

**PART-TIME**

**COLLECTIVE AGREEMENT**

**Between**

**Markham Stouffville Hospital  
(hereinafter called the "Hospital")**

**and**

**CUPE LOCAL  
3651-02**

**Expires: September 28, 2023**

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## **ARTICLE 1 – PREAMBLE**

### **1.01 - PREAMBLE**

The general purpose of this Agreement is to establish and maintain collective bargaining relations between the Hospital and the employees covered by this Agreement; to provide for ongoing means of communication between the Union and the Hospital and the prompt disposition of grievances and the final settlement of disputes and to establish and maintain mutually satisfactory wages, hours of work and other conditions of employment in accordance with the provisions of this Agreement.

It is recognized that the employees wish to work efficiently together with the Hospital to secure the best possible care and health protection for patients

## **ARTICLE 2 – DEFINITIONS**

### **2.01 – TEMPORARY EMPLOYEE**

Employees may be hired for a specific term not to exceed six (6) months, to replace an employee who will be on approved leave of absence, absence due to WSIB disability, sick leave, long term disability or to perform a special non-recurring task. This term may be extended a further six (6) months on mutual agreement of the Union, employee and Hospital or by the Hospital on its own up to twelve (12) months where the leave of the person being replaced extends that far. The period of employment of such persons will not exceed the absentee's leave. The release or discharge of such persons shall not be the subject of a grievance or arbitration.

This clause would not preclude such employees from using the job posting provision under the collective agreement and any successful applicant who has completed their probation period will be credited with the appropriate seniority.

The Hospital will outline to employees selected to fill such temporary vacancies and the Union, the circumstances giving rise to the vacancy, and the special conditions relating to such employment.

### **2.02 – PART-TIME COMMITMENT**

The Hospital shall not refuse to accept an offer from an employee to make a written commitment to be available for work on a regular predetermined basis solely for the purpose of utilizing casual employees so as to restrict the numbers of regular part time employees.

### **2.03 - REGULAR PART-TIME EMPLOYEE**

A regular part-time employee shall be deemed to be employee who is regularly scheduled to work twenty-four (24) hours per week or less.

## 2.04 - CASUAL EMPLOYEE

A casual part-time employee shall be deemed to be an employee who is not scheduled to work but may be called in as needed in accordance with the terms of this Agreement.

## **ARTICLE 3 - RELATIONSHIP**

### 3.01 – NO DISCRIMINATION

The parties agree that there shall be no discrimination within the meaning of the Ontario Human Rights Code against any employee by the Union or the Hospital by reason of race, creed, colour, age, sex, marital status, nationality, ancestry or place of origin, family status, handicap, sexual orientation, political affiliation or activity, or place of residence. The Hospital and the Union further agree that there will be no intimidation, discrimination, interference, restraint or coercion exercised or practised by either of them or their representatives or members, because of an employee's membership or non-membership in a Union or because of their activity or lack of activity in the Union.

The Union shall be provided a copy of any written notice provided to an employee that they may be subject to termination, demotion, transfer, or other adverse impact for innocent absenteeism.

### 3.02 – ATTENDANCE MANAGEMENT

Days of absence arising out of a medically-established serious chronic condition, an on-going course of treatment, a catastrophic event, absence for which WSIB benefits are payable, medically necessary surgical interventions, or days where the employee is asymptomatic and is under a doctor's care from the commencement of symptoms for a confirmed communicable disease (and has provided medical substantiation of such symptoms) but is required to be absent under the Hospital or public health authority protocol, will not be counted for the purposes of being placed on, or progressing through, the steps of an attendance management program.

Leaves covered under the *Employment Standards Act*, and leaves under Article 12 will not be counted for the purposes of being placed on, or progressing through, the steps of an attendance management program.

## **ARTICLE 4 – STRIKES & LOCKOUTS**

The Union agrees there shall be no strikes and the Hospital agrees there shall be no lockouts so long as this Agreement continues to operate. The terms "strike" and "lockout" shall bear the meaning given them in the Ontario Labour Relations Act.

## **ARTICLE 5 – UNION SECURITY**

### **5.01 – T4 SLIPS**

The Hospital will provide each employee with a T-4 supplementary slip showing the dues deducted in the previous year for income tax purposes where such information is available or becomes readily available through the Hospital's payroll system.

### **5.02 – NOTIFICATION TO UNION**

- (a) The Hospital will provide the union with a list, monthly, of all hirings, lay-offs, recalls, and positions which have been vacated within the bargaining unit where such information is available or becomes readily available through the Hospital's payroll system.
- (b) The Hospital will provide the Union with the current mailing address, personal email address if available and phone number(s) it has on record of all members of the bargaining unit twice a year in electronic form.

### **5.03 – EMPLOYEE INTERVIEW**

A new employee will have the opportunity to meet with a representative of the Union in the employ of the Hospital for a period of up to 15 minutes during the employee's orientation period without loss of regular earnings. The purpose of the meeting will be to acquaint the employee with such representative of the Union and the collective agreement.

Such meetings may be arranged collectively or individually for employees by the Hospital as part of the orientation program.

### **5.04 – NO OTHER AGREEMENTS**

No employee shall be required or permitted to make any written or verbal agreement with the Hospital or its representative(s) which conflicts with the terms of this agreement.

No individual employee or group of employees shall undertake to represent the union at meetings with the Hospital without proper authorization from the union.

## **ARTICLE 6 – UNION REPRESENTATION AND COMMITTEES**

### **6.01 – UNION ACTIVITY ON PREMISES AND/OR ACCESS TO PREMISES**

The Union agrees that neither it, nor its officers, agents, representatives and members will engage in the solicitation of members, holding of meetings or any other Union activities on Hospital premises or on Hospital time without the prior approval of the Hospital, except as specifically provided for in this Agreement. Such approval will not be unreasonably denied.

### **6.02 – LABOUR-MANAGEMENT COMMITTEE**

- (a) Where the parties mutually agree that there are matters of mutual concern and interest that would be beneficial if discussed at a Labour Management Committee Meeting during the

term of this Agreement, the following shall apply.

- (b) An equal number of representatives of each party as mutually agreed shall meet at a time and place mutually satisfactory. A request for a meeting hereunder will be made in writing prior to the date proposed and accompanied by an agenda of matters proposed to be discussed, which shall not include matters that are properly the subject of grievance or negotiations for the amendment or renewal of this agreement.

Any representative(s) attending such meetings during their regularly scheduled hours of work shall not lose regular earnings as a result of such attendance.

- (c) It is agreed that the topic of a rehabilitation program for drug and alcohol abuse is an appropriate topic for the Labour-Management Committee.

It is also agreed that the topic of the utilization of full-time and part-time staff is an appropriate topic for the Labour-Management Committee. The committee shall have access to work schedules and job postings upon request.

- (d) It is understood that joint meetings with other Labour-Management Committees in the Hospital may be scheduled concerning issues of mutual interest if satisfactory to all concerned.
- (e) Where two or more agreements exist between a Hospital and CUPE the Committee may be a joint one representing employees under both agreements, unless otherwise agreed.

#### 6.03 – LOCAL BARGAINING COMMITTEE

The Hospital agrees to recognize a negotiating committee comprised of hospital employee representatives of the Union for the purpose of negotiating a renewal agreement (as set out in the Local Provisions Appendix). The Hospital agrees to pay members of the negotiating committee for straight time wages lost from their regularly scheduled working hours spent in direct negotiations for a renewal agreement, up to but not including arbitration. Nothing in this provision is intended to preclude the Union negotiating committee from having the assistance of any representatives of the Canadian Union of Public Employees when negotiating with the Hospital.

When direct negotiations begin or end within ten (10) hours of a negotiating team member's scheduled shift, the Hospital will endeavour to provide a one day's leave of absence without pay, to provide a sufficient rest break if the employee so requests. Such request shall not be unreasonably denied. Such leave shall be considered leave of absence for union business, but shall not be deducted from the Union entitlement under Article 12.02.

#### 6.04 – CENTRAL BARGAINING COMMITTEE

- (a) In central bargaining between the Canadian Union of Public Employees and the participating hospitals, an employee serving on the Union's Central Negotiating Committee shall be paid for time lost from their normal straight time working hours at their regular rate of pay and without loss of leave credits for attending central negotiating meetings with the Hospitals' Central Negotiating Committee in direct negotiations up to the point of arbitration. In addition, an employee serving on the Union's Central Negotiating Committee shall be paid for time lost from their normal straight time working hours at their regular rate of pay and without loss of leave credits for two (2) days of preparation time for such central negotiating meetings with the Hospital's Central negotiating Committee. Upon reference to arbitration, the Negotiating Committee members shall receive unpaid time off for the

purpose of attending arbitration hearings.

It is understood and agreed that the maximum number of Union Central Negotiating Committee members entitled to payment under this provision shall be eight (8), and in no case will more than one employee from a hospital be entitled to such payment.

The Union shall advise the Hospitals' Central Negotiating Committee, before negotiations commence, of those employees to be paid under this provision. The Hospitals' Central Negotiating Committee shall advise the eight (8) Hospitals accordingly.

- (b) Vice-Presidents of the Ontario Council of Hospital Unions shall be granted leave of absence by their employers in accordance with (a) above or Article 12.02 as the case may be, in order to fulfil the duties of their position.

#### 6.05 – UNION STEWARDS

- (a) The Hospital agrees to recognize Union stewards to be elected or appointed from amongst employees in the bargaining unit who have completed their probationary period for the purpose of dealing with Union business as provided under this Collective Agreement.
- (b) A Chief Steward or designate may, in the absence of any steward, assist in the presentation of any grievance, or with any steward function.
- (c) The Union shall keep the Hospital notified in writing of the names of Union stewards appointed or selected under this Article as well as the effective date of their respective appointments.
- (d) It is agreed that Union stewards have their regular duties and responsibilities to perform for the Hospital and shall not leave their regular duties without first obtaining permission from their immediate supervisor. If, in the performance of their duties, a Union steward is required to enter an area within the Hospital in which they are not originally employed, they shall report their presence to the supervisor in the area immediately upon entering it. Such permission shall not be unreasonably withheld. When resuming their regular duties and responsibilities, such steward shall again report to their immediate supervisor. A Union steward shall suffer no loss of earnings for time spent in performing the above duties during their regular scheduled working hours.
- (e) Nothing in this Article shall preclude full-time stewards from representing part-time employees and vice-versa.
- (f) The number of stewards and the areas which they represent, are to be determined locally.

#### 6.06 – GRIEVANCE COMMITTEE

The Hospital will recognize a Grievance Committee composed of the Chief Steward and not more than (as set out in Local Provisions Appendix) employees selected by the Union who have completed their probationary period. A general representative of the Union may be present at any meeting of the Committee. The purpose of the Committee is to deal with complaints or grievances as set out in this Collective Agreement.

The Union shall keep the Hospital notified in writing of the names of the members of the Grievance Committee appointed or selected under this Article as well as the effective date of their respective appointments.

A Committee member shall suffer no loss of earnings for time spent during their regular scheduled working hours in attending grievance meetings with the Hospital up to, but not including arbitration. The number of employees on the Grievance Committee shall be determined locally.

## **ARTICLE 7 – GRIEVANCE AND ARBITRATION PROCEDURE**

- 7.01 For purposes of this Agreement, a grievance is defined as a difference arising between the parties relating to the interpretation, application, administration or alleged violation of the Agreement including any question as to whether a matter is arbitrable.
- 7.02 At the time formal discipline is imposed or at any stage of the grievance procedure an employee shall have the right upon request to the presence of their steward. In the case of suspension or discharge the Hospital shall notify the employee of this right in advance.
- 7.03 It is the mutual desire of the parties hereto that complaints of employees shall be adjusted as quickly as possible, and it is understood that an employee has no grievance until they have first given their immediate supervisor the opportunity of adjusting their complaint. The grievor may have the assistance of a union steward if they so desire. Such complaint shall be discussed with their immediate supervisor within nine (9) calendar days after the circumstances giving rise to it have occurred or ought reasonably to have come to the attention of the employee and failing settlement within nine (9) calendar days, it shall then be taken up as a grievance within nine (9) calendar days following advice of their immediate supervisor's decision in the following manner and sequence:

### Step No. 1

The employee, who may be accompanied by a steward, may submit a written grievance signed by the employee to (designated by Hospital). The grievance shall identify the nature of the grievance and the remedy sought and should identify the provisions of the Agreement which are alleged to be violated. The Union and the Hospital may, if they so desire, meet to discuss the grievance at a time and place suitable to both parties. The (designate) will deliver their decision in writing within nine (9) calendar days following the day on which the grievance was presented to them. Failing settlement or response, then:

### Step No. 2

Within nine (9) calendar days following the decision in Step No.1, the grievance may be submitted in writing to the (designated by Hospital). A meeting will then be held between the (designate) and the Grievance Committee within nine (9) calendar days of the submission of the grievance at Step No. 2 unless extended by agreement of the parties. It is understood and agreed that a representative of the Canadian Union of Public Employees and the grievor may be present at the meeting. It is further understood that the (designate) may have such counsel and assistance as they may desire at such meeting. The decision of the Hospital shall be delivered in writing within nine (9) calendar days following the date of such meeting.

- 7.04 A complaint or grievance arising directly between the Hospital and the Union concerning the interpretation, application or alleged violation of the Agreement shall be originated at Step No. 2 within fourteen (14) calendar days following the circumstances giving rise to the complaint or grievance. It is expressly understood, however, that the provisions of this Article may not be used with respect to a grievance directly affecting an employee which such employee could themselves institute and the regular grievance procedure shall not be thereby bypassed.

- 7.05 Where a number of employees have identical grievances and each employee would be entitled to grieve separately they may present a group grievance in writing identifying each employee who is grieving to the Department Head or their designee within fourteen (14) calendar days after the circumstances giving rise to the grievance have occurred or ought reasonably to have come to the attention of the employee(s). The grievance shall then be treated as being initiated at Step No. 2 and the applicable provisions of this Article shall then apply with respect to the processing of such grievance.
- 7.06 The release or discharge of an employee during the probationary period shall not be the subject of a grievance or arbitration. A claim by an employee who has completed their probationary period that they have been unjustly discharged or suspended shall be treated as a grievance if a written statement of such grievance is lodged by the employee with the Hospital at Step No. 2 within seven (7) calendar days after the date the discharge or suspension is effected. Such special grievance may be settled under the Grievance or Arbitration Procedure by:
- (a) confirming the Hospital's action in dismissing the employee; or
  - (b) reinstating the employee with or without full compensation for the time lost; or
  - (c) by any other arrangement which may be deemed just and equitable.

Wherever the Hospital deems it necessary to suspend or discharge an employee, the Hospital shall notify the Union of such suspension or discharge in writing. The Hospital agrees that it will not suspend, discharge or otherwise discipline an employee who has completed their probationary period, without just cause.

- 7.07 (a) Failing settlement under the foregoing procedure of any grievance between the parties arising from the interpretation, application, administration or alleged violation of this Agreement, including any question as to whether a matter is arbitrable, such grievance may be submitted to arbitration as hereinafter provided. If no written request for arbitration is received within eighteen (18) calendar days after the decision under Step No. 2 is given, the grievance shall be deemed to have been abandoned. Where such a written request is postmarked within sixteen (16) calendar days after the decision under Step No. 2, it will be deemed to have been received within the time limits.
- (b) The parties agree that it is their intent to resolve grievances without recourse to arbitration, wherever possible. Therefore, notwithstanding (a) above, the parties may, upon mutual agreement, engage the services of a mediator in an effort to resolve the grievance and may extend the time limits for the request for arbitration. The parties will share equally the fees and expenses, if any, of the mediator.
- 7.08 All agreements reached under the Grievance Procedure between the representatives of the Hospital and the representatives of the Union will be final and binding upon the Hospital and the Union and the employees.
- 7.09 When either party requests that any matter be submitted to arbitration as provided in the foregoing Article, it shall make such request in writing addressed to the other party to this Agreement, and at the same time name a nominee. Within seven (7) calendar days thereafter the other party shall name a nominee, provided, however, that if such party fails to name a nominee as herein required, the Minister of Labour for the Province of Ontario shall have power to effect such appointment upon application thereto by the party invoking Arbitration Procedure. The two nominees shall attempt to select by agreement a chairperson of the Arbitration Board. If they are unable to agree upon such

a chairperson within a period of fourteen (14) calendar days, they shall then request the Minister of Labour for the Province of Ontario to appoint a chairperson.

- 7.10 No person may be appointed as an arbitrator who has been involved in an attempt to negotiate or settle the grievance.
- 7.11 No matter may be submitted to arbitration which has not been properly carried through all requisite steps of the Grievance Procedure.
- 7.12 The Arbitration Board shall not be authorized to make any decision inconsistent with the provisions of this Agreement, nor to alter, modify, add to or amend any part of this Agreement.
- 7.13 The proceedings of the Arbitration Board will be expedited by the parties hereto and the decision of the majority and, where there is no majority the decision of the chairperson will be final and binding upon the parties hereto and the employee or employees concerned.
- 7.14 Each of the parties hereto will bear the expense of the nominee appointed by it and the parties will share equally the fees and expenses, if any, of the chairperson of the Arbitration Board.
- 7.15 The time limits set out in the Grievance and Arbitration Procedures herein are mandatory and failure to comply strictly with such time limits except by the written agreement of the parties, shall result in the grievance being deemed to have been abandoned subject only to the provisions of Section 48 (16) of The Labour Relations Act.
- 7.16 Wherever Arbitration Board is referred to in the Agreement, the parties may mutually agree in writing to substitute a single arbitrator for the Arbitration Board at the time of reference to arbitration and the other provisions referring to Arbitration Board shall appropriately apply.

## **ARTICLE 8 – ACCESS TO FILES**

### **8.01 – ACCESS TO PERSONNEL FILE**

Each employee shall have reasonable access to their personnel file for the purpose of reviewing any evaluations or formal disciplinary notations contained therein, in the presence of the Director of Personnel or designate. An employee has the right to request copies of any evaluations in this file.

### **8.02 – CLEARING OF RECORD**

Any letter of reprimand, suspension or any other sanction will be removed from the record of an employee eighteen (18) months following the receipt of such letter, suspension or other sanction provided that such employee's record has been discipline free for one year. All leaves of absence in excess of ten (10) calendar days will not count toward either of the above periods.

## **ARTICLE 9 – SENIORITY**

### **9.01 – PROBATIONARY PERIOD**

A new employee will be considered on probation until they have completed sixty (60) days of work (or 450 hours of work for employees whose regular hours of work are other than the standard work

day), within any twelve (12) calendar months. Upon completion of the probationary period they shall be credited with seniority equal to sixty (60) working days. With the written consent of the Hospital, the probationary employee and the President of the Local Union or designate, such probationary period may be extended. Any extensions agreed to will be in writing and will specify the length of the extension. The release or discharge of an employee during the probationary period shall not be the subject of a grievance or arbitration unless the probationary employee is released for reasons which are arbitrary, discriminatory, in bad faith, or for exercising a right under this Agreement.

#### 9.02 – DEFINITION OF SENIORITY

Full-time employees will accumulate seniority on the basis of their continuous service in the bargaining unit from the last date of hire, except as otherwise provided herein.

Part-time employees, including casual employees, will accumulate seniority on the basis of one (1) year's seniority for each 1725 hours worked in the bargaining unit as of the last date of hire, except as otherwise provided herein.

Seniority will operate on a bargaining unit wide basis.

A part-time employee cannot accrue more than one year's seniority in a twelve (12) month period. The twelve (12) month period shall be determined locally.\*

#### 9.03 – LOSS OF SENIORITY

An employee shall lose all seniority and service and shall be deemed to have terminated if they:

- (a) resign;
- (b) are discharged and not reinstated through the grievance/arbitration procedure;
- (c) have retired;
- (d) are absent from scheduled work for a period of three (3) or more consecutive working days without notifying the Hospital of such absence and providing to the Hospital a satisfactory reason;
- (e) have been laid off for forty-eight (48) months;
- (f) have been laid off and fail to return to work within seven (7) calendar days after that employee has been notified by the Hospital through registered mail addressed to the last address on the records of the Hospital, subject to any special provisions regarding temporary vacancies noted under the heading of Layoff and Recall.

