

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38  
39  
40  
41  
42  
43  
44  
45  
46

**UNION PROPOSAL**  
**ARTICLE 9 - HOURS OF WORK**

A. The workweek begins Sunday at 12:01 am and ends Saturday at midnight.

B. Workdays: The basic workday shall be eight, 10 or 12 hours.

The Hospital and an individual Nurse may mutually agree to alter the hours of the basic workday to workdays with fewer than eight, 10 or 12 hours. Such agreement shall be in writing. The Hospital reserves the right to cancel such agreements by giving written notice of at least 30 calendar days to the affected Nurse. If a Nurse in an existing 12-hour position is medically unable to perform 12 hours of work (supported by a fitness-for-duty evaluation), an eight-hour position may be considered if staffing needs can be accommodated. The Hospital may offer and a Nurse may accept shorter single shifts to meet Department needs, as such Department needs arise.

C. Overtime: Overtime compensation shall be paid at one and one-half times the Nurse's regular rate of pay, for all hours worked in excess of one of the following:

1. Daily overtime: Hours worked in excess of the basic workday (8, 10, 12 hour shifts). Approved shifts of less than eight hours as posted on the work schedule will not incur overtime until a minimum of eight hours is worked.
2. Weekly overtime: Hours worked in excess of ~~40 hours~~ FTE in a workweek (except for Nurses on an 8/80 pay plan).

Overtime must be approved by your manager or designee in advance, except in emergencies where required by patient care or other exigent circumstances. Emergency overtime must be approved in advance when feasible or on the next regular workday when advance approval is not feasible.

D. Rest Periods: One 15-minute rest period shall be allowed during each four-hour period of employment. Managers and Nurses shall be responsible for working together to arrange suitable rest periods. Nurses must notify their manager if they are unable to take their rest break due to patient care needs so their managers or their designee can ensure they get their rest period as soon as possible.

E. Meal Period. Nurses scheduled for a shift of 6 hours or more must take a meal period of 30 uninterrupted minutes. During the meal period, Nurses are relieved of duty and must use a badge reader or computer to clock in/out in real time for their meal periods at the clock closest to their work area.

Managers and Nurses shall be responsible for working together to arrange suitable meal periods. Meal Periods shall be scheduled so they can be taken without interruption. Managers or designee shall schedule nurses' meal periods and provide relief as necessary. Nurses who are unable to take a meal period as a result of patient load shall be paid for the time worked. Nurses are expected to take their scheduled meal period, except in emergency situations. This requires Nurses to manage their workload and

1 communicate with their Managers or designee to ensure the meal period can be taken.  
2 Meal periods may be scheduled taken between the third and ninth hour worked,  
3 depending on the length of the shift and the needs of the department.  
4

5 F. Minimum Shift Pay: Nurses shall be paid a minimum of three hours' pay for each  
6 shift worked unless the nurse volunteers to take the time off without pay.  
7

8 G. Notice for Low Census: During periods of low-census, the Hospital shall notify  
9 Nurses that they are not needed for a scheduled shift no later than two hours prior to the  
10 nurse's scheduled shift. A reasonable effort by the Hospital would include an attempt to  
11 contact the Nurse by telephone or text at up to two telephone numbers listed by the nurse.  
12

13 If the Hospital has not notified the nurse that they are not needed for their schedule  
14 and they show up for work, they shall be offered the opportunity to work for a minimum of  
15 three hours. A nurse who has not been timely notified of low census for an LSI shift shall  
16 be offered the opportunity to work a minimum of four hours. A nurse may elect to forego  
17 this work opportunity and take the time off with (utilizing APL) or without pay. When the  
18 Hospital has made a reasonable effort to notify the nurse in advance of the shift not to  
19 report, the three-hour minimum shall not apply.  
20

21 H. Low Census: When patient census and acuity create a need to reduce nurse  
22 staffing after the schedule has been posted, individual Nurses will be subject to low  
23 census pursuant to the following procedures. In the application of the factors described  
24 below relating to low-census decisions, the primary considerations shall be the  
25 maintenance, at all times, of safe patient care, continuity of care by the Nurse currently  
26 assigned to such activities, and the maintenance of adequate nursing staff to serve  
27 Hospital patients. The appropriate mix of skill sets, certifications required to care for the  
28 immediate patient census and continuity of nursing care will be evaluated and  
29 determined by Hospital supervisors/manager/charge nurse.  
30

31 I. Low census may occur for a portion of a scheduled shift (including a decision to  
32 delay the start time of a previously scheduled nurse) or for the entire scheduled shift.  
33 A delayed start may be used only once per Nurse, per scheduled shift, and shall  
34 count in the low-census rotation. As long as the criteria described in the paragraph  
35 above have been met, nurses shall be selected for low census in the following order:  
36

- 37 1. Agency/travelers (within the limits of their contract with the Hospital) Agency  
38 nurses will float to other units prior to bargaining unit Nurses if the agency  
39 contract so permits. (Note: the Hospital agrees that it will seek to include low  
40 census and floating of agency/travelers in its contracts with agency/travelers.)
- 41 2. **Resource Nurses**
- 42 3. Nurses working at premium pay (for example, 1.5x)
- 43 4. Volunteers who are scheduled for an extra shift that would be compensated  
44 at straight time (beyond budgeted hours)
- 45 5. All other volunteers

