-quarter (7.75) hour shift schedule pattern, calculated in accordance with Article 21. The amount of paid time off that a nurse receives under the modified shift schedule pattern shall correspond exactly in hours to the paid time off on 7.75 hour shift pattern.
10. A "weekend" shall mean the period from 2345 hours on Friday until 2330 hours on the immediately following Sunday.
11. The terms of 1504(g) shall be applicable.

12. Shift Premium, Weekend Premium and Responsibility Pay shall be paid in accordance with the provisions of the Collective Agreement.
13. It is understood that whenever 11.625 ("12") hours is mentioned, its equivalent of eleven (11) hours and thirty-seven and one-half (37.50) minutes may be used.
14. Where payroll limitations exist such that only two decimal points can be entered in regard to shift length, the shift length shall be rounded up to two decimal points.
15. PROCEDURES FOR AREAS DISCONTINUING THE TWELVE (12) HOUR SHIFT:
 - A. When a majority of seventy percent (70%) of nurses in an area working the twelve (12) hour shift decide to return to the eight (8) hour shift, the following procedure must be carried out:
 - (1) The Manager is to notify the designated Senior Nursing Manager.
 - (2) The designated Senior Nursing Manager should hold a staff conference.
 - (3) The reasons for returning to the eight (8) hour shift should be documented.
 - (4) Establish the fact that a majority of seventy percent (70%) of the staff wish to return to the eight (8) hour shift.
 - (5) Set a tentative date for returning to the eight (8) hour shift. This must commence with the beginning of a new pay period.
 - (6) The Manager will then submit in writing to the designated Senior Nursing Manager and Human Resources, the area's intention with reasons for returning to the eight (8) hour shift for their approval.
 - B. The Employer retains the right to discontinue the "12" hour shift rotation, subject to, amongst others, the following:
 - (i) patient care is adversely affected; or
 - (ii) performance and productivity deteriorate due to fatigue; or
 - (iii) if there are demonstrated increased costs.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN**

**HEALTH SCIENCES CENTRE
AND
HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF
THE MANITOBA NURSES UNION
AND
WINNIPEG REGIONAL HEALTH AUTHORITY
AND
THE MANITOBA NURSES' UNION**

Applicable for Home Care Nurses

Re: Nurse Clinician – Bleeding Disorder Program

The Employer(s) and the Union agree that the following conditions and understandings apply re nursing services provided by the Nurse Clinician-Bleeding Disorder Program in the Home Care Program.

1. The Nurse Clinician-Bleeding Disorder Program providing nursing services in the Home Care Program is an employee of the Health Sciences Centre and the terms and conditions of the Collective Agreement between the Winnipeg Regional Health Authority, Health Sciences Centre Site and Health Sciences Centre Nurses Local 10 shall be applicable to her/him.
2. Professional practice issues shall be referred to and are the responsibility of the Health Sciences Centre.
3. Any other disputes/grievances arising under the WRHA HSC/HSC Nurses Local 10 Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
4. It is agreed that the Nurse Clinician-Bleeding Disorder Program shall continue to provide the following nursing services in accordance with past practice:
 - Following the patient into the community and providing education to Bleeding Disorder patients;
 - Providing education to the Home Care Nurses responsible for the care of the patient(s) including demonstrating skills, accessing veins, developing the appropriate therapy, IV techniques;
 - Providing education to the educational facilities that the patient(s) attend.

5. Should any party to this agreement wish to alter any provision of this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the parties are unable to reach agreement concerning the alteration(s), the dispute shall, at the request of any or all parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at Section 1302.

6. Should any party to this agreement wish to terminate this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the concerns cannot be resolved or addressed at the above-mentioned meeting, then the notice to terminate will be accepted by all parties.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN**

**HEALTH SCIENCES CENTRE
AND
HEALTH SCIENCES CENTRE NURSES LOCAL 10 OF
THE MANITOBA NURSES UNION**

AND

**WINNIPEG REGIONAL HEALTH AUTHORITY
AND
THE MANITOBA NURSES' UNION**

Applicable for Home Care Nurses

Re: Child Health Program Nurses

The Employer(s) and the Union agree that the following conditions and understandings apply re nursing services provided by Child Health Program Nurses in the Home Care Palliative Program.