#### 9.04 – EFFECT OF ABSENCE

((a), (b) and (c) of the following clause are applicable to full-time employees only)

Unless otherwise provided in the Collective Agreement:

- (d) Part-time employees shall accrue seniority for the duration of the absence, if an employee's absence is due to a disability resulting in WSIB benefits\*, or a disability in accordance with the *Human Rights Code*.

Part-time employees shall accrue service for a period of fifteen (15) weeks if absent due to a disability resulting in WSIB benefits, on the basis of what the employee's normal regular hours of work would have been.

\*Note: Add the words "or L.T.D. benefits" only in agreements providing L.T.D. benefits.

#### 9.05 – JOB POSTING

*Any provision pertaining to definition of temporary vacancies, non-bargaining unit applications, outside advertising, interim placements or criteria for selection except as it relates to promotions and transfers that existed in the hospital's expiring collective agreement will be continued as the last paragraph of this Article.*

- (a) Where a permanent vacancy occurs in a classification within the bargaining unit or a new position within the bargaining unit is established by the Hospital, such vacancy shall be posted for a period of seven (7) consecutive calendar days. Applications for such vacancy shall be made in writing within the seven (7) day period referred to herein.
- (b) The postings shall stipulate the qualifications, classifications, rate of pay, department and shift and a copy shall be provided to the Chief Steward.
- (c) Vacancies created by the filling of an initial permanent vacancy will be posted for a period of three (3) consecutive calendar days, excluding Saturdays, Sundays and Holidays. Applications for such vacancies shall be made in writing within the three (3) day period referred to herein.
- (d) In matters of promotion and staff transfer appointment shall be made of the senior applicant able to meet the normal requirements of the job. Successful employees need not be considered for other vacancies within a six (6) month period unless an opportunity arises which allows the employee to change their permanent status.
- (e) The Hospital agrees that it shall post permanent vacant positions within 30 calendar days of the position becoming vacant, unless the Hospital provides the Union notice under Article 9.08(A)(a) of its intention to eliminate the position.
- (f) The name of the successful applicant will be posted on the bulletin board for a period of seven (7) calendar days.
- (g) Where there are no successful applicants from within this bargaining unit for vacant positions referred to in this Article, employees in other CUPE bargaining units at the Hospital will be selected in accordance with the criteria for selection above, prior to considering persons who are not members of CUPE bargaining units at the Hospital. The employees eligible for consideration shall be limited to those employees who have applied for the position in accordance with this Article, and selection shall be made in accordance with this Article.
- (h) The successful applicant shall be allowed a trial period of up to thirty (30) days, during which the Hospital will determine if the employee can satisfactorily perform the job. Within this period the employee may voluntarily return, or be returned by the Hospital to the position formerly occupied, without loss of seniority. The vacancy resulting from the posting may be filled on a temporary basis until the trial period is completed.

- (i) A list of vacancies filled in the preceding month under this Article and the names of the successful applicants will be posted, with a copy provided to the union.
- (j) In the case of temporary full-time vacancies for the first three (3) months, the provisions of 9.05 shall not apply and such vacancies will be offered to part-time employees within the unit or program where the temporary vacancy exists, by seniority and where the employee can perform the job without any training. This term may be extended upon mutual agreement of the Union, employee and the Hospital. After three (3) months the vacancy will be posted. Where the parties agree, a temporary full-time vacancy may be posted at the commencement of the leave of the employee being replaced. Part-time employees filing temporary full-time vacancies shall maintain their part-time status and will be governed by the part-time collective agreement.

#### 9.06 – TRANSFER AND SENIORITY OUTSIDE THE BARGAINING UNIT

- (a) It is understood that an employee shall not be transferred by the Hospital to a position outside the bargaining unit without their consent except in the case of temporary assignments not exceeding six (6) months. This period may be extended a further six (6) months upon the agreement of the employee and the Hospital. Such employees on temporary assignments shall remain members of the bargaining unit.
- (b) An employee who is transferred to a position outside the bargaining unit shall not, subject to (c) below, accumulate seniority. In the event the employee is returned by the Hospital to a position in the bargaining unit within twenty-four (24) months of the transfer they shall be credited with the seniority held at the time of transfer and resume accumulation from the date of their return to the bargaining unit. An employee not returned to the bargaining unit within 24 months shall forfeit bargaining unit seniority.
- (c) In the event an employee transferred out of the bargaining unit under (a) or (b) above is returned to the bargaining unit within a period of nine (9) calendar months, they shall accumulate seniority during the period of time outside the bargaining unit.

#### 9.07 (A) – TRANSFER OF SENIORITY AND SERVICE

Effective (the date as set out in the Local Provisions Appendix) and for employees who transfer subsequent to (the effective date as set out in the Local Provisions Appendix):

For application of seniority for purposes of promotion, demotion, transfer, layoff and recall and service (including meeting any waiting period or other entitlement requirements) for purposes of vacation entitlement, HOODIP or equivalent, health and welfare benefit plans, and wage progression:

- (i) an employee whose status is changed from full-time to part-time shall receive full credit for their seniority and service;
- (ii) an employee whose status is changed from part-time to full-time shall receive credit for their seniority and service on the basis of one (1) year for each 1725 hours worked.

The above-noted employee shall be allowed a trial period of up to thirty (30) days, during which the Hospital will determine if the employee can satisfactorily perform the job. Within this period the employee may voluntarily return, or be returned without loss of seniority to their former duties on

the same shift in the same department and at the appropriate rate of pay, subject to any changes which would have occurred had they not transferred.

#### 9.07 (B) – PORTABILITY OF SERVICE

An employee hired by the Hospital with recent and related experience may claim consideration for such experience at the time of hiring on a form to be supplied by the Hospital. Any such claim shall be accompanied by verification of previous related experience. The Hospital shall then evaluate such experience during the probationary period following hiring. Where in the opinion of the Hospital such experience is determined to be relevant, the employee shall be slotted in that step of the wage progression consistent with one (1) year's service for every one (1) year of related experience in the classification upon completion of the employee's probationary period. It is understood and agreed that the foregoing shall not constitute a violation of the wage schedule under the collective agreement.

#### 9.07 (C) – TRANSFORMATION IN HEALTH CARE

##### Seniority Recognition

Without prejudice to the Union's or Hospitals' rights under the collective agreement or the Labour Relations Act and/or the Public Sector Labour Relations Transition Act, the parties agree that non-unionized employees who are affected (via relocation/transfer\*) shall, when entering the bargaining unit, be afforded seniority and service in accordance with the anniversary of their date of hire (or hours worked) from their original Hospital. Such anniversary date shall be calculated in accordance with the relevant provisions of the relevant collective agreement.

##### Right to Return or Transfer

Employees who are relocated/transferred\* to another employer by the Hospital will retain their seniority and service at their original hospital for a 48-month period.

Without prejudice to the Union's or Hospitals' rights under the collective agreement or the Labour Relations Act and/or the Public Sector Labour Relations Transition Act, employees relocated/transferred\* shall have the right to post for vacancies that arise, prior to or subsequent to the relocation/transfer\*, at their originating Hospital for that 48-month period.

If they are the successful applicant, they will return to the employ of the Hospital with seniority accrued and service intact but not accrued, for the period that the employee was relocated/transferred\* to another employer.

\*Pursuant to a "Sale of Business" under Section 69 of the Labour Relations Act, or to a transfer pursuant to the Public Sector Labour Relations Transition Act.

#### 9.08 (A) – NOTICE AND REDEPLOYMENT COMMITTEE

##### (a) Notice

In the event of a proposed layoff at the Hospital of a permanent or long-term nature or the elimination of a position within the bargaining unit, the Hospital shall:

- (i) provide the Union with no less than five (5) months' written notice of the proposed layoff or elimination of position; and

- (ii) provide to the affected employee(s), if any, who will be laid off with no less than five (5) months' written notice of layoff, or pay in lieu thereof.

Note: Where a proposed layoff results in the subsequent displacement of any member(s) of the bargaining unit, the original notice to the Union provided in (i) above shall be considered notice to the Union of any subsequent layoff.

- (b) A layoff shall not include a reassignment of an employee from their classification or area of assignment who would otherwise be entitled to notice of layoff provided:
  - (I) reassignments will occur in reverse order of seniority;
  - (II) the reassignment of the employee is to an appropriate permanent position with the employer having regard to the employees skills, abilities, qualifications and training or training requirements;
  - (III) the reassignment of the employee does not result in a reduction of the employees wage rate or hours of work;
  - (IV) the job to which the employee is reassigned is located at the employee's original work site or at a nearby site in terms of relative accessibility for the employee;
  - (V) the job to which the employee is reassigned is on the same or substantially similar shift or shift rotation; and
  - (VI) where more than one employee is to be reassigned in accordance with this provision, the reassigned employees shall be entitled to select from the available appropriate vacancies to which they are being reassigned in order of seniority provided no such selection causes or would cause a layoff or bumping.

The Hospital bears the onus of demonstrating that the foregoing conditions have been met in the event of a dispute. The Hospital shall also reasonably accommodate any reassigned employee who may experience a personal hardship arising from being reassigned in accordance with this provision.

- (c) Any vacancy to which an employee is reassigned pursuant to paragraph (b) need not be posted.

(d) Redeployment Committee

At each Hospital a Redeployment Committee will be established not later than two (2) weeks after the notice referred to in 9.08(A)(a) and will meet thereafter as frequently as is necessary.

(i) Committee Mandate

The mandate of the Redeployment Committee is to:

- (1) Identify and propose possible alternatives to the proposed layoff(s) or elimination of position(s), including, but not limited to, identifying work which would otherwise be bargaining unit work and is currently work contracted-out by the Hospital which could be performed by bargaining-unit employees who are or would otherwise be laid off;

- (2) Identify vacant positions in the Hospital or positions which are currently filled but which will become vacant within a twelve (12) month period and which are either:
  - (a) within the bargaining unit; or
  - (b) within another CUPE bargaining unit; or
  - (c) not covered by a collective agreement.
- (3) Identify the retraining needs of workers and facilitate such training for workers who are, or would otherwise be, laid off.
- (4) Subject to article 9.11, the Hospital will award vacant positions to employees who are, or would otherwise be laid off, in order of seniority if, with the benefit of up to six (6) months retraining, an employee has become able to meet the normal requirements of the job.
- (5) Any dispute relating to the foregoing provisions may be filed as a grievance commencing at Step 2.

(ii) Committee Composition

The Redeployment Committee shall be comprised of equal numbers of representatives of the Hospital and of the Union. The number of representatives will be determined locally. Where for the purposes of HTAP (the Ontario Hospital Training and Adjustment Panel) there is another hospital-wide staffing and redeployment committee created or in existence, Union members of the Redeployment Committee shall serve on any such hospital wide staffing committee established with the same or similar terms of reference, and the number of Union members on such committee will be proportionate to the number of its bargaining unit members at the particular Hospital in relation to other staff groups.

Meetings of the Redeployment Committee shall be held during normal working hours. Time spent attending such meetings shall be deemed to be work time for which the representative(s) shall be paid by the Hospital at their regular or premium rate as may be applicable.

Each party shall appoint a co-chair for the Redeployment Committee. Co-chairs shall chair alternative meetings of the Committee and will be jointly responsible for establishing the agenda of the Committee meetings, preparing minutes and writing such correspondence as the Committee may direct.

(iii) Disclosure

The Hospital shall provide to the Redeployment Committee all pertinent staffing and financial information.

(iv) Alternatives

The Redeployment Committee or where there is no consensus, the committee members shall propose alternatives to cutbacks in staffing to the Hospital's Chief Executive Officer and to the Board of Directors.

At the time of submitting any plan concerning rationalization of services and involving the elimination of any position(s) or any layoff(s) to the District Health Council or to the Ministry of Health, the Hospital shall provide a copy, together with accompanying documentation, to the Union.

9.08 (B) – RETIREMENT ALLOWANCE

Prior to issuing notice of layoff pursuant to article 9.08(A)(a)(ii) in any classification(s), the Hospital will offer early retirement allowance to a sufficient number of employees eligible for early retirement under HOOPP within the classification(s) in order of seniority, to the extent that the maximum number of employees within a classification who elect early retirement is equivalent to the number of employees within the classification(s) who would otherwise receive notice of layoff under article 9.08(A)(a)(ii).

An employee who elects an early retirement option shall receive, following completion of the last day of work, a retirement allowance of two (2) weeks' salary for each year of service, plus a prorated amount for any additional partial year of service, to a maximum ceiling of fifty-two (52) weeks' salary.

9.08 (C) – VOLUNTARY EXIT OPTION

If after making offers of early retirement, individual layoff notices are still required, prior to issuing those notices the Hospital will offer a voluntary early exit option in accordance with the following conditions:

- (i) The Hospital will first make offers in the classifications within department(s) where layoffs would otherwise occur. If more employees than are required are interested, the Hospital will make its decision based on seniority.
- (ii) If insufficient employees in the department affected accept the offer, the Hospital will then extend the offer to employees in the same classification in other departments. If more employees than are required are interested, the Hospital will make its decision based on seniority.
- (iii) In no case will the Hospital approve an employee's request under (i) and (ii) above for a voluntary early exit option, if the employees remaining are not qualified to perform the available work.
- (iv) The number of voluntary early exit options the Hospital approves will not exceed the number of employees in that classification who would otherwise be laid off. The last day of employment for an employee who accepts a voluntary early exit option will be at the Hospital's discretion and will be no earlier than thirty (30) calendar days immediately following the employee's written acceptance of the offer.

An employee who elects a voluntary early exit option shall receive, following completion of the last day of work, a separation allowance of two (2) weeks' salary for each year of service, to a maximum of fifty-two (52) weeks' pay.

#### 9.09 – LAYOFF AND RECALL

An employee in receipt of notice of layoff pursuant to 9.08(A)(a)(ii) may:

- (a) accept the layoff; or
- (b) opt to receive a separation allowance as outlined in Article 9.12; or
- (c) opt to retire, if eligible under the terms of the Hospitals of Ontario Pension Plan (HOOPP) as outlined in Article 9.08(B); or
- (d) displace another employee who has lesser bargaining unit seniority in the same or a lower or an identical-paying classification in the bargaining unit if the employee originally subject to layoff has the ability to meet the normal requirements of the job. An employee so displaced shall be deemed to have been laid off and shall be entitled to notice in accordance with Article 9.08(A)(a).

An employee who chooses to exercise the right to displace another employee with lesser seniority shall advise the Hospital of their intention to do so and the position claimed within seven (7) days after receiving the notice of layoff.

For purposes of the operation of clause (d), an identical-paying classification shall include any classification where the straight-time hourly wage rate at the level of service corresponding to that of the laid off employee is within 1% of the laid off employee's straight time hourly wage rate.

- (e) In the event that there are no employees with lesser seniority in the same or a lower or identical-paying classification, as defined in this article, a laid-off employee shall have the right to displace another employee with lesser seniority in a higher-paying classification provided they are able to meet the normal requirements of the job, with orientation but without additional training.
- (f) In addition, in combined full-time/part-time collective agreements, a full-time employee shall also be entitled to displace another full-time employee with lesser seniority in a higher-paying classification provided that they are able to meet the normal requirements of the job, with orientation but without additional training, when there are no other full-time employees in the same or a lower or similar-paying classification with lesser seniority, prior to being required to displace a part-time employee.
- (g) An employee who is subject to layoff other than a layoff of a permanent or long-term nature including a full time employee whose hours of work are, subject to Article 14.01, reduced, shall have the right to accept the layoff or displace another employee in accordance with (a) and (d) above.
- (h) No full-time employee within the bargaining unit shall be laid off by reason of their duties being assigned to one or more part-time employees.
- (i) In the event of a layoff of an employee, the Hospital shall pay its share of insured benefits premiums for the duration of the five-month notice period provided for in Article 9.08(A)(a).

- (j) The Hospital agrees to post vacancies during the recall period, as per the job posting procedure, allowing employees on recall to participate in the posting procedure. Should the position not be filled via the job posting procedure, an employee shall have opportunity of recall from a layoff to an available opening, in order of seniority, provided they have the ability to perform the work.
- (k) In determining the ability of an employee to perform the work for the purposes of the paragraphs above, the Hospital shall not act in an arbitrary or unfair manner.
- (l) An employee recalled to work in a different classification from which they were laid off shall have the privilege of returning to the position held prior to the layoff should it become vacant within six (6) months of being recalled.
- (m) No new employees shall be hired until all those laid off have been given an opportunity to return to work and have failed to do so, in accordance with the loss of seniority provision, or have been found unable to perform the work available.
- (n) The Hospital shall notify the employee of recall opportunity by registered mail, addressed to the last address on record with the Hospital (which notification shall be deemed to be received on the second day following the date of mailing). The notification shall state the job to which the employee is eligible to be recalled and the date and time at which the employee shall report for work. The employee is solely responsible for their proper address being on record with the Hospital.

#### 9.10 – RETRAINING

##### (a) Retraining for Positions within the Hospital

Where, with the benefit of retraining of up to six (6) months, an employee who has either accepted the layoff or who is unable to displace any other employee could be redeployed to a hospital position identified by the Redeployment Committee in accordance with Article 9.08(A)(d)(i):

- (i) Opportunities to fill vacant positions identified by the Hospital Redeployment Committee through retraining shall be offered to employees who apply and would qualify for the position with the available retraining in order of their seniority until the list of any such opportunities is exhausted. Opportunities to fill vacancies outside of CUPE bargaining units may be offered by the Hospital in its discretion.
- (ii) The Hospital and the Union will cooperate so that employees who have received notice of permanent layoff and been approved for retraining in order to prevent a layoff will have their work schedules adjusted in order to enable them to participate in the retraining, and scheduling and seniority requirements may by mutual agreement be waived. The Redeployment Committee will seek the availability of any federal or provincial retraining program funds to cover the cost of tuition, books and travel, as well as any wages eligible under the terms of such program.
- (iii) Apart from any on-the-job training offered by the Hospital, any employee subject to layoff who may require a leave of absence to undertake retraining in accordance with the foregoing shall be granted an unpaid leave of absence which shall not exceed six (6) months.

(iv) Laid-off employees who are approved for retraining in order to qualify for a vacant position within the Hospital will continue to receive insured benefits.

(b) Placement

Upon successful completion of their training period, the Hospital and the Union undertake to waive any restrictions which might otherwise apply, and the employee will be placed in the job identified in 9.11(a)(i).

An employee subject to layoff who applies but later declines to accept a retraining offer or fails to complete the training will remain subject to layoff.

### 9.11 – SEPARATION ALLOWANCES

(a) Where an employee resigns within 30 days after receiving notice of layoff pursuant to article 9.08(A)(a)(ii) that their position will be eliminated, they shall be entitled to a separation allowance of two (2) weeks' salary for each year of continuous service to a maximum of sixteen (16) weeks' pay, and, on production of receipts from an approved educational program, within twelve (12) months of resignation, may be reimbursed for tuition fees up to a maximum of three thousand (\$3,000) dollars.

(b) Where an employee resigns later than 30 days after receiving notice pursuant to Article 9.08(A)(a)(ii) that their position will be eliminated, they shall be entitled to a separation allowance of four (4) weeks' salary, and, on production of receipts from an approved educational program, within twelve (12) months of resignation, may be reimbursed for tuition fees up to a maximum of one thousand two hundred and fifty (\$1,250) dollars.

### 9.12 – TECHNOLOGICAL CHANGE

The Hospital undertakes to notify the Union in advance, so far as practicable, of any technological changes which the Hospital has decided to introduce which will significantly change the status of employees within the bargaining unit.

The Hospital agrees to discuss with the Union the effect of such technological changes on the employment status of employees and to consider practical ways and means of minimizing the adverse affect, if any, upon employees concerned.

Where new or greater skills are required than are already possessed by affected employees under the present methods of operation, such employees shall be given a period of training, with due consideration being given to the employee's age and previous educational background, during which they may perfect or acquire the skills necessitated by the new method of operation. The employer will assume the cost of tuition and travel. There shall be no reduction in wage or salary rates during the training period of any such employee. Training shall be given during the hours of work whenever possible and may extend for up to six months.

Employees with one (1) or more years of continuous service who are subject to lay-off under conditions referred to above, will be given notice of the impending change in employment status at the earliest reasonable time in keeping with the notification to the Union as above set forth and the requirements of the applicable law.

