ARTICLE 21 - PAID TIME OFF

Paid time off is a plan to give each Registered Nurse \( \text{nurse} \) more leisure time off with pay. In comparison with the traditional vacation, holidays, and pay for sick days, paid time off provides paid days for a nurse to use as he or she wishes, plus additional protection for extended absences due to illness or injury.

The following provisions apply to nurses employed on or before April 19, 2011:

21.1 Paid Time Off - Time off with pay for vacations, holidays, sickness, personal emergency or other reason is called paid time off. Paid time off has two parts—paid time off (PTO) hours and Extended Illness Time (EIT) hours.

21.2 Paid Time Off (PTO) Accrual

For nurses employed on or before April 19, 2011:

A. A nurse accumulates PTO hours each pay period starting with the first hour of work. However, no nurse is entitled to payment for, or use of, accrued PTO hours until completion of the introductory period, except in cases of mandatory low census (if requested by the nurse).

B. PTO hours can be used for a vacation, holiday, sickness, or any other reason desired, but may only be taken for hours on regularly scheduled shifts. PTO benefit hours accumulate on an hours paid basis. For every hour a nurse is paid, whether it is a regular work hour (including overtime), or a non-work paid hour such as bereavement leave, educational leave, or paid leave itself, the nurse accumulates PTO credit. However, there is no PTO accrual for pre-scheduled but not worked on-call time, or for PTO that is “cashed out” on termination. PTO benefit hours will also accumulate during the unpaid hours of a shift which has been canceled. Notwithstanding the prior provisions, a nurse will not accrue PTO on any hours above 2,080 per year.

Through December 31, January 41, 2020, All full time and part time Nurses employed on or before April 19, 2011 will accrue PTO as follows:

<table>
<thead>
<tr>
<th>Continuous employment</th>
<th>Accrual Rate</th>
<th>Annual accrual based on 2,080 hours</th>
<th>Maximum accrual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 5 years</td>
<td>.09231</td>
<td>192</td>
<td>288</td>
</tr>
<tr>
<td>At least 5 but less than 10 years</td>
<td>.10769</td>
<td>224</td>
<td>348</td>
</tr>
<tr>
<td>At least 10 but less than 15</td>
<td>.12307</td>
<td>256</td>
<td>408</td>
</tr>
<tr>
<td>Continuous employment</td>
<td>Accrual Rate</td>
<td>Annual accrual based on 2,080 hours</td>
<td>Maximum accrual</td>
</tr>
<tr>
<td>-----------------------</td>
<td>-------------</td>
<td>------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Less than 5 years</td>
<td>.0924</td>
<td>192</td>
<td>288</td>
</tr>
<tr>
<td>At least 5 but less than 10 years</td>
<td>.1116</td>
<td>232</td>
<td>348</td>
</tr>
<tr>
<td>At least ten</td>
<td>.1308</td>
<td>272</td>
<td>408</td>
</tr>
</tbody>
</table>

For nurses hired after April 19, 2011:

A. Through December 31, 2020. All full time and part time Nurses hired after April 19, 2011 will accrue PTO as follows:

<table>
<thead>
<tr>
<th>Continuous employmentYears of Service</th>
<th>Accrual Rate</th>
<th>Annual accrual based on 2,080 hours*</th>
<th>Maximum accrual**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 3 years</td>
<td>0.096125</td>
<td>200</td>
<td>300</td>
</tr>
<tr>
<td>3 to less than 5 years</td>
<td>0.10775</td>
<td>224</td>
<td>336</td>
</tr>
<tr>
<td>5 to less than 10 years</td>
<td>0.115375</td>
<td>240</td>
<td>360</td>
</tr>
<tr>
<td>10 to less than 15 years</td>
<td>0.126875</td>
<td>264</td>
<td>396</td>
</tr>
<tr>
<td>15 or more years</td>
<td>0.134625</td>
<td>280</td>
<td>420</td>
</tr>
</tbody>
</table>

*The number of hours is based on 80 hours per pay period.

**Accrual will cease when a nurse has unused PTO accrual equal to one and one-half (1 1/2) times the applicable annual accrual set forth above.
B. A paid hour in subparagraph A above will include only hours directly
compensated by the Medical Center, and mandatory days off, and will exclude standby hours,
hours compensated through third parties, hours paid in lieu of notice of termination, or hours
while not classified as a benefit-eligible nurse. A paid hour includes hours taken as PTO and EIT.
Notwithstanding the prior provision, a nurse will not accrue PTO on any hours above 2,080 per
year.

C. PTO Use. Accrued PTO may be used in the pay period following completion of six
(6) months of employment and then in or after the pay period following the pay period when
accrued, except with respect to use on observed holidays as provided in below. PTO will be
used for any absence of a quarter hour or more, except that the nurse may choose to use or
not to use PTO for time off:

1. When a nurse is on a mandatory day off, by making the appropriate entry
   on the nurse's timecard; or

2. For military leaves of absence under federal leave laws.

3. Through Jan. 4, 2020, PTO may be used in addition to receiving workers' compensation benefits if EIT is not available, up to a combined total of PTO, EIT (if any), and workers' compensation benefits that does not exceed two thirds (2/3) of the nurse's straight time pay for the missed hours.

4. Effective Jan. 5, 2020, to supplement short-term disability and paid parental leave pay to 100 percent of base pay as long as PTO is available.

5. PTO may not be used when the nurse is eligible for Medical Center compensation in connection with paid bereavement leave, jury duty, witness service, or EIT.

D. Change in Status. A nurse's unused PTO account will be paid to the nurse in the following circumstances:

1. Upon termination of employment, if the nurse has been employed for at
   least six (6) months and, in cases of resignation, if the nurse has also provided two (2)
   weeks' notice of intended resignation;

2. Upon changing from benefits-eligible [FTE 0.5 – 1.0] to non-eligible status
   (FTE less than< 0.5)- provided the nurse has been employed for at least six (6) months at
   the time of the change.

A nurse hired on or before April 19, 2011 may elect at any time that the provisions of 21-2,
Section 2, will apply to him or her, and once elected shall apply to that nurse for the remainder
of the nurse's employment with the Medical Center.
21.3 **PTO-Scheduling Time Off** - Scheduled PTOs or unpaid time off shall be scheduled in accordance with the scheduling procedures in Section 14.9. In case of illness, accident, or emergencies, PTO hours, or unpaid time off, may be taken without prior scheduling. Scheduled PTO hours or unpaid time off must be used in a block of at least eight (8) hours. Unscheduled PTO hours or unpaid time off (illness, accident, and personal emergencies, for example, emergency doctor appointment, family illness, or funeral) can be used in less than eight hour blocks. A nurse may utilize scheduled unpaid time off, rather than use PTOs, in accordance with Section 21.8.

Scheduling of time off is best resolved by unit-based decisions, where the affected nurses are involved in creative and flexible approaches to such scheduling. Each unit will develop guidelines that promote the ability of the nurses on that unit to preschedule vacation.

A. Nurses will make good faith efforts to balance their vacation and PTO requests in a manner that supports a core schedule and allows the Medical Center to maximize approval of requests. In order to facilitate these efforts, units will use transparent processes to inform nurses' selections for requesting time off.

B. Requests for PTO or vacation should be inclusive of the entire block of time the nurse is requesting to be away from work. The nurse will only need to use PTO or vacation time equivalent to their FTE.

