

COLLECTIVE AGREEMENT

BETWEEN

WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION

AND

MANITOBA NURSES UNION

April 1, 2017 to March 31, 2024

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THIS AGREEMENT MADE BETWEEN:

WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
(hereinafter referred to as the “Employers Organization”)

– and –

MANITOBA NURSES UNION
(hereinafter referred to as the “Union”)

WHEREAS, it is the desire of both parties to this Agreement to recognize a mutual obligation to provide the best possible quality of health care through the successful operation of the Health Care Organization; and recognizing that some Employers are Faith based; and to maintain harmonious relationships between the Employers and the members of the Union; and to recognize the value of joint discussion and negotiation in matters related to working conditions; and

WHEREAS, the Employers Organization and the Union have agreed to enter into a Collective Agreement containing terms and conditions of employment of the nurses as herein set forth;

WHEREAS, the Employers Organization recognizes the responsibility to secure nurses from risks to their safety, health and welfare arising out of or in connection with the activities in their workplaces, the Employers will comply with their responsibilities in accordance with Section 2(2) of The Workplace Safety and Health Act.

NOW, THEREFORE, the Employers Organization and the Union mutually covenant and agree as follows:

ARTICLE 1 -- SCOPE OF RECOGNITION

101 The Employers Organization recognizes the Union as sole bargaining agent for nurses in the bargaining unit defined in the Health Section Bargaining Unit Review Act Certificate HSBURA-0031.

ARTICLE 2 -- DURATION

201 This Collective Agreement shall be in full force and effect from the 1st day of April, 2017, up to and including the 31st day of March, 2024.

202 Either party to this Collective Agreement desiring to terminate this Collective Agreement or renegotiate a new Agreement, shall give notice to the other party in writing at least ninety (90) days prior to the expiration date of the Collective Agreement and present its proposals in writing at a meeting between the parties, within thirty (30) days following such notice. If notice is not given as above, the Collective Agreement shall be automatically renewed without change for a further period of one (1) year.

203 The provisions of this Agreement shall continue in effect following the expiry date until replaced by a new Agreement, or until the declaration of a strike or lockout, whichever occurs first.

ARTICLE 3 -- DEFINITIONS

301 A "nurse" is a Registered Nurse, or a Nurse Practitioner (Registered Nurse Extended Practice) or a Licensed Practical Nurse, or a Registered Psychiatric Nurse, or a graduate nurse, or a graduate nurse extended practice or a graduate practical nurse, or a graduate psychiatric nurse, or an Operating Room Technician who is employed by the Employer in one of the occupational classifications described in Appendix "C" attached hereto and forming part of this Agreement, subject to Article 3807 herein.

302 Employment status of nurses shall be defined as:

- (a) A "full-time nurse" is one who works the full prescribed hours of work specified in Article 14.
- (b) A "part-time nurse" is one who works on a regular and continuing basis for less than the full prescribed hours as specified in Article 14 but not less than seven and three-quarter (7.75) hours per bi-weekly period when averaged over a four (4) week period.
- (c) A "casual nurse" is one called in occasionally by the Employer to replace a full-time or part-time nurse or to supplement regular staff coverage in situations of unforeseen staff shortage.

303 "Weekend" shall mean the 48 hour period between 0001 hours on the Saturday to 2400 hours on the following Sunday.

304 "Bi-weekly period" as used herein shall mean the two (2) weeks constituting a pay period.

305 The provisions of this Collective Agreement are intended to be gender neutral and gender inclusive. A word used in the singular applies also in the plural, unless the context otherwise requires.

306 A "Registered Nurse" or a "Nurse Practitioner" (Registered Nurse Extended Practice) is a person entitled to practice under the Regulated Health Professions Act of Manitoba.

307 A "Licensed Practical Nurse" is a person entitled to practice under the Licensed Practical Nurses' Act of Manitoba.

308 A "Registered Psychiatric Nurse" is a person entitled to practice under the Regulated Health Professions Act of Manitoba.

309 An "Operating Room Technician" shall mean a person who has graduated from a formal course in Operating Room Technology approved by the Employer.

310 A "graduate nurse" means a person whose name is entered on the graduate nurse register of the College of Registered Nurses of Manitoba. A "graduate nurse extended practice" means a person whose name is entered on the graduate nurse extended practice register of the College of Registered Nurses of Manitoba. A "graduate practical nurse" means a person whose name is entered on the register of graduate practical nurses of the College of Licensed Practical Nurses of Manitoba. A "graduate psychiatric nurse" means a person whose name is entered on the register of graduate psychiatric nurses of the College of Registered Psychiatric Nurses of Manitoba. The terms of this Agreement shall be applicable to the graduate nurse, the graduate practical nurse, graduate psychiatric nurse, and graduate nurse practitioner, except as otherwise specified in the Collective Agreement.

311 Definition of Continuous Service/Length of Employment

"Length of Employment" with an Employer shall mean the period of time since an employee last became a full-time or part-time employee in a permanent or term position for purposes of calculating all entitlements pursuant to this Agreement including, but not limited to, vacation, bonus vacation and pre-retirement leave and "Length of Service" shall have a similar meaning. Conversion from full-time or part-time status to casual status shall be considered a break in service and no period of casual employment or prior full-time or part-time employment in a permanent or term position shall be included in an employee's length of employment or length of service even when a casual employee subsequently becomes a full-time or part-time employee.

312 "Site(s)" shall mean the program(s)/facility(ies) within the Employer as listed in Appendix "D" under the Site List column.

313 "Employer" shall mean the legal entity with whom the nurse is employed as listed in Appendix "D" under the Employer List column.

314 "Employers Organization" shall mean the party to this agreement, being the collective total of Employers listed in Appendix "D" (Employer list column) herein established for the purpose of identifying the group of Employers party to this Collective Agreement.

ARTICLE 4 -- MANAGEMENT RIGHTS

401 The Union recognizes the sole right of the Employer, unless otherwise provided in this Agreement, to exercise its function as management in an equitable manner, under which it shall have, amongst others, the right to maintain efficiency and quality of patient/resident/client care and to direct the work of the nurses; the right to hire, classify, promote, transfer and assign to nursing positions; the right to demote, discipline, suspend, discharge for just cause; to determine job content and number of nurses in a nursing unit; and to make, alter and enforce rules and regulations in a manner consistent with the terms of this Agreement.

402 The Employer, in administering the Collective Agreement, shall act reasonably, fairly, in good faith, and in a manner consistent with the Collective Agreement as a whole.

ARTICLE 5 -- UNION SECURITY AND REPRESENTATION

501 All nurses who are union members in good standing, or who may subsequently become union members in good standing shall as a condition of employment maintain union membership during the life of this Agreement. All nurses who are not union members shall not be required to become members as a condition of employment. All new nurses hired shall as a condition of employment, become union members within ninety (90) days from the date of employment and shall as a condition of employment, remain union members in good standing during the life of this Agreement.

The Employer agrees to deduct an amount equal to the current Union dues as directed in writing by the Manitoba Nurses' Union from each nurse in the bargaining unit, whether a member of the Union or not. Such letter shall include any dues exemptions. The Employer shall forward such dues to the Manitoba Nurses' Union by the fifteenth (15th) day of the following month together with a list of the names of nurses from each site for whom deductions have been made and a list of the names of all nurses newly hired/terminated and all nurses on leave of absence for a period of four (4) weeks or longer. Electronic copies of the lists from each site will be provided with specifications as indicated below.

Annually, a list including the name, address and telephone number of each nurse currently in the bargaining unit shall be sent to the Union. This information may only be used by the Union for the purpose of communicating with its members.

The Employer also agrees to deduct once annually the amount of any special general assessment made by the Union. The Union shall notify the Employer, in writing, of the amount of the assessment at least one (1) month in advance of the end of the pay period in which the deductions are to be made.

The Employer agrees to provide each newly hired nurse with a Union Membership Form, or provide an electronic Union Membership Form, or link to an electronic Union Membership Form as requested/determined by the Union at the time of hiring. A nurse who chooses to complete the Union Membership Form shall forward the completed Union Membership Form to the Local/Worksite President.

The Union commits to have in place reasonable administrative and physical safeguards to ensure the confidentiality and security of this information.

502 The Employer agrees to deduct union dues and the amount of any special general assessment in arrears upon receiving written authorization from the Union, and the Union agrees that all nurses to which the foregoing applies shall be given advance notice of the requested adjustment; and the Union further agrees to make refunds to nurses in the event of an overdeduction of dues.

503 When a nurse makes known to the Employer or the Union that they are a member of a religious group which has as one of its articles of faith the belief that members of the group are precluded from being members of or financially supporting any union or professional association, the matter shall be dealt with in accordance with Section 76(3) of the Labour Relations Act of Manitoba.

504 The Union shall notify the Employer in writing of any change in the amount of dues at least one (1) month in advance of the end of the pay period in which the deductions are to be made; however, such change shall not be made more frequently than once in a twelve (12) month period.

505 The Union shall save the Employer harmless from any claims from nurses covered by this Agreement as a result of dues or special general assessments having been collected in accordance with the terms of this Article.

506 The Union shall provide the Employer with a list of officers and nurse representatives of the Union, and shall provide the Employer with a revised list within four (4) weeks of any changes made. The Employer also agrees to notify the Union when there are changes to relevant management positions.

507 Union activities other than those provided for in this Agreement shall not be conducted during the hours of duty of any nurse, nor in any non-public restricted area of the Employer's premises, without prior authorization by persons designated by the Employer.

508 If required in relation to the renewal of this Agreement or any new Agreement which may be negotiated as herein provided, nurse representatives or officers of the Union shall be granted time off duty, without loss of pay, to participate in negotiations in which both the Employer and the Union are represented, subject to a maximum cost as follows:

(a) Local Negotiations:

Facilities of less than 150 beds -- Two (2) nurses
Facilities of 151 - 400 beds -- Three (3) nurses
Facilities of over 400 beds -- Four (4) nurses

This sub-paragraph (a) shall only apply in the event Local Negotiations of individual site Collective Agreements are reinstated, such that the Employers Organization structure established under the HSBURA is no longer applicable to the affected Employers/sites for the purpose of collective bargaining.

(b) In the case of "Central Table" negotiations, salaries of up to twelve (12) nurses representing participating Manitoba Nurses' Union regions/locals shall be maintained by the respective Employers.

The number of nurses from each Employers Organization shall be designated/determined by the Union.

509 Copies of this Agreement shall be provided by the Union, and the Employer will supply a copy to each nurse at the time of hiring. The Employer agrees to obtain a completed Manitoba Nurses' Union Membership application form for all newly hired nurses.

510 A suitable notice board or notice board space for the use of the Union will be provided by the Employer. Such notice boards shall be located in each building within the site where members of the bargaining unit are regularly employed. The Employer reserves the right to request the removal of posted material if considered damaging to the Employer and the Union agrees to comply with this request.

511 The Employer agrees to show on the income tax (T-4) slip of each nurse, the total amount of union dues deducted from their earnings and remitted to the Union.

512 A representative of the Union shall be granted not less than forty-five (45) minutes during the orientation period in order to familiarize nurses in the bargaining unit with the general conditions and responsibilities with respect to this Collective Agreement and to the Union. A management representative may be present during this period.

513 No nurse shall be required to make a written or verbal agreement with the Employer which may conflict with the terms of this Agreement, in accordance with Section 72(1) of the Labour Relations Act of Manitoba.

ARTICLE 6 -- CONTINUANCE OF OPERATIONS

601 The Union agrees that during the life of this Agreement there shall be no strike, and to this end the Union will take affirmative action to prevent any nurse covered by this Agreement from striking. The Employer agrees that for the duration of this Agreement, there shall be no lockout.

ARTICLE 7 -- NON DISCRIMINATION

701 The parties agree that there shall be no discrimination, interference, restriction, harassment or coercion based on the applicable characteristics cited in Section 9 of the Human Rights Code of Manitoba.

702 The Employer and the Union agree that no form of workplace harassment, sexual harassment, disruptive workplace conflict, disrespectful behavior or violence, shall be condoned in the workplace. It is further agreed that both parties will work together in recognizing and resolving such problems should they arise. Situations involving sexual harassment shall be treated in strict confidence by both the Employer and the Union, except where disclosure is required by law.

ARTICLE 7A -- HEALTH AND SAFETY

7A01 The parties to this Collective Agreement endorse the importance of a safe and secure environment, in which nurses must work. The parties will work together in recognizing and resolving Occupational Health and Safety issues.

7A02 In accordance with the Workplace Safety and Health Act, the Employer agrees to make reasonable and proper provisions for the maintenance of a high standard of health and safety in the workplace and will provide safety and personal protective equipment where required and install safety devices where necessary.

7A03 The Workplace Safety and Health Committee shall operate with Union representation for the purpose of ensuring health and safety in the workplace and the identification of health and safety hazards.