### 9.13 – REGISTERED PRACTICAL NURSE PROFESSIONAL DEVELOPMENT/SCOPE OF PRACTICE

Continuous professional development is a hallmark of professional nursing practice. As a self-regulating profession, nursing recognizes the importance of maintaining a dynamic practice environment which includes ongoing learning, the maintenance of competence, career development, career counseling and succession planning. The parties agree that professional development includes a diverse range of activities, including but not limited to formal academic programs; short-term continuing education activities; certification programs; independent learning committee participation. The parties recognize their joint responsibility in and commitment to active participation in the area of professional development, including scope of practice.

Where Registered Practical Nurse professional development is not specifically addressed at any existing joint committee, the Hospital's Chief Nursing Officer and Human Resources Officer will meet with the Union on a quarterly basis to discuss professional responsibility and scope of practice issues.

In any event, the parties will be guided by the following key principles:

- Professional development will be recognized;
- All Registered Practical Nurses will have access to professional development opportunities;
- Responsibilities for professional development will be shared between the individual and the Hospital;
- Employee needs, Hospital needs and department/program requirements will be considered.

### 9.14 – PROFESSIONAL RESPONSIBILITY, PATIENT CARE, WORKLOADS & STAFFING

(The following clause is applicable to Regulated Health Professionals only)

- (a) The parties agree that optimal patient care is, and safe working conditions are, enhanced if concerns relating to professional responsibility, patient care, workloads and staffing issues are resolved in a timely and effective manner with communications between the parties being:
  - (i) professional;
  - (ii) courteous;
  - (iii) collegial;
  - (iv) respectful; and
  - (v) focused on resolving the issue, not on the individuals.
- (b) In the event that the Hospital assigns a number of patients or a workload to an individual Regulated Health Professional (RHP) or group of RHPs such that they have cause to believe that they are being asked to perform more work than is consistent with proper patient care, they shall:
  - i. At the time the workload issue occurs, discuss the issue within the unit/program to develop strategies to meet patient care needs using current resources.

- ii. If necessary, using established lines of communication as identified by the hospital, seek immediate assistance from an individual(s) (who could be within the bargaining unit) who has responsibility for timely resolution of workload issues.
  - iii. Failing resolution of the workload issue at the time of occurrence or if the issue is ongoing the RHP(s) will discuss the issue with their Manager or designate on the next day that the Manager (or designate) and the RHP are both working or within five (5) calendar days whichever is sooner.
- (c) Upon receipt of a response from the supervisor within five (5) working days, if the employee or group of employees in (b) above are not satisfied, the employee or group of employees may, within forty-eight (48) hours, submit a workload complaint form (attached at appendix A) to the Chief Nursing Officer or equivalent in the case of other RHPs, with a copy to the Union. A meeting shall be held within thirty (30) days of a request from the employee or group of employees, who may be accompanied to this meeting by a Union representative. The Chief Nursing Officer or equivalent, will respond in writing to the employee, or group of employees, with a copy to the Union if applicable, within fifteen (15) days.
- (d) Upon receipt of a written response from the Chief Nursing Officer or equivalent, if the employee or group of employees in (c) above are not satisfied, the employee or group of employees, who may be accompanied by their Union Representative, may, within forty-eight (48) hours, request a meeting with the Chief Executive Officer (or designate) and such meeting shall be held within thirty (30) days. The Chief Executive Officer (or designate) will respond in writing to the employee, or group of employees, within fifteen (15) days of the meeting, with a copy to the Union if applicable.
- (e) It is agreed and understood that an employee or group of employees may in exceptional and urgent cases request an immediate meeting with the Chief Nursing Officer or equivalent who will make every reasonable effort to accommodate the request. The timelines provided for in (d) above will apply failing resolution at this meeting.
- (f) Only the timelines set out above are subject to Article 7 – Grievance and Arbitration Process.
- (g) The Hospital will provide access on the hospital intranet, whereby members will have the ability to access a digital version of the Workload Review Form.

#### 9.15 – WORK-LOADS

- (a) The parties agree that patient care is enhanced if concerns relating to professional practice, patient acuity, fluctuating Work-Loads and fluctuating staffing are resolved in a timely and effective manner.
- (b) Employees are encouraged to raise their concerns with the immediate supervisor within forty-eight (48) hours. In the event that within ten (10) calendar days, the workload concern is not resolved to the employee's satisfaction, the employee, or group of employees, may, within forty-eight (48) hours, submit their concerns in writing (with a copy to their immediate supervisor) to either the Joint Health and Safety Committee (as constituted under the collective agreement's local appendix) or the Labour Management Committee (as

constituted under Article 6.02) through their union representative using the template workload complaint form attached at appendix A. This form may be modified by the mutual agreement of the local parties.

## **ARTICLE 10 – CONTRACTING OUT**

### **10.01 – CONTRACTING OUT**

The Hospital shall not contract out any work usually performed by members of the bargaining unit if, as a result of such contracting out, a layoff of any employees other than casual part-time employees results from such contracting out.

### **10.02 – CONTRACTING OUT**

Notwithstanding the foregoing, the hospital may contract out work usually performed by members of the bargaining unit without such contracting-out constituting a breach of this provision if the hospital provides in its commercial arrangement contracting out the work that the contractor to whom the work is being contracted, and any subsequent such contractor, agrees:

- (1) to employ the employees thus displaced from the hospital; and
- (2) in doing so to stand, with respect to that work, in the place of the hospital for the purposes of the hospital's collective agreement with the Union, and to execute into an agreement with the Union to that effect.

In order to ensure compliance with this provision, the hospital agrees that it will withdraw the work from any contractor who has failed to meet the aforesaid terms of the contracting-out arrangement.

### **10.03 – CONTRACTING IN**

Further to Article 9.08(A)(d)(i)(1) the parties agree that the Redeployment Committee will immediately undertake a review of any existing sub-contract work which would otherwise be bargaining unit work and which may be subject to expiry and open for renegotiation within six (6) months with a view to assessing the practicality and cost-effectiveness of having such work performed within the Hospital by members of the bargaining unit.

## **ARTICLE 11 – WORK OF THE BARGAINING UNIT**

### **11.01 – WORK OF THE BARGAINING UNIT**

Employees not covered by the terms of this Agreement will not perform duties normally assigned to those employees who are covered by this Agreement, except for the purposes of instruction, experimentation, or in emergencies when regular employees are not readily available.

### **11.02 – VOLUNTEERS**

The use of volunteers to perform bargaining unit work, as covered by this agreement, shall not be expanded beyond the extent of existing practice as of June 1, 1986.

The Hospital shall submit to the Union, at three (3) month intervals, the number of volunteers for the current month and the number of hours worked and the duties performed.

## **ARTICLE 12 – LEAVES OF ABSENCE**

### **12.01 – PERSONAL LEAVE**

Written request for a personal leave of absence without pay will be considered on an individual basis by the Hospital. Such requests are to be submitted to the employee's immediate supervisor at least four (4) weeks in advance, unless not reasonably possible to give such notice, and a written reply will be given within fourteen (14) days except in cases of emergency in which case a reply will be given as soon as possible. Employees needing personal leave days for appointments with medical practitioners may utilize the personal leave language. Such leave shall not be unreasonably withheld.

### **12.02 – UNION BUSINESS**

- (a) The Hospital shall grant leave of absence without pay to employees to attend Union conventions, seminars, education classes and other Union business in connection with the administration of the collective agreement provided that such leave will not interfere with the efficient operation of the Hospital. Such leave will not be unreasonably denied.

In requesting such leave of absence for an employee or employees, the Union must give at least fourteen (14) days clear notice in writing to the Hospital, unless not reasonably possible to give such notice.

The cumulative total leave of absence, the number of employees that may be absent at any one time from any one area, and the number of days of absence shall be negotiated locally and are set out in the Local Provisions Appendix.

During such leave of absence, the employee's salary and applicable benefits shall be maintained by the Hospital on the basis of what their normal regular hours of work would have been, provided that the Union reimburses the Hospital in the amount of such salary and applicable benefits within thirty (30) days of billing.

Notwithstanding the above, time spent by the eight (8) Executive Board members and seven (7) Alternate Executive Board members of the Ontario Council of Hospital Unions to fulfill the duties of the position shall be in addition to leave for Union Business under this clause.

Part-time and casual employees will be given full credit for seniority purposes for regularly scheduled hours missed in accordance with this provision.

- (b) In addition to the above, a part-time or casual employee who is attending to union business when not regularly scheduled to work shall be deemed to be on union leave and the amount of such leave shall not be deducted from the number of days of absence identified above. Such part-time or casual employee will be credited with seniority for the number of hours of such leave to a maximum of thirty-seven and one-half (37.5) hours per week. The Union will advise the Hospital of the number of such hours.

### **12.03(A) - FULL-TIME POSITION(S) WITH THE UNION**

Upon application by the Union, in writing, the Hospital shall grant leave of absence, without pay, to an employee elected or appointed to full-time Union office. It is understood that no more than two

(2) employees in the bargaining unit may be on such leave at the same time. Such leave shall be for a period of one (1) calendar year from the date of appointment unless extended for a further specific period by agreement of the parties. It is understood that no more than one (1) employee will be from the same unit of the Hospital, subject to operational requirements.

Seniority and service shall accrue at seven and one-half (7.5) hours per day to a maximum of thirty-seven and one-half (37.5) hours per week during such leave.

The employee shall notify the Hospital of their intention to return to work at least four (4) weeks prior to the date of such return. The employee shall be returned to their former duties on the same shift in the same department and at the appropriate rate of pay, subject to any changes which would have occurred had the employee not been on leave.

Notwithstanding Article 2.01, the Hospital may fill the vacancy resulting from such leave on a temporary basis.

#### 12.03(B) – LEAVE FOR OCHU PRESIDENT, SECRETARY-TREASURER, AND FIRST VICE-PRESIDENT

Upon application in writing by the Union on behalf of the employee to the Hospital, a leave of absence without pay shall be granted to such employee(s) elected to the positions of the President of the Ontario Council of Hospital Unions, the Secretary-Treasurer of the Ontario Council of Hospital Unions, or the First Vice-President of the Ontario Council of Hospital Unions for period(s) of up to two (2) years. It is understood, however, that during such leave the employee(s) shall be deemed to be an employee of the Union.

During such leave of absence seniority and service shall accrue at seven and one-half (7.5) hours per day to a maximum of thirty-seven and one-half (37.5) hours per week. In addition, during such leave of absence, the employee's salary and applicable benefits shall be maintained by the Hospital on the basis of what their normal regular hours of work would have been, provided that the Union reimburses the Hospital in the amount of such salary and applicable benefits within thirty (30) days of billing.

The employee agrees to notify the Hospital of their intention to return to work at least four (4) weeks prior to the date of such return. The employee shall be returned to their former duties on the same shift in the same department and at the appropriate rate of pay, subject to any changes which would have occurred had the employee not been on leave.

Notwithstanding Article 2.01, the Hospital may fill the vacancy resulting from such leave on a temporary basis.

#### 12.04 – BEREAVEMENT LEAVE

Any employee who notifies the Hospital as soon as possible following bereavement will be granted bereavement leave for four (4) consecutive working days off without loss of regular pay from regularly scheduled hours in conjunction with the death of the spouse, child, or parent.

Any employee who notifies the Hospital as soon as possible following a bereavement will be granted bereavement leave for three (3) consecutive working days off without loss of regular pay from regularly scheduled hours in conjunction with the death of the sister, brother, mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent, grandchild, brother-in-law, sister-in-law or grandparent of spouse.

An employee shall be granted one (1) day bereavement leave without loss of regular pay from regularly scheduled hours to attend the funeral of their aunt or uncle, niece or nephew.

The Hospital, in its discretion, may extend such leave with or without pay. Where an employee does not qualify under the above-noted conditions, the Hospital may, nonetheless, grant a paid bereavement leave. For the purpose of bereavement leave, the relationships specified in the preceding clause are deemed to include a common-law spouse and a partner of the same sex.

## **12.05 – JURY & WITNESS DUTY**

If an employee is required to attend jury selection or serve as a juror in any court of law, or is required to attend as a witness in a court proceeding in which the Crown is a party, or is required by subpoena to attend a court of law or coroner's inquest in connection with a case arising from the employee's duties at the Hospital, the employee shall not lose regular pay because of such attendance provided that the employee:

- (a) notifies the Hospital immediately on the employee's notification that they will be required to attend at court;
- (b) presents proof of service requiring the employee's attendance;
- (c) deposits with the Hospital the full amount of compensation received excluding mileage, travelling and meal allowances and an official receipt thereof.

Where a part-time employee is selected for jury duty, for a period in excess of one (1) week, the employee shall be paid for all hours scheduled and not be expected to attend at work. Upon completion of the process the employee shall be returned to that point on their former schedule that is considered appropriate by the Hospital. It is understood and agreed that the local parties may agree to different scheduling arrangements for the first week of jury and witness duty.

In addition to the foregoing, where a part-time employee is required by subpoena to attend a court of law or coroner's inquest in connection with a case arising from the employee's duties at the Hospital on their regularly scheduled day off, they shall be paid for all hours actually spent at such hearings at their regular straight time hourly rate subject to (a), (b) and (c) above.

## **12.06– PREGNANCY LEAVE**

(The following clause is applicable to part-time employees only)

- (a) Pregnancy leave will be granted in accordance with the provisions of the *Employment Standards Act*, except where amended in this provision. The service requirement for eligibility for pregnancy leave shall be thirteen (13) weeks of continuous service.
- (b) The employee shall give written notification at least two (2) weeks in advance of the date of commencement of such leave and the expected date of return. At such time they shall also furnish the Hospital with the certificate of a legally qualified medical practitioner stating the expected birth date.

- (c) The employee shall reconfirm their intention to return to work on the date originally approved in subsection (b) above by written notification received by the Hospital at least two (2) weeks in advance thereof.
- (d) Effective on confirmation by the Canada Employment Insurance Commission of the appropriateness of the Hospital's Supplementary Unemployment Benefit (SUB) Plan, an employee who is on pregnancy leave as provided under this Agreement who has applied for and is in receipt of Employment Insurance pregnancy benefits pursuant to Section 23 of the *Employment Insurance Act*, shall be paid a supplemental unemployment benefit for a period not exceeding fifteen (15) weeks. The supplement shall be equivalent to the difference between ninety-three percent (93%) of their normal weekly earnings and the sum of their weekly unemployment insurance benefits and any other earnings. Receipt by the Hospital of the employee's unemployment insurance cheque stubs shall constitute proof that they are in receipt of Employment Insurance pregnancy benefits.

The employee's normal weekly earnings shall be determined by multiplying their regular hourly rate on their last day worked prior to the commencement of the leave times their normal weekly hours plus any wage increase or salary increment that they would be entitled to receive if they were not on pregnancy leave.

In addition to the foregoing, the Hospital will pay the employee ninety-three percent (93%) of their normal weekly earnings during the one (1) week period of the leave while waiting to receive Employment Insurance benefits.

The employee does not have any vested right except to receive payments for the covered unemployment period. The plan provides that payment in respect of guaranteed annual remuneration or in respect of deferred remuneration or severance pay benefits are not reduced or increased by payments received under the plan.

- (e) Credits for service and seniority shall accumulate for a period of up to seventeen (17) weeks while an employee is on pregnancy leave on the basis of what the employee's normal regular hours of work would have been.
- (f) The Hospital will continue to pay the percentage in lieu of benefits and its share of pension contributions during the period of pregnancy leave. The Hospital will register those benefits as part of the Supplementary Unemployment Benefit Plan with the Canada Employment Insurance Commission.
- (g) Subject to any changes to the employee's status which would have occurred had they not been on pregnancy leave, the employee shall be reinstated to their former duties, on the same shift in the same department, and at the same rate of pay.

#### 12.07 – PARENTAL LEAVE

(The following clause is applicable to part-time employees only)

- (a) Parental leaves will be granted in accordance with the provisions of the *Employment Standards Act*, except where amended in this provision. The service requirement for eligibility for parental leave shall be thirteen (13) weeks of continuous service.

- (b) An employee, who qualifies for parental leave, other than an adoptive parent, shall give written notification of at least two (2) weeks in advance of the date of the commencement of such leave and the expected date of return.
- (c) For the purposes of this article, parent shall be defined to include a person with whom a child is placed for adoption and a person who is in a relationship of some permanence with a parent of a child and who intends to treat the child as their own.
- (d) An employee who is an adoptive parent shall advise the Hospital as far in advance as possible of having qualified to adopt a child, and shall request the leave of absence, in writing, upon receipt of confirmation of the pending adoption. If, because of late receipt of confirmation of the pending adoption, the employee finds it impossible to request the leave of absence in writing, the request may be made verbally and subsequently verified in writing. An employee shall reconfirm their intention to return to work on the date originally approved in subsection (b) above by written notification received by the Hospital at least two (2) weeks in advance thereof.
- (e) Effective on confirmation by the Canada Employment Insurance Commission of the appropriateness of the Hospital's Supplemental Unemployment Benefit (SUB) Plan, an employee who is on parental leave as provided under this Agreement who has applied for and is in receipt of Employment Insurance parental benefits pursuant to Section 23 of the *Employment Insurance Act*, shall be paid a supplemental unemployment benefit for a period not exceeding eleven (11) weeks. That benefit shall be equivalent to the difference between ninety-three percent (93%) of the employee's normal weekly earnings and the sum of their weekly employment insurance benefits and any other earnings. Receipt by the Hospital of the employee's employment insurance cheque stub will serve as proof that the employee is in receipt of unemployment parental benefits.

Where an employee elects to receive parental leave benefits pursuant to Section 12(3)(b)(ii) of the *Employment Insurance Act*, the amount of any Supplemental Unemployment Benefit payable by the Hospital will be equal to what would have been payable had the employee elected to receive parental leave benefits pursuant to Section 12(3)(b)(i) of the *Employment Insurance Act*.

The employee's normal weekly earnings shall be determined by multiplying the employee's regular hourly rate on their last day worked prior to the commencement of the leave times the employee's normal weekly hours, plus any wage increase or salary increment that the employee would be entitled to if they were not on parental leave.

In addition to the foregoing the Hospital shall pay the employee ninety-three percent (93%) of their normal weekly earnings during the one (1) week period of the leave while waiting to receive Employment Insurance benefits.

The employee does not have any vested right except to receive payments for the covered unemployment period. The plan provides that payment in respect of guaranteed annual remuneration or in respect of deferred remuneration or severance pay benefits are not reduced or increased by payments received under the plan.

- (f) Credits for service and seniority shall accumulate for a period of up to sixty-one (61) weeks after the parental leave began, if the employee also took pregnancy leave, and sixty-three (63) weeks after the parental leave began otherwise, while the employee is on parental leave on the basis of what the employee's normal regular hours of work would have been.

- (g) The Hospital will continue to pay the percentage in lieu of benefits and its share of the pension contribution for a period of up to eleven (11) weeks while the employee is on parental leave. The Hospital will register these benefits with the Unemployment Benefit Plan.
- (h) Subject to any changes to the employee's status which would have occurred had they not been on parental leave, the employee shall be reinstated to their former duties, on the same shift in the same department, and at the same rate of pay.

#### 12.08 – EDUCATION LEAVE

If required by the Hospital, an employee shall be entitled to leave of absence with pay and with full credit for service and seniority and benefits to take courses and to write examinations to upgrade their employment qualifications. Where employees are required by the Hospital to take courses to upgrade or acquire new employment qualifications, the Hospital shall pay the full costs associated with the courses.

Subject to operational requirements, the Hospital will make every reasonable effort to grant requests for necessary changes to an employee's schedule to enable attendance at a recognized up-grading course or seminar related to employment with the Hospital.

Subject to operational requirements, the Hospital will make every reasonable effort to grant requests for an employee to take an educational leave without pay and without loss of seniority of up to twelve (12) months for training related to the employee's employment at the Hospital.

The Hospital will endeavour to schedule mandatory in-service programs during an employee's regular working hours. When an employee is on duty and authorized to attend any in-service program within the Hospital and during their regularly scheduled working hours the employee shall suffer no loss of regular pay. When an employee is required by the Hospital to engage in any learning opportunities outside of their regularly scheduled working hours, the employee shall be paid for all time spent on such learning opportunities at their regular straight time hourly rate of pay.

Where the hospital requires e-learning, it will make reasonable efforts to enable hospital e-learning requirements during an employee's regular working hours. Where an employee is unable to complete required hospital e-learning during regular working hours and is required to complete hospital e-learning outside of their regular working hours, the hospital will identify in advance the time that will be paid at their regular straight time hourly rate of pay.

Part-time employees will be credited with seniority and service for all such hours paid as provided above while engaged in such learning opportunities.

#### 12.09 – PRE-PAID LEAVE PLAN

The Hospital agrees to introduce a pre-paid leave program, funded solely by the employee subject to the following terms and conditions:

- (a) The plan is available to employees wishing to spread four (4) years' salary over a five (5) year period, in accordance with Part LXVIII of the Income Tax Regulations, Section 6801, to enable them to take a one (1) year leave of absence following the four (4) years of salary deferral.

- (b) The employee must make written application to the Hospital at least six (6) months prior to the intended commencement date of the program (i.e. the salary deferral portion), stating the intended purpose of the leave.
- (c) The number of employees that may be absent at any one time shall be determined between the local parties. The year for purposes of the program shall be September 1 of one year to August 31 the following year or such other twelve (12) month period as may be agreed upon by the employee, the local Union and the Hospital.
- (d) Where there are more applications than spaces allotted, seniority shall govern.
- (e) During the four (4) years of salary deferral, 20% of the employee's gross annual earnings will be deducted and held for the employee and will not be accessible to the employee until the year of the leave or upon withdrawal from the plan.
- (f) The manner in which the deferred salary is held shall be at the discretion of the Hospital.
- (g) All deferred salary, plus accrued interest, if any, shall be paid to the employee at the commencement of the leave or in accordance with such other payment schedule as may be agreed upon between the Hospital and the employee.
- (h) All benefits shall be kept whole during the four (4) years of salary deferral. During the year of the leave, seniority will accumulate. Service for the purpose of vacation and salary progression and other benefits will be retained but will not accumulate during the period of leave. The employee shall become responsible for the full payment of premiums for any health and welfare benefits in which the employee is participating. Contributions to the Hospitals of Ontario Pension Plan will be in accordance with the Plan. The employee will not be eligible to participate in the disability income plan during the year of the leave.
- (i) An employee may withdraw from the plan at any time during the deferral portion provided three (3) months notice is given to the Hospital. Deferred salary, plus accrued interest, if any, will be returned to the employee within a reasonable period of time.
- (j) If the employee terminates employment, the deferred salary held by the Hospital plus accrued interest, if any, will be returned to the employee within a reasonable period of time. In case of the employee's death, the funds will be paid to the employee's estate.
- (k) The Hospital will endeavour to find a temporary replacement for the employee as far in advance as practicable. If the Hospital is unable to find a suitable replacement, it may postpone the leave. The Hospital will give the employee as much notice as is reasonably possible. The employee will have the option of remaining in the Plan and rearranging the leave at a mutually agreeable time or of withdrawing from the Plan and having the deferred salary, plus accrued interest, if any, paid out to the employee within a reasonable period of time.
- (l) The employee will be reinstated to their former position unless the position has been discontinued, in which case the employee shall be given a comparable job.
- (m) Final approval for entry into the pre-paid leave program will be subject to the employee entering into a formal agreement with the Hospital in order to authorize the Hospital to make the appropriate deductions from the employee's pay. Such agreement will include:

- (i) A statement that the employee is entering the pre-paid leave program in accordance with this Article of the collective agreement.
- (ii) The period of salary deferral and the period for which the leave is requested.
- (iii) The manner in which the deferred salary is to be held.

The letter of application from the employee to the Hospital to enter the prepaid leave program will be appended to and form part of the written agreement.

#### 12.10 – MEDICAL CARE AND EMERGENCY LEAVE

An employee is entitled to a leave of absence without pay because of any of the following:

1. A personal illness, injury or medical emergency.
2. The death, illness, injury or medical emergency of an individual described in this Article.
3. An urgent matter that concerns an individual described in this Article.

For the purposes of this Article, the individuals referred to in this Article are:

- the employee's spouse
- a parent, step-parent or foster parent of the employee or the employee's spouse
- a child, step-child or foster child of the employee or the employee's spouse
- a grandparent, step-grandparent, grandchild or step-grandchild of the employee or of the employee's spouse
- the spouse of a child of the employee
- the employee's brother or sister
- a relative of the employee who is dependent on the employee for care or assistance.

An employee who wishes to take leave under this section shall advise their Hospital that they will be doing so. If the employee must begin the leave before advising the Hospital, the employee shall advise the Hospital of the leave as soon as possible after beginning it.

An employee is entitled to take a total of 10 days' leave under this section each year. If an employee takes any part of a day as leave under this section, the Hospital may deem the employee to have taken one day's leave on that day for the purposes of this Article. The Hospital may require an employee who takes leave under this section to provide evidence reasonable in the circumstances that the employee is entitled to the leave.

Upon the conclusion of an employee's leave under this Article, the Hospital shall reinstate the employee to the position the employee most recently held with the Hospital, if it still exists, or to a comparable position, if it does not.

#### 12.11 – COMPASSIONATE CARE LEAVE

- (a) Compassionate care leave will be granted to an employee for up to eight (8) weeks within a twenty-six (26) week period to provide care or support to a family member who is at risk of dying within that 26-week period in accordance with section 49.1 of the *Employment Standards Act, 2000*.
- (b) An employee who is on compassionate care leave shall continue to accumulate seniority and service.

- (c) Subject to any changes to the employee's status which would have occurred had they not been on compassionate care leave, the employee shall be reinstated to their former duties, on the same shift in the same department, and at the same rate of pay.
- (d) The employee and the Hospital will continue to pay their respective shares of the benefits and pension premiums.

## **ARTICLE 13 – SICK LEAVE, INJURY AND DISABILITY**

### **13.01 – INJURY PAY**

If an employee is injured on the job and their supervisor excuses them from further duty for the balance of their shift, the employee's regular rate of pay shall continue for the balance of that shift and there shall be no deduction from sick leave or other credits.

## **ARTICLE 14 – HOURS OF WORK**

### **14.01 – DAILY & WEEKLY HOURS OF WORK**

The normal daily hours of work shall be seven and one-half (7.5) hours exclusive of a thirty (30) minute unpaid meal break.

Notwithstanding the above, the parties agree that the employer shall not be prevented from maintaining its current practice with respect to shifts of a shorter duration. The parties agree to meet within sixty (60) days of ratification to identify the current practice.

### **14.02 – REST PERIODS**

(This clause is applicable to part-time employees only)

Part-time employees shall be entitled to a paid rest period of fifteen (15) minutes for each three and three-quarter (3 3/4) hours of work.

### **14.03 – ADDITIONAL REST PERIODS**

When an employee performs authorized overtime work of at least three (3) hours duration, the Hospital will schedule a rest period of fifteen (15) minutes duration.

### **14.04 – EXTENDED TOURS**

Extended tour provisions may be negotiated by the parties at the local level.

### **14.05 – JOB SHARING**

- (a) Job sharing is defined as two permanent employees sharing one full-time position. All job sharing arrangements shall be subject to the approval of the Hospital and the agreement of the Union.

- (b) Before any job sharing arrangement is approved, the Hospital and the Union must determine locally:
  - (i) The resulting vacancy or vacancies to be posted in accordance with Article 9.05; and
  - (ii) The terms and conditions governing the introduction and discontinuance of such job sharing arrangements.
- (c) The employees involved in a job sharing arrangement will be classified as regular part-time and will be covered by the provisions of this agreement applicable to part-time employees, except that any full-time employee who enters a job sharing arrangement may continue participation in the group health and welfare benefit programs set out in Article 18.01 provided the employee pays the full amount of the monthly premiums during the job sharing period.

## **ARTICLE 15 – PREMIUM PAYMENT**

### **15.01 – DEFINITION OF REGULAR STRAIGHT TIME RATE OF PAY**

The regular straight time rate of pay is that prescribed in wage schedule of the Collective Agreement.

### **15.02 – DEFINITION OF OVERTIME**

Any work which an employee is required to perform in excess of seven and one-half (7.5) hours daily or seventy-five (75) hours per pay period shall be paid as overtime at the rate of one and one-half (1-1/2) times the regular straight time rate of pay.

Where an averaging of hours over the duration of the scheduling cycle exist, hours worked in excess of the scheduling cycle shall be deemed to be overtime and shall be paid at time and one-half the employee's straight time hourly rate.

Notwithstanding the above, the daily overtime threshold for extended shifts shall be specified in the Local Issues Appendix.

### **15.03 – OVERTIME PREMIUM AND NO PYRAMIDING**

Subject to any superior conditions, the overtime rate shall be time and one-half (1-1/2) the employee's straight-time hourly rate.

Where an employee is required to work additional overtime contiguous to an overtime shift within a twenty-four (24) hour period, the employee will be compensated at the rate of double time their straight time hourly rate for all additional contiguous overtime hours worked.

Overtime premium will not be duplicated nor pyramided nor shall other premiums be duplicated nor pyramided nor shall the same hours worked be counted as part of the normal work week and also as hours for which the overtime premium is paid.

#### 15.04 – TIME OFF IN LIEU OF OVERTIME

Employees who work overtime will not be required to take time off in regular hours to make up for overtime worked.

Time off in lieu may be taken on a mutually agreed upon basis between the employee and the Hospital, such time off will be the equivalent of the premium rate the employee has earned for working overtime. The Hospital shall revert to payment of premium rate if time off is not taken within ninety (90) calendar days of the work week in which the overtime was earned or, with the employee's agreement, within 12 months of that work week.

#### 15.05 – REPORTING PAY

Employees who report for any scheduled shift will be guaranteed at least four (4) hours of work, or if no work is available will be paid at least four (4) hours except when work is not available due to conditions beyond the control of the Hospital. The reporting allowance outlined as herein shall not apply whenever an employee has received prior notice not to report for work. Part-time employees scheduled to work less than seven and one-half (7-1/2) hours per day will receive a pro-rated amount of reporting pay.

#### 15.06 – CALL-BACK

Where employees are called back to work after having completed a regular shift, and prior to the commencement of their next regular shift, they shall receive a minimum of four (4) hours of work or four (4) hours pay at the rate of time and one-half (1-1/2) times their regular hourly earnings. Superior provisions shall remain.

Effective June 13, 2023, where employees are called back to work after having completed a regular shift, and prior to the commencement of their next regular shift, they shall receive a minimum of four (4) hours of work or four (4) hours of pay at the rate of two (2) times their regular hourly earnings. Superior provisions shall remain.

#### 15.07 – STANDBY

An employee who is required to remain available for duty on standby, outside the normal working hours for that particular employee, shall receive standby pay in the amount of \$3.30 per hour for all hours on standby. Effective September 29, 2016, where such standby duty falls on a paid holiday, as set out in the Appendix of Local Provisions, the employee shall receive standby pay in the amount of \$4.90 per hour.

Standby pay shall, however, cease where an employee is called into work under Article 15.06 above and works during the period of standby.

#### 15.08 – TEMPORARY TRANSFER

Where an employee is assigned temporarily to perform the duties and assume the responsibilities of a higher paying position in the bargaining unit, they shall be paid the rate in the higher salary range immediately above their current rate for all hours worked in the higher paying position.

Where a Hospital temporarily assigns an employee to carry out the assigned responsibilities of a classification outside the bargaining unit, the employee shall receive an allowance of \$4.00 for each shift from the time of the assignment.

Effective November 3, 2022, where a Hospital temporarily assigns an employee to carry out the assigned responsibilities of a classification outside the bargaining unit, the employee shall receive an allowance of \$1.00 per hour from the time of the assignment.

#### 15.09 – SHIFT AND WEEKEND PREMIUM

Employees shall be paid a shift premium of one dollar and twenty-six cents (\$1.26) per hour for all hours worked where the majority of their scheduled hours fall between 1500 and 0700 hours.

Effective June 13, 2023, employees shall be paid a shift premium of two dollars and twenty-six cents (\$2.26) per hour for all hours worked where the majority of their scheduled hours fall between 1500 and 0700 hours.

One dollar and twenty-seven cents (\$1.27) per hour will be paid as weekend premium for all hours worked between 2400 hours Friday and 2400 hours Sunday, or such other 48-hour period as may be agreed upon by the local parties.

Effective June 13, 2023, two dollars and seventy-seven cents (\$2.77) per hour will be paid as weekend premium for all hours worked between 2400 hours Friday and 2400 hours Sunday, or such other 48-hour period as may be agreed upon by the local parties.

For clarity, employees will be paid both shift and weekend premiums when working hours eligible for both premiums.

#### 15.10 – CHARGE NURSE PREMIUM

Effective November 3, 2022:

- (a) Whenever a nurse is assigned overall responsibility for patient care on the unit, ward, or area, the nurse shall be paid a premium of two dollars (\$2.00) per hour in addition to their regular salary and applicable premium allowance.
- (b) Before assigning a nurse to be in charge of a unit, the nurse will receive orientation to the role of the charge nurse on that unit. It is understood that such nurse may be assigned to any tour as part of the nurse's orientation program, providing such assignment is in accordance with any scheduling regulations or objectives contained in the Appendix of Local Provisions which forms part of this Collective Agreement.

### **ARTICLE 16 – HOLIDAYS**

#### 16.01– PAYMENT FOR WORKING ON A HOLIDAY

(The following clause is applicable to part-time employees only)

The holidays listed in the part-time local Appendix for the purposes of Article 16.03(b) shall be the same holidays as are listed in the full-time Local Provisions Appendix.

If an employee is required to work on any of the holidays set out in the local Appendix the employee shall be paid at the rate of time and one-half (1-1/2) their regular straight time hourly rate of pay for all hours worked on such holiday.

**16.02 – PAYMENT FOR WORKING OVERTIME ON A HOLIDAY**

Where an employee is required to work authorized overtime in excess of their regularly scheduled hours on a paid holiday, such employee shall receive twice (2x) their regular straight time hourly rate for such authorized overtime.

**ARTICLE 17 – VACATIONS**

**17.01 – VACATION ENTITLEMENT, QUALIFIERS AND CALCULATION OF PAYMENT**

***Any provision related to part-time qualifiers and calculation of payment that existed in the hospital's expiring collective agreement will be continued in Article 17.01(b).***

***Subject to any superior conditions:***

An employee who has completed the following number of continuous hours of service:	But less than the following number of continuous hours of service:	Is entitled to the following percentage of vacation pay, plus the equivalent time off:
Less than 3,450		4%
3,450	8,625	6%
8,625	20,700	8%
20,700	34,500	10%
34,500	48,300	12%
48,300		14%

**Progression on Vacation Schedule (Part-Time)**

Part-time employees, including casual employees, shall accumulate service for the purpose of progression on the vacation scale, on the basis of one year for each 1725 hours worked.

**17.02 – WORK DURING VACATION**

Should an employee who has commenced their scheduled vacation and agrees upon request by the Hospital to return to perform work during the vacation period, the employee shall be paid at the rate of one and one-half (1-1/2) times their basic straight time rate for all hours so worked. To replace the originally scheduled days on which such work was performed, the employee will receive one (1) vacation lieu day off for each day on which they have so worked.

**17.03 – BEREAVEMENT DURING VACATION**

Where an employee's scheduled vacation is interrupted due to a bereavement, the employee shall be entitled to bereavement leave in accordance with Article 12.04.

The portion of the employee's vacation which is deemed to be bereavement leave under the above provisions will not be counted against the employee's vacation credits.

## **ARTICLE 18 – HEALTH & WELFARE**

### **18.01 – BENEFITS FOR PART-TIME EMPLOYEES**

A part-time employee shall receive in lieu of all fringe benefits (being those benefits to an employee, paid in whole or part by the Hospital, as part of direct compensation or otherwise, including holiday pay, save and except salary, vacation pay, standby pay, call back pay, reporting pay, responsibility allowance, jury and witness duty, bereavement pay, and maternity supplemental unemployment benefits) an amount equal to 14% of their regular straight time hourly rate for all straight time hours paid.

### **18.02 – UNION EDUCATION**

If the local union indicates to the Hospital that its members have approved a special assessment for union education in accordance with the CUPE constitution and local union by laws, the Hospital agrees to deduct this assessment.

Such assessment will be paid on a quarterly basis into a trust fund established and administered by OCHU/CUPE for this purpose.

## **ARTICLE 19 – HEALTH & SAFETY**

### **19.01 – PROTECTIVE FOOTWEAR**

Effective January 1, 2014, and on that date for each subsequent calendar year, the Hospital will provide \$120 per calendar year to each full-time and each regular part-time employee who is required by the Hospital to wear safety footwear during the course of their duties. The employees who will be required to wear safety footwear will be negotiated locally and set out in the Local Provisions Appendix.

Note: The existing central language designating the classifications of employees which are deemed to require appropriate safety footwear shall be transferred to the local appendix.

### **19.02 – INFECTIOUS DISEASES**

- a) The employer shall take every precaution reasonable in the circumstances for the protection of a worker. [*Occupational Health and Safety Act*, s. 25 (2) (h)].
- b) When faced with occupational health and safety decisions, the Hospital will not await full scientific or absolute certainty before taking reasonable action(s) including but not limited to, providing readily accessible personal protective equipment that reduces risk and protects employees.
- c) Hospitals will ensure adequate stocks of the N95 respirator or equivalent or better (or such other personal protective equipment as the parties may in writing agree) to be made available to bargaining unit members at short notice in the event that there are reasonable indications of the emergence of a pandemic, epidemic or outbreak of an infectious disease in the community served by the Hospital.

- d) A worker who is required by their employer to wear or use any protective clothing, equipment or device shall be instructed and trained in its care, use and limitations before wearing or using it for the first time and at regular intervals thereafter and the worker shall participate in such instruction and training. Personal protective equipment that is to be provided, worn or used shall, be properly used and maintained, be a proper fit, be inspected for damage or deterioration and be stored in a convenient, clean and sanitary location when not in use. [O. Reg. 67/93 – Health Care].
- e) The Hospital agrees to cooperate in providing necessary information and management support to enable the Joint Health and Safety Committee to fulfil its functions. In addition, the Hospital will provide the Committee with access to the Hospital’s pandemic plan and related risk assessment, all accident reports, health and safety records, notifications of exposure to an infectious or contagious disease, and any other pertinent information in its possession. The Hospital will also provide the Committee with reports on fit testing compliance annually and personal protective equipment inventory on a quarterly basis. The Committee shall respect the confidentiality of the information.
- f) Pregnant employees may request to be temporarily transferred from their current duties if, in the professional opinion of the employee's physician a risk to the pregnancy and/or unborn child is identified. If a temporary transfer is not feasible, the employee will be granted an unpaid leave of absence before the commencement of the pregnancy leave.

### 19.03 – VIOLENCE

The hospital and the union agree that they have a shared goal of a workplace free of violence.

“Workplace violence” means,

- (a) The exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker,
- (b) An attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker, and
- (c) A statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to the worker.

The local parties will determine appropriate solutions to promote health and safety in workplaces, which shall include the adoption of the following mandatory provisions:

1. The Hospital will ensure that employees are properly advised in advance if they are required to interact with patients who the Hospital is aware have exhibited violent behaviour previously or who could otherwise reasonably be considered to pose a danger of exhibiting violent behaviour.
2. The Hospital shall give due consideration to whether, in light of all the relevant circumstances, it is appropriate that an employee interacts with a known violent patient alone.
3. The Hospital shall notify the Union without undue delay of any incident of an employee being subjected to violence at the workplace. The timing and nature of such notification may be negotiated locally by the parties.

In addition, the local parties will consider addressing the inclusion of the following additional remedies:

- (i) Electronic and visual flagging;
- (v) Properly trained security who can de-escalate, immobilize and detain / restrain;
- (vi) Appropriate personal alarms;
- (vii) Organizational wide risk assessments assessing environment, risk from patient population, acuity, communication, and work flow and individual client assessments; and
- (viii) Training in de-escalation, “break-free” and safe immobilization / detainment / restraint.