21.4 **PTO Request Procedure** - Should the Medical Center be unable to find adequate coverage for a nurse's requested scheduled PTOs or requested scheduled unpaid time off, a nurse's request for PTO hours or unpaid time off may be denied even though a nurse has given the required advance notice under Section 14.9. A decision to deny a request will be made no later than the third (3rd) day before the schedule's posting deadline. Prior to the date the schedule is posted, the Medical Center will attempt to notify the nurse of the action on the request. If a request is granted for a block of PTOs of five (5) consecutive workdays or more, the nurse will not be scheduled to work during that time period without the nurse's consent. Once approved and scheduled, a nurse's PTOs or unpaid time off shall not be unilaterally changed by the Medical Center. If more than one (1) nurse in a unit asks for the same time off, and gives the required advance notice under the scheduling article, but the operational and staffing needs of the Medical Center will not allow all such nurses to take this time off, the nurse(s) with the longer continuous employment of any type by the Medical Center, commencing with the most recent date of hire, will be given preference; except as provided below with respect to certain "priority" requests. Where the time off requested is for New Year's Day, Thanksgiving or Christmas, a nurse who received that holiday off in the previous year may not use the preference provided for in the preceding sentence. If a nurse is denied requested time off but is able to find coverage before the 8th day after posting of the schedule and provides the nurse's manager with written commitment from the other nurses of such coverage, the nurse shall be granted the time off. Trades will be granted when they do not incur additional overtime or
other premium pay, and staffing levels and skill mix must be maintained. All other requests for trades will be reviewed at manager discretion.

1. Except for unexpected illness or emergencies, time off should be scheduled in advance via established procedures.

2. The number of persons who may be on pre-scheduled time off at one time will be defined at the unit level.

3. The following PTO Request periods indicate when a nurse may apply for prescheduled time off by seniority, and for what time period:

<table>
<thead>
<tr>
<th>PTO Request Period</th>
<th>Submission Deadline</th>
<th>Decision Notice</th>
</tr>
</thead>
<tbody>
<tr>
<td>December 1 through February 28</td>
<td>September 15</td>
<td>September 29</td>
</tr>
<tr>
<td>March 1 until Memorial Day</td>
<td>December 15</td>
<td>December 29</td>
</tr>
<tr>
<td>Memorial Day through Labor Day</td>
<td>March 15</td>
<td>March 29</td>
</tr>
<tr>
<td>Day after Labor through November 30</td>
<td>June 15</td>
<td>June 29</td>
</tr>
</tbody>
</table>

4. Requests submitted during the PTO Request period for the designated time off window shall be granted on the basis of seniority within the same unit and shift. In the event that registered nurses with the same seniority submit requests for the same or overlapping periods of time off, the issue will be decided by a flip of a coin. Written or electronic confirmation of a nurse’s scheduled time off will be provided.

5. PTO will be granted only if the nurse will have sufficient amount of PTO by the requested dates. Moreover, PTO requests shall not be converted to requests for unpaid time off absent Hospital approval, provided that previously approved time off will not be rescinded if the nurse’s shortage of PTO is directly due to PTO taken for mandatory MDO’s.

6. Based on number 2 above, if there is available PTO after the submission deadline for the PTO request period, any unused vacation may be given on a first come first served basis prior to the schedule posting for the days requested.

7. Once a time off request has been approved, based on number 4, it can only be changed by mutual agreement between the Medical Center and the nurse.

8. Time-off requests shall not be converted to requests for unpaid time off absent Medical Center approval.
21.5 PTO Priority Requests—When "priority" requests for a block of PTOs of seven (7) consecutive calendar days or more are submitted to the Medical Center in writing at least four (4) months but not more than six (6) months in advance of the posting deadline for the schedule containing the beginning of such block, the relative length of continuous employment will not be relevant except as specified below in this section.

A. "Priority" requests are those where it is extremely important that the nurse in question actually be scheduled for the PTOs requested, due to events requiring definite scheduling commitments, such as family reunions, graduations, advance airline reservations or travel tour bookings, vacations during the same time period as a spouse's or other relative's pre-scheduled vacation, and the like. Nurses will indicate that a request is a priority request by email notification to the manager.

B. A nurse will be eligible for this "priority" request procedure only if the nurse has, on the request date, sufficient PTO accrual to cover the requested time off, or is expected to have such accrual, based on the nurse's accrual level, when the requested time off would occur.

C. The Medical Center will inform the nurse no later than one (1) month after receiving the priority request whether the requested PTOs will be granted or denied.

D. If more nurses make priority requests under this paragraph for the same days than can be accommodated consistent with the unit's core staffing level, the request(s) received on the earliest date will be given preference, except that, in the case of requests received on the same date, the nurse with the most seniority will be given preference. Such seniority preference may not be exercised more than once in any two (2) consecutive calendar years.

E. Nurses may not priority request the same holiday off in a two-year cycle nor may they priority request the days between Christmas Eve and New Year's Day and/or the week of 12-Spring Break.

21.5 Holidays - The Medical Center shall attempt to rotate holiday work. Units will develop guidelines that provide for the fair and just rotation of the scheduling of shifts on holidays. The parties agree to respect such unit-based guidelines, even if they are not seniority-based. The PTO/vacation scheduling process may not be used to avoid or circumvent the fair and just rotation of holiday work.

21.6 Holidays and PTO for Surgical Services - In a unit department that is "closed" on a designated holiday (New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving, and Christmas) for routine patient care or elective cases, but may provide nursing care on an urgent or emergency basis, the following will apply:
A. A nurse will not be required to use PTO if (1) the nurse works in a unit that is normally scheduled only Monday through Friday; (2) the unit is closed for the holiday; and (3) the Medical Center places the nurse on standby for the holiday.

B. Full-time nurses who normally work a five (5) day a week position, and who do not normally work on holidays, may request PTO on such holiday.

C. Part-time nurses will be scheduled for their normal number of scheduled hours in the holiday week, with the holiday considered as one of their regular days off, unless the nurse requests PTO for the holiday in accordance with 12.9, 16.2b, and 16.4.

D. Being on standby call on the holiday will not affect PTO eligibility under this section.

21.7 Conditions For Paid Time - All scheduled or unscheduled PTO hours taken shall be with pay. All scheduled or unscheduled time off taken by an RN nurse, except to the extent specified to the contrary below, shall be paid time off.

21.8 Taking Unpaid Time Off

An RN nurse can take only the following time off, if desired, without pay:

1. Leaving early (with supervisory approval).

2. Supervisory reduction in force (temporary layoff, shift cancellation or layoff for part of shift).

3. Time spent in collective bargaining negotiations.

21.9-8 Finding Replacements - Any nurse exercising her/his option to find an acceptable replacement for a scheduled shift (and who does not merely trade shifts with the replacement employee during the same work week) will take PTO pay for this time off and such trade cannot result in overtime or other premium payments.

21.10-9 PTO Accrual and Shift Cancellation - An RN nurse may occasionally have a shift canceled, or be requested to go home for part of a shift, due to lack of work. Sometimes the nurse may be requested to stay on an on-call basis at home. In such shift cancellations or layoffs for a portion of a shift, the RN nurse will continue to accrue PTO and EIT hours for the canceled hours in the shift. He or she shall have the option of taking such canceled hours as unpaid time off or PTOs. Through December 31, 2019, if the nurse chooses to take these canceled hours of a shift as PTOs and is requested by the Medical Center to stay "on-call" for these hours as well, any PTO pay shall be in addition to on-call pay. This section applies to nurses employed on or before April 19, 2011 only.

21.11-10 Computation of PTO Pay - Compensation for PTO hours will be at the straight-time rate of pay.
A. For nurses not in variable shift positions, it will include shift differentials or other sorts of premium pay (e.g., Charge nurse pay) for those nurses regularly working more than eighty percent (80%) of their time on shifts or in jobs which receive such premium pay.

B. For nurses in variable shift positions, the only premium rate that will be included in PTO pay will be certification premium which would have been payable to the nurse if the nurse had worked such hours. However, at the beginning of each calendar year, the Medical Center will determine the percentage of the nurse’s time worked during the preceding calendar year on shifts for which shift premium or a special job premium (Charge nurse) was paid. If the percentage is more than eighty percent (80%) of their time on shifts or in jobs which receive such premium pay, then a supplemental payment will be issued for such premium pay, as applicable, for PTO taken during the preceding calendar year.

21.12-11 PTO Benefit Year - The paid leave benefit year will commence January 1 of each year and end December 31 of each year. There shall be no minimum number of PTO days which an RN nurse must take each benefit year.

21.13-12 Extended Illness Time (EIT) Defined - Another benefit of paid leave is the extended illness bank (EIT). EIT hours are intended to be used only in cases of disability due to extended illness or accident.

A. Therefore, for a period of one (1) year following ratification, EIT can only be used after a nurse has been ill or disabled for twenty-four (24) consecutive working hours, for scheduled hours missed after said working hours; or earlier for scheduled hours missed from the first day of hospitalization, including being in the Medical Center for day surgery. Nurses employed on or before April 19, 2011 who have 240 or more hours of EIT may use EIT hours for illnesses of less than twenty-four (24) working hours following a waiting period of twenty-four (24) consecutive scheduled working hours. Nurses who were hired after April 19, 2011 who have accumulated over 240 EIT hours may use these hours for illnesses of less than twenty-four (24) consecutive working hours.

The accrual and computation of pay conditions for EIT hours are the same as for PTOs (see Sections 21.2 and 21.11).

21.14-13 EIT Accrual — Through January 4, 2020, for every hour paid, 0.027 EIT hours are accumulated by nurse with an FTE of 0.6 or higher both full-time and part-time employees. This amounts to approximately seven (7) days per year for full-time employees. EITs can accumulate to a maximum of 720 hours, or ninety (90) days. Effective with the pay period that begins Sunday, January 5, 2020, no further EIT accrual will occur. All existing EIT accruals for then-current nurses shall be frozen as of that date and shall be placed in an Extended Illness bank for each respective nurse. Nurses hired on or after January 5, 2020 will not accrue or participate in EIT.

a. **EIT Use (through January 4, 2020)** - Any nurse utilizing EITs will be required to provide a physician’s statement to the Medical Center which details the beginning and ending dates of the disability due to accident or illness, and the nature of the disability, to be eligible for EIT payments. For nurses employed on or before April 19, 2011, those eligible for first day use of EITs must provide such a physician’s statement for such disabilities lasting three or more days.

b. **EIT Use (January 5, 2020 to January 9, 2021):** Effective Jan. 5, 2020 and for a period of one (1) year (through Jan. 9, 2021), accrued EIT may be used for the following purposes:

1. Top-up short-term disability pay to 100%
2. Top-up paid parental leave pay to 100%
3. Top-up Workers’ Compensation pay to 100%
4. Use to care for a family member when outpatient on an approved FMLA, after a waiting period of missed work that is equal to the short of the equivalent of three regularly scheduled work shifts or twenty-four (24) scheduled hours.
5. Use for an approved intermittent leave if PTO hours have been exhausted

**211615 Other Leaves** - PTO and EIT hours are paid leave hours designed to substitute for sick leave, vacation and holidays. Educational leave, unpaid medical or personal convenience leaves of absence, bereavement leave, jury duty and witness leave, and so forth, shall continue to be available to nurses, and administered by the Medical Center as in the past, according to the provisions of this Agreement.

**211716 Cashout of PTO on Termination** - Upon termination of employment, an nurseRN shall be paid for all unused accrued PTOs at the nurseRN’s straight-time rate of pay, including premium pay when applicable, provided the RN is not within the first 90 days of continuous employment. An nurseRN shall not be reimbursed for unused days in the Extended Illness Time.

**211817 Workers’ Compensation** — Effective Jan. 5, 2020, PTO may also be used in addition to receiving workers’ compensation benefits if EIT is not available, up to a combined total of PTO, EIT (if any), and workers’ compensation benefits that does not exceed 100 percent of the nurse’s base pay two-thirds (2/3) of the nurse’s straight-time pay for the missed hours.

**211918 Effect of PTO/EIT Payment** - Once PTO or EIT is paid to a nurse, it will not be transferred back to the nurse’s PTO or EIT account.

**2119 Short-Term Disability and Paid Parental Leave** - Providence will provide a short-term disability and paid parental leave benefit effective the first full pay period following Jan. 1, 2019. Short-term disability and paid parental leave benefits will be paid at 65 percent of the nurse’s base rate of pay plus shift differential plus certification premium, if applicable.
Participation shall be subject to specific requirements outlined in the HR policy and timely submission of required documentation to the benefit/leave administrator.