On an annual basis the Workplace Safety and Health Committee will be provided with and will review the Critical Incident Stress Management policy, security/response plans and all other applicable policies and regulations.

The Employer will make available where it exists, support through the Critical Incident Stress Management (CISM) team, or where there is no CISM team, appropriate Critical Incident support, to a nurse affected by a Critical Incident, an incident or circumstances that are deemed by the nurse to be outside the normal experience of their duties/workplace, and/or upon request of the nurse, or the manager on behalf of the nurse.

The Employer will communicate to members the option to activate CISM as well as provide information as to the nature of the support provided by the CISM teams.

7A04 The Employer and the Union agree that no form of abuse of nurses will be condoned in the workplace. Both parties will work together in recognizing, facilitating the reporting of alleged abuse and resolving such problems as they arise. Any nurse who believes a situation may become or has become abusive shall report this to the immediate supervisor. The Employer shall notify the Union ninety-six (96) hours after the receipt of the report. Every reasonable effort will be made to rectify the abusive situation to the mutual satisfaction of the parties.

There shall be a policy supporting a Respectful Workplace and zero tolerance of staff abuse which shall be reviewed annually by the Workplace Health and Safety Committee. Such policy shall address the issue of communication strategies, which will include signage. The Employer's Respectful Workplace policy shall include a commitment to conclude the investigation as quickly as is reasonably possible

Any workplace injury or harmful exposure suffered by a nurse shall be reported to the Union no later than ninety-six (96) hours after the report/notification is made to the Employer. Such report to the Union will include the name of the affected nurse and a brief description as to the mechanism of injury/exposure, subject to the restrictions and requirements of PHIA.

7A05 At the request of a nurse, the Employer shall provide, at no cost to the nurse, vaccination(s) and/or immunization(s) for occupational illness(es) in accordance with the Canadian Immunization Guide from the Laboratory Centre for Disease for Health Canada.

All reasonable efforts should be made to provide immunization(s) to the nurse during their regularly scheduled work hours.

7A06 Rehabilitation and Return to Work Program - The Employer agrees to actively participate and facilitate the rehabilitation and return to work of ill, injured or disabled nurses even when they are not covered under the D & R, WCB or MPI programs. Any such nurse will be supernumerary in nature when reasonably possible. The Union shall be notified by the Employer if there is a request for a Rehabilitation and Return to Work Program for a nurse. The Employer shall include the Union in the initial meeting with the nurse to review the provisions of the program to ensure that the work designated is within their restrictions and limitations. If required, the Employer shall schedule subsequent (progress) review(s) with the Union and the nurse and may proceed without the Union's involvement subject to the Union's concurrence. Where appropriate, by agreement between the Employer and the Union, job postings may be waived.

Not Applicable at non-transferred sites

Nurses may be placed in a rehabilitation program within a fifty (50) kilometre radius of the originating site unless a greater distance is mutually agreed between the Employer and the nurse.

7A07 Whistle Blowing Protection - Nurses who exercise their rights in accordance with the Public Interest Disclosure Act shall not be subject to discipline or reprisal.

7A08 Basic pay or equivalent time off with a minimum of one (1) hour guaranteed to nurses who are not on duty, will be granted to nurses appointed by the Union to attend meetings of the Workplace Safety and Health Committee or to perform such other duties as may be specified in the Workplace Safety and Health Act or prescribed by regulation.

In accordance with the Workplace Safety and Health Act, a nurse is entitled to take time off from their regular work duties in order to carry out their duties as a committee member under this Act and the regulations. The nurse shall be paid by the Employer at their regular or premium pay, as applicable, for all time spent carrying out their duties as a committee member under this Act and the regulations.

Upon application, each nurse on the Workplace Safety and Health Committee shall be granted paid educational leave in accordance with the Workplace Safety and Health Act.

As part of the above paid education days, new Committee Members shall be required to attend a basics course offered by Manitoba Workplace Safety and Health or an equivalent course approved by the Workplace Safety and Health Committee within their first year on the Committee.

ARTICLE 7B -- REPRESENTATIVE WORKFORCE

7B01 Health services across Manitoba are provided in facilities located on the original lands of First Nations and Inuit peoples, and on the homeland of the Métis Nation. Manitoba's health authorities respect that First Nations treaties were made on these territories and we dedicate ourselves to collaborate in partnership with First Nations, Inuit, and Métis peoples in the spirit of reconciliation.

7B02 The Union and the Employer agree with the goal of achieving a representative workforce for First Nations, Métis, and Inuit ("Indigenous") peoples who are significantly underrepresented in the health workforce. Additional actions are needed to promote and facilitate employment of Indigenous persons in health care occupations at all levels. The parties shall work collaboratively to:

- (a) Develop strategic initiatives and programs that:
 - Foster mutual respect, trust, equity, open communication, and understanding;
 - Focus on recruiting, training, and career development of Indigenous staff;
 - Identify workplace barriers that may be discouraging or preventing Indigenous staff from entering and remaining in the workforce;
 - Foster reconciliation in race and cultural relations;
 - Promote the elimination of anti-Indigenous racism in the healthcare system.
- (b) Promote and publicize initiatives undertaken to encourage, facilitate, and support the development of a representative workforce.

7B03 The Employer will implement educational opportunities for all employees to promote awareness of cultural diversity with an emphasis on Indigenous peoples. This will include enhanced orientation sessions for new employees to promote cultural awareness with emphasis on Indigenous peoples. Anti-racism education will be offered. The Union will encourage participation in such efforts amongst its members.

7B04 Truth and Reconciliation

The parties agree to collaborate in finding constructive ways of implementing the Calls to Action outlined by the Truth and Reconciliation Commission of Canada, June 2015 that are relevant to health and healthcare, including improving cultural competencies, improving health outcomes, supporting culturally appropriate healthcare services, and increasing the number of Indigenous employees in the health care system.

ARTICLE 8 -- TECHNOLOGICAL CHANGE

801 Technological Change shall mean the introduction by the Employer of equipment or material of a different nature or kind than that previously used by the Employer, and a change in the manner in which the Employer carries on the work, that is directly related to the introduction of that equipment or material.

In the event of a technological change occurring during the life of this Agreement which will displace or adversely affect one or more nurses in the bargaining unit:

- (a) The Employer shall notify the Union at least one hundred and twenty (120) working days before the introduction of the technological change, with a detailed description of the project it intends to carry out, disclosing all foreseeable effects and repercussions on nurse(s).
- (b) The Employer and the Union will meet as soon as possible and not later than ninety (90) working days prior to the intended date of implementation for the purpose of negotiating reasonable provisions to protect the interest of nurse(s) so affected.
- (c) If the Employer and the Union fail to agree upon measures to protect the nurse(s) from any adverse effects, the matter may be referred by either party to Arbitration as provided for under the terms of this Agreement.

802

Applicable for WRHA (direct operations):

A nurse who is displaced from their job as a result of technological change:

- (i) shall be entitled to apply for any vacancy within the sites comprising the Employer, or
- (ii) shall have the right to displace a nurse with less seniority in accordance with Article 27 specified in this Agreement.

Applicable for all non-transferred sites:

A nurse who is displaced from their job as a result of technological change:

- (i) shall be entitled to apply for any vacancy, or
- (ii) shall have the right to displace a nurse with less seniority in accordance with Article 27 specified in this Agreement.

803 Where newer skills are required than are already possessed by nurse(s) who are affected by a technological change as provided in Article 801, such nurse(s) shall, at the expense of the Employer, be given a reasonable training period during which they may acquire the skills necessitated by the new method of operation or, at the option of the Employer, be trained in a new area in respect of which there is a demand for individuals possessing such skills. There shall be no reduction in wage or salary rates during the training period of any such nurse.

ARTICLE 9 -- CHANGE OF FUNCTION OF NURSING UNIT

901 Should the Employer find it necessary in the interest of patient/client care, reduction of costs, or increased efficiency, to change the general overall function of a nursing unit/Community Health Program (**Community Health Program n/a @ non-transferred facilities**), the Employer shall provide written notice to the nurses and the Union at least ninety (90) days in advance of the change of function. The Employer and the Union shall enter into discussion within fourteen (14) calendar days of notice being given for the purpose of affecting reasonable provisions to protect the interests of the nurse(s) so affected.

Applicable for Home Care Nurses:

In the event that the Employer transfers the delivery of Home Care services to another Employer, the Employer shall notify the Union in writing at least ninety (90) days in advance of any transfer of services. The notification to the Union shall identify which services are being transferred, the name of the Employer to which the services are being transferred and the names of the nurses within the bargaining unit affected by the transfer of services. At the request of either party, the parties shall meet to discuss the impact of the transfer.

ARTICLE 10 -- EMERGENCY, DISASTER, FIRE PLANS

1001 Emergency

- (a) In any emergency or disaster, nurses are required to perform duties as assigned notwithstanding any contrary provision in this Agreement.

For purposes of this Article, emergencies will be those situations which directly affect the safety or well-being of patients/residents/clients in the site.

In the event of the declaration of an emergency, written confirmation of same will be given to the President of the Union by the Employer.

In the event of the issuance of a major health alert such as a possible pandemic occurrence, it is understood that notification will also be provided to the Manitoba Nurses' Union.

- (b) Compensation for unusual working conditions related to such emergency will be determined by later discussion, between the Employer and the Union, and/or by means of the grievance procedure if necessary, except that the provisions of Article 16 shall apply to overtime hours worked.
- (c) This clause is subject to the Labour Relations Act of Manitoba.

1002 Drills

- (a) Site disaster, emergency or fire plans brought into effect by drill shall override the provisions of this Agreement provided always that where overtime is worked by reason of a disaster or fire drill, pay, or by mutual agreement equivalent time off will be granted.
- (b) The importance of regular disaster plan exercises and fire drills is mutually acknowledged by the Employer and the Union and, to this end, the participation of all nurses is encouraged.
- (c) Fire drills and equipment testing shall be held in accordance with the Manitoba Fire Code, and a review of written disaster plan exercises will be conducted at least once annually. The site will ensure that the telephone fan-out system will be maintained on a perpetual basis. Each newly hired nurse shall receive the appropriate information relative to the site emergency, disaster, and fire plans during orientation to the site. An inservice session related to evacuation procedures will be conducted at least once annually.

The Workplace Safety and Health Committee will be provided with a copy of the written Disaster Plan annually for their information. The Committee may provide feedback.

ARTICLE 11 -- JOINT COMMITTEES

1101 Release Time

- (a) Basic pay or equivalent time off, with a minimum of one (1) hour guaranteed to nurses who are not on duty, will be granted to nurses appointed by the Union to attend meetings of the Union Management Committee, Nursing Advisory Committee and any other worksite, regional, or provincial joint committee to which the Union is required or requested by the Employer to appoint representatives.

- (b) All reasonable efforts will be made to relieve a nurse who is appointed to attend meetings of the Union Management Committee, Nursing Advisory Committee, NRRF Committee or any other worksite, regional, or provincial joint committee to which the Union is required or requested by the Employer to appoint representatives, without loss of salary or benefits. This clause is applicable when the meeting(s) occurs during hours the nurse is otherwise scheduled to work.

1102

Union Management Committee

- (a) The Employer and the Union agree to establish and maintain a Union Management Committee at each site comprising the Employers Organization, consisting of not less than two (2) persons appointed by each of the parties. Management representatives shall include the designated senior nursing manager at the site. Union representatives shall be nurses employed at the site and shall include the President and/or Vice-President of the Local/Worksite. Appointments shall be made for a term of one (1) year but without limit on the number of consecutive terms a member may serve. The committee shall meet at the request of either party subject to five (5) days notice being given, but not less than bi-monthly unless otherwise mutually agreed. Other persons may be invited to participate as mutually agreed.

The purpose of this committee shall be to discuss/study/make recommendations to the Employer and Union regarding matters of mutual concern at that site.

- (b) In addition, the Employer and the Union agree to establish and maintain a Union Management Committee for the Employers Organization consisting of one (1) nurse from each site in the agreed upon groupings appointed by the Union, and senior management representatives appointed by the Employer, the number of whom shall not exceed the number of Union representatives. The Committee shall meet at the request of either party subject to ten (10) days notice being given, but not less than semi-annually. Other persons may be invited to participate as mutually agreed.

This committee shall address concerns as follows:

- (i) Issues that have been referred by any site Union Management Committee because they could not be resolved at the site level, or

- (ii) Issues that have region-wide implication.

Where a nurse is required to use their vehicle to travel to attend meetings of this committee at a location other than their work site/office, they shall be reimbursed by the Employer in accordance with the prevailing Province of Manitoba mileage rates. It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

Employers Organization Union Management Pilot Project

Within sixty (60) days of ratification the following Pilot Project shall commence.