#### 19.04 – INFLUENZA VACCINATION

The parties agree that influenza vaccinations may be beneficial for patients and employees. Upon a recommendation pertaining to a facility or a specifically designated area(s) thereof from the Medical Officer of Health or in compliance with applicable provincial legislation, the following rules will apply:

- (a) Hospitals recognize that employees have the right to refuse any recommended or required vaccination.
- (b) If an employee refuses to take the recommended or required vaccine required under this provision, they will be reassigned during the outbreak period, unless reassignment is not possible, in which case they will be placed on unpaid leave. If an employee is placed on unpaid leave, they can use banked lieu time or vacation credits in order to keep their pay whole. It is further agreed that any such reassignment will not adversely impact the scheduled hours of other employees.
- (c) If an employee refuses to take the recommended or required vaccine because it is medically contra-indicated, and where a medical certificate is provided to this effect, they will be reassigned during the outbreak period, unless reassignment is not possible, in which case the employee will be placed on paid leave. It is further agreed that any such reassignment will not adversely impact the scheduled hours of other employees.
- (d) If an employee gets sick as a result of the vaccination, and applies for WSIB, the Hospital will not oppose the claim.
- (e) If the full cost of such medication is not covered by some other source, the Hospital will pay the full or incremental cost for the vaccine and will endeavour to offer vaccinations during an employee’s working hours. In addition, employees will be provided with information, including risks and side effects, regarding the vaccine.
- (f) This article shall be interpreted in a manner consistent with the *Ontario Human Rights Code*.

## **ARTICLE 20 – COMPENSATION**

### **20.01(A) – JOB CLASSIFICATION**

When a new classification (which is covered by the terms of this collective agreement) is established by the Hospital, the Hospital shall determine the rate of pay for such new classification and notify the local Union of the same. If the local Union challenges the rate, it shall have the right to request a meeting with the Hospital to endeavour to negotiate a mutually satisfactory rate. Such request will be made within ten (10) days after the receipt of notice from the Hospital of such new occupational classification and rate. Any change mutually agreed to resulting from such meeting shall be retroactive to the date that notice of the new rate was given by the Hospital. If the parties are unable to agree, the dispute concerning the new rate may be submitted to arbitration as provided in the Agreement within fifteen (15) days of such meeting. The decision of the Board of Arbitration (or Arbitrator as the case may be) shall be based on the relationship established by comparison with the rates for other classifications in the bargaining unit having regard to the requirements of such classification.

When the Hospital makes a substantial change in the job content of an existing classification which in reality causes such classification to become a new classification, the Hospital agrees to meet with the Union if requested to permit the Union to make representation with respect to the appropriate rate of pay.

If the matter is not resolved following the meeting with the Union the matter may be referred to arbitration as provided in the agreement within fifteen (15) days of such meeting. The decision of the Board of Arbitration (or Arbitrator as the case may be) shall be based on the relationship established by comparison with the rates for other classifications in the bargaining unit having regard to the requirements of such classifications.

The parties further agree that any change mutually agreed to or awarded as a result of arbitration shall be retroactive only to the date that the Union raised the issue with the Hospital.

Notwithstanding the foregoing, if as a result of compensable illness or injury covered by WSIB, an employee is unable to carry out the regular functions of their position, the Hospital may, subject to its operational requirements, establish a special classification and salary in an endeavour to provide the employee with an opportunity of continued employment. This provision shall not be construed as a guarantee that such special classification(s) will be made available or continued.

### **20.01(B) – JOB DESCRIPTIONS**

A copy of the current job description for a bargaining unit position shall be made available to the Union upon request. When a new classification which is covered by terms of this collective agreement is created, a copy of the job description shall be forwarded to the Union at the time that the Hospital notifies the local Union of the rate of pay pursuant to article 20.01(a) above.

### **20.02 – ASSIGNMENT OF DUTIES FROM ANOTHER CLASSIFICATION**

Where the Hospital revises the job content of an existing classification in such a manner that duties of another classification are assigned to it, the following shall apply:

- (a) An employee who occupies a position which is revised in accordance with this article, and who is physically incapable of performing the revised position, will not be required to

perform those additional duties which exceed the employee's physical capabilities provided the employee's physician provides documentation to the Hospital of such limitation.

- (b) In the event an employee presently occupying a position which is revised in accordance with this article requires additional training to perform duties of the revised position the employee shall be entitled to a period of training, with due consideration being given to the employee's age and previous educational background, during which they may perfect or acquire the skills necessitated by the new method of operation. The employer will assume the cost of tuition and travel. There shall be no reduction in wage or salary rates during the training period of any such employee. Training shall be given during the hours of work whenever possible and may extend for up to six months.

#### 20.03 – PROMOTION TO A HIGHER CLASSIFICATION

An employee who is promoted to a higher rated classification within the bargaining unit will be placed in the range of the higher rated classification so that they shall receive no less an increase in wage rate than the equivalent of one step in the wage rate of their previous classification (provided that they do not exceed the wage rate of the classification to which they have been promoted).

#### 20.04 – WAGES AND CLASSIFICATION PREMIUMS

Provisions under these headings shall remain unchanged and are repeated as 20.04, except to the extent that the Wage Schedule referred to in the hospital's expiring collective agreement shall be adjusted and retroactivity shall be paid in accordance with the Implementation Agreement signed.

#### 20.05 – PROGRESSION ON THE WAGE GRID

(The following clause is applicable to part-time employees only)

Effective October 10, 1986 part-time employees, including casual employees, shall accumulate service for the purpose of progression on the wage grid, on the basis of one year for each 1725 hours worked.

Notwithstanding the above, employees hired prior to October 10, 1986 will be credited with the service they held for the purpose of progression on the wage grid under the Agreement expiring September 28, 1985 and will thereafter accumulate service in accordance with this Article.

### **ARTICLE 21 – FISCAL ADVISORY COMMITTEE**

Recognizing the value of Union input on behalf of employees, the parties agree to the following:

- (a) The Union's representative(s) will be included in the consultation and planning process from the early phases of the budget planning process, through representation on the Fiscal Advisory Committee or equivalent committee to its final stages of completion, to assist the Hospital in minimizing layoffs or job loss, and in developing labour adjustment strategies where necessary, and in otherwise minimizing adverse effects on CUPE-represented employees through program or service restructuring.
- (b) Where the Hospital experiences unforeseen circumstances such that will necessitate changes to its budgetary plans which have been approved by the Ministry of Health, or the

Local Health Integration Network, the Hospital agrees that revisions to the budget will be carried out in consultation with the Union.

- (c) In furtherance of the foregoing, and, where possible, in advance of any scheduled FAC or equivalent committee meeting, the Hospital agrees to provide to the Union in a timely way any financial and staffing information pertinent to its budget, or to any other re-structuring plan that would affect the Union's members.
- (d) It is understood that employee time spent at FAC or equivalent committee meetings with the employer in pursuance of the above shall be deemed to be work time for which the employee shall be paid by the Hospital at their regular or premium rate as may be applicable.

## **ARTICLE 22 – APPRENTICESHIP COMMITTEE**

The central parties agree that within sixty (60) days of the commencement of this agreement, a joint local committee consisting of up to three representatives each will be formed to discuss the feasibility of establishing an apprenticeship Program (s). If such a program is deemed feasible, the local parties will determine the terms and conditions of such program(s).

The joint local committee will seek the availability of any federal or provincial funds to cover the costs of such programs.

## **ARTICLE 23 – DURATION**

### **23.01 – TERM**

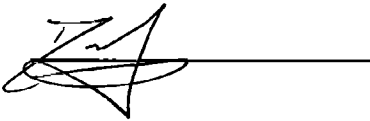
This agreement shall be binding and continue in effect and shall continue from year to year unless either party gives written notice to the other party of its desire to bargain for amendments within ninety (90) days prior to the termination date of September 28, 2023. Upon receipt of such notice by one party or the other, both parties will meet thereafter for the purpose of bargaining.

### **23.02 – CENTRAL BARGAINING**

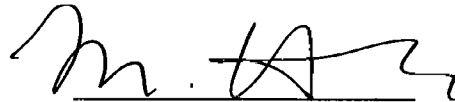
Notwithstanding the foregoing provisions, in the event the parties to this Agreement agree to negotiate for its renewal through the process of central bargaining, either party to this Agreement may give notice to the other party of its desire to bargain for amendments on local matters proposed for incorporation in the renewal of this Agreement and negotiations on local matters shall take place during the period from 120 to 60 days prior to the termination date of this Agreement. Negotiations on central matters shall take place during the period commencing forty-five days prior to the termination date of this Agreement.

It is understood and agreed that "local matters" means, those matters which have been determined by mutual agreement between the central negotiating committees respectively representing each of the parties to this Agreement as being subjects for local bargaining directly between the parties to this Agreement. It is also agreed that local bargaining shall be subject to such procedures that may be determined by mutual agreements between the central negotiating committees referred to above. For such purposes, it is further understood that the central negotiating committees will meet during the sixth month prior to the month of termination of this Agreement to convey the intentions of their principals as to possible participation in central negotiations, if any, and the conditions for such central bargaining.

**FOR THE HOSPITALS**



**FOR THE UNION**



*Sharon Reicher*

*Paul & Vm  
John Jackson*

*Aislin Keely*

*Seena Hollingsworth*

*John Cook*

*Paul*

*Andrew*

*René B.*

**LETTER OF UNDERSTANDING**

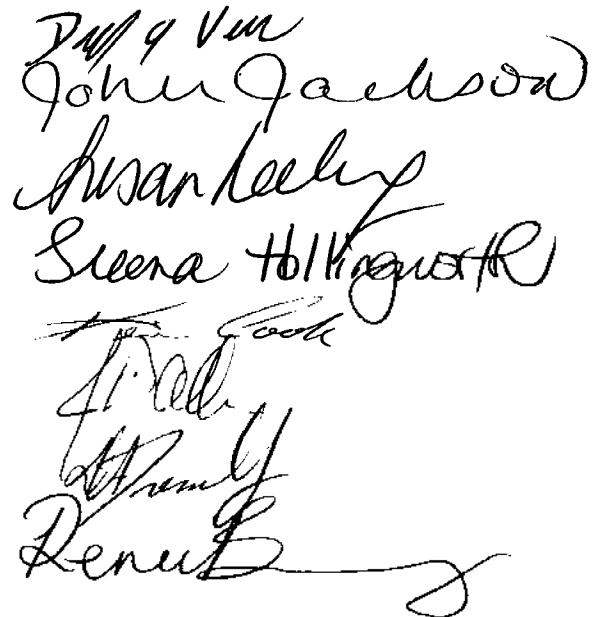

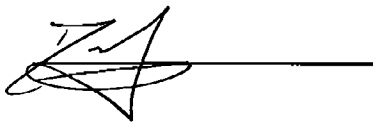
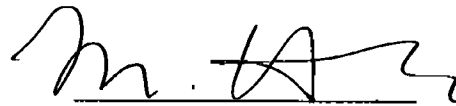
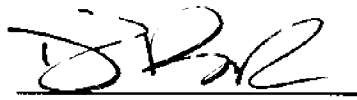
**Regarding the introduction of HOODIP to Hospitals with Accumulating Sick Leave Plans**

Participating CUPE locals and Hospitals agree to meet to discuss the merits of introducing HOODIP to their CUPE bargaining units.

It is understood that such meetings will occur within 6 months following the date of ratification of the Memorandum of Settlement.

**FOR THE HOSPITALS**

**FOR THE COMBINED LOCAL UNION**



Sharon Reckert  
Paul & Vm  
John Jackson  
Susan Kelly  
Seena Hollingsworth  
The Cook  
D. Bell  
Anthony  
Dennis

**LETTER OF UNDERSTANDING**

**RE: HOODIP**

CUPE and the Participating Hospitals agree to establish a provincial working group consisting of up to three representatives each, to investigate sick leave utilization, discuss changes to HOODIP and individual Hospital participation in the Plan.

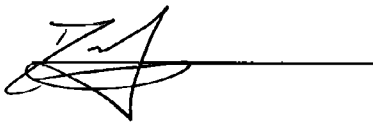
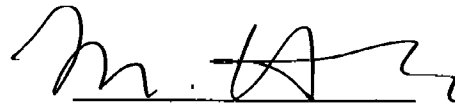
The working group will have access to expertise and resources as appropriate. The working group will commence meeting within 3 months following the date of the ratification of the settlement. The committee may explore the feasibility of implementing pilot project(s) to determine the effectiveness of any changes to the current sick leave plan. Any pilot project will be without prejudice.

CUPE members will be granted such time off as is required to attend joint meetings of the working group. The time spent by the CUPE members to attend joint meetings of the working group will be deemed time worked and CUPE members will be compensated at their regular straight time hourly rate.

The working group will arrange its activities in order to endeavour to arrive at joint recommendations for the central parties by March 31, 2024.

**FOR THE HOSPITALS**

**FOR THE COMBINED LOCAL UNION**



Sharon Reibel

Paul & Viv  
John Jackson

Aislinn Kelly

Seena Hollingsworth

John Cook

Tim Allen

Andrew

Denise

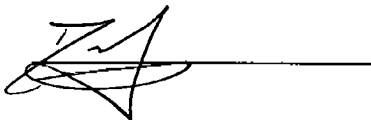
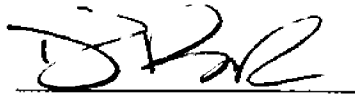
**LETTER OF UNDERSTANDING**

**Re: Voluntary Part-time Benefits**

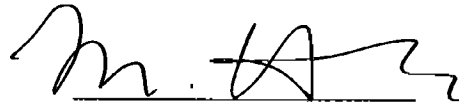
If the local parties agree, the Hospital will provide part-time employees with the option of voluntary participation in any and all of the group health and welfare benefit programs set out in Article 18.01. It is understood and agreed that the part-time employees would pay the Employer the full amount of the monthly premiums, in advance.

NOTE: Part-time voluntary benefits are not arbitrable in local negotiations.

**FOR THE HOSPITALS**



**FOR THE COMBINED LOCAL UNION**



Sharon Riches

Duff & Van  
John Jackson

Aislin Keely

Seena Holmgren

~~Frank Cook~~

Frank

Frank

René B

**LETTER OF UNDERSTANDING**

**RE: RPN Rates**

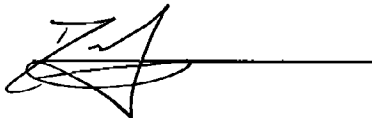
CUPE and the Participating Hospitals agree to establish a provincial working group consisting of up to three representatives each, to discuss the issue of RPN rates across the province, and the feasibility of moving towards a provincial or common wage rate.

The working group will have access to expertise and resources as appropriate. The working group will commence meeting sixty (60) days following ratification of the collective agreement.

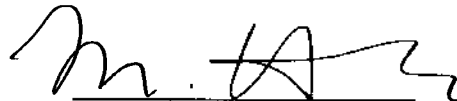
CUPE members will be granted such time off as is required to attend joint meetings of the working group. The time spent by the CUPE members to attend joint meetings of the working group will be deemed time worked and CUPE members will be compensated at their regular straight time hourly rate.

The working group will arrange its activities in order to endeavour to arrive at joint recommendations for the central parties four (4) months prior to the expiry of the collective agreement.

**FOR THE HOSPITALS**



**FOR THE COMBINED LOCAL UNION**



*Sharon Riches*

*Paul & Van  
John Jackson*

*Aislinn Kelly*

*Seena Holmquist*

*Tom Cook*

*Timothy*

*Anthony*

*René B...*

**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

**Memorandum of Agreement**

**Between:**

**The Participating Hospitals/ OHA**

**- and -**

**The Ontario Council of Hospital Unions/ CUPE**

Whereas the current collective agreement makes reference to the Blue Cross Plans in effect as of September 28, 1993;

And Whereas the semi-private, extended health care and dental benefits are now being provided by various carriers at the different hospitals;

And Whereas the Participating Hospitals ("the Hospitals") and the Ontario Council of Hospital Unions/CUPE ("the Union") wish to ensure that the collective agreement entitlements to semi-private, extended health care and dental benefits are comparable;

And Whereas the Hospitals and the Union are desirous of considering whether, without reducing the level of benefits provided at each individual participating hospital, savings can be achieved in the provision of semi-private, extended health care and dental benefits;

And Whereas the Hospitals and the Union wish to ensure that eligible employees receive comprehensive and accurate information about their coverage and entitlements;

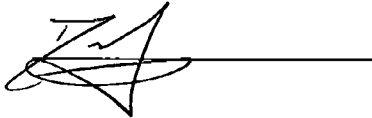
And Whereas the Hospitals and the Union recognize the importance of working collaboratively to achieve the objectives outlined above, it is agreed as follows:

1. Within thirty days of the ratification by the Hospitals and the Union of the collective agreement, a provincial Joint Benefits Committee ("the Committee") will be established.
2. Both the Hospitals and the Union will nominate three members of the Committee and appoint co-chairs. The Committee will meet and mutually select a third party facilitator. Failing to do so, William Kaplan will appoint the facilitator.
3. The Hospitals and the Union will be responsible for their own expenses, but they will share equally in the fees of the expenses of the facilitator.
4. The Committee will meet monthly or as otherwise agreed by the parties or directed by the facilitator.
5. The Committee will immediately request from all participating hospitals a copy of their current benefit plan master policies as they pertain exclusively to CUPE and booklets to be provided within 90 days of the request.
6. The Committee will review those plans and determine what, if any, variations exist among the plans.
7. The Committee will also consider whether, without reducing the level of benefits provided at each individual participating hospital, there are cost saving mechanisms available to the parties.
8. The Committee may retain expert assistance, the cost of which shall be borne equally by the Hospitals and the Union. Should the Hospitals and the Union not agree on retaining expert assistance, the decision of the facilitator shall be binding.
9. The Committee shall complete its work and prepare a final report within eighteen months, unless the parties agree otherwise. The parties agree that this memorandum of agreement and the report of the Committee shall not be introduced or relied upon by either party in any proceedings

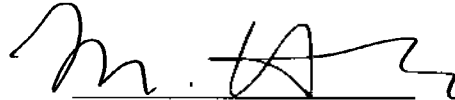
**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

whatsoever. However, it is agreed and understood that the data collected may be relied upon by either party for any purpose in any proceeding.

**FOR THE HOSPITALS**



**FOR THE COMINED LOCAL UNION**



Sharon Leitch

Paul & Van  
John Jacobson

Arian Keely

Seena Holmgren

Tom Cook

Wally

Arund

Denise

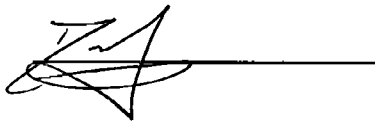
EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.

**LETTER OF UNDERSTANDING**

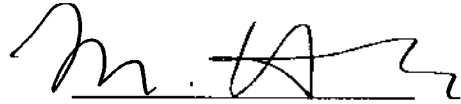
**Re: Grievances Related to Article 3.02**

The parties agree that grievances related to 3.02, if any, will be heard before Arbitrator William Kaplan (with nominees).

**FOR THE HOSPITALS**



**FOR THE COMBINED LOCAL UNION**



*Sharon Reckel*

*Paul & Van  
John Jackson*

*Arian Keely*

*Seena Hollingsworth*

*Tom Cook*

*Paul*

*Anthony*

*Denise*

EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.

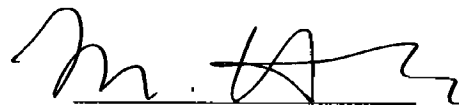
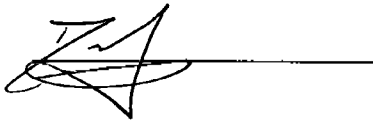
**LETTER OF UNDERSTANDING**

**RE: Workload Complaint Form**

The Central Bargaining Committees for the Ontario Hospital Association and the Canadian Union of Public Employees will establish a joint working group to develop a workload complaint form for Registered Practical Nurses. This committee will meet within thirty (30) days of ratification and complete its work within ninety (90) days of ratification. In the event the parties cannot agree on forms, Arbitrator Kaplan will hold a hearing and make a decision on an expeditious basis. These forms will then be attached to the Collective agreement.

**FOR THE HOSPITALS**

**FOR THE COMINED LOCAL UNION**



Sharon Leckie

Duff & Vu  
John Jackson

Arian Lecky

Seena Hollingsworth

John Gault

John Gault

John Gault

René B...

**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

**LETTER OF UNDERSTANDING**

**RE: Commitment to Equity, Diversity and Inclusivity**

The parties agree that working and caring conditions are at their best when the workplace environment is reflective of the communities they serve and work together to promote equity, diversity, and inclusion within the Hospital.

The parties are committed to promoting a workplace of diversity, inclusion and where everyone feels valued. The parties are committed to a workplace that is inclusive of their diverse communities, including but not limited to Women, Racialized workers, workers with a disability, Black, Indigenous, People of Colour (BIPOC) workers, and Lesbian, Gay, Bisexual, Transgender, Queer and/or Questioning, Intersex, Asexual and/or Agender, Two-Spirited and the countless affirmative ways in which workers choose to self-identify (LGBTQIA2+).


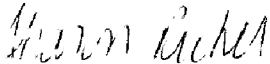

The parties value the contributions of all staff in the hospital and recognize that discriminatory and oppressive acts can negatively impact staff. The parties are committed to making an equitable working environment that is inclusive for all.

To support this commitment, where a committee or other hospital forum does not already exist, the local parties will endeavour in the first year of the collective agreement to establish a committee or other hospital forum. The local parties will coordinate to integrate at least one (1) representative, and one (1) alternate, selected or appointed by the Union from amongst bargaining unit employees to join said committee. The committee will meet on a frequency as determined by the committee. The committee will discuss, research and implement strategies, initiatives, and training programs aimed at promoting equity, diversity, and inclusion in the hospital in effective and meaningful ways.



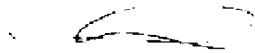
Where a committee or other hospital forum currently exists, at least one (1) representative, and one (1) alternate, from the bargaining unit will be integrated onto the committee or other hospital forum.

DATED this 22<sup>nd</sup> day of September 2021.

ON BEHALF OF  
CANADIAN UNION OF PUBLIC EMPLOYEES:

  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_

ON BEHALF OF  
THE PARTICIPATING HOSPITALS:

  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_

**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

Suzana Hollingworth  
Gmilenis W  
[Signature]  
Diane Lawrence  
Hospice  
Duff  
[Signature]  
Judy Zarr  
[Signature]  
Lillian Gordon

[Signature]  
D. W. [Signature]  
[Signature]  
Phil Caparelli  
Judia Bell  
[Signature]

**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

**APPENDIX OF LOCAL ISSUES**

The following provisions, while not being an exhaustive listing, are appropriate for inclusion in an Appendix of Local Issues. Any local issue provisions which existed in the hospital's expiring collective agreement shall be continued in the Appendix of Local Issues subject to any changes, deletions or additions resulting from the current round of bargaining.

- Management Rights
- Statement of Religious Purpose
- Recognition
- Union Membership
- Dues Deduction and Remittance and Dues Lists
- Constitution of Local Bargaining and Grievance Committees
- Seniority Lists
- Scheduling
- Uniform Allowance
- Sick Leave Administrative Provisions
- Designation of Specific Holidays
- Administrative Provision re Payment of Wages
- Meal Allowances
- Bulletin Boards
- Mileage Allowance
- Communication to Union
- Vacation Administrative Provisions
- Pay Day
- Health & Safety
- Designation of Classifications Required to Wear Safety Footwear

Where a Hospital and a Local Union have reached a settlement of all Local Issues, and the form in which their agreed issues are to appear in the collective agreement is inconsistent with the foregoing agreement of the central parties, then the local parties may re-open negotiations for the sole purpose of ensuring that the form of their collective agreement is consistent with the foregoing. Any difficulties in this regard shall be submitted to the Implementation Committee for resolution.

**IMPLEMENTATION NOTE RE PREEXISTING CLAUSES**

For those headings containing a reference to this note, if the expiring collective agreement applied to part-time employees, the existing provision shall continue, amended as appropriate by any amendment to the full-time provisions.

**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

**APPENDIX A: RPN WORKLOAD COMPLAINT FORM**

*RPNs are required to complete all of SECTION 1 through 6 of this form prior to submitting it to the Chief Nursing Officer.*

**SECTION 1: INFORMATION**

Name(s) Of Employee(s) Reporting:	
Employer:	Unit/Program:
Date of Occurrence:	Time: <input type="checkbox"/> 7.5 Hr Shift <input type="checkbox"/> 11.25Hr Shift
Name of Supervisor:	Date/Time Submitted:

**SECTION 2: DETAILS OF OCCURRENCE**

Provide a concise summary of the occurrence:

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**Check one:**  Is this an isolated incident?  An ongoing problem?

**SECTION 3: INITIAL ATTEMPT AT RESOLUTION**

At the time the workload issue occurred, did you discuss the issue within the unit/area/program?

Yes    What was the outcome of the discussion and what solutions were identified?  

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No    Why not? 

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Failing resolution at the time of occurrence, did you seek assistance from a person designated by the employer as responsible for a timely resolution of workload issues?

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Yes      What was the outcome of the discussion and what solutions were identified?

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No      Why not? \_\_\_\_\_

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Did you discuss the issue with your immediate supervisor (i.e unit manager or designate) within 48 hours of the occurrence?

Yes      What was the outcome of the discussion and what solutions were identified?

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No      Why not? \_\_\_\_\_

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**SECTION 4: WORKING CONDITIONS/CONTRIBUTING FACTORS**

In order to effectively resolve workload issues, please provide details about the working conditions at the time of occurrence by providing the following information:

**# of scheduled staff**     RPN \_\_\_\_     RN \_\_\_\_     Unit Clerk \_\_\_\_     Service Support \_\_\_\_

**# of staff working**     RPN \_\_\_\_     RN \_\_\_\_     Unit Clerk \_\_\_\_     Service Support \_\_\_\_

**# of agency staff**     Yes    How many? \_\_\_\_     No

**# of RPNs on overtime**  Yes    How many? \_\_\_\_     No

**If there was a shortage of staff at the time of the occurrence (including support staff), please check one or all of the following that apply:**

Absence/Emergency leave     Sick call(s)     Vacancies

Please check off the factor(s) you believe contributed to the workload issue:

Change in patient acuity. Provide details: \_\_\_\_\_

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Number of beds. Provide details: \_\_\_\_\_

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\_\_\_\_\_

Number of Admissions. Provide details: \_\_\_\_\_

\_\_\_\_\_

Number of Discharges. Provide details: \_\_\_\_\_

\_\_\_\_\_

Other. Please specify and provide details: \_\_\_\_\_

\_\_\_\_\_

**SECTION 5: RPN RECOMMENDED SOLUTIONS**

Please check-off one or all of the areas you believe should be addressed in order to prevent similar occurrences:

- |   |   |
|---|---|
| <input type="checkbox"/> In-service   | <input type="checkbox"/> Orientation              |
| <input type="checkbox"/> Review nurse/patient ratio                                     | <input type="checkbox"/> Review policy/procedures |
| <input type="checkbox"/> Float/casual pool  | <input type="checkbox"/> Adjust supporting staff  |
| <input type="checkbox"/> Adjust RPN staff   | <input type="checkbox"/> Equipment                |
| <input type="checkbox"/> Replace sick calls, vacations, paid holidays or other absences |   |

Provide details for each checked box above: \_\_\_\_\_

\_\_\_\_\_

Other solutions: \_\_\_\_\_

\_\_\_\_\_

**SECTION 6: EMPLOYEE SIGNATURES**

Signature \_\_\_\_\_ Phone # \_\_\_\_\_

Signature \_\_\_\_\_ Phone # \_\_\_\_\_

Signature \_\_\_\_\_ Phone # \_\_\_\_\_

Date submitted: \_\_\_\_\_

**SECTION 7: MANAGEMENT COMMENTS**

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**Process as outlined in Article 9.15 (b) – (d)**

- Step 1**            *Employee(s) are to raise their concern(s) with immediate supervisor within 48 hours of the occurrence.*
- Step 2:**            *The supervisor is to provide a response within 5 working days.*
- Step 3**            *If the supervisor's response is unsatisfactory, the employee(s) may submit\* a Workload Complaint Form to the CNO within 48 hours, with a copy to the Union. A meeting with the CNO will be held within 30 days. A Union representative may attend this meeting.*
- Step 4**            *The CNO is to provide a response within 15 days. A copy of the response will be sent to the Union, if applicable.*
- Step 5**            *If the CNO's response is unsatisfactory, the employee(s) may request a meeting with the CEO (or designate) within 48 hours. This meeting is to be held within 30 days. A Union representative may attend this meeting.*
- Step 6**            *The CEO (or designate) will provide a written response within 15 days. A copy of the response will be sent to the Union, if applicable.*

\*This form may be submitted via email.

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**APPENDIX B: NON-RPN WORKLOAD COMPLAINT FORM**

N.B. All sections of the form must be completed prior to submission for review.

The parties agree that patient care is enhanced if concerns relating to professional practice, patient acuity, fluctuating Work-Loads and fluctuating staffing are resolved in a timely and effective manner.

**SECTION 1: GENERAL INFORMATION**

Name(s) of Employee(s) Reporting (Please Print)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Unit/Area/Program: \_\_\_\_\_ Site/Location: \_\_\_\_\_

Date of Occurrence \_\_\_\_\_ Time of Occurrence: \_\_\_\_\_

Shift Length:  7.5 hr.  11.25 hr.  Other \_\_\_\_\_

Name of Manager/Supervisor: \_\_\_\_\_ Time Notified: \_\_\_\_\_

Date Form Submitted to Employer: \_\_\_\_\_

**SECTION 2: WORKING CONDITIONS**

In order to effectively resolve workload issues, please provide detail about the working conditions at the time of the occurrence by providing the following information:

Type of Work Being Performed (please describe)

_____
_____
_____
_____
_____

Number of Staff on Duty \_\_\_\_\_ Usual Number of Staff on Duty \_\_\_\_\_

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If there was a shortage of staff at the time of the occurrence, please provide details about why there was a shortage:

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**SECTION 3: DETAILS OF OCCURENCE**

Is this an:            Isolated Incident            Ongoing Problem      (*Check One*)

I/We the undersigned, believe that I was/we were given an assignment that was excessive or inconsistent with quality patient care and/or created an unsafe working environment for the following reasons. (Provide brief description of problem/work assignment below, including what happened, how the assignment was inconsistent with quality patient care and/or created an unsafe work environment, where the incident happened.:

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**SECTION 4: REMEDY**

a) At the time the workload issue occurs, discuss the issue within the unit/area/program to develop strategies to meet patient care needs. Provide details of how it was or was not resolved:

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b) Failing resolution at the time of the occurrence, seek immediate assistance from your immediate supervisor/manager who has responsibility for timely resolution of workload issues. Discussion details:

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c) Was it resolved                      Yes                No   

Provide details of how it was or was not resolved:

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**SECTION 5: RECOMMENDATIONS**

To correct this problem, I/we recommend:

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**SECTION 6: EMPLOYEE SIGNATURE(S)**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

**SECTION 7: MANAGEMENT COMMENTS**

The manager (or designate) will provide a written response to the individual(s) with a copy to the Bargaining Unit President. Please provide any information/comments in response to this report, including any actions taken to remedy the situation, where applicable:

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**PART-TIME  
LOCAL ISSUES**

**COLLECTIVE AGREEMENT**

**between**

**MARKHAM STOUFFVILLE HOSPITAL  
(hereinafter called the "Hospital")**

**and**

**CUPE LOCAL 3651-02  
(hereinafter called the "Union")**

**Expires: September 28, 2023**

**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

**ARTICLE L1 - RECOGNITION**

L1.01 The Hospital recognizes the Canadian Union of Public Employees and its Local 3651, as the bargaining agent of all part-time employees of Oak Valley Health Markham Stouffville Hospital and Reactivation Care Centre save and except coordinators, persons above the rank of coordinator, professional medical staff, registered graduate and undergraduate nurses, paramedical and technical personnel, office and clerical staff, persons regularly employed for more than twenty-four (24) hours per week and students employed during the school vacation year.

**ARTICLE L2 - MANAGEMENT RIGHTS**

L2.01 The Union acknowledges that the management of the Hospital and the direction of working forces shall remain with the Hospital except as limited by the provisions of this Agreement and, without restricting the generality of the foregoing, the Union acknowledges that it is the exclusive function of the Hospital to:

- (a) maintain order, discipline and efficiency;
- (b) hire, assign, discharge, direct, demote, classify, transfer, layoff, recall, discharge or otherwise discipline employees, provided that a claim of discharge or discipline without cause may be the subject of a grievance and dealt with as hereinafter provided;
- (c) Generally, to manage the operations of the hospital;
- (d) make, enforce, and alter from time to time, policies, rules and regulations to be observed by the employees.

**ARTICLE L3 - UNION SECURITY AND DUES**

L3.01 The Hospital will deduct from each employee's pay cheque Union dues, initiation fees and Union contributions imposed in accordance with the statutes and regulations of the Local. The Union will advise the Hospital in writing, one (1) month in advance, of any changes in the amount of deductions and the date on which these changes are to become effective.

L3.02 Union dues will be collected for each pay period and the sum sent to the National Treasurer, no later than the fifteenth (15th) day of the month following the date of deduction, accompanied by a list of names of the employees for whom these amounts have been deducted, and indicating the amount deducted from each employee.

For the purposes of clarity, addresses, telephone numbers and the classification of each employee shall accompany the first list. Thereafter, the Hospital will, to the extent that it maintains or is able to maintain current up-to-date lists of employee address and telephone numbers, provide a revised list on a semi- annual basis (January and July) to the Treasurer of the Local.

L3.03 The Union agrees to indemnify and save the Employer harmless against any claim or liability arising out of the application of this Article.

**ARTICLE L4 - UNION REPRESENTATION**

L4.01 (a) The Hospital acknowledges the right of the Union to appoint or otherwise select fifteen (15) stewards, including a Chief Steward, for both full-time and part-time bargaining units

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- (b) The hospital will recognize any steward, as may be available, for the purpose of representation at any meeting with the Employer.
- (c) The Union will provide the Hospital with a list of the names of the stewards and the committee members of the bargaining unit. The Hospital will not recognize any representatives until the Union has officially advised the Hospital in writing as to the appointment of the representatives.
- (d) The Union will endeavor to have stewards on various shifts and in various areas to ensure appropriate representation available when required.
- (e) The Hospital will recognize a Grievance Committee composed of three (3) employees consisting of the Chief Steward and two (2) other employees, subject to L4.05.

L4.02 The Labour Management Committee referred to in Article 6.02 of the Central Agreement will be comprised of five (5) Union representatives and five (5) Management representatives. A maximum of one (1) employee per group or department will be given leave to attend a Labour Management Committee meeting, however exception will be granted if a Union member of the Committee works in the same group or department as the Local President. At all times, the parties will endeavor to have an equal number of representatives.

The parties agree that one Labour Management Committee may be utilized to fulfill the requirements under full-time, part-time and clerical collective agreements. The parties agree to pre-schedule meetings at least every two months. Nothing in this article limits the ability of the parties to mutually agree to meet more frequently. Additional representation, if any, to fulfill this objective will be determined by agreement of the parties.

The parties agree that one Labour Management Committee may be utilized to fulfil the requirements under both full-time and part-time collective agreements provided this is mutually agreed. Additional representation, if any, to fulfil this objective will be determined by agreement of the parties.

L4.03 The Union and the Employer will recognize a Local Bargaining Committee as referred to in Article 6.03 of the Central Agreement comprised of seven (7) Union and seven (7) Management representatives. At all times, the parties will endeavor to have an equal number of representatives.

L4.04 Requests for leave of absence without pay to perform Union duties shall be submitted in writing by completing a Union Leave Request form. Such form shall be submitted to the employee's department head or designate.

Permission for such leave(s) will be granted to a reasonable number of employees' subject to the provisions outlined below:

- (a) Authorization for such leaves shall be with due regard for the operation of the Hospital and provided that the scheduling changes made necessary by such leaves shall not impose any penalty on the Hospital.
- (b) The working schedule of these employees shall not be modified in any way because of the said leave of absence unless the parties shall otherwise agree. Bargaining unit employees shall be eligible for cumulative leave of up to forty-five (45) days each calendar year.
- (c) Leave for Union business will be paid by the Hospital, who will obtain reimbursement from the Union for the payment of the normal rate plus an additional cost of 14% in lieu of benefits.

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- (e) The Local President or designate will be entitled to three point seven-five (3.75) hours off, every week to conduct local union business. This time off shall be prearranged with the appropriate supervisor, at a mutually agreed time, subject to change in the event that operational requirements require rescheduling.

L.4.05 In some circumstances, as a result of operational requirements, only one employee per classification within a department may be authorized to take time off for Union activities as authorized by this Agreement.

**ARTICLE L5 - SENIORITY LIST**

L5.01 A seniority list shall be established for employees covered by this Agreement who have completed their probationary period. Such list will be posted no later than the pay ending including April 1<sup>st</sup>, August 1<sup>st</sup> and December 1<sup>st</sup> of each year. If no challenge to the list is filed in writing to the Hospital within sixty (60) days of posting the list shall be accepted by all employees as correct for all purposes. Two (2) copies will be supplied to the Chief Steward; a hard copy and an electronic copy by email in a printable format.

**ARTICLE L6 - SCHEDULING**

L6.01 Work schedules will be posted at least two (2) weeks in advance of a six (6) week period with a beginning and an end date.

Regular part-time employees will not have shifts cancelled with less than twenty- four (24) hours' notice. In the event notice is not given within twenty-four (24) hours of the scheduled shift, such employee will be paid the next shift worked at time and one-half (1-1/2) his/her regular rate of pay.

If an employee's shift is cancelled after the schedule is posted, they will have the first opportunity to be called into work in the event that work is available within a twenty-four (24) hour period of being cancelled, providing this shift does not trigger any overtime hours or premium pay.

L6.02 The part-time schedule that is posted shall provide for equitable distribution of hours in order of seniority and qualifications to the extent possible.

Once the schedule is posted additional shifts, not resulting in overtime, will be offered to part-time employees first, followed by casual employees in order of seniority and qualification.

If more than one shift on the same day is available when an employee is called (Day, Evening or Night; 11.25, 7.5 hours or less than 7.5 hours) the employee will be offered the choice.

For call-in shifts, a list of employees will be maintained for each pay period, in order of seniority. Employees will be notified, when a shift becomes available. If a phone call is made the Employer will leave a voice message confirming the call, where voicemail is available.

Shifts will be awarded in order of seniority. Once an employee accepts a call-in shift during a pay period, that employee will not be considered for subsequent call-in shifts until all other employees have been offered a shift.

The above process is repeated for all subsequent call-in shifts during the same pay period.

L6.03 There shall be no less than fourteen (14) hours off between shifts. If an employee has less than fourteen (14) hours off between shifts he shall be paid one and one- half (1-1/2) his regular straight time hourly rate of pay for all hours worked in the period less than fourteen (14) hours, only when such hours worked are at the request of the Hospital.

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This does not apply to extended tours or self-scheduling models; overtime hours worked on the prior shift; an exchange of shifts between employees or shifts that are changed, which are mutually agreed upon between the Hospital and the employee.

L6.04 The employer will not schedule more than six (6) consecutive days of work for any one employee without his or her consent. The seventh (7th) shift, if scheduled, shall be paid at time and one half (1½). In any successive two (2) week period, at least two (2) consecutive days off will be scheduled unless the employee requests otherwise in writing.  
This provision does not apply to Registered Practical Nurses (RPNs) where self- scheduling exists.

L6.05 The Employer will schedule three (3) weekends off in six (6). An employee will receive time and one-half (1-1/2) for all hours worked on a fourth consecutive and subsequent week-ends if scheduled to work a fourth and subsequent weekend until the employee is scheduled a week-end off. If after a schedule is posted, an employee is called in to work a fourth weekend, the employee will receive time and one-half (1-1/2) for all hours worked only on that fourth consecutive week- end. Exceptions are when:

- 1) such weekend has been worked by the employee to satisfy specific days off requested by such employees.
- 2) such employee has requested week-end work or
- 3) such weekend is worked as a result of an exchange of shifts with another employee.

In order to facilitate the above weekends off commitment, article 15.02 will be deemed to apply to an averaging of hours over the pay period and overtime shall apply when an employee is required to work in excess of 75 hours.

This provision does not apply to Registered Practical Nurses (RPNs) where self- scheduling exists or where a DDNN schedule is worked.

L6.06 Shift Exchanges and Requested Leaves

- (a) Shift exchanges and requested leaves may be allowed subject to operational requirements but will not be unreasonably denied.
- (b) Once the schedule is posted, shift exchanges between employees within the same classification and work area may be allowed providing that such a request is submitted in writing to the Employer for approval in advance of exchange.
- (c) Requested leaves will be submitted not less than one week prior to the posting of the schedule where possible. Short notice requests may be considered at the discretion of the Manager.
- (d) The immediate supervisor, or designate, will endeavor to reply to an employee's request for a shift exchange within forty-eight ( 48) hours following receipt of such request. If the request is denied, the employer will provide reasons for such denial.
- (e) It is understood that shift exchanges will not result in premium payments that would not have otherwise been paid by the Hospital were there no exchange.

L6.07 Where offering an additional shift that will result in overtime, such shift(s) will be offered in rotating order of seniority to employees of the same classification within the work area.

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Such assignment of overtime hours will not result in the payment of a scheduling penalty not otherwise payable.

Notwithstanding the above, the employer shall not be required to offer overtime where the assignment of hours can be made without overtime.

**L6.08 Scheduling Christmas and New Year's**

Employees will be scheduled off on either Christmas or New Year's on an alternating yearly basis.

A Christmas/New Year's scheduling request list shall be posted by September 15th and employees shall indicate their preferences by October 1st each year. If an employee requests and the Hospital agrees, the employee may work both holidays. If there are several employees who request to work both, then an equivalent number of employees may be granted both Christmas and New Year's off, if requested by October 1st and seniority shall be the determining factor. The Employer will endeavour to post the Christmas/New Year's schedules by November 15th.

**L6.09 Regular part-time employees must be available to be scheduled to work on the following basis:**

1. fifty-two (52) weeks per year minus their individual vacation entitlement and approved leave of absence;
2. forty-five (45) hours per pay period (six 7.5 hour shifts or four extended shifts or any other combination);
3. available to work Christmas or New Years;
4. fifty percent (50%) of the remaining paid holidays except when the unit does not work paid holidays;
5. three (3) weekends in six (6).

It is understood that the above availability will only be used for the creation of the schedule. Once the schedule is posted employees are deemed to have met their obligation.

**ARTICLE L7 - SICK LEAVE ADMINISTRATION**

- L7.01**
- (a) An employee will personally notify their department head or designate of illness at least two (2) hours in advance of starting their day shift to allow for the arrangement of necessary replacements. An employee working the evening or night shift will provide four (4) hours' notice where it is reasonably possible to do so.
  - (b) An employee shall personally request sick leave from their department head or designate if they become ill during a shift.
  - (c) Employees available to return to work following an absence are required to give adequate notice so that replacements may be cancelled with proper notice. Employees are required to notify their supervisor or designated alternate of their availability to return to work in accordance with the following:
    - No later than 1400 hours of the day immediately preceding the day they are available to return for a scheduled day shift;
    - No later than 1000 hours of the day they are available to return for a scheduled evening shift or night shift.

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- (d) An employee, in all cases of absence due to illness, may be required to submit to Occupational Health and Safety Services a medical certificate signed by a duly qualified Medical Practitioner stating fully the reasons for the absence. Such medical certificate shall be presented to Occupational Health and Safety Services prior to a return to work.

**ARTICLE L8 - VACATION SCHEDULES**

L8.01 Vacation requests shall be submitted in writing by April 1 for the period June 1 through November 30 and by October 1 for the period December 1 through May 31 of every year. Such requests shall be granted on the following basis:

- (a) availability of periods shall be allocated within departments in accordance with seniority;
- (b) vacation requests for the same time period will be granted to a reasonable number of employees with due regard for the operations of the Hospital and the wishes of the employees.
- (c) It is understood that vacation request shall not be unreasonably denied.
- (d) vacation weeks may not always be consecutive; however the Hospital will endeavour to accommodate the wishes of employees with respect to their preferred vacation dates with due regard for the operations of the Hospital;
- (e) blocks of five (5) days shall receive priority over lesser periods;
- (f) it is understood that vacation entitlement is not cumulative from year to year;
- (g) vacations shall be scheduled with adjacent weekends off whenever possible.

L8.02 A vacation schedule shall be posted on May 15 for requests submitted by April 1 for the period June 1 through November 30 and on November 15 for requests submitted by October 1 for the period December 1 through May 31. Thereafter, vacations shall be granted on an order of request basis and as such periods are available; such requests will be written or sent electronically and will be responded to in kind within seven (7) working days of receipt by management. The vacation schedule shall not be changed without the consent of affected employees.

**ARTICLE L9 - HOLIDAYS**

L9.01 The following are recognized as holidays:

- New Year's Day
- Family Day
- Good Friday
- Easter Monday
- Victoria Day
- Canada Day
- Civic Holiday
- Labour Day
- Thanksgiving Day
- Christmas Day
- Boxing Day
- Remembrance Day

L9.02 Holiday Weekend

Where an employee is scheduled off on a weekend contiguous to a holiday, the Hospital will endeavour to schedule such holiday off.

Where an employee is scheduled to work the weekend contiguous to a holiday the Hospital will endeavour to schedule the employee to work the holiday.

**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

An employee who qualifies for a lieu day for having worked on a paid holiday may bank the day to be taken within ninety (90) days following the paid holiday.

This provision does not apply to Registered Practical Nurses (RPNs) who are subject to a master rotation or where self-scheduling exists.

**ARTICLE L10 - MISCELLANEOUS**

- L10.01 The Employer shall provide a centrally located bulletin board which will be placed so that all employees will have access and upon which the Union shall have the right to post notices of meetings and such other notices as may pertain to Union business. All such notices must be signed by a member of the Union Executive and by the Director, Human Resources, or designate prior to posting.
- L10.02 (a) The Hospital shall supply or make available such clothing and equipment as it deems necessary to be worn or used on the job for reasons of appearance, safety or health, or as a protection against undue wear or damage.
- (b) It shall be the responsibility of the Hospital to maintain all equipment issued.
- (c) Where uniforms are provided by the Employer, two (2) uniforms will be provided to newly hired part-time employees. Thereafter, uniforms will be replaced due to excessive wear or damage as necessary, to a maximum of two (2) uniforms per fiscal year, unless otherwise approved by the department manager.
- (d) The Hospital will provide a uniform allowance of one hundred dollars (\$100.00) per calendar year to each part-time Registered Practical Nurse. This only applies in cases where the Hospital requires the Registered Practical Nurse to wear a uniform and the Hospital has not supplied a uniform or scrub suit.
- L10.03 Should an error of less than fifty dollars (\$50.00) occur on a pay cheque, attributable to the Hospital, the Hospital agrees to correct the error no later than the following pay day. Errors of over fifty dollars (\$50.00) will be corrected within three (3) working days following notification. All such requests must be submitted through the employee's department head.
- L10.04 The parties agree to endeavour to provide a copy of the Collective Agreement to all Union members within one hundred and twenty (120) days following local issues ratification or issuance of interest arbitration award. Printing costs of these Agreements will be shared equally between the parties. It is agreed and understood that a unionized print shop will be used to print the Collective Agreement in the event that the Hospital's in-house printing service is not utilized.
- L10.05 Upon changing of Daylight Savings Time to Eastern Standard Time or vice versa employees shall be paid at the regular straight time hourly rate of pay for each hour worked.
- L10.06 An employee who is required to work a second consecutive tour shall be entitled to the normal rest periods and meal period for the second tour. The employee shall also be provided with a meal voucher for up to eleven dollars (\$11.00). Employees who are required to work more than four (4) hours overtime on the same day they have worked a full tour shall be entitled to a normal 0.5-hour meal period and a meal voucher for up to eleven dollars (\$11.00).
- L10.07 Reference to Article 9.07. The first date required is the certification date of June 6, 2014. The second date is not applicable.

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L10.08 All correspondence between the parties arising out of this Agreement or incidental thereto shall pass to and from the Director, Human Resources (or designate) and the President of the Union (or designate.)

**L10.09 Parking**

The Employer agrees to continue to provide designated on-site parking on the evening and night shifts in a well lit area.

**L10.10 Automobile Allowance**

At any time, an employee is requested by the Hospital to leave the premises to perform the duties of his/her classification at another site

- (a) the Hospital will provide the method of transportation, or,
- (b) the employee who uses his/her own vehicle will receive mileage between the sites from the Hospital at the per kilometre rate established by corporate policy.

When a bargaining unit member is called in and is required to travel to the Hospital and/or return home between the hours of their scheduled shifts, or at any time when on Standby, the Hospital will pay transportation costs either by taxi/transport service, to a maximum of \$50 per trip, or by the employee's own vehicle at the per kilometre rate established by corporate policy to a maximum of 100km per trip in each direction if returning home prior to the next shift. The employee will provide the Hospital proof of such fare.

L10.11 Employees assigned to carry a device to respond to calls while at work shall not be required to respond to calls during their scheduled unpaid meal break, unless mutually agreed or in cases of an emergency.

**L10.12 The Peer Feedback Process of the Quality Assurance Program Required by College of Nurses of Ontario**

The above referenced Peer Feedback is confidential information which the nurse is expected to obtain by requesting feedback from peer(s) of her or his choice, for the sole purpose of meeting the requirements of the Quality Assurance Program required by the College of Nurses of Ontario. The parties recognize the importance of supporting the confidential nature of the Peer Feedback component of the Quality Assurance Program. For further clarity, the above referenced Peer Feedback will not be used as a performance evaluation by the Hospital.

**L10.13 Student Supervision**

Nurses may be required, as part of their regular duties, to supervise activities of students in accordance with the current College of Nurses of Ontario Practice Guidelines – Supporting Learners. Nurses will be informed in writing of their responsibilities in relation to these students and will be provided with what the Hospital determines to be appropriate training. Any information that is provided to the Hospital by the educational institution with respect to skill level of the students will be made available to the nurse recruited to supervise the students. Upon request, the Hospital will review the nurse's workload with the nurse and the student to facilitate successful completion of the assignment. Where a nurse is assigned nursing student supervision duties, the Hospital will pay the nurse a premium of one dollar (\$1.00) per hour for all hours spent supervising nursing students.

**ARTICLE L11 - HEALTH AND SAFETY**

L11.01 It is a mutual interest of the parties to promote health and safety in workplaces and

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to prevent and reduce the occurrence of workplace injuries and occupational diseases. The parties agree that health and safety are of the utmost importance and agree to promote health and safety and wellness throughout the organization. When faced with occupational health and safety decisions, the Hospital will not await full scientific or absolute certainty before taking reasonable actions(s) that reduces risk and protects employees. The Hospital shall provide orientation and training in health and safety to new and current employees on an ongoing basis and employees shall attend required health and safety training sessions.

The Hospital and all employees shall comply with all applicable federal, provincial and municipal health and safety legislation, regulations and policies. All standards established under such legislation, regulations and policies shall constitute acceptable practice which may be improved upon in consultation with the Joint Occupational Health and Safety Committee or in negotiations with the Hospital.

- L11.02 In all cases of lost time work-related illnesses/injuries, the Hospital representatives and the Union safety representative or delegate (identified by the Union below), along with the ill/injured employee, will conduct an Accident Investigation. Through the investigation, the cause(s) of the accident shall be determined, and the recommendations developed to minimize the risk of re-occurrence. The Union's safety representative and the injured employee will be provided copies of the WSIB Form 7.

The Union will provide the Hospital with the names of two (2) delegates, who will receive education from the Hospital in accident investigation.

**ARTICLE L12 - HEALTH AND SAFETY COMMITTEE**

- L12.01 (a) The Hospital accepts that one (1) CUPE member on the Joint Occupational Health and Safety Committee shall be trained as a certified worker under the Occupational Health and Safety Act. Any costs associated with the training of a certified worker will be paid by the Hospital, or as may be prescribed pursuant to the Occupational Health and Safety Act. When a certified worker is called in to work to perform his/her duties under the Occupational Health and Safety Act and/or the Collective Agreement, he/she shall be paid at the regular rate.
- (b) Such committee shall identify potential dangers and hazards, institute means of improving health and safety programs and recommend actions to be taken to improve conditions related to safety and health.
- (c) The Hospital agrees to cooperate in providing necessary information and management support to enable the Health and Safety Committee to fulfil its functions. In addition, the Hospital will provide the Health and Safety Committee with access to all accident reports, health and safety records and other pertinent information in its possession. The Health and Safety Committee shall respect the confidentiality of the information.
- (d) Meetings shall be held every second month or more frequently at the call of the chair if required. The committee shall maintain minutes of all meetings and make the same available for review.
- (e) Any representative appointed or selected in accordance with (a) hereof shall serve for a term of one (1) calendar year from the date of appointment which may be renewed for further periods of one (1) year. Such representative is entitled to,
1. one (1) hour or such longer period of time as the committee determines is necessary to prepare for each committee meeting;

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2. such time as is necessary to attend meetings of the committee;
  3. such time as is necessary to carry out inspections and investigations under subsection 9 (26), (27), and 9 (31) of the Act;
  4. where an investigation is required under the Occupational Health and Safety Act, the JOHSC shall determine the appropriate member or members who will participate in the investigation, recognizing the interests of a CUPE representative to be involved in an investigation involving CUPE members.
- (f) The Union agrees to endeavour to obtain the full cooperation of its membership in the observation of all health and safety rules and practices.
- (g) Where the Hospital identifies high risk areas where employees are exposed to Hepatitis B, the Hospital will provide, at no cost to the employees, the Hepatitis B vaccine series.

**ARTICLE L13 - MODIFIED WORK**

L13.01 The Hospital and the Union are committed to a consistent, fair approach to meeting the needs of injured/ill workers, to restoring them to work which is meaningful for them and valuable to the Hospital, and to meeting the parties' responsibilities under relevant legislation.

To that end, the Hospital and the Union agree to cooperate in facilitating the return to work of injured/ill employees as quickly as possible. The Hospital and the Union agree that ongoing and timely communication by all participants in this process is essential to success. In order to assist with the process, the Hospital and the Union agree as follows:

- (a) An ad-hoc Return to Work Committee will be established when required to develop a return to work plan. Such committee will normally be comprised of the employee, a Union representative, an Occupational Health and Safety representative and the employee's Manager. A Union representative who is required to attend a return to work meeting on a scheduled day off will receive pay at straight time for hours spent attending the return to work meeting.
- (b) An injured/ill employee who has obtained medical clearance from her treating healthcare practitioner to return to work will provide the Occupational Health and Safety Department with this verification of her ability to return to work including information regarding any restrictions. The employee will also advise her Manager that she wishes to return to work. The Occupational Health and Safety Department will advise the Manager when the employee is cleared to return to work.
- (c) When a returning employee is in need of modified work the Hospital will consult with the Union and the Parties shall decide whether a meeting of an ad-hoc Return to Work Committee is necessary. It is acknowledged that not all requests for modified work shall necessitate meeting(s) of a committee. When required, the Committee will meet as soon as practicable to develop and recommend a return to work plan.
- (d) In developing a return to work plan, the Committee will:
  - i) review the restrictions placed on the employee's ability to return to work;
  - ii) determine whether the existing job can be modified to meet the employee's needs. If this is not possible, the Committee will consider other options;

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- iii) consult with the employee concerned; and,
  - iv) review the progress of employees on modified work as required.
- (e) In creating a permanent accommodation plan the Committee will consider the injured/ill employee's abilities and accommodation needs to determine if the employee can return to her:
- i) original position;
  - ii) original unit;
  - iii) original unit/position with modifications to the work area and/or equipment and/or the work arrangement;
  - iv) alternate position within the original unit;
  - v) alternate positions outside the original unit.
- (f) In the event the parties are not able to agree on any aspect of the implementation of the return to work protocol described above, or the resultant plan, it is the parties understanding that each party is entitled to exercise their rights under Article 7.

**ARTICLE L14 - VIOLENCE IN THE WORKPLACE**

L14.01 The parties recognize that employees may be exposed to unwanted behaviour from others in the workplace and that such behaviour may result in injury and/or emotional distress to an employee.

The Hospital agrees to continue its development of policies and procedures to deal with such situations and shall submit such policies to the Joint Occupational Health and Safety Committee for review.

The Joint Occupational Health and Safety Committee shall concern itself with those matters and shall make such recommendations as it deems appropriate.

**Violence Notice Provision**

The Hospital will inform the Union within three (3) working days of any employee who has been subjected to violence while performing his/her work. Such information shall be submitted to the Union in writing as soon as possible.

**ARTICLE L15 - PROTECTIVE FOOTWEAR**

L15.01 (a) The Hospital will require employees performing the following functions to wear appropriate safety footwear:

- 1) Engineering Services staff
- 2) Stores
- 3) Receiving
- 4) Environmental Services Project Work

(b) The hospital will provide winter coats to the following groups of employees, who are required to work in cold temperatures during the course of their duties. The coats will be washed regularly by the hospital.

- 1) Facilities staff
- 2) Stores
- 3) Receiving

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- 4) Environmental Services Staff

This list is not necessarily exhaustive.

**ARTICLE L16 - WAGES**

L16.01 Wage scales covering all classifications represented by the CUPE bargaining unit are provided in the Appendix A – Wage grid.

Dated at Toronto ONTARIO, This                      day of                      2023.

**FOR THE HOSPITALS**

Shelagh Jones  
Shelagh Jones (2025-08-26 10:34:48 EDT)

Shelagh Jones

Keith MacMillan  
Keith MacMillan (2025-08-27 10:20:11 EDT)

Keith MacMillan

Andre Saker  
Andre Saker (2025-08-26 09:20:07 EDT)

Andre Saker

**FOR THE LOCAL UNION**

Lesley Sullivan  
Lesley Sullivan (2025-11-06 14:24:22 EST)

Lesley Sullivan

Robynn Clarke  
Robynn Clarke (2025-07-08 11:35:08 EDT)

Robynn Clarke

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**Letter of Understanding  
Between**

**Markham Stouffville Hospital (Part-Time)  
And**

**CUPE Local 3651**

NEW

**Re: Office Space**

Hospital to provide Union with bigger office space that can accommodate at least four people, by no later than September 2022. This space will cover full-time and part time service and clerical bargaining units.

Dated at Toronto ONTARIO, This                      day of                      2025.

**FOR THE HOSPITALS**

**FOR THE LOCAL UNION**

*Shelagh Jones*

Shelagh Jones (2025-08-26 10:34:48 EDT)

Shelagh Jones



Lesley Sullivan (2025-11-06 14:24:22 EST)

Lesley Sullivan

*Keith MacMillan*

Keith MacMillan (2025-08-27 10:20:11 EDT)

Keith MacMillan

*Robynn Clarke*

Robynn Clarke (2025-09-03 11:39:05 EDT)

Robynn Clarke

*Andre Saker*

Andre Saker (2025-08-26 09:20:07 EDT)

Andre Saker

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**Letter of Understanding  
Between  
Markham Stouffville Hospital (Part-Time)  
And  
CUPE Local 3651**

**Re: Union Office Space – Renew**

The Hospital will provide the Union with on-site office space, at no cost to the Union for purposes of file storage and office administration. Wireless internet access will also be made available.

Dated at Toronto ONTARIO, This                      day of                      2025.

**FOR THE HOSPITALS**

Shelagh Jones  
Shelagh Jones (2025-08-26 10:34:48 EDT)

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**Letter of Understanding  
Between  
Markham Stouffville Hospital (Part-Time)  
And  
CUPE Local 3651**

**Re: Unit Assistant (UA) classifications**

The parties agree as follows:

Unit Assistant (UA) classifications will not be represented in the collective agreement wage schedule

The following employees will continue to receive their present rate of pay in addition to further general wage increases, and lump-sum payments

Biljana Minov

Dated at Toronto ONTARIO, This                      day of                      2025.

