Proposed Changes	Response	Status
Article 1 Definitions:		*TA=Tentative
		Agreement
per diem nurse requirements to line up	Per Diem nurses to	TA
with settled grievance and to adjust	be scheduled for 3	
holiday policy to one holiday per year	shifts per quarter and	
(1.6)	work one holiday per	
	year	
Article 2 Recognition and		
Membership:		
clarify recognition clause, all RN's and	Agree in principle	Finalizing language,
LPN's not working as managers or		likely TA next
supervisors add notice to ONA if		session
Hospital creates new position (2.1)		0
remove opt out as an option, retain	Hospital respectfully	Still open
agency fee payers, religious objectors (2.6)	declines	
clarify ONA attendance at new hire	Hospital agreed	TA
orientation rather than as a separate		
meeting (2.8)		
paid negotiations team (new)	Hospital agreed	TA
Article 4 Compensation:		
Step advancement based on years of	Both sides proposed	TA
service/anniversary date (4.2 and App		
A)		
Recognition of nursing experience	Hospital agreed but	TA pending full
upon hire at year for year (4.4)	needs to know what	financial package
	the impact will be.	
	Will be researching	
	step placement and	
	comparing	
	resumes/length of	
	license	O4:11
Home Health/Hospice nurses paid for	Hospital understands	Still open
time/mileage from home when on call	our request, is	
and go out to a patient visit (new)	looking into legal/IRS	
Auticle 5 Deid Tire (Off (DTO)	regulations	
Article 5 Paid Time Off (PTO):	114-1-1-1-1-1	Otill and an
Increase limit of earned PTO to 2500 hours worked per year (5.3)	Hospital declined	Still open
Year of service for PTO is anniversary	Hospital proposed	TA
year, removing the 1000-hour		
requirement (5.3.d)		
PTO available first of the month	Hospital proposed	TA
following 30 days of employment (5.4)		

PTO requests not to be unreasonably denied (5.4.e)	Hospital understands request, fruitful discussion at table	New language to be proposed at next session
Proposed birthday holiday, pay at holiday premium if working (5.5.a)	Pending financial TA	
Increase holiday pay to double time and double time and a half for per diem and those on call. (5.5.d)	Pending financial TA	
Proposed removal of the A/B holiday rotation, fall back language (5.5.d)	Discussion- H wants to keep this, ONA reminds that this is a backup, and ALL departments are supposed to be soliciting preference	Still open
Allow use of EIB for OFLA/FMLA covered illnesses (5.6, 5.8)		Pending financial TA
Increase EIB cashout for long term employees (5.6 f)	No discussion	Pending financial TA
Article 6 Hours of Work:		
Clarify that meal period must be uninterrupted (6.2)	Agreed	TA
Remove no ten-hour rest pay restrictions for hours worked while on call (6.3.e)	Discussion on history and impact	TA
Staffing language regarding disaster plans (6.3.f)	Hospital understands our intent, wants to adjust language	Still open
Nurses working variable schedules should have a minimum of 36 hours off between a night and day shift (6.6.b)	Discussion, with adjustment to 48 hours between, hospital will return and review with their managers	Still open
Article 7 Employment Status:		
Removing restriction on paying out PTO on separation (7.3, 7.5)	Hospital understands and agrees	TA
Article 8 Leaves of Absence:		
Changing "Maternity Leave" to Parental Leave (8.5)		TA
Clarifying bereavement leave is one week of work, 3 days for 12-hour shift, 4 for 10 hour shift, 5 for 8 hour (8.6)	Hospital understood and agreed, proposed adding language to cover the biological parent of a child or stepchild	TA