The Union agrees to the following committee structure:

- WCHREO – three committees (Acute Care, Long Term Care, Community Programs)
 1. The Union and Employer agree to meet to discuss an appropriate structure for the Union Management Meetings for the Winnipeg Churchill Health Region Employers Organization. The committee will be comprised of equal representation from the Employer and Union. Upon agreement of a new structure the following will apply:
 - (a) Individual sites may opt out of the committee groupings.
 - (b) The Employer will pay mileage for all site representatives to attend six (6) committee meetings per fiscal year.
 - (c) Eighteen (18) months after ratification, the Union and the PHLRS shall reconvene for three purposes:
 - i. to assess the relative strengths and weaknesses of the Pilot Project and determine whether or not to continue;
 - ii. to determine if the Union Management model could be applied to NAC's and if so, to negotiate an implementation plan;
 - iii. to review any requests for sites wishing to opt out of the Pilot Project.
 - (d) If a site specific issue or concern arises, either party may request a site Union Management meeting. Such meeting will take place within five (5) days of the request.
 2. The Employer will allow participation without loss of salary and benefits for Union appointees (for nurses) and will compensate Union appointees as per regular pay and benefits for all time engaged in committee activities.

3. The Collective Agreement language will stand. The committee will not have the authority to modify the Collective Agreement; however, will be able to make recommendations to the respective parties bargaining committee for the subsequent round of bargaining.

1103 Nursing Advisory Committee

(1) Purpose of the Committee

- (a) At the request of either the Union or the Employer's senior nursing management, a Nursing Advisory Committee (NAC) shall be established at each site to:
 - (i) Review and make recommendations relative to those unresolved issues relating to workload and staffing including documented Workload Staffing Reports.
 - (ii) Provide a forum for discussion and make recommendations on issues relative to nursing professional practice such as nursing standards, nursing functions, physical planning and layout of facilities as they relate to nursing and other matters of concern.
- (b) The parties mutually recognize that resolving nurses' workplace issues supports the delivery of effective patient/resident/client care and contributes to a healthy work environment.
- (c) It is further agreed it is in the best interests of the Employer, the facilities/sites/programs and the nurses to work together to resolve the issues relative to staffing and scheduling, prolonged periods of work (consecutive hours and consecutive shifts), standby assignments, agency nurse utilization and the use of part time additional shifts and casual shifts as it relates to the creation of permanent positions.
- (d) It is further agreed that to facilitate the effective functioning of the NAC, the NAC as a committee may request and obtain data related to use of additional and/or casual shifts, overtime hours, and vacancies, as well as Agency Nurse utilization with a view to making recommendations relative to the creation of positions and service delivery strategies to ensure the highest quality of patient/client/resident care and compliance with professional nursing standards.
 - (i) *As part of the data related to Agency Nurse Utilization, a standing NAC agenda item will be maintained to discuss the Agency Report that is provided to MNU Central on a quarterly basis in accordance with MOU #5.*

- (e) The parties further agree that the cost of producing the Workload Staffing Reports will be shared equally.
- (f) Any information shared with NAC cannot be used or shared by NAC members for any purpose other than that set out in this Article.

(2) Committee Representation and Meeting Processes

- (a) The NAC shall be comprised of at least two (2)* and up to three (3)** nurses appointed by the Union and senior nursing management representatives appointed by the Employer, the number of whom shall not exceed the number of Union representatives. Other persons may be invited to participate as mutually agreed.

*Two (2) at those facilities which have less than three (3) out of scope senior nursing managers.

**Four (4) for those facilities exceeding 400 beds.

- (b) The NAC shall meet at the request of either party subject to five (5) days notice being given but not less than bi-monthly unless otherwise mutually agreed.
- (c) The chair and the secretary of the NAC shall alternate between the parties. The secretary shall be the opposite party to the chair.
- (d) Agendas shall be circulated at least seven (7) calendar days prior to each meeting; however this shall not preclude members from raising issues without prior agenda notice. It is understood that issues may be deferred to future meetings to enable appropriate investigation.
- (e) Minutes of the NAC meetings shall be circulated to members of the committee and shall be approved at the next NAC meeting.
- (f) A regular report outlining the activities and deliberations of the NAC including the number, type and disposition of issues dealt with by the NAC shall be forwarded to the facility's/Regional Health Authority's Board of Directors (Board).
- (g) The NAC shall be provided with a copy of that portion of the minutes of the Board's meeting relating to its deliberations of the NAC report. The NAC shall provide the nurse(s) with a copy of that portion of the minutes of the Board's meeting relating to issues raised by a nurse(s) under 1 (a) (i) above.

(3) Nursing Advisory Committee Procedures

- (a) A nurse(s) with a concern as referenced in 1 (a) (i) above shall discuss the matter at the ward/unit/program level utilizing established lines of communication including the designated out of scope manager with the objective of resolving the concern. If the matter is not resolved to the satisfaction of the nurse(s), the nurse(s) may complete and submit a Workload Staffing Report. The Manager shall provide a written response as soon as is reasonably possible and no later than fourteen (14) days after the form has been submitted to management. The response will outline the action(s) taken and any further actions to be implemented. The Workload Staffing Report will then be reviewed at the next scheduled Nursing Advisory Committee meeting.
- (b) Those issues referenced in 1 (a) (ii) above may be placed on the agenda at any time by any NAC member.
- (c) If the decision of the NAC regarding an issue referenced in 1 (a) (i) or 1 (a) (ii) above is unacceptable to the nurse(s) who submitted the issues, or if the NAC is unable to resolve the issues in 1 (a) (i) or 1 (a) (ii), the matter shall be referred in writing to the facility Administrator/Executive Management Committee/regional senior nursing manager/senior nursing officer. Upon the request of either party, a meeting will be scheduled as soon as reasonably possible, but no later than fourteen (14) days.
- (d) The response of the Administrator/Executive Management Committee/regional senior nursing manager/senior nursing officer shall be provided in writing to the nurse(s) and the NAC within fourteen (14) calendar days of the referral unless otherwise mutually agreed.
- (e) Where, in the opinion of the nurse(s) who submitted the issue, the response from the Administrator/Executive Management Committee/regional senior nursing manager/senior nursing officer does not resolve the issue, it may be referred to an Independent Assessment Committee (IAC) within twenty-one (21) days following the response.

1104

Independent Assessment Committee

- (a) The IAC shall be composed of three (3) nurses, one (1) of whom shall be appointed by the Manitoba Nurses' Union, and one (1) of whom shall be appointed by the Employer. The third (3rd) nurse shall chair the IAC and shall be selected in the following manner:
 - (i) A list of IAC Chairpersons as agreed between the parties shall be appended to this Collective Agreement.

- (ii) When a Chairperson is required, the Provincial Health Labour Relations Services (PHLRS) and the Manitoba Nurses' Union will be contacted. They will provide the name of the person to be utilized on the alphabetical listing of Chairpersons. The name to be provided shall be the name following that of the last person utilized.
 - (iii) Should the person whose name is so selected be unable to serve, or where the person would be unsuitable due to connections with the parties or geographic community involved, the next person on the list shall be approached to act as Chairperson.
 - (iv) In the event that an individual whose name appears on the list of IAC Chairpersons can no longer serve in that capacity, another individual shall be jointly selected by the Manitoba Nurses' Union and the Provincial Health Labour Relations Services (PHLRS) and the list of Chairpersons shall be amended accordingly.
 - (v) Appointments to the IAC shall be confirmed within twenty-one (21) calendar days of the referral.
- (b) A meeting of the IAC to investigate and make recommendations shall be held within thirty (30) calendar days of the IAC's appointment unless a longer time frame is otherwise mutually agreed between the Employer and the Union. Such recommendations shall be provided in writing to the nurse(s), the NAC and the Administrator/Executive Management Committee/regional senior nursing manager/senior nursing officer within a further fourteen (14) calendar days. The Employer shall convene a meeting of Employer representatives, the Union and representative(s) selected by, and from amongst, the nurses who referred the matter/issues to the NAC, subsequent to the receipt of the report, to review and discuss potential implementation of the recommendations.
- (c) Each party shall bear the cost of its own appointee to the IAC and shall jointly bear the cost of the Chairperson.
- (d) Nurses required to attend IAC meetings shall be granted Union leave upon seven (7) calendar days notice in accordance with Article 2409.
- (e) Nurses who are nominees to an IAC shall be granted leave of absence in accordance with Article 2409.
- (f) A regular report outlining the activities and deliberations of the IAC including the number, type and disposition of issues dealt with by the IAC shall be forwarded to the facility's/Regional Health Authority's Board of Directors (Board).

- (g) The NAC shall be provided with a copy of that portion of the minutes of the Board's meeting relating to its deliberations of the NAC report. The NAC shall provide the nurse(s) with a copy of that portion of the minutes of the Board's meeting relating to issues raised by a nurse(s) under 1 (a) (i) above.

1105 Employers Organization Nursing Advisory Committee

(1) Purpose of the Committee

- (a) The parties agree that an Employers Organization Nursing Advisory Committee (EO NAC) shall be established for the WCHREO and SHEO and the facilities/sites/programs affiliated therein to address issues outlined in Article 1103 above, which have Regional impact as well as the following. The EO NACs participants will be as follows:

NURSING ADVISORY COMMITTEE (NAC) PARTICIPANTS LONG TERM CARE

Sharon Home Nurses Local 47
Tache Nurses Local 49
Convalescent Home Nurses Local 13
DCM Nurses Local 60
Golden West Nurses Local 91
Fred Douglas Nurses Local 100
Luther Home Nurses Local 102
Bethania Nurses Local 103
Middlechurch Nurses Worksite 116
Holy Family Nurses Local 136
Lions Nurses Local 137
Meadowood Nurses Local 140
Foyer Valade Nurses Local 146
River Park Gardens Nurses Worksite 149
Southeast PCH Nurses Local 148
Misericordia Nurses Local 2
Riverview Health Centre Nurses Local 1a
Concordia Nurses Local 27
Golden Links Lodge Nurses Local 152
St. Joseph's Nurses Local 154
Donwood Manor Local 155
Deer Lodge Worksite 157

NURSING ADVISORY COMMITTEE (NAC) PARTICIPANTS COMMUNITY CARE

Public Health Nurses Worksite 1
Home Care Nurses Worksite 97
Breast Health Centre Nurses Worksite 132
Clinical Nurse Specialists Worksite 134
Nurse Practitioners/RNEP Worksite 141
Primary Care Nurses Worksite 142

Klinik

Mount Carmel Clinic
Nine Circles Community Health Centre
Nor'West Co-op Community Health Centre
Women's Health Clinic
*Manitoba Adolescent Treatment Centre **
*Rehabilitation Centre for Children **
Crisis Response Services

NURSING ADVISORY COMMITTEE (NAC) PARTICIPANTS ACUTE CARE

Health Sciences Centre Worksite 10
St. Boniface Nurses Local 5
Concordia Nurses Local 27
Misericordia Nurses Local 2
Grace Nurses Worksite 41
Victoria Nurses Worksite 3
Seven Oaks Nurses Local 72
Pan Am Nurses Worksite 135
Regional Programs Nurses Worksite 153
Riverview Health Centre Nurses Local 1a
Cancer Care Worksite 36

- (b) The parties mutually recognize that resolving nurses' workplace issues supports the delivery of effective patient/resident/client care and contributes to a healthy work environment.
- (c) It is further agreed it is in the best interests of the Employers Organization, the facilities/sites/programs and the nurses to work together to resolve the issues relative to staffing and scheduling, prolonged periods of work (consecutive hours and consecutive shifts), standby assignments, and the use of part time additional shifts and casual shifts as it relates to the creation of permanent positions.
- (d) It is further agreed that the Employers Organization NAC will review data relative to use of additional and/or casual shifts, with a view to making

recommendations relative to the creation of positions.

- (e) It is agreed this structure shall not preclude issues as noted above being brought forward and/or resolved at the facility/site/program NAC in accordance with the provisions of Article 1103.

(2) EO NAC Committee Representation and Meeting Processes

- (a) The Employers Organization NAC shall be comprised of (1) one nurse from each facility/site/program appointed by the Union, and senior nursing management representatives from the facilities/sites appointed by the Employer, the number of whom shall not exceed the number of Union representatives. Other persons may be invited to participate as mutually agreed.
- (b) Where a nurse is required to use their vehicle to travel to attend meetings of this committee at a location other than their work site, they shall be reimbursed by the Employer in accordance with the prevailing Province of Manitoba mileage rates. It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.
- (c) The Employers Organization NAC shall meet at the request of either party subject to five (5) days notice being given but not less than bi-monthly unless otherwise mutually agreed.
- (d) The chair and the secretary of the Employers Organization NAC shall alternate between the parties. The secretary shall be the opposite party to the chair.
- (e) Agendas shall be circulated at least seven (7) calendar days prior to each meeting; however, this shall not preclude members from raising issues without prior agenda notice. It is understood that issues may be deferred to future meetings to enable appropriate investigation.
- (f) Minutes of the Employers Organization NAC meetings shall be circulated to members of the committee and shall be approved at the next Employers Organization NAC meeting.