**FOR THE HOSPITALS**

*Shelagh Jones*  
Shelagh Jones (2025-08-26 10:34:48 EDT)

Shelagh Jones


*Keith MacMillan*  
Keith MacMillan (2025-08-27 10:20:11 EDT)

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*Andre Saker*  
Andre Saker (2025-08-26 09:20:07 EDT)

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Lesley Sullivan (2025-11-06 14:24:22 EST)

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*Robynn Clarke*  
Robynn Clarke (2025-09-03 11:39:05 EDT)

Robynn Clarke

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**Letter of Understanding  
Between  
Markham Stouffville Hospital (Part-Time)  
And  
CUPE Local 3651**

NEW

**Re: Pay Equity**


Within one hundred and fifty (150) business days of ratification of a local collective agreement, the Union and the Employer will meet and review the Markham Stouffville Hospital Pay Equity Plan posted on June 18, 1993 and begin negotiating the terms of reference for the Pay Equity system and determine timelines for the process. The Parties will ensure that maintenance occurs for all classifications. Any extension to this timeline shall be by mutual agreement. Both parties may have an advisor present through the process.

Dated at Toronto ONTARIO, This                      day of                      2025.

**FOR THE HOSPITALS**

**FOR THE LOCAL UNION**

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Shelagh Jones (2025-08-26 10:34:48 EDT)

  
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Andre Saker  
Andre Saker (2025-08-20 09:20:07 EDT)

Andre Saker

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**Letter of Understanding  
Between**

**Oak Valley Health Markham Stouffville Hospital (Part-Time)  
And**

**CUPE Local 3651**

NEW

**Re: Parking Fees**


The parties agree the parking fees will not increase before September 29<sup>th</sup>, 2023.

Dated at Toronto ONTARIO, This                      day of                      2025.

**FOR THE HOSPITALS**

**FOR THE LOCAL UNION**

Shelagh Jones  
Shelagh Jones (2025-08-26 10:34:48 EDT)

  
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**Letter of Understanding  
Between**

**Markham Stouffville Hospital (Part-Time)  
And**

**CUPE Local 3651**

NEW

**Letter of Understanding**

The parties agree to meet and discuss the matter of scrubs dispensed by machines being available in different sizes for tops and bottoms.

**SCHEDULE "A" (FT & PT)**

Add Linen Attendant at Environmental Services Attendant rates of pay

Amend title of Materials Management Attendant/Porter position to read MM Attendant/Porter

Remove Surgical Clinic Attendant Position

Stockless Inventory Attendant	Increase max. to \$23.43 eff 28 Sep/17
Receiving/Stores Attendant	Increase max. to \$23.43 eff 28 Sep/17
Stores/Copier Attendant	Increase max. to \$23.43 eff 28 Sep/17
Patient Support Assistant (PSA)	Increase max. to 23.25 eff 1 Apr/18 + GWI Sep/17
Environmental Service Attendant (ESA)	Increase max. to 22.34 eff 1 Apr/18 + GWI Sep/17
Food Service Attendant (FSA)	Increase max. to 22.34 eff 1 Apr/18 + GWI Sep/17
MMA Attendant/Porter	Increase max. to 22.34 eff 1 Apr/18 + GWI Sep/17

Dated at Toronto ONTARIO, This                      day of                      2025.

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Robynn Clarke

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**APPENDIX 1 - WAGES**

	<b>Hours</b>	<b>Start</b>	<b>1725</b>	<b>3450</b>	<b>5175</b>	<b>6900</b>
		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>RPN</b>	Sept. 29, 2018	30.25	30.81	31.36		
	Sept. 29, 2019	30.74	31.31	31.86		
	Sept. 29, 2020	31.25	31.82	32.39		
	<b>Sept 29, 2021</b>	<b>32.75</b>	<b>33.34</b>	<b>32.39</b>		
	<b>Sept 29, 2022</b>	<b>33.90</b>	<b>34.52</b>	<b>35.14</b>		
	<b>June 13, 2023</b>	<b>34.70</b>	<b>35.34</b>	<b>35.97</b>		
<b>Electro-Mechanic</b>	Sept. 29, 2018	26.28	27.20	28.14	29.11	30.14
<b>Maintenance Mechanic</b>	Sept. 29, 2019	26.70	27.63	28.59	29.58	30.62
<b>Plumber-Mechanic</b>	Sept. 29, 2020	27.14	28.09	29.06	30.06	31.13
<b>Refrigeration Mechanic</b>	<b>Sept 29, 2021</b>	<b>28.44</b>	<b>29.43</b>	<b>30.45</b>	<b>31.50</b>	<b>32.62</b>
	<b>Sept 29, 2022</b>	<b>29.44</b>	<b>30.47</b>	<b>31.52</b>	<b>32.61</b>	<b>33.77</b>
<b>Building Services Operator</b>	<b>Sept 29, 2021</b>	<b>27.32</b>	<b>28.31</b>	<b>29.33</b>	<b>30.39</b>	<b>31.50</b>
	<b>Sept 29 2022</b>	<b>28.28</b>	<b>29.31</b>	<b>30.36</b>	<b>31.45</b>	<b>32.61</b>
<b>Maintenance Assistant</b>	Sept. 29, 2018	22.91	23.71	24.54	25.40	26.30
	Sept. 29, 2019	23.28	24.09	24.93	25.80	26.72
	Sept. 29, 2020	23.66	24.49	25.34	26.23	27.16
	<b>Sept 29, 2021</b>	<b>24.79</b>	<b>25.66</b>	<b>26.55</b>	<b>27.49</b>	<b>28.46</b>

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	<b>Sept 29, 2022</b>	<b>25.67</b>	<b>26.57</b>	<b>27.49</b>	<b>28.45</b>	<b>29.46</b>
<b>Painter</b>	Sept. 29, 2018	23.77	24.57	25.39	26.27	27.12
	Sept. 29, 2019	24.15	24.96	25.79	26.69	27.56
	Sept. 29, 2020	24.55	25.37	26.22	27.13	28.01
	<b>Sept 29, 2021</b>	<b>25.73</b>	<b>26.58</b>	<b>27.48</b>	<b>28.43</b>	<b>29.35</b>
	<b>Sept 29, 2022</b>	<b>26.63</b>	<b>27.52</b>	<b>28.44</b>	<b>29.43</b>	<b>30.39</b>
<b>MDRD Technician</b>	Sept. 29, 2018	23.42	24.04	24.66	25.35	
<b>Surgical System Technician</b>	Sept. 29, 2019	23.79	24.42	25.05	25.75	
	Sept. 29, 2020	24.18	24.82	25.46	26.18	
	<b>Sept 29, 2021</b>	<b>25.34</b>	<b>26.01</b>	<b>26.68</b>	<b>27.43</b>	
	<b>Sept 29, 2022</b>	<b>26.26</b>	<b>29.93</b>	<b>27.62</b>	<b>28.40</b>	
<b>Stockless Inventory Attendant</b>	Sept. 29, 2018	22.17	22.79	23.41	24.09	
<b>Receiving/Stores Attendant</b>	Sept. 29, 2019	22.53	23.16	23.79	24.48	
<b>Stores/Copier Attendant</b>	Sept. 29, 2020	22.90	23.54	24.18	24.88	
	<b>Sept 29, 2021</b>	<b>24.00</b>	<b>24.67</b>	<b>25.34</b>	<b>26.07</b>	
	<b>Sept 29, 2022</b>	<b>24.84</b>	<b>25.54</b>	<b>26.23</b>	<b>26.99</b>	
<b>Patient Support Assistant</b>	April 1, 2018	21.30	21.95	22.56	23.58	
	Sept. 29, 2018	21.59	22.25	22.87	23.91	
	Sept. 29, 2019	21.94	22.61	23.24	24.29	
	Sept. 29, 2020	22.30	22.98	23.62	24.69	

**EACH OF THE FOLLOWING PROVISIONS WILL APPEAR IN ALL COLLECTIVE AGREEMENTS REPLACING ANY RELATED PROVISIONS THAT EXISTED IN THE HOSPITAL'S EXPIRING COLLECTIVE AGREEMENT, UNLESS OTHERWISE SPECIFIED.**

	<b>Sept 29, 2021</b>	<b>23.37</b>	<b>24.08</b>	<b>24.75</b>	<b>25.87</b>
	<b>April 22, 2022</b>	<b>25.37</b>	<b>26.08</b>	<b>26.75</b>	<b>27.87</b>
	<b>Sept 29, 2022</b>	<b>26.26</b>	<b>27.00</b>	<b>27.69</b>	<b>28.85</b>
<b>Support Services Attendant</b>	<b>Sept 29, 2022</b>	<b>24.14</b>	<b>24.88</b>	<b>25.58</b>	<b>26.45</b>
<b>Food Service Attendant</b>	April 1, 2018	20.77	21.37	22.00	22.65
<b>MM Attendant / Porter</b>	Sept. 29, 2018	21.06	21.67	22.31	22.97
<b>Environmental Services Attendant</b>	Sept. 29, 2019	21.40	22.02	22.66	23.34
<b>Linen Attendant</b>	Sept. 29, 2020	21.75	22.38	23.04	23.72
	<b>Sept 29, 2021</b>	<b>22.79</b>	<b>23.45</b>	<b>24.14</b>	<b>24.86</b>
	<b>Sept 29, 2022</b>	<b>23.59</b>	<b>24.28</b>	<b>24.99</b>	<b>25.73</b>

## MEMORANDUM OF AGREEMENT

Between

Markham Stouffville Hospital  
("Employer")

And

Canadian Union of Public Employees (CUPE), Local 3651  
("Union")

### RE: Extended Tours

1) Twelve (12) Hour Shifts

The parties agree that the RPN's and PSA's will work extended tours pursuant to the following provisions:

- (a) A regular twelve (12) hour shift shall be eleven and one-quarter (11 ¼) consecutive paid hours in any twenty-four (24) hour period.
- (b) Not more than three (3) consecutive extended shifts shall be scheduled. When the Employer requires an employee to work a fourth (4<sup>th</sup>) consecutive shift, premium pay shall be paid for the fourth (4<sup>th</sup>) shift and subsequent consecutive shifts until a shift has been scheduled off.
- (c) At least twelve (12) hours' time off will be scheduled between shifts.
- (d) The Employer will provide full time employees who adhere to a master schedule only at least every second (2<sup>nd</sup>) weekend off in each six (6) week schedule. An employee will receive time and one half (1 ½) for all hours worked on the third consecutive and subsequent week-end until the employee is scheduled a week-end off. A weekend is defined as 2400 hrs Friday to 2400 hrs Sunday as per the Collective Agreement.

Exceptions are when:

- i. Such weekend has been worked by the employee to satisfy specific days off requested by such employee;
- ii. Such employee has requested weekend work; or
- iii. Such weekend is worked as a result of an exchange of shifts with another employee.
- iv. Where self-scheduling applies

- (e) Overtime premiums shall become payable when the hours exceed two hundred and twenty-five (225) paid hours in a six (6) week scheduling period. Such overtime shall become payable during the pay period in which the additional time is worked.
  - (f) RPN's and PSA's may elect to use a self-scheduling model or to have a master rotation. The election of the self-scheduling or master rotation shall be made by vote of the affected employees. The determination of which employee group or groups that will vote will be made by the manager of the affected unit, taking into consideration the expressed wishes of the employees and the operational needs of the Hospital. Vote results shall be determined by simple majority of ballots cast. Once an election is made, the employees may not elect to change the scheduling method for at least a six (6) month period. Departments who engage in self-scheduling will have guidelines that will reflect the input of both parties.
- 2) Commencement and Discontinuance of Extended Tours

The commencement process does not apply in units where extended tours already exist.

- (a) Extended tours shall be introduced into any unit when, at the request of either party, when:
  - i) Sixty percent (60%) of Part Time and Full-Time staff in the unit vote and seventy-five percent (75 %) of those staff vote in favour by secret ballot after the employees view a draft schedule; and,
  - ii) All proposed master schedules for extended and combination tours shall be submitted to the local president, or designate, to review for the purpose of compliance with the collective agreement. Submission of a proposed schedule is excluded where self-scheduling applies.
- (b) Extended tours may be discontinued in any unit when:
  - i) Sixty percent (60%) of Part Time and Full-Time staff in the unit vote and seventy-five percent (75 %) of those vote in favour by secret ballot; or
  - ii) the Employer because of:
    - a) adverse effects on patient care or on the efficient operation of the work area, or
    - b) inability to provide a workable staffing schedule, or
    - c) where the Employer wishes to do so for reasons which are not unreasonable and states its intention to discontinue the extended and combination tour schedule.

- (c) when notice of discontinuance is given by either party in accordance with paragraph (b) above, then
  - i) the parties shall meet within two (2) weeks of the giving of notice to review the request for discontinuation; and
  - ii) where it is determined that the extended tours will be discontinued, affected employees shall be given twelve (12) weeks' notice before schedules are so amended. Such vote shall not be held more than once in six (6) months.

**Rest Periods**

Employees shall be entitled to paid relief periods totaling 45 minutes.

**Meal Period**

Employees shall be entitled unpaid meal breaks totaling 45 minutes.

NOTE: The current HOODIP employee booklet references sick pay for 15 standard work weeks or equivalent. The equivalent works out to 562.5 hours.

Dated at Toronto, this            day of            , 2025.

**FOR THE HOSPITALS**

Shelagh Jones  
Shelagh Jones (2025-08-26 10:34:48 EDT)

Shelagh Jones

Keith MacMillan  
Keith MacMillan (2025-08-27 10:20:11 EDT)

Keith MacMillan

Andre Saker  
Andre Saker (2025-08-26 10:29:07 EDT)

Andre Saker

**FOR THE LOCAL UNION**

Lesley Sullivan  
Lesley Sullivan (2025-11-06 14:24:22 EST)

Lesley Sullivan

Robynn Clarke  
Robynn Clarke (2025-09-03 11:39:05 EDT)

Robynn Clarke

**APPENDIX A: RPN WORKLOAD COMPLAINT FORM**

*RPNs are required to complete all of SECTION 1 through 6 of this form prior to submitting it to the Chief Nursing Officer.*

**SECTION 1: INFORMATION**

Name(s) Of Employee(s) Reporting:	
Employer:	Unit/Program:
Date of Occurrence:	Time: <input type="checkbox"/> 7.5 Hr Shift <input type="checkbox"/> 11.25Hr Shift
Name of Supervisor:	Date/Time Submitted:

**SECTION 2: DETAILS OF OCCURRENCE**

Provide a concise summary of the occurrence:

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**Check one:**     Is this an isolated incident?     An ongoing problem?

**SECTION 3: INITIAL ATTEMPT AT RESOLUTION**

At the time the workload issue occurred, did you discuss the issue within the unit/area/program?

Yes    What was the outcome of the discussion and what solutions were identified?

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No    Why not? \_\_\_\_\_

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Failing resolution at the time of occurrence, did you seek assistance from a person designated by the employer as responsible for a timely resolution of workload issues?

Yes      What was the outcome of the discussion and what solutions were identified?

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No      Why not? \_\_\_\_\_

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Did you discuss the issue with your immediate supervisor (i.e unit manager or designate) within 48 hours of the occurrence?

Yes      What was the outcome of the discussion and what solutions were identified?

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No      Why not? \_\_\_\_\_

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**SECTION 4: WORKING CONDITIONS/CONTRIBUTING FACTORS**

In order to effectively resolve workload issues, please provide details about the working conditions **at the time of occurrence** by providing the following information:

**# of scheduled staff**     RPN \_\_\_\_     RN \_\_\_\_     Unit Clerk \_\_\_\_     Service Support \_\_\_\_

**# of staff working**     RPN \_\_\_\_     RN \_\_\_\_     Unit Clerk \_\_\_\_     Service Support \_\_\_\_

**# of agency staff**     Yes    How many? \_\_\_\_     No

**# of RPNs on overtime**  Yes    How many? \_\_\_\_     No

**If there was a shortage of staff at the time of the occurrence (including support staff), please check one or all of the following that apply:**

Absence/Emergency leave     Sick call(s)     Vacancies

Please check off the factor(s) you believe contributed to the workload issue:

Change in patient acuity. Provide details: \_\_\_\_\_

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Number of beds. Provide details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Number of Admissions. Provide details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Number of Discharges. Provide details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other. Please specify and provide details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SECTION 5: RPN RECOMMENDED SOLUTIONS**

Please check-off one or all of the areas you believe should be addressed in order to prevent similar occurrences:

- |   |   |
|---|---|
| <input type="checkbox"/> In-service   | <input type="checkbox"/> Orientation              |
| <input type="checkbox"/> Review nurse/patient ratio                                     | <input type="checkbox"/> Review policy/procedures |
| <input type="checkbox"/> Float/casual pool  | <input type="checkbox"/> Adjust supporting staff  |
| <input type="checkbox"/> Adjust RPN staff   | <input type="checkbox"/> Equipment                |
| <input type="checkbox"/> Replace sick calls, vacations, paid holidays or other absences |   |

Provide details for each checked box above: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other solutions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SECTION 6: EMPLOYEE SIGNATURES**

Signature \_\_\_\_\_

Phone # \_\_\_\_\_

Signature \_\_\_\_\_

Phone # \_\_\_\_\_

Signature \_\_\_\_\_

Phone # \_\_\_\_\_

Date submitted: \_\_\_\_\_

**SECTION 7: MANAGEMENT COMMENTS**

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**Process as outlined in Article 9.15 (b) – (d)**

- Step 1**            Employee(s) are to raise their concern(s) with immediate supervisor within 48 hours of the occurrence.
  
- Step 2:**            The supervisor is to provide a response within 5 working days.
  
- Step 3**            If the supervisor’s response is unsatisfactory, the employee(s) may submit\* a Workload Complaint Form to the CNO within 48 hours, with a copy to the Union. A meeting with the CNO will be held within 30 days. A Union representative may attend this meeting.
  
- Step 4**            The CNO is to provide a response within 15 days. A copy of the response will be sent to the Union, if applicable.
  
- Step 5**            If the CNO’s response is unsatisfactory, the employee(s) may request a meeting with the CEO (or designate) within 48 hours. This meeting is to be held within 30 days. A Union representative may attend this meeting.
  
- Step 6**            The CEO (or designate) will provide a written response within 15 days. A copy of the response will be sent to the Union, if applicable.

\*This form may be submitted via email.

**APPENDIX B: NON-RPN WORKLOAD COMPLAINT FORM**

N.B. All sections of the form **must** be completed prior to submission for review.

The parties agree that patient care is enhanced if concerns relating to professional practice, patient acuity, fluctuating Work-Loads and fluctuating staffing are resolved in a timely and effective manner.

**SECTION 1: GENERAL INFORMATION**

Name(s) of Employee(s) Reporting (Please Print)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Unit/Area/Program: \_\_\_\_\_ Site/Location: \_\_\_\_\_

Date of Occurrence \_\_\_\_\_ Time of Occurrence: \_\_\_\_\_

Shift Length:  7.5 hr.  11.25 hr.  Other \_\_\_\_\_

Name of Manager/Supervisor: \_\_\_\_\_ Time Notified: \_\_\_\_\_

Date Form Submitted to Employer: \_\_\_\_\_

**SECTION 2: WORKING CONDITIONS**

In order to effectively resolve workload issues, please provide detail about the working conditions at the time of the occurrence by providing the following information:

Type of Work Being Performed (please describe)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of Staff on Duty \_\_\_\_\_ Usual Number of Staff on Duty \_\_\_\_\_

If there was a shortage of staff at the time of the occurrence, please provide details about why there was a shortage:

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**SECTION 3: DETAILS OF OCCURENCE**

Is this an:            Isolated Incident            Ongoing Problem      (*Check One*)

I/We the undersigned, believe that I was/we were given an assignment that was excessive or inconsistent with quality patient care and/or created an unsafe working environment for the following reasons. (Provide brief description of problem/work assignment below, including what happened, how the assignment was inconsistent with quality patient care and/or created an unsafe work environment, where the incident happened.:

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**SECTION 4: REMEDY**

d) At the time the workload issue occurs, discuss the issue within the unit/area/program to develop strategies to meet patient care needs. Provide details of how it was or was not resolved:

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e) Failing resolution at the time of the occurrence, seek immediate assistance from your immediate supervisor/manager who has responsibility for timely resolution of workload issues. Discussion details:

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f) Was it resolved                      Yes                No   

Provide details of how it was or was not resolved:

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**SECTION 5: RECOMMENDATIONS**

To correct this problem, I/we recommend:

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**SECTION 6: EMPLOYEE SIGNATURE(S)**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

**SECTION 7: MANAGEMENT COMMENTS**

The manager (or designate) will provide a written response to the individual(s) with a copy to the Bargaining Unit President. Please provide any information/comments in response to this report, including any actions taken to remedy the situation, where applicable:

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