1. Child Health Program Nurses providing nursing services in the Home Care Palliative Program are employees of the Health Sciences Centre and the terms and conditions of the Collective Agreement between the Winnipeg Regional Health Authority, Health Sciences Centre Site and Health Sciences Centre Nurses Local 10 shall be applicable to them.
2. Professional practice issues shall be referred to and are the responsibility of the Health Sciences Centre.
3. Any other disputes/grievances arising under the WRHA HSC/HSC Nurses Local 10 Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
4. It is agreed that the Child Health Program Nurses (CK5 Oncology) shall continue to provide the following nursing services in accordance with past practice:

Transition plans for terminally ill children to the WRHA Home Care Palliative Program from CK5 may result in one or more CK5 Nurses providing direct assistance with the care of the terminally ill child in the Community for a temporary period after transition and/or having CK5 Nurses available on a consultative basis to the WRHA Home Care Palliative Program with regard to the care of the terminally ill child.

5. Should any party to this agreement wish to alter any provision of this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the parties are unable to reach agreement concerning the alteration(s), the dispute shall, at the request of any or all parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at Section 1302.

6. Should any party to this agreement wish to terminate this Memorandum, ninety (90) days notice must be provided to all interested parties. All interested parties will meet within thirty (30) days to discuss any outstanding concerns. If the concerns cannot be resolved or addressed at the above-mentioned meeting, then the notice to terminate will be accepted by all parties.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
THE WINNIPEG REGIONAL HEALTH AUTHORITY
AND
HOME CARE NURSES LOCAL 97
OF THE MANITOBA NURSES' UNION**

***Re: Secondment of a Home Care Nurse Elected To Serve As
President Of Local 97***

The Employer and the Union mutually agree as follows:

1. A nurse employed by the Employer who is elected to the position of President of the Union, shall be considered as continuing in the employ of the Employer during the nurse's term of office as President of the Union and shall be considered to be seconded to the Union on a part-time basis during the term of office.
2. It is agreed that the part-time secondment will be for no less than 0.4 EFT. This nurse will be granted a partial leave of absence, if required, to maintain her/his position within Home Care. It is understood that the partial position vacated by the nurse seconded to the Executive position shall be posted and maintained and/or replaced as an indefinite term.
3. Scheduling of the nurse's remaining position in her/his remaining rotation and EFT, if required, will be done by the appropriate Team Manager in consultation with the nurse and will observe the conditions of 1504 unless otherwise mutually agreed.
4. For the purposes of administering the period of secondment, the Treasurer of the Union shall function as the official contact person in any dealings with the Employer. In addition, the Treasurer of the Union shall be accountable for:
 - (i) notifying the Employer, in writing, of the official commencement and termination date of the President's term of office;
 - (ii) determining the bi-weekly payroll record of the President and notifying the Employer of same.

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

5. Reimbursement of Employer Costs

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

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

It is understood that the Employer shall reimburse the Union for all travel expenses, i.e. parking, mileage from the facility to the meeting site incurred by the President when attending Regional NAC meetings, other regional joint committee meetings or any other regional meetings.

The Employer shall provide the Union Treasurer with a monthly statement of the above-referenced payroll expenses incurred during the nurse's period of secondment to President of the Union.

6. Income Protection

- (i) The Union President will accumulate sick pay credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Union President is absent during the secondment period due to accident or illness and the sick pay credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Union President out of sick leave credits accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.
- (ii) Upon the nurse's return to work following the period of secondment the amount of income protection accumulated during the period of secondment will be reconciled against the amount of income protection utilized during this same period. In the event the difference is positive i.e. the amount accumulated is greater than the amount utilized, the nurse will be eligible to utilize the difference (unutilized income protection credits) at a future date. It is understood that utilization of these income protection credits may only occur once the nurse exhausts all income protection credits accumulated during her/his normal course of employment with the Employer.

- (iii) It is further understood that the income protection credits earned during the period of secondment shall not be stored in the nurse's income protection bank within the computerized payroll system. Following the period of secondment a record of these credits will be provided to the nurse along with a copy in the personnel file of the nurse. In the event and at the point that the nurse wishes to utilize these income protection credits, she/he will advise the Human Resources Department. The Employer will pay said income protection and bill the Union for the cost.

7. Disability & Rehabilitation Plan (D & R)

The President will have coverage under the MHO Disability & Rehabilitation (D & R) Plan. During the D & R elimination period unutilized income protection credits earned during the period of secondment will be paid for those days that the President would have been at the Local 97. The remaining EFT if applicable will be covered as per 3902.

8. Accumulation of Paid Vacation

The President will accumulate vacation credits on the same earning rate as she/he would have accumulated vacation credits had she/he not been seconded.

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

9. Seniority/Service

- (i) Seniority shall continue to accrue during the period of secondment.
- (ii) Following the expiry of the period of secondment, the President's normal increment date will be delayed on a pro rata basis for a period of time equivalent to the period of secondment. The time worked between the date of the last increment to the date that the nurse assumed the office of President shall count toward the granting of the next increment.

10. This Letter of Understanding shall remain in force until revised by mutual agreement between the parties or until terminated by either party.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG REGIONAL HEALTH AUTHORITY
– and –
THE MANITOBA NURSES' UNION
*Applicable for Nurse Practitioners***

Re: Distribution Of Functions With Respect To Protected Time

Whereas the WRHA has adopted the Strong Model of practice for Nurse Practitioners which provides for domains of practice equivalent to approximately 80% dedicated to direct clinical practice and up to approximately 20% dedicated to non-clinical activities that support such clinical practice;

And Whereas the parties agree that, for novice Nurse Practitioners, a greater percentage of time and focus may be required on clinical activities of the Strong Model of practice during the novice period;

And Whereas the parties agree that non-clinical activities may include, but are not limited to educational/professional development, research, publication/professional leadership and system support activities;

And Whereas the parties understand that the performance of these non-clinical activities will require some flexibility on the part of both the Employer and the Nurse Practitioner to enable their achievement while balancing the needs of operational requirements and the professional development of the Nurse Practitioner;

Now therefore, the parties agree as follows:

Establishment of Work Schedule

The Nurse Practitioner and their manager shall work cooperatively on an on-going basis to determine a work schedule that ensures that the Strong Model of practice can be achieved and that also meets operational requirements relating to the provision of clinical care. Such schedules may require modification from time to time and changes shall occur in consultation between the Nurse Practitioner and their manager. Should agreement not be achieved between the parties on an appropriate work schedule, the determination of the direct Supervisor, after consulting with and giving due consideration to the expressed interests of the Nurse Practitioner, shall govern. This determination shall not result in a change in the shift rather it shall be limited to the type of functions performed during that shift.

From time to time, clinical requirements and/or competing priorities may require temporary modification to the schedule. Reasonable efforts shall be made to ensure that any such adjustments to schedules are temporary in nature and that any resulting lost non-clinical time is recaptured over a reasonable period.

Establishment of Priorities

Priorities for non-clinical functions shall be determined jointly through consultation between the Nurse Practitioner and their manager and may be modified over time to reflect changing priorities. Priorities are to be relevant to the specific role of the Nurse Practitioner and consistent with the missions, aims and objectives of the WRHA.

Within the priorities established, the WRHA supports the Nurse Practitioners' right, responsibility and opportunity to carry out research and other scholarly activities. The Nurse Practitioner holds professional discretion in how these priorities will be achieved. No articles, papers, written submissions, etc. are to be submitted for publication without the prior approval of the WRHA Advance Practice Nursing Steering Committee. All such activities are to be completed by the Nurse Practitioner as an employee of the WRHA.

Professional Leadership

The WRHA recognizes that professional leadership under the Strong Model may include, but is not limited to such functions as consultation, community service and professional activities. Professional Leadership functions shall be consistent with the priorities established as per the process contained within this Memorandum and performed by the Nurse Practitioner as an employee of the WRHA.

Future Models of Practice

The parties agree that the inclusion of this Memorandum does not, in any way, restrict the Employer's right to determine appropriate practice models and, specifically, that the Employer is not prevented from adopting a different model other than the Strong Model of practice in the future following consultation with the Nurse Practitioners through the Nursing Advisory Committee.

FOR THE EMPLOYER:

FOR THE UNION:

Signed the _____ day of _____, 2011.

INDEPENDENT ASSESSMENT COMMITTEE (IAC)

Chairpersons as per 1103(k)(i):

Leanne Bernaerdt
Nancy Brown

Shirley Delaquis
Dorothy Froman

Linda Newton

WINNIPEG REGIONAL NURSING ADVISORY COMMITTEE (NAC) PARTICIPANTS- Community Care

Winnipeg Civic Nurses Worksite 1
Cancer Care Nurses Local 36
Children's Rehab Nurses Local 58
Home Care Nurses Worksite 97
Breast Health Centre Nurses Worksite 132
Clinical Nurse Specialists Worksite 134
Nurse Practitioners/RNEP Worksite 141
Primary Care Nurses Worksite 142

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