		<u> </u>
	who is not living in	
	workers home (i.e.,	
	ex-partner)	
Jury duty and court pay is paid at		TA
regular rate including shift differentials		
(8.7, 8.8)		
Article 9 Health and Welfare:		
ONA nor the Hospital have made	Hospital is	
specific proposals in this area, but	undergoing an	
there is agreement that our insurance	ERISA compliance	
program needs significant changes.	audit and will have	
	more ability to	
	discuss when that is	
	completed	
Article 10 Grievance and	- 2	
Arbitration:		
Hospital proposed language to	ONA is not opposed;	TA
encourage staff and managers to	workers retain the	
settle informally (10.3)	right to the grievance	
, ()	process if informal	
	attempts fail.	
Adding in language for Association	Hospital is not	TA
Grievances (10.4)	opposed, may need	171
Grievarious (10.4)	to clarify each step,	
	add to headings	
Removed limitation on retroactive	Hospital opposed,	Still open
	concerned about	Still Open
grievances for those involving pay		
(10.8) Article 11 Professional	financial impact	
Development		
ONA made several proposals to	Hospital agrees	Still open
	Hospital agrees,	Still Open
increase education hours and days	working on finalizing	
available for nurses and also to add	language	
compensation for time spent in		
education online at home or in other		
prep. (11.2, 11.10)		0.00
ONA has proposed a clinical ladder	Hospital is in	Still open
program, which will include multiple	agreement, will need	
steps and compensation for nurses	further discussion to	
who successfully complete each step.	determine	
PNCC in conjunction with Education	compensation that	
and other interested nurses to develop	will be tied to each	
competencies (New)	step of ladder	
Article 12 Seniority:		
Core schedules should be included in		TA
job posting (12.5)		
	1	1

If two candidates have equal	Question about	Still open
qualifications, seniority will prevail	department seniority	
(12.5)	vs hospital seniority	
ONA has proposed removing the	Hospital asked	Still open
points based low census system and	questions about how	
<u> </u>		
replacing it with a system that tracks	this is implemented,	
total time lost. System would be	and the work	
tracked the same in all departments.	involved house wide	
(12.7)		
Proposed language clarifying that all		Still open
low census counts towards the low		
census cap (12.9)		
Article 17 PNCC:		
Proposed increasing the membership	Agree in theory,	Still open
of this committee to one nurse from	more discussion	
	needed	
each department or sub-department	needed	
(17.2)		
Article 18 Retirement:		2
ONA proposed increasing the amount		Still open
the hospital pays into pension to 5,6, 8		
and 10% depending on years of		
service		
Appendix A Rates of Pay and		
Differentials		
ONA has made numerous financial	The hospital is	Still open
proposals in this section, starting with	considering, and we	·
a proposed increase in our wage scale	await a counter	
of 10% Jan 1, 2022 and 6% in 2023	proposal	
and 2024.	ргорозаг	
Increases to on-call pay, preceptor		
pay, charge pay, weekend premium,		
have all been proposed		
Proposed preceptor pay to cover		
nursing students and time spent in		
preceptor training course		
Proposed deleting the section on Merit	Merit pay provisions	
Pay	often result in	
,	unequal treatment	
	amongst the	
	bargaining unit and	
	require direct dealing	
	which is contrary to	
	the spirit of collective	
	agreements	
Proposed increasing extra shift (bonus		
pay) to \$15 per hour and proposed		

language that clarifies this is for all extra shifts picked up after the schedule is posted		
Proposed increasing differential for RNFA's to 20%		
Proposed adding sedation certification and translation premiums	More discussion needed, may be a component of the clinical ladder	
Proposed pay at the callback rate for any time worked after being put on standby		
Appendix D Day Care (new)		
We have asked the hospital to explore day care opportunities, to include expanding the hours of care and expanding to after school care to help workers with school age children.	The Hospital is exploring this.	
Throughout the agreement we have made grammatical corrections and are committed to making changes to pronouns so that all pronouns are gender neutral	The hospital has agreed to the spirit of these changes.	

^{*}Tentative Agreement (TA) – A tentative agreement or TA is an item or issue that both parties have agreed upon. As we move forward through negotiations, we settle items one at a time or sometimes in groups and reach a TA. Once we have reached a TA, those items are no longer part of the negotiation process and are considered closed. Once we have all issues resolved, we package all of our TA's into a full contract TA and then present that to membership to vote on. Members vote on the whole agreement, a no vote results in the team returning to the table and starting the process again; a yes vote ratifies the agreement and puts the contract into effect based on the dates in the agreement.