(3) EO NAC Procedures

- (a) A nurse(s) with a concern which may be of regional impact may complete and submit a NAC summary report to the Chair of the Employers Organization NAC
 - (i) If such issue is determined to be of regional impact it will be placed on the agenda of the Employers Organization NAC. If not, it shall be referred to the appropriate facility/site/program NAC.

- (b) If the decision of the Employers Organization NAC regarding an issue referenced above is unacceptable to the nurse(s) who submitted the issue, or if the EO NAC is unable to resolve the issue, the matter shall be referred in writing to the regional senior nursing manager/senior nursing officer. Upon the request of either party, a meeting will be scheduled as soon as reasonably possible.
- (c) The response of the EO Executive Management Committee shall be provided in writing to the nurse(s) and the EO NAC within fourteen (14) calendar days of the referral unless otherwise mutually agreed.
- (d) Where in the opinion of the nurse who submitted the issue to the Employers Organization NAC, the response from the EO Executive Management Committee does not resolve the issue it can be referred to an Independent Assessment Committee (IAC) within twenty-one (21) days following the response.

1106 Employers Organization (EO) Independent Assessment Committee (IAC)

- (a) The IAC shall be composed of three (3) nurses, one (1) of whom shall be appointed by the Manitoba Nurses' Union, and one (1) of whom shall be appointed by the Employer. The third (3rd) nurse shall chair the IAC and shall be selected in the following manner:
 - (i) A list of IAC Chairpersons as agreed between the parties shall be appended to this Collective Agreement.
 - (ii) When a Chairperson is required, the Provincial Health Labour Relations Services (PHLRS) and the Manitoba Nurses' Union will be contacted. They will provide the name of the person to be utilized on the alphabetical listing of Chairpersons. The name to be provided shall be the name following that of the last person utilized.
 - (iii) Should the person whose name is so selected be unable to serve, or where the person would be unsuitable due to connections with the parties or geographic community involved, the next person on the list shall be approached to act as Chairperson.
 - (iv) In the event that an individual whose name appears on the list of IAC Chairpersons can no longer serve in that capacity, another individual shall be jointly selected by the Manitoba Nurses' Union and the Provincial Health Labour Relations Services (PHLRS) and the list of Chairpersons shall be amended accordingly.

- (v) Appointments to the IAC shall be confirmed within twenty-one (21) calendar days of the referral.
- (b) A meeting of the IAC to investigate and make recommendations shall be held within thirty (30) calendar days of the IAC's appointment unless a longer time frame is otherwise mutually agreed between the Employer and the Union. Such recommendations shall be provided in writing to the nurse(s), the EO NAC and the senior nursing manager/senior nursing officer within a further fourteen (14) calendar days. The Employer shall convene a meeting of Employer representatives, the Union and representative(s) selected by, and from amongst, the nurses who referred the matter/issues to the EO NAC, subsequent to the receipt of the report, to review and discuss potential implementation of the recommendations.
- (c) Each party shall bear the cost of its own appointee to the IAC and shall jointly bear the cost of the Chairperson.
- (d) Nurses required to attend IAC meetings shall be granted Union leave upon seven (7) calendar days notice in accordance with Article 2409.
- (e) Nurses who are nominees to an IAC shall be granted leave of absence in accordance with Article 2409.
- (f) A regular report outlining the activities and deliberations of the EO IAC including the number, type and disposition of issues dealt with by the Employers Organization IAC shall be forwarded to the Regional Health Authority's Board of Directors (Board).
- (g) The EO NAC shall be provided with a copy of that portion of the minutes of the Board's meeting relating to its deliberations of the EO NAC report. The EO NAC shall provide the nurse(s) with a copy of that portion of the minutes of the Board's meeting relating to issues raised by a nurse(s) under (a) (i) above.

1107 Patient Care Optimization Committee

WHEREAS it is the desire of the Employers Organizations to ensure that quality health care services are delivered to Manitobans through a system which is, to the fullest extent possible, sustainable, accessible, cost-effective, efficient and effective;

AND WHEREAS Nurses are an integral part of the delivery of health care services in facilities, programs and communities throughout the province, and have a shared commitment and responsibility for the provision of appropriate, quality health care to Manitobans;

AND WHEREAS the Employers Organizations are responsible for the provision of health care services and programs for Manitobans, and as such desire to attract and retain nurses to work as part of the delivery of those services;

AND WHEREAS the parties recognize that it is in the best interest of the health care delivery system to have all parties working together towards these mutual goals, and the parties wish to work towards the achievement of these goals through collaborative initiatives to optimize patient care;

1. The Employers Organizations through the Provincial Health Labour Relations Services (PHLRS), and the Union, agree to establish the Patient Care Optimization Committee, which shall have a dual purpose:

- (a) to make recommendations to the Deputy Minister of Health regarding the identification, development and implementation of system delivery changes that are intended to improve the effectiveness and efficiency of health care service delivery in Manitoba; and
- (b) to administer and distribute the Patient Care Optimization Allocation, described below, which shall be used to support the following objectives:
 - i) to improve recruitment and retention of nurses where staffing priorities and needs are identified; and
 - ii) to incentivize training or education with respect to identified areas of need in the health care system.

2. The Patient Care Optimization Committee (“Committee”) shall be established as follows:

- a) the Committee shall be comprised of equal representation from the Union and Employer representatives through the PHLRS, to a maximum of five (5) representatives each, unless expanded by agreement of the Committee. MNU appointees shall be permitted to participate in Committee functions without loss of salary and or benefits;
- b) each of the Union and PHLRS shall nominate an appointee to serve as Committee co-chair;
- c) the Committee shall develop Terms of Reference and ensure processes are in place to appropriately authorize distribution of the allocated funds.
- d) the Committee shall meet three (3) times per year at minimum, or more frequently as required upon agreement of the Committee. PHLRS shall provide all necessary administrative resources required by the Committee to carry out its functions and mandate;

- e) the Committee shall make recommendations to the Deputy Minister of Health that will include but are not limited to:
1. improving scheduling practices to reduce the use of overtime and agency nurses;
 2. creating a balance of full-time and part-time positions;
 3. improving the quality of work-life balance through the implementation of the group self-scheduling guidelines;
 4. improving weekend staffing resources through broader implementation of the weekend worker;
 5. focusing on safe practices and the reduction of WCB injuries; and
 6. ensuring the skill sets of specialty nurses are used to maximum effect in the delivery of quality health services.

The parties agree to commit the necessary resources and expertise to this work.

- f) the Committee will be provided an allocation of \$4 million per year and shall be responsible to determine how these funds are to be disbursed to improve recruitment and retention of nurses where staffing priorities and needs are identified; and to incentivize training or education with respect to identified areas of need in the health care system;
- g) the Committee shall make all decisions about the disbursement of the allocated funds by mutual agreement, failing which either party shall have the right to refer any dispute to an arbitrator, who shall be empowered to determine any dispute about how the allocated funds shall be disbursed in accordance with principles as defined in this Article.

3. The allocated funds shall be fully disbursed each year, or any portion thereof may be carried over to the next year by mutual agreement or order of the arbitrator.

4. For clarity, to the extent the allocated funds are to be used to incentivize training/education in identified areas of need for recruitment or retention of nurses, the funds shall not be utilized to replace funding the Employer Organizations provide under Article 2407 for education/training/certification, nor for other necessary instruction deemed mandatory for nurses engaged in a specific role/function/assignment or duty.

ARTICLE 12 -- GRIEVANCE PROCEDURE

1201 For purposes of this Agreement "grievance" shall mean a dispute between a nurse; or between a group of nurses with a similar grievance; or between the Union and the Employer regarding the application, interpretation or alleged violation of this Agreement.

1202 Unless dismissed or suspended by the Employer a nurse shall continue to work in accordance with this Agreement until such time as the dispute has been resolved.

1203 A nurse may be accompanied by, or represented by, a Union representative at any stage of the grievance procedure.

1204 A nurse or Union representative shall request permission from their immediate supervisor to leave their duties in order to process grievances; they shall report to their immediate supervisor upon their return; they shall be granted this permission when, in the opinion of their immediate supervisor, it will not prejudice care or student education or require any staff replacement in either area. They shall not suffer loss of salary when engaged in such activities during regular working hours.

1205 Discussion Stage:

A nurse shall, within fifteen (15) days of the occurrence of the grievance, attempt to resolve the grievance through discussion with their immediate supervisor outside the bargaining unit, and if the matter is not settled to their satisfaction the nurse may proceed with the grievance themselves or elect to be represented by a Union representative.

1206 Step One:

If the grievance is not resolved within the time period specified in Article 1205 above, the grievor and/or Union representative may, within a further ten (10) days submit the grievance in writing to the Human Resources Consultant or equivalent. The Human Resources Consultant or equivalent shall reply in writing within ten (10) days of receipt of the written grievance.

A grievance concerning general application or interpretation of the Agreement, including the question of whether the matter falls within the scope of this Agreement, or which affects a group of nurses in more than one (1) department, may be submitted as Step 1.

The Employer agrees to notify the Union in writing when there are changes in personnel in these positions.

1207 Step Two:

If the grievance remains unresolved, the Union may, within a further ten (10) days, submit the grievance in writing to the appropriate Human Resources Director or designate, who shall reply in writing within ten (10) days of receipt of the written grievance.

The Employer agrees to notify the Union in writing when there are changes in personnel in these positions.

1208 For purposes of determining the lengths of time in the foregoing procedure, Saturdays, Sundays and Recognized Holidays are excluded.

1209 The time limits fixed in the grievance procedure may be extended by mutual agreement between the Employer and the aggrieved nurse and/or Union, and shall be confirmed in writing. The parties agree that “in writing” includes electronic communications such as email. Confirmation includes indication of receipt of such communication.

1210 Subject to the provision of Article 1209 above, and subject to Section 121(2) of the Labour Relations Act of Manitoba, failure of the nurse/Union to comply with any of the time limits specified in this Article shall result in the grievance being deemed abandoned, without prejudice.

ARTICLE 13 -- ARBITRATION PROCEDURE

1301 In the event of the failure of the parties to settle a grievance by means of the grievance procedure stated in Article 12, within ten (10) days of the date upon which the written reply referred to in Article 12 is received from the appropriate Human Resources Director, or designate, the matter may then be referred to Arbitration as hereinafter set forth.

1302 A referral for Arbitration shall be made in writing by either party, addressed to the other party to this Agreement, within the time defined in Article 1301. The referral for Arbitration shall contain the names of three (3) proposed sole arbitrators. The other party shall, within ten (10) days of the receipt of such notice, notify the party who referred the matter to Arbitration of the acceptance of one of the arbitrators named or propose others. Where the parties are unable to agree on the choice of a single arbitrator, the party who referred the matter to Arbitration may make application to the Manitoba Labour Board to select an arbitrator, or proceed as outlined in Article 1303.

1303 If mutual agreement is not reached by both parties to choose a sole arbitrator, in accordance with the process in Article 1302, then the party who referred the matter to Arbitration shall submit the matter in dispute to a Board of Arbitration by giving notice to the other party within seven (7) days and such notice shall contain the party's one (1) nominee of the intended Board of Arbitration. The other party to the dispute shall, within seven (7) days after the receipt of such notice, also appoint a nominee and the two (2) nominees thus appointed shall, within ten (10) days thereafter, select a third member who shall be the Chairperson of the Board of Arbitration.

1304 Should either party fail to appoint an Arbitrator as herein provided, or if any Arbitrator thus appointed should fail or be unable to serve and another Arbitrator not be appointed in their place by the party who made the original appointment, then the other party to the dispute may request the Manitoba Labour Board to select a substitute.

1305 Should the two (2) appointed nominees fail within ten (10) days to agree upon a Chairperson, the two (2) nominees shall forward a request to the Manitoba Labour Board to select a Chairperson.

1306 It is mutually agreed by both parties to this Collective Agreement that the decision of the Arbitrator, or the decision of the Chairperson in the absence of the majority decision of the Arbitration Board shall be final and binding upon the Employer, the Union and the nurse(s) concerned; however, the Arbitrator or the Arbitration Board shall not be authorized to make any decisions inconsistent with the provisions in this Collective Agreement.

1307 The Arbitrator or Board of Arbitration shall determine its own procedure but shall give full opportunity to all parties to present evidence and make representations.

1308 In the event of a grievance alleging unjust layoff, suspension or discharge being referred to Arbitration, the Arbitrator or Board of Arbitration shall be authorized to rule whether or not the nurse(s) concerned shall be reinstated and, in the event of reinstatement, shall also be authorized to make an award in terms of compensation for regular salary lost or a reasonable alternate award, however, any monetary award shall not exceed the difference between salary lost and any wages that may have been earned from employment with another employer during the period of the layoff, suspension or discharge.

1309 Any costs incurred by either of the parties hereto, preceding or during Arbitration proceedings, shall be borne by the respective parties incurring such costs, but the costs of the Arbitrator or of the Chairperson of the Arbitration Board shall be borne by the parties hereto in equal shares.

1310 For the purposes of determining lengths of time in the foregoing procedure, Saturdays, Sundays and Recognized Holidays are excluded.

1311 Nothing in this Collective Agreement shall preclude a nurse or the Union committee and the Employer from mutually agreeing to settle a dispute by means other than those described in the grievance and Arbitration procedures or to extend any of the stipulated time limits.

1312 Nurses whose attendance is required at Arbitration hearings related to the Agreement shall be given permission to be absent from work and shall not suffer any loss of salary as a result.

1313 The Arbitrator shall be requested to provide both parties with a hard (paper) copy as well as an electronic version of the Arbitration award.

ARTICLE 14 -- HOURS OF WORK

1401 *Prior to April 1, 2022 – Refer to MOU #35 Re: Hours of Work*

Effective April 1, 2022:

Regular daily, biweekly, and annual hours of work for full-time nurses, excluding meal periods, shall consist of seven and three-quarter (7.75) hours per day, seventy-seven and one-half (77.50) hours biweekly when averaged over the rotation period and two thousand and fifteen (2015) hours per year.

Applicable for WRHA - Public Health Program, WRHA - Clinical Nurse Specialists, WRHA - Primary Care Program, WRHA - Nurse Practitioners, WRHA - Regional Programs, Women's Health Clinic, Mount Carmel Clinic, Nine Circles Community Health Centre, Klinik Community Health, and Nor'West Co-op Community Health Centre sites only:

- (a) Upon mutual agreement between a nurse and their supervisor, a nurse may work alternate hours during the day or in a bi-weekly period in order to facilitate the provision of services and/or to accommodate the nurse's personal schedule. Such alteration of hours, although subject to Employer approval, is voluntary and at the discretion of the nurse. In instances where working alternate hours under these circumstances results in additional hours being worked in a day or bi-weekly pay period, the nurse shall take the equivalent time off at a time mutually agreeable to the nurse and their supervisor. To the extent practicable, this time off shall occur within four (4) weeks of the nurse having worked the additional hours.
- (b) In instances where additional hours are being scheduled in a day or bi-weekly pay period as a result of direction from the supervisor, compensation for the additional hours worked will be in accordance with Article 16 - Overtime.
- (c) The provisions of Article 1404, Article 16 and Article 17 shall not apply to a nurse working alternate hours in (a) above.

Additional for WRHA - Public Health Program site only:

(d) In order to facilitate the provision of Public Health nursing services, a nurse may periodically elect to work; or upon a minimum of two (2) weeks notice may be scheduled to work during the evening in accordance with Article 1505.

1402 *Prior to April 1, 2022 – Refer to MOU #35 Re: Hours of Work***Effective April 1, 2022:**

The meal period will be scheduled by the Employer and will be one-half (.50) of an hour in duration, unless otherwise mutually agreed between the nurse(s) concerned and the Employer.

Applicable for Home Care Nurses:

Where a nurse works for five (5) or more consecutive hours, an unpaid meal period of one-half (.50) hour will be provided.

1403 A rest period of fifteen (15) minutes will be allocated by the Employer during each continuous three (3) hour period of work. Rest periods shall be taken away from the work area unless otherwise mutually agreed.

1404 A shift shall be seven and three-quarter (7.75) consecutive hours of work exclusive of meal times and inclusive of two (2) fifteen (15) minute rest periods. This clause shall not, however, prevent trial and implementation of changes in shift length if mutually agreed between a majority of nurses whose schedule is affected, the Union representing those nurses whose schedule is affected, and the Employer. Any change in shift length agreements shall take the form of an addendum attached to and forming part of this Agreement.

Applicable for Home Care Nurses:

A shift shall not be less than one (1) paid hour nor more than seven and three-quarter (7.75) paid hours and shall be governed by the following conditions:

- (a) a nurse shall receive one (1) hour regular salary for any and all client assignments in the first one (1) hour of their work day, and*
- (b) a nurse shall receive regular salary for all additional time required to complete any further client assignments up to and including seven and three-quarter (7.75) hours in any one (1) day. Nurses may be required to work split shifts, and in so doing shall receive a premium of twelve dollars (\$12.00), and*
- (c) shifts shall be inclusive of paid rest periods and exclusive of the unpaid meal period except as per Article 1402 above, and*

(d) This clause shall not, however, prevent trial and implementation of changes in shift length if mutually agreed between a majority of nurses whose schedule is affected, the Union representing those nurses whose schedule is affected, and the Employer. Any change in shift length agreements shall take the form of an addendum attached to and forming part of this Agreement.

1405 A full-time or part-time nurse who is advised not to report for their scheduled shift, or who is sent home because of lack of work, shall receive pay for the scheduled hours not worked.

Applicable for Home Care Nurses:

Where a Home Care nurse is unable to complete their scheduled shift due to client circumstances, the nurse may be reassigned to other clients, or may be reassigned to other work for which the nurse is qualified within any of the offices within the Home Care Program. It is understood that such reassignment will only occur within a fifty (50) km. radius of the originating unit/worksites/office, unless a greater distance is mutually agreed between the Employer and the nurse. Travel time and Transportation Allowance as outlined in Article 20 shall be paid to the nurse to travel to the reassigned site.

Should reassignment as contemplated above not be possible, the Home Care nurse shall receive pay for the scheduled hours not worked.

1406 Where a nurse cannot arrive as scheduled at the Worksite due to whiteout/blizzard conditions as declared by Environment Canada or the Employer, or due to road closures as declared by police agencies or Manitoba Infrastructure, the nurse shall be rescheduled at a mutually agreeable time if possible during the following two (2) consecutive bi-weekly pay periods to work any hours missed. Where the scheduling of such shift cannot be accommodated or the nurse chooses not to be rescheduled, the nurse may take the time from banked time which includes banked overtime, Recognized Holidays or vacation.

Additional for Churchill Health Centre site only:

In the event that Polar Bears constitute an immediate danger to nurses travelling to and from the Worksite, the Employer shall ensure that nurses are reimbursed for, or provided with transportation.

1407 Whenever a nurse is called in to work within one (1) hour of the start of the shift and reports for duty within one (1) hour of the start of the shift, they shall be entitled to pay for the full shift. In such circumstances the scheduled shift hours shall not be extended to equal a full shift.

Applicable for WRHA - Public Health Program site only:

1408 A maximum of thirty (30) nurses, excluding nurses in the Antenatal Home Care and Travel Health programs, will be assigned to work in any office on weekends, on an equitable, rotational basis. With mutual agreement between the Employer and the nurse, the nurse's scheduled days off may be altered to be taken during the one (1) week prior to and/or the two weeks following the assignment. The number of nurses assigned to work weekends may be increased by mutual agreement between the parties, such agreement shall not be unreasonably denied.

ARTICLE 15 -- SHIFT SCHEDULES

1501 Shift schedules for a minimum of a four (4) week period shall be posted at least two (2) weeks in advance of the beginning of the scheduled period. Shifts within the minimum four (4) week period shall not be altered after posting except by mutual agreement between the nurse(s) concerned and the Employer. Requests for specific days off duty shall be submitted in writing at least two (2) weeks prior to posting and granted if possible in the judgment of the Employer.

1502 Requests for interchanges in posted shifts or a portion thereof shall also be submitted in writing, co-signed by the nurse willing to exchange shifts with the applicant. Where reasonably possible, interchanges in posted shifts are to be completed within the posted shift schedule. It is understood that any change in shifts or days off initiated by the nurses and approved by the Employer shall not result in overtime costs to the Employer. Requests for interchanges shall be granted if reasonably possible, including considering the length of notice provided by the nurse and shall receive a prompt reply.

1503 Night shift shall be considered as the first shift of each calendar day.

Applicable for Victoria General Hospital and Misericordia Health Centre sites only:

Night shift shall be considered as the last shift of each calendar day.

1504 Master rotations for each nursing unit shall be planned by the Employer in meaningful consultation with the nurse(s) concerned.

The process for meaningful consultation shall include:

- Employer proposes a master rotation including the Employer established criteria and provides to nurses concerned
- Nurses are provided reasonable time to submit feedback and/or an alternate master rotation for consideration.
- The amended or new master rotation is provided to nurses for review. Nurses are provided with a reasonable time to submit feedback.
- At each step of the consultation process the Union will be provided with the new or revised master rotation to ensure contract compliance.
- Employer has the sole discretion to select the new master rotation and provides rationale for the selection.

Master Rotations shall, unless otherwise mutually agreed between the nurse(s) concerned and the Employer, observe the conditions listed hereinafter:

- (a) a minimum of fifteen (15) hours off between assigned shifts.
- (b)
 - (i) a minimum of forty-seven (47) hours off at one time, or
 - (ii) where only “8” hour shifts are worked, a single weekday off may be permitted on a changeover from Day shift to Evening shift or in a staffing pattern that provides alternate weekends off. This is subject to meaningful consultation between the nurses affected and the Union.

Applicable for Victoria General Hospital site only:

Each nurse shall receive a minimum of forty-seven (47) hours off except that a single day may be assigned:

- (i) on a changeover from Day shift to Night shift provided that three (3) days are given on completion of the Night shift, or*
 - (ii) on a changeover from Day shift to Evening shift, and*
 - (iii) not more than twice in each rotation pattern when the single day off results in less than forty-seven (47) continuous hours off between shifts.*
- (c) a minimum of eight (8) days off within each period of four (4) consecutive weeks.
 - (d) a minimum of fifty percent (50%) of weekends off in each master rotation period with a maximum of two (2) weekends worked between weekends off.
 - (e) a maximum of seven (7) consecutive days of work and preferably less between days off. It is understood that eight (8) consecutive days of work may be assigned for the purpose of meeting the requirements of Articles 2204, 2209, and 2210 inclusive herein.

- (f) nurses who are required to rotate shifts being assigned to work either Day shift and Evening shift, or Day shift and Night shift. There shall be at least as great a number of Day shifts assigned as there are Night (or Evening) shifts within each standard rotation pattern, whenever reasonably possible. This provision is not applicable to a nurse who agrees to work permanently on Evenings or Nights, or a nurse who accepts a position which has been posted as a permanent Night or Evening position.
- (g) A nurse will receive consideration in scheduling to allow the nurse to pursue academic course(s) to further their education. Whenever reasonably possible, subject to patient/resident/client care requirements, the granting shall be based on the following:
- (i) the nurse submits their written request at least eight (8) weeks prior to commencing the academic course(s), and
 - (ii) another nurse(s) on the unit is (are) prepared to interchange their 'normally' scheduled shifts for the 'normally' scheduled shifts of the nurse attending the academic course(s), as agreed in writing,
 - (iii) upon completion of the academic course(s) each nurse shall revert to their former rotation pattern.
- Proof of registration in such course(s) shall be submitted by the nurse upon request.
- (h) No nurse shall work more than a total of sixteen (16) consecutive hours (inclusive of regular and overtime hours) in a twenty-four (24) hour period, unless otherwise mutually agreed between the nurse and Employer.

Applicable for Victoria General Hospital site only:

- (i) Violation of any provision of Article 1504 during the minimum four (4) week period outlined in Article 1501 shall result in payment to each affected nurse at overtime rates for all hours worked during the specific violation of the provision.

1505 Group Self-Scheduling

A. The following conditions and understandings apply to Group Self-Scheduling:

1. The procedure to be followed for Group Self-Scheduling shall be as follows:
 - (a) A meeting of all nurses on the unit/worksite/program who wish to participate in Group Self-Scheduling and the Employer (as designated) will be held to discuss tentative unit/worksite/program specific Group Self-Scheduling guidelines, the Master Rotation, the Group Self Schedule and proposed date of commencement of the initial test period. A letter will be forwarded to the Local/Worksite President to inform them of the proposed changes.
 - (b) The length of the initial trial period for Group Self-Scheduling shall be six (6) months in length or for a shorter period as mutually agreed between the Union and the Employer.
 - (c) Six (6) weeks prior to the completion of the initial trial period, a meeting of all participating nurses on the unit/worksite/program and the Employer will be held to evaluate Group Self-Scheduling.
2. Upon mutual agreement between the Employer and the Union the Group Self Schedule shall continue for a minimum duration of an additional six (6) months. The Employer shall not unreasonably withhold its agreement. In the event the parties are not able to agree the Collective Agreement provision on Hours of Work, Article 14 shall apply.

The Group Self-Schedule may be cancelled at the end of any six month period by either the Employer or the Union by giving written notice of at least six (6) weeks to the other party of its desire to terminate the agreement. The notice shall coincide with the effective date of the implementation of the existing/new master rotation for the unit/worksite/program. This date must commence with the beginning of a new pay period.
3. Group Self-Scheduling shall not result in any additional costs to the Employer
4. All full-time and part-time nurses on a unit/worksite/program may participate in Group Self- Scheduling.
5. Terms and conditions of the Collective Agreement, Appendices and Supplementary Memorandums of Understanding shall remain in full force and effect.

6. Unit/worksites/program specific guidelines for Group Self-Scheduling shall be established/revise for each unit/worksites/program in consultation with, and agreement by, the Union. All self-scheduling groups shall follow the attached general guidelines and are subject to approval by both the Union and the Employer. The provisions of the Collective Agreement including hours of work, shift schedules and overtime shall be adhered to.
7. The Master Rotation must be in place for each unit/worksites/program in accordance with the provisions of Article 1504 of the MNU Collective Agreement. It is understood that any nurse(s) who requests to be scheduled in accordance with their line on the Master Rotation shall be permitted to do so. All nurses hired into a position(s) on the unit/worksites/program shall be provided with the option of following the Master Rotation or Group Self-Schedule, however, the nurse(s) shall complete the Group Self-Schedule for the remainder of the posted shift schedule.
8. A nurse who is participating in Group Self-Scheduling has the option of reverting to being assigned their shift schedule in accordance with their line on the Master Rotation and a nurse who has a Master Rotation has the option of participating in a self-scheduling group. The nurse must advise their out-of-scope manager/designate in writing of this request two (2) weeks prior to the next round of shift selection. This scheduling preference, Master Rotation or Group Self-Scheduling, must be worked for a minimum of six (6) months before making another change.
9. It is understood that this Article shall apply to any nurse or group of nurses whether or not they have a master rotation.

B. GROUP SELF-SCHEDULING GUIDELINES

The Key to success is co-operation. We must also remember to be fair, responsible and keep an open mind. The Group Self-Scheduling process will benefit each one of us by allowing more freedom of choice. At the same time we must keep in mind that first and foremost the unit/worksites/program must be staffed properly.

General Information

1. The unit/worksites/program specific Group Self-Scheduling guidelines must follow the provisions of the Collective Agreement.

2. Group Self-Scheduling is a process whereby a group of two (2) or more nurses on the same unit/worksites/program agree to work together and take responsibility for coordinating and selecting their scheduled shifts within the combined master rotation schedules of the group over the scheduling period. Each nurse must meet their current EFT requirement and the additional requirements contained herein.
3. The out-of-scope Manager/designate has the responsibility of overseeing the process and has final authority in resolving issues. However such authority is to be exercised reasonably and in accordance with the principles described herein.
4. To form a self-scheduling group, nurses must be of equal competency and skill sets. Where necessary, consideration must also be given to ensuring that there are nurses who are able to take charge/special skill assignments (e.g. triage, LDRP, OR, clinic etc.) based on the Employer Master Rotation requirements.
5. Group Self-Scheduling meetings shall be held at least once a year so that there is a forum for all participating nurses to voice concerns or make suggestions for change. Attendance is voluntary and all nurses on the unit/worksites/program shall be invited.
6. The guidelines below are generic and are used on all units/worksites/programs that practice Group Self-Scheduling.

C. GUIDELINES

1. The Employer established Master Rotation will be used as the basis for each nurse within the Group Self-Scheduling unit/worksites/program.
2. Nurses within the self-scheduling group are not allowed to schedule themselves in a way that would incur any overtime costs, unless pre-approved by their out of scope Manager/ designate.
3. Each nurse must work a minimum of one (1) shift within each pay period
4. Shifts can be interchanged once selections are completed, however all nurses may be recommended to work a minimum of four (4) week day shifts in a six (6) week period in order to maintain adequate experience and for evaluation purposes.
5. The self-scheduling group must comply with the provisions of the Collective Agreement and meet the deadlines of these guidelines and the current posting practices.

6. EFT requirements will be averaged over the six (6), three (3) or two (2) consecutive bi-weekly periods in the shift schedule pattern as applicable, or where it exists.
7. The out of scope Manager/designate will receive the proposed schedule of the self-scheduling group no later than two (2) weeks prior to the required posting date for the schedule period. The out of scope Manager/designate must approve the proposed schedule prior to it being posted as part of the unit/worksite/program posted schedule. Such approval is not to be unreasonably denied. If approval is denied, the Employer will notify the Union in writing as soon as practicable, such notification to include the reasons for denial.
8. Vacation scheduling will be done in accordance with Article 21.
9. All changes to the self-scheduling group schedule must be confirmed with the out of scope Manager/designate in accordance with Article 1502.

ARTICLE 16 -- OVERTIME

1601 Overtime shall be authorized time worked which exceeds the normal daily shift as defined in Article 14 herein or the normal full-time hours in the rotation pattern in effect on each nursing unit for full-time nurses or the normal full-time hours in two (2) consecutive bi-weekly periods for part-time nurses. Overtime hours extending beyond the normal daily shift into the next calendar day shall continue to be paid at the overtime rates in accordance with Article 1602.

Authorization must be obtained prior to the start of any overtime work except in emergency situations. The Employer agrees the authorization in these emergency situations will not be unreasonably withheld. Payment for overtime worked when emergency circumstances prevent prior authorization shall be subject to a claim accompanied by a special written report prepared by the nurse before leaving the facility/site substantiating the reason for the overtime work.

Applicable for Churchill Health Centre site only:

Overtime shall be authorized time worked which exceeds the normal daily shift as defined in Article 14 herein or the normal full-time hours in the rotation pattern in effect on each nursing unit for both full-time and part-time nurses. Overtime hours extending beyond the normal daily shift into the next calendar day shall continue to be paid at the overtime rates in accordance with Article 1602.

Authorization must be obtained prior to the start of any overtime work except in emergency situations. The Employer agrees the authorization in these emergency situations will not be unreasonably withheld. Payment for overtime worked when emergency circumstances prevent prior authorization shall be subject to a claim accompanied by a special written report prepared by the nurse before leaving the facility/site substantiating the reason for the overtime work.

1602 Effective October 14, 2021, each nurse shall be paid at the rate of two (2) times their basic salary for all hours of authorized overtime in any one (1) day. A full-time nurse shall receive two (2) times their basic salary for all overtime worked on a scheduled day off. However, notwithstanding Article 1601 above, all overtime worked on a Recognized Holiday shall be paid at two and one-half (2.50) times their basic salary.

1603 Notwithstanding Articles 1601 and 1602 above, where a nurse works two consecutive shifts, the nurse shall be paid the full hours for both shifts and shall not be required to work an additional fifteen (15) minutes. They shall receive pay at the rate of double their basic salary for the additional shift, except when the additional shift is worked on a Recognized Holiday, they shall receive pay at the rate of two and one-half (2.50) times their basic salary for the additional shift.

1604 At the nurse's request, overtime shall be banked and shall be compensated by time off at overtime rates to be taken at a time mutually agreed. At the nurse's request, any banked overtime, or portion thereof, shall be paid out on a separate cheque without a surcharge on the dates designated by the Employer. At the nurse's request, any banked overtime or portion thereof shall be paid out at any time on a regular pay cheque. Overtime may be accumulated to a maximum of seventy-seven and one-half (77.50) hours at any one time. Any overtime in excess of seventy-seven and one-half (77.50) hours shall be paid as earned. All accumulated overtime must be taken as time off or paid out by March 31st of each fiscal year. Accumulated overtime not taken as time off or paid out by this date shall be paid to the nurse in the last pay period of the fiscal year on a separate cheque without a surcharge.

Applicable for Churchill Health Centre and Holy Family Home sites only:

At the nurse's request, overtime shall be banked and shall be compensated by time off at overtime rates to be taken at a time mutually agreed. At the nurse's request, any banked overtime, or portion thereof, shall be paid out on a separate cheque without a surcharge on the dates designated by the Employer. At the nurse's request, any banked overtime or portion thereof shall be paid out at any time on a regular pay cheque. All accumulated overtime must be taken as time off or paid out by March thirty-first (31st) of each fiscal year. Accumulated overtime not taken as time off or paid out by this date shall be paid to the nurse in the last pay period of the fiscal year on a separate cheque without a surcharge.

1605 A full-time nurse reporting back to work upon request after leaving the site following completion of a shift but before commencement of their next scheduled shift shall be paid at overtime rates of pay, with a guaranteed a minimum of three (3) hours at overtime rates. If the extra time worked under this subsection commences within less than three (3) hours before the start of a shift, the guaranteed minimum of overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time the nurse starts to work to the beginning of their shift.

Applicable for Home Care Nurses:

A full-time nurse reporting back to work upon request after completing the daily client assignment and following completion of a seven and three-quarter (7.75) hour shift but before commencement of their next scheduled shift shall be paid at overtime rates of pay with a guaranteed minimum of three (3) hours at overtime rates. If the extra time worked under this subsection commences within less than three (3) hours before the start of a shift, the guaranteed minimum of overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time the nurse starts to work to the beginning of their shift.

1606 Overtime worked as a result of the changeover from Daylight Savings Time to Central Standard Time shall be deemed to be authorized overtime.

The changeover from Central Standard Time to Daylight Savings Time will be considered as full hours worked for that shift.

1607 Applicable for all non-transferred sites and the sites within WRHA (direct operations)

Overtime shall be distributed as equitably as possible, within the posted shift schedule, amongst those nurses qualified for the work in accordance with Article 1601. Preference for such overtime shall be awarded in order by unit, program and then site.

- (i) "Home Unit" – full-time nurses or part-time nurses who are at full-time hours and/or eligible for overtime (equitable distribution) – once offered to full-time and part-time nurses, shifts can be offered to casual nurses who are at full-time hours and/or eligible for overtime;
- (ii) "Home Program" – full-time nurses or part-time nurses who are at full-time hours and/or eligible for overtime – once offered to full-time and part-time nurses, shifts can be offered to casual nurses who are at full-time hours and/or eligible for overtime;
- (iii) "External to Program" – full-time nurses or part-time nurses who are at full-time hours and/or eligible for overtime – once offered to full-time and part-time nurses, shifts can be offered to casual nurses who are at full-time hours and/or eligible for overtime.

Applicable for Home Care Nurses:

Overtime shall be distributed as equitably as possible amongst those nurses qualified for the work, and giving consideration to client needs and continuity of care.

No nurse shall be required to work overtime against their wishes when other qualified nurses within the same site are able and willing to perform the required work. The Employer may maintain a sign up sheet (or in electronic format) for nurses to indicate advanced availability for work in such case. The sign up sheet may include eligible nurses from the Employer, as well as the site.

1608 In every period of overtime, a paid rest period of twenty (20) minutes shall occur during each continuous three (3) hours, unless the overtime worked is a full shift in which case regular meal/rest periods shall occur.

1609 A nurse required to work overtime without advance notice for a period in excess of two (2) hours immediately following their regular shift shall receive a meal voucher for the facility cafeteria to cover the cost of a meal of up to of eight dollars (\$8.00) [ten dollars (\$10.00) effective October 14, 2021], or if this is not possible, a meal allowance of eight dollars (\$8.00) [ten dollars (\$10.00) effective October 14, 2021] shall be provided.

Applicable for Home Care Nurses:

A nurse required to work overtime without advance notice for a period in excess of two (2) hours immediately following their regular hours of work shall be provided with a meal allowance of eight dollars (\$8.00) [ten dollars (\$10.00) effective October 14, 2021].

Applicable for Grace Hospital site only:

When a nurse is required to work overtime without advance notice for a period in excess of two (2) hours following their assigned shift, the Employer shall provide a meal at no cost to the nurse.

1610 A nurse who is required to remain on the nursing unit during a meal period or who is required to return to their unit during a meal period, and the missed portion of the meal period is not rescheduled during their shift, shall receive pay at overtime rates for the missed meal period or portion thereof.

ARTICLE 17 -- SHIFT PREMIUM AND WEEKEND PREMIUM

1701

- (a) An evening shift premium of one dollar and seventy-five cents (\$1.75) [two dollars (\$2.00) effective October 14, 2021] per hour shall be paid to a nurse for all hours actually worked on any shift when the majority of the hours on that shift fall between 1800 hours and the next succeeding 2400 hours.

- (b) A night shift premium of two dollars and fifty cents (\$2.50) [three dollars and fifty cents (\$3.50) effective October 14, 2021] per hour shall be paid to a nurse for all hours actually worked on any shift when the majority of hours on that shift falls between 2400 hours and 0600 hours.

Applicable for St. Boniface Hospital site only:

A premium of one dollar and seventy-five cents (\$1.75) [two dollars (\$2.00) effective October 14, 2021] per hour shall be paid to nurses for all hours worked on the Evening shift between 1530 and 2345 hours, except for the periods from 1530 hours to 1545 hours on the Day shift. A premium of two dollars and fifty cents (\$2.50) [three dollars and fifty cents (\$3.50) effective October 14, 2021] per hour shall be paid to all nurses for all hours worked on the eight (8) hour night shift between 2330 and 0745 hours and between 1930 and 0755 hours for the twelve (12) hour night shift. The Night shift premium shall not be applicable from 0730 to 0745 hours on the Day shift.

The above premiums are applicable to any overtime hours worked between 1530 hours and 0730 hours whether paid in money or time off.

1702 *n/a @ St. Boniface Hospital site*

The Evening shift premium shall also be applicable to each hour worked after 1600 hours on a "modified" Day or Evening shift during which at least two (2) hours are worked between 1600 hours and the termination of the shift.

For purposes of application of this provision, a "modified" Day shift shall mean one that commences at a different time than the majority of Day shifts worked by nurses, and a "modified" Evening shift shall mean one that commences at a different time than the majority of Evening shifts worked by nurses. This provision shall be applicable from 1600 hours to the termination of the Day shift on a twelve (12) hour shift pattern.

1703 When a nurse is on standby, shift premium and weekend premium are payable only for hours actually worked on a callback.

1704 A weekend premium of two (\$2.00) dollars per hour shall be paid to a nurse for all hours actually worked on any shift where the majority of the hours on that shift fall between 0001 hours on the Saturday and 2400 hours on the following Sunday.

1705 Shift premium shall not be payable when a nurse is on standby, leave of absence, sick time, Recognized Holiday, paid vacation and Workers' Compensation unless the nurse works a permanent evening or night shift.

ARTICLE 18 -- STANDBY

1801 "Standby" shall refer to any period of time duly authorized by the Employer during which a nurse is required to be available to return to work without undue delay. Callback shall be limited to the unit(s) for which the nurse is on standby. Standby shall be assigned and scheduled in accordance with the provisions of Article 1501 whenever reasonably possible.

Applicable for Community Health Nurses and Home Care Nurses:

"Standby" shall refer to any period of time duly authorized by the Employer during which a nurse is required to be available to return to work without undue delay. Callback shall be limited to the program(s) for which the nurse is on standby. Standby shall be assigned and scheduled in accordance with the provisions of Article 1501 whenever reasonably possible.

1802 Nurses required to be on standby shall receive two (2) hours basic pay per eight (8) hour shift or portion thereof.

1803 A nurse actually called back to work when they are on standby shall be paid for hours worked at the overtime rates, or may, at the nurse's request, be granted time off which is the equivalent of overtime rates. The nurse will be guaranteed a minimum of three (3) hours at the overtime rate except when called in within three (3) hours of the commencement of their next shift. In such cases the nurse shall be paid at the overtime rate from the time the nurse started work to the beginning of their shift.

1804 Standby allowance shall be paid for any time during which a nurse is actually called back to work.

1805 Assignment of standby shall be distributed as equitably as possible amongst those nurses qualified for the assignment.

1806 The Employer will provide parking space in near proximity to the site for the use of nurses on standby who are called back.

1807 Whenever reasonably possible, a pager (or alternate) shall be provided by the Employer to nurses during any period of assigned standby.

1808 Telephone Consultation(s):

When a nurse is consulted by telephone outside of their regular working hours and is authorized to handle bona fide work-related matters without returning to the workplace, the following shall apply:

- (a) A nurse who is placed on standby shall, in addition to standby premium, be paid at the applicable overtime rates for all time spent on any telephone calls received. In any event the nurse shall be guaranteed a minimum of fifteen (15) minutes compensation at the aforementioned rate per call. Accumulated time spent on telephone consultations extending beyond fifteen (15) minutes shall be compensated at the next higher fifteen (15) minute interval.
- (b) A nurse designated by the Employer but not on standby shall be paid at the applicable overtime rates for all time spent on any telephone calls received. In any event the nurse shall be guaranteed a minimum of fifteen (15) minutes compensation at the aforementioned rate per call. Accepting any such calls and/or processing such electronic communications when not receiving the standby premium shall be at the discretion of the nurse. Accumulated time spent on telephone consultations extending beyond fifteen (15) minutes shall be compensated at the next higher fifteen (15) minute interval.
- (c) Nurses consulted by telephone outside of their regular working hours shall document all calls received and shall submit a log of all such calls to their supervisor for processing.
- (d) Where the nurse is authorized to handle bona fide work-related matters through electronic means, including email, without returning to the workplace, the nurse shall be compensated in the same manner as a telephone consultation.

1809

Applicable for St. Boniface Hospital site (Cardiac Operating Room nurses excluded), Misericordia Health Centre site (Operating Room nurses excluded), and Victoria General Hospital site (Operating Room and PACU nurses excluded) only:

A nurse may be required by the Employer to be available for duty for a period of not more than sixteen (16) hours consecutively unless otherwise agreed to between the nurse and the Employer.

NOTE: Please reference MOU Re: Article 18 Exclusions Waiver.

1810

Applicable for St. Boniface Hospital site (Cardiac Operating Room nurses excluded), Misericordia Health Centre site (Operating Room nurses excluded), and Victoria General Hospital site (Operating Room and PACU nurses excluded) only:

A nurse shall not be required to be on standby during the evening prior to or on their scheduled days off, or on a change over from Day Shift to Evening Shift unless otherwise mutually agreed between the nurse and the Employer.

NOTE: Please reference MOU Re: Article 18 Exclusions Waiver.

1811

Applicable for St. Boniface Hospital site only:

When a nurse is called in and works more than four (4) hours of the eight (8) hours immediately preceding their next assigned shift, the time worked shall be payable at regular pay (straight time) and the next assigned shift shall be deemed to be a rest period at regular pay in lieu of overtime rates.

When a nurse is called in and works any time of the four (4) hours immediately preceding their next assigned shift, the time worked shall be payable at overtime rates with a minimum of three (3) hours pay at overtime rates.

ARTICLE 19 -- RESPONSIBILITY PAY

1901 A nurse assigned to perform all or substantially all the responsibilities of a more senior classification for at least two (2) consecutive hours or for the entirety of their shift, or a nurse designated as being "in charge" shall be compensated by an allowance of one dollar (\$1.00) for each hour worked, except for a Nurse III temporarily replacing a Nurse IV.

A Licensed Practical Nurse will receive responsibility pay when they are assigned charge nurse responsibilities by the Employer.

For temporary assignments of promotion of more than four (4) weeks in length, the terms of Article 2801 herein shall be applicable to salary rates.

1902 Assignment of "charge" responsibility shall be equitably distributed amongst those nurses available and qualified for the assignment.

1903 This allowance shall be paid to one (1) nurse designated "in charge" on a nursing unit for any shift (days, evenings or nights) in accordance with Article 1901 above except in the case of there being a Nurse III or Nurse IV or an out of scope manager assigned to the responsibility of the unit on that shift.

It is understood and agreed that the current practice of designating nurses as being "in charge" shall continue.

ARTICLE 20 -- TRANSPORTATION ALLOWANCE/ESCORT DUTY

2001 A nurse who is required to terminate or commence work between the hours of 0001 and 0600 hours and who does not have their own transportation, will have transportation provided by the Employer at no cost to the nurse.

2002 A nurse required to return to the site/worksite/facility on a callback as referenced in Article 1803 shall receive:

- (a) return transportation provided by the Employer, or
- (b) if the nurse elects to use their own vehicle, they shall be reimbursed for all travel in accordance with the prevailing Province of Manitoba mileage rates, subject to a minimum guarantee of \$4.00.

It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

2003 Where a nurse is required and authorized to use their privately owned vehicle on the Employer's business:

- (a) the nurse shall be reimbursed by the Employer for all travel from the site/worksite and between work locations in accordance with the prevailing Province of Manitoba mileage rates.

It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

- (b) The nurse shall be reimbursed for parking expenses incurred away from the site/worksite during the course of the authorized business.

2004 **Escort Duty:**

- (a) (i) A nurse called in to escort a patient when they are not on standby or provided they do not qualify for pay at overtime rates in accordance with Article 16, shall be paid for all time involved with the patient assignment including travel time required to return to the facility, subject to a minimum guarantee of three (3) hours pay at regular rates of pay. All hours worked in excess of seven and three-quarter (7.75) hours shall be paid in accordance with Article 16.

For facilities/sites/programs outside of Winnipeg, the minimum guarantee of hours shall correspond to the geographic region in which the facilities/sites/programs are located.

- (ii) When a nurse is required to escort a patient while on a scheduled shift, overtime rates of pay will apply in accordance with Article 16 for all hours worked in excess of the scheduled shift length (i.e. 7.75 hours, 11.625 hours).
- (iii) A full-time or part-time nurse scheduled or called in for escort duty when they are not on standby whose escort duty is cancelled, shall be paid or assigned work for a period of three (3) hours.
- (iv) When a nurse on escort duty is no longer involved with the patient assignment, time and return travel time will be paid as follows:
 - For each subsequent twenty-four (24) hour period that the nurse is awaiting return travel they shall be paid wages for one regular shift (or overtime in accordance with Article 16)
 - For each portion of a twenty-four (24) hour period that the nurse is awaiting return travel or travelling to return to the facility, the nurse will be paid the greater of hours worked plus actual hours in travel status (or overtime in accordance with Article 16) or a prorated shift based on the portion of the twenty-four (24) hour period away.
- (v) Where a nurse is responsible for the care and control of equipment and/or drugs, and such equipment and/or drugs is not readily portable and requires the nurses' full attention, then the nurse shall be considered as being still "on duty" as if they were still involved with the patient and shall be paid accordingly.

A casual nurse whose Escort Duty is cancelled prior to their arrival at the site shall not be entitled to the payment or work noted above. If their Escort Duty is cancelled after they have reported for duty, they shall be paid or assigned work for a period of three (3) hours.

It is understood that the full-time, part-time or casual nurse shall have the right to refuse the assigned work and as such they shall not be entitled to the minimum payment noted above.

- (b) A nurse going out on escort duty will not suffer any loss in basic salary as a result of missing any portion of a scheduled shift. Therefore, a nurse who is unable to return from escort duty in time to work a scheduled shift or portion thereof shall be paid for the missed hours at their basic salary. Where a nurse misses only a portion of their scheduled shift while on escort duty, they will be expected to work the remainder of their shift.

- (c) A nurse required for escort duty on a Recognized Holiday shall be paid in accordance with Article 22, and Article 16 if applicable, for all time involved with the patient assignment including travel time required to return to the site.
- (d) (i) A nurse on escort duty out of province/country shall be provided with a travel advance for all anticipated travel expenses (transportation, meals, accommodation) before commencing escort duty, unless the nurse chooses to make alternate arrangements.
- (ii) A nurse on escort duty within the province, shall be provided with a meal allowance/advance of ten (\$10.00) dollars, once per shift. If the escort duty extends over another meal period, meal expenses shall be claimed in accordance with Employer policy. A subsequent travel/expense claim will be submitted in accordance with the Employer travel policy.

Additional for Home Care and Public Health:

2005

Applicable to nurses who live within the City of Winnipeg:

Where a nurse is authorized to use their privately owned vehicle on the Employer's business, the nurse shall be reimbursed in accordance with Article 2003 above for all travel between work locations and any distance greater than eight (8) kilometres when traveling from home to the first work assignment of the day or traveling home from the last work assignment of the day. Where the nurse is required to report to the designated Community Health Services site at the beginning of the day or at the end of the day, the nurse will be reimbursed in accordance with Article 2003 for all travel between the designated Community Health Services site and all client visits.

Applicable to nurses who live outside the City of Winnipeg:

Where a nurse is authorized to use their privately owned vehicle on the Employer's business, the nurse shall be reimbursed in accordance with Article 2003 above for all travel between work locations and any distance greater than eight (8) kilometres from their closest point of entry to the Perimeter Hwy. (from the nurse's home) when the nurse is directed to report to a client's home as the first work assignment of the day or traveling home from a client's home after the last work assignment of the day. Where the nurse is required to report to the designated Community Health Services site at the beginning of the day or at the end of the day, the nurse will be reimbursed in accordance with Article 2003 for all travel between the designated Community Health Services site and all client visits.

Additional for Home Care:

2006 *Where bus and taxi transportation is authorized for travel between work locations, the nurse shall be reimbursed transportation expenses.*

Additional for Home Care:

2007 *Travel time between work locations shall be considered time worked. Travel time from the nurse's home to the first work assignment of the day shall also be considered time worked but only where:*

- (a) *the first assignment is to report to a client's residence, rather than to the Community Health Services site to which the nurse normally reports, and*
- (b) *the client's residence is more than twenty-four (24) kilometres away from the office and from the nurse's home.*

Travel time from the last work assignment of the day to the nurse's home shall also be considered time worked but only where:

- (a) *the last assignment is at a client's residence, rather than at the Community Health Services site to which the nurse normally reports, and*
- (b) *the client's residence is more than twenty-four (24) kilometres away from the office and the nurse's home.*

ARTICLE 21 -- VACATIONS

2101 Unless otherwise agreed between the nurse and the Employer, the Employer will provide for vacation days to be taken on a consecutive basis, recognizing that five (5) vacation days [thirty-eight point seven five (38.75) hours] equals one (1) calendar week. The vacation year shall be from May 1st to April 30th.*

***April 1st to March 31st @**

<i>Actionmarguerite (Saint-Boniface)</i>	<i>Actionmarguerite (Saint-Vital)</i>	<i>Actionmarguerite (St. Joseph)</i>
<i>Centre de santé Saint-Boniface</i>	<i>Deer Lodge</i>	<i>Fred Douglas Lodge Society</i>
<i>Golden Links Lodge</i>	<i>Klinic Community Health</i>	<i>Middlechurch Home of Winnipeg</i>
<i>Mount Carmel Clinic</i>	<i>Nine Circles Community Health Centre</i>	<i>Nor'West Co-op Community Health Centre</i>
<i>Pan Am Clinic</i>	<i>River Park Gardens</i>	<i>Seven Oaks General Hospital</i>
<i>The Convalescent Home of Winnipeg</i>	<i>The Salvation Army Golden West Centennial Lodge</i>	<i>The Simkin Centre</i>
<i>Victoria Hospital</i>	<i>Women's Health Clinic</i>	<i>WRHA - Clinical Nurse Specialists</i>
<i>WRHA - Home Care Program</i>	<i>WRHA - Nurse Practitioners</i>	<i>WRHA - Primary Care Program</i>
<i>WRHA - Public Health Program</i>	<i>WRHA - Regional Programs</i>	

***June 1st to May 31st @ Holy Family Home and LHC Personal Care Home**

The dates used to calculate vacation earned shall be from the end of the last full pay period of April* in one vacation accrual year to the end of the last full pay period of the following April*. Vacation earned in any vacation year is taken in the following vacation year.

***March @**

<i>Actionmarguerite (Saint-Boniface)</i>	<i>Actionmarguerite (Saint-Vital)</i>	<i>Actionmarguerite (St. Joseph)</i>
<i>Centre de santé Saint-Boniface</i>	<i>Deer Lodge</i>	<i>Fred Douglas Lodge Society</i>
<i>Golden Links Lodge</i>	<i>Klinic Community Health</i>	<i>Middlechurch Home of Winnipeg</i>
<i>Mount Carmel Clinic</i>	<i>Nine Circles Community Health Centre</i>	<i>Nor'West Co-op Community Health Centre</i>
<i>Pan Am Clinic</i>	<i>River Park Gardens</i>	<i>Seven Oaks General Hospital</i>
<i>The Convalescent Home of Winnipeg</i>	<i>The Salvation Army Golden West Centennial Lodge</i>	<i>The Simkin Centre</i>
<i>Victoria Hospital</i>	<i>Women's Health Clinic</i>	<i>WRHA - Clinical Nurse Specialists</i>
<i>WRHA - Home Care Program</i>	<i>WRHA - Nurse Practitioners</i>	<i>WRHA - Primary Care Program</i>
<i>WRHA - Public Health Program</i>	<i>WRHA - Regional Programs</i>	

***May @ Holy Family Home and LHC Personal Care Home.**

The nurse shall have the right to request which day of the week their vacation begins. Upon request, a nurse may be permitted to retain up to three (3) days of their regular vacation for the purpose of taking such time off for personal reasons such as religious observance or special occasion. Any such days not scheduled at the commencement of the vacation year shall be requested and duly considered in accordance with Article 1501.

The above Article is subject to MOU #41 Re: Article 2101 & 2109 and MOU #35 Re: Hours of Work.

2102 A nurse who has completed less than one (1) year of employment as at the cut-off date shall be entitled to a paid vacation at the rate of one and one-quarter (1.25) days per month worked, however, unless mutually agreed between the nurse and the Employer, the Employer is not obliged to permit earned vacation to be taken until a nurse has completed six (6) months of employment.

Applicable for Churchill Health Centre site only:

A nurse who has completed less than one (1) year of employment as at the cut-off date shall be entitled to a paid vacation at the rate of one and two-thirds (1.66) days per month worked, however, unless otherwise mutually agreed, the Employer is not obliged to permit earned vacation to be taken until a nurse has completed six (6) months of employment.

Applicable for St Boniface Hospital site only:

Unless mutually agreed between the nurse and the Employer, the Employer is not obliged to permit earned vacation to be taken until a nurse has completed six (6) months of employment. For the purpose of the calculation of vacation entitlement, a nurse employed between the first (1st) and fifteenth (15th) of the month inclusive, or terminating between the sixteenth (16th) and thirty-first (31st) of the month inclusive shall be deemed to have a full month of service.

2103

(a) Except as provided in subsection (b) hereinafter, nurses shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

<u>Length of Employment</u>	<u>Rate at Which Vacation Earned</u>
In the first three (3) years	Fifteen (15) days/three (3) weeks [116.25 hours] per year
In the fourth (4th) to tenth (10th) year inclusive	Twenty (20) days/four (4) weeks [155 hours] per year
In the eleventh (11th) to twentieth (20th) year inclusive	Twenty-five (25) days/five (5) weeks [193.75 hours] per year
In the twenty-first (21st) and subsequent years	Thirty (30) days/six (6) weeks [232.50 hours] per year

Applicable for Churchill Health Centre site only:

Except as provided in subsection (b) hereinafter, nurses shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

<u>Length of Employment</u>	<u>Rate at Which Vacation Earned</u>
In the first three (3) years	Twenty (20) days/four (4) weeks (155 hours) per year
In the fourth (4th) to tenth (10th) year inclusive	Twenty-five (25) days/five (5) weeks (193.75 hours) per year
In the eleventh (11th) to twentieth (20th) year inclusive	Thirty (30) days/six (6) weeks (232.50 hours) per year
In the twenty-first (21st) and subsequent years	Thirty-five (35) days/seven (7) weeks (271.25 hours) per year

- (b) In addition to (a) above, all nurses employed in the Nurse IV or Nurse V occupational classifications shall be entitled to paid vacation calculated on the basis of vacation earned at a rate which is five (5) days more than the rates at which vacation is earned in (a).

This provision shall apply to nurses employed in the classification of Nurse IV or higher on April 1, 1998. This Article will not apply to nurses who are newly employed as or reclassified to Nurse IV or higher after April 1, 1998.

- (c) Vacation entitlement for the vacation year following completion of the 3rd, 10th and 20th years of continuous employment shall be determined by a pro-rata calculation based upon the two (2) rates of earned vacation.

Additional for Churchill Health Centre site only:

- (d) Vacation travel assistance shall be paid once annually commencing with the nurse's second (2nd) year of employment, and shall consist of economy return airfare, or its equivalent from Churchill to Winnipeg. Commencing in the nurse's sixth (6th) year of employment and each year thereafter, the amount of vacation travel assistance shall consist of two (2) times economy return airfare, or its equivalent from Churchill to Winnipeg.

Travel assistance shall be provided for nurses only and shall be issued not later than the nurse's last day of work prior to taking vacation. Unused travel assistance shall not be paid on termination of employment.

In the event of the discontinuation of scheduled commercial flights between Churchill and Winnipeg, the amounts referred to above shall be equal to the rates in effect prior to such discontinuation.

It is understood that Vacation Travel Assistance shall be used solely for the purpose of aiding a nurse leaving the Churchill area utilizing commercial transportation when on vacation, banked time off, and/or any combination of the two, and such assistance shall not be paid for any other purpose.

Applicable for Klinik Community Health and Nine Circles Community Health Centre sites only:

See attached MOU's Re: Vacation Accrual per MNU Article 2103.

2104 In recognition of length of service, each nurse shall receive an additional five (5) days of vacation on completion of twenty (20) years of continuous service, and on each subsequent fifth (5th) anniversary of employment (i.e. 25th, 30th, 35th, 40th, etcetera). Such days shall be taken during the vacation year in which the twentieth (20th or subsequent fifth (5th) anniversary occurs.

2105 For the purposes of determining the rate at which vacation entitlement is earned, the term of continuous service of a nurse will be deemed to include:

- (a) any periods when a nurse is receiving income protection benefits, is on paid vacation, is on paid leave of absence, is on unpaid leave of absence related to illness or disability of up to two (2) years
- (b) any period of Workers' Compensation up to two (2) years
- (c) any period of unpaid leave of absence of up to four (4) weeks
- (d) any period of layoff of less than eighteen (18) weeks
- (e) educational leave of up to two (2) years
- (f) any period of parenting leave.

2106 Nurses on Workers Compensation or MPI (as a result of a motor vehicle accident while on duty) will continue to accrue paid vacation for a period of one (1) year from the date of the first absence from work, related to the occurrence of the compensable injury or illness.

2107 Terminal vacation pay shall be calculated in accordance with Articles 2103 and 2105 and based on the nurse's rate of pay on the date of termination.

2108 The Employer shall notify each nurse, prior to their vacation, of the date and time upon which they are to report back to work following their vacation, but this will not preclude the making of a change during the nurse's vacation period if mutual agreement is reached between the Employer and the nurse.

2109 The Employer shall be responsible for posting the vacation entitlement lists, along with a list of the number of nurses in each occupational classification per unit/site that may be scheduled for vacation at one time, in an accessible location, by March 1st* of each year. The vacation entitlement lists shall reflect each nurse's projected vacation entitlement as at April 30th** of that year.

***February 1st @ St. Boniface Hospital**

****March 31st @**

<i>Actionmarguerite (Saint-Boniface)</i>	<i>Actionmarguerite (Saint-Vital)</i>	<i>Actionmarguerite (St. Joseph)</i>
<i>Centre de santé Saint-Boniface</i>	<i>Deer Lodge</i>	<i>Fred Douglas Lodge Society</i>
<i>Golden Links Lodge</i>	<i>Klinic Community Health</i>	<i>Middlechurch Home of Winnipeg</i>
<i>Mount Carmel Clinic</i>	<i>Nine Circles Community Health Centre</i>	<i>Nor'West Co-op Community Health Centre</i>
<i>Pan Am Clinic</i>	<i>River Park Gardens</i>	<i>Seven Oaks General Hospital</i>
<i>The Convalescent Home of Winnipeg</i>	<i>The Salvation Army Golden West Centennial Lodge</i>	<i>The Simkin Centre</i>
<i>Victoria Hospital</i>	<i>Women's Health Clinic</i>	<i>WRHA - Clinical Nurse Specialists</i>
<i>WRHA - Home Care Program</i>	<i>WRHA - Nurse Practitioners</i>	<i>WRHA - Primary Care Program</i>
<i>WRHA - Public Health Program</i>	<i>WRHA - Regional Programs</i>	

***April 1st @ LHC Personal Care Home**

****May 31st @ Holy Family Home and LHC Personal Care Home**

Beginning March 15th* of each year, the Employer shall arrange an appointment with each nurse, in order of seniority, so that the nurse may indicate their choice of vacation dates, in writing. All of the nurse's earned vacation must be chosen at this time except for the three (3) days as per Article 2101. These appointments shall take place in person, unless otherwise mutually agreed, and shall include reviewing the vacation selected/approved to date.

***February 15th @**

Actionmarguerite (Saint-Boniface)	Actionmarguerite (Saint-Vital)	Actionmarguerite (St. Joseph)
Centre de santé Saint-Boniface	Deer Lodge	Fred Douglas Lodge Society
Golden Links Lodge	Klinic Community Health	Middlechurch Home of Winnipeg
Mount Carmel Clinic	Nine Circles Community Health Centre	Nor'West Co-op Community Health Centre
Pan Am Clinic	River Park Gardens	Seven Oaks General Hospital
St. Boniface Hospital	The Convalescent Home of Winnipeg	The Salvation Army Golden West Centennial Lodge
The Simkin Centre	Victoria Hospital	Women's Health Clinic
WRHA - Clinical Nurse Specialists	WRHA - Home Care Program	WRHA - Nurse Practitioners
WRHA - Primary Care Program	WRHA - Public Health Program	WRHA - Regional Programs

***April 15 @ LHC Personal Care Home**

The selected/approved vacation schedule shall be updated on an ongoing basis and shall be posted daily in an accessible location. Once a nurse's vacation selection has been approved, it shall not be changed unless by mutual agreement and without displacing the request of another nurse.

Except in extenuating circumstances, a nurse who fails to indicate their choice of vacation dates in accordance with the above, shall have their vacation scheduled by the Employer.

To the extent that it finds possible, the Employer shall give priority to those nurses in each occupational classification within each nursing unit/site having the most seniority within the site.

The approved vacation schedule will be posted no later than May 1st *. Approved vacation schedules within each nursing unit/site shall not be changed unless mutually agreed upon by the nurse and the Employer.

***April 1st @**

Actionmarguerite (Saint-Boniface)	Actionmarguerite (Saint-Vital)	Actionmarguerite (St. Joseph)
Centre de santé Saint-Boniface	Deer Lodge	Fred Douglas Lodge Society
Golden Links Lodge	Klinic Community Health	Middlechurch Home of Winnipeg
Mount Carmel Clinic	Nine Circles Community Health Centre	Nor'West Co-op Community Health Centre
Pan Am Clinic	River Park Gardens	Seven Oaks General Hospital
St. