

Second Set of Proposals February 22, 2017

The Union Reserves the right to add to, modify, or rescind any of its proposals.

Proposal 19

Rationale:

Due to the disruption in personal life involved, all call pay should be at least the minimum wage, call should be for emergencies not basic staffing, and a one-hour rule is appropriate for areas of non-mandatory call.

Proposal:

ARTICLE XXI

CALL PAY

<u>Section 1</u>. Provisions of this section will apply to Registered Nurses working on call in all areas of the Hospital. <u>Call may only be activated to deliver patient care in emergency situations.</u> A Registered Nurse assigned call will be paid as follows:

(a.) Out of Hospital Call. A Registered Nurse able to reach his/her place of work in the Hospital within 30 **60** minutes may take call from home, except as noted in Section 1.c., below, and will receive seventyfive percent (75%) of the applicable minimum wage per hour for all hours on the shift of call as assigned regardless of whether s/he is called in to work.

(b.) In Hospital Call. A Registered Nurse may remain in the Hospital in the call room provided in order to comply with the response time requirements in Section 1.a. above, and will receive seventy five percent (75%) of the applicable minimum wage per hour for all hours on the shift of call as assigned, regardless s/he is called in to work.

(c.) Required On-Premises Call and Off- Premises Mandatory Call.

(i.) A Registered Nurse may be required to remain on Hospital premises in the call room provided, and will receive \$1.00 \$2.00 in addition to minimum wage per hour for all hours on the call shift as assigned, regardless of whether s/he is called in to work.

(ii.) A Registered Nurse who is required to take off- premises call will receive minimum wage per hour for all hours on the call shift as assigned, regardless of whether she/he is called in to work.

(d.) In the event a Registered Nurse is called in to work while on call, s/he shall be paid in his/her base rate plus applicable premiums for each hour s/he works. Overtime pay shall be time and one-half when the total hours paid are twelve hours (12) or more in a twenty-four hour period.

e. A Registered Nurse called in to work and who is not scheduled to be on call shall receive call pay as provided under Section (c)(ii). above, for the length of the call shift.

(f.) A Registered Nurse scheduled to be on-call on a holiday and who is called in to work may use the time worked towards control hours for the week.

<u>Section 2.</u> PACU, PACU EXT, OR, Interventional Radiology and Endoscopy Departments with Mandatory Call.

(a.) Out of Hospital Call. A Registered Nurse able to reach his/her place of work in the Hospital within 30 minutes may take call from home, except as noted in Section 2.b., below, and will minimum wage for all hours on the shift of call as assigned regardless of whether s/he is called in to work.

(b.) In Hospital Call. A Registered Nurse may remain in the Hospital in the call room provided in order to comply with the response time requirements in Section 2.a. above, and will receive minimum wage for all hours on the shift of call as assigned, regardless of whether s/he is called in to work.

(a) (c) If a Registered Nurse on-call works less than six and one-half hours past 11:00 p.m. and is scheduled to work the day shift immediately following (including flexible hours beginning before 12:00 noon), s/he will normally be given time off without loss of pay immediately prior to the end of such day shift. When mutually agreed-upon and based upon pre-planned approval by the manager, such time back may be taken at the beginning of her/his scheduled shift. Such time off shall be equal to the time actually worked on the night shift or two hours, whichever is greatest.

(b) (d) If a Registered Nurse on-call works six and one-half or more hours into their assigned call shift and is scheduled to work the next day or evening shift, s/he will be paid for a full shift and given the next day off with pay.

Proposal 20

Rationale:

The Labor/Management Committee needs to be updated to reflect the new organizational structure of the Union, and to facilitate constructive dialogue.

Proposal:

ARTICLE XXIX

LABOR/MANAGEMENT CONSULTATION

The Senior Vice President of Human Resources and the SVP/CNO (or the appropriate Manager/Supervisor), or their designees, and <u>the Executive Board of Unit 47 shall meet monthly at</u> <u>regularly scheduled meetings</u> President of Unit #47 and the Federation Representative, or their designees, shall meet periodically at mutually convenient times during the term of this Agreement to discuss matters of concern to the parties. Said meetings shall be informal, and any matters discussed therein shall not in any way alter any provision of this Agreement. <u>If scheduled during the working</u> hours of any of the Unit 47 members, they will remain on employer paid status during the meeting.

This provision will not be utilized by the Hospital or Unit #47 or the Federation to diminish or enlarge (or have any affect on) whatever rights or obligations might exist with respect to bargaining during the terms of this Agreement.

Either party may bring additional people to the meeting, with notice, including other managers and the AFT Connecticut Representative. When Unit 47 members are invited to share information, they will not suffer loss of pay for attending.

Proposal 21

Rationale:

Updating the LOA to reflect new contract term.

Proposal:

LETTER OF UNDERSTANDING

The Hospital agrees that during the term of this Agreement (2014 2017) (**2017-?)** it shall not challenge the supervisory status, as defined in Section 2(11) of the National Labor Relations Act, of any bargaining unit nurse based solely upon her/his functioning in the role of Charge Nurse.