- 1 6. Nurses scheduled for an extra shift that would be compensated at straight  
2 time (beyond budgeted hours)
- 3 7. On-call Nurses
- 4 8. All other nurses assigned to the unit that day (including Legacy Resource  
5 Pool Nurses)

6  
7 The Nurse selected for the "low census" (which includes delayed starts and standby)  
8 within the groups described above shall be the nurse on the shift who has the lowest  
9 percentage of low census in the last rolling calendar year (as described in Legacy policy;  
10 see 900.4913 – Simplicity Guidelines -- Staffing). All efforts will be made to "cap"  
11 mandatory low census at no more than one shift per pay period per Nurse (excluding On-  
12 call Nurses). Once a Nurse is involuntarily low-censused for a shift, regardless of low-  
13 census percentage, the Nurse would not be low-censused again until all ~~staff~~ **Nurses**  
14 within the department and shift are low-censused once within that pay period.

15  
16 The Hospital has the option of assigning the Nurse to be on standby when the nurse  
17 has been selected for low census. Except in the Family Birth Center ("FBC"), the  
18 Hospital may assign a maximum of two Nurses to standby per unit. Except in FBC, if  
19 additional Nurses are low censused in that unit, the additional Nurses may be placed in  
20 standby only through mutual agreement between Nurse and the Hospital. If a Nurse ~~is~~  
21 ~~placed on~~ **agrees to** standby, they will be paid the standby rate of pay for the time spent  
22 on standby. If the ~~n~~**Nurse is does not** ~~placed on~~ **agree to** standby, they will not be  
23 required to remain available for call back.

- 24 J. Floating. Traveler/Agency Nurses shall not displace part-time or full-time Nurses  
25 assigned to work a scheduled straight-time shift, unless the Nurse volunteers to  
26 float. A Nurse who is regularly assigned to one (1) department may be asked to  
27 volunteer to float (defined as: going to another department and being assigned  
28 patient(s)) to any other department for which they have the required  
29 competency. Every reasonable effort shall be made to limit a nurse to only one  
30 (1) float assignment per shift. Float Nurses shall be floated prior to any floating  
31 of regularly scheduled department Nurses, as long as the qualifications,  
32 competencies and orientation to the physical environment to perform the work  
33 required.

- 34  
35 K. Mandatory Departmental Nursing Staff Meetings: Nurses on a day off or  
36 working night shift shall be compensated at the rate of one-and-one-half times  
37 the regular rate for time attending mandatory departmental nursing staff  
38 meetings. Nurse Managers will schedule each departmental meeting for their  
39 department. Nurses who are scheduled to work on the day of a required staff  
40 meeting or otherwise excused, will read the minutes for that staff meeting within  
41 ten days for the purpose of meeting the required attendance rule.

- 42  
43 9. Standby: Each department shall maintain a voluntary standby list for high census  
44 days. Nurses who sign up for voluntary standby shall be the first Nurses contacted  
45 if the Hospital needs additional staff. Surgical Services Nurses shall be required to  
46 perform surgical services call time. Surgical services call time shall begin when the

1 nurse is expected to be available by phone. All other nurses shall not be required  
2 to perform standby duties except when called off due to low census and placed on  
3 standby pursuant to Section H of this Article.

4 L. Scheduling Procedure: The Hospital shall first schedule all full and part-time nurses  
5 on the regular schedule. Full-time, part-time, and on-call nurses may then declare their  
6 availability. Extra available shifts shall be distributed to all those Nurses interested in an  
7 equitable fashion in each respective department, provided that any shifts with the potential  
8 to result in overtime or premium pay will be scheduled last.  
9 M. Pay for Call Worked: Nurses on standby (scheduled or unscheduled), in addition to their standby pay, shall  
10 receive time and a half their regular rate of pay for call worked (defined as time worked  
11 when called back from standby). Call Worked begins when the Nurse reports to the  
12 Hospital, ready for work. If a Nurse is called into work from standby, they will receive a  
13 minimum of three (3) hours pay regardless of hours worked.  
14

15 N. Scheduling: The Hospital shall schedule all full and part-time nurses for periods of  
16 at least six weeks. The schedule will be posted at least four weeks before it goes into  
17 effect. The Hospital may post a schedule for a longer period, and may post it further in  
18 advance, after providing prior written notice to the Association. Once posted, schedules  
19 may not be changed except by mutual consent of the nurse and the Hospital.  
20

21 O. Notice for Absences: Nurses are expected to provide advance notice of any  
22 absences as soon as possible, but no later than at least two hours prior to the start  
23 of the scheduled shift.  
24

25 P. Weekend Work: For work on the weekend, the Hospital will make a reasonable  
26 effort to have Nurses who work 12-hour shifts work no more than every third  
27 weekend. Any nurse who is required to work more than every other weekend shall  
28 be paid one-and-a-half times their regular rate of pay for all weekend hours worked  
29 outside of their normal rotation (note, however, that this premium pay will not apply  
30 if the change in required weekend rotation is due to holiday scheduling.) The  
31 weekend is defined as beginning at 2300 on Friday and ending at 2330 on Sunday.  
32 Weekend differential is paid based on the majority of hours worked within that time-  
33 frame, and is paid only for hours worked. Nurses may volunteer for more weekend  
34 shifts than are required. Volunteers will not receive one-and-a-half times (1 1/2x)  
35 their regular rate of pay, unless as required by Legacy policy.  
36  
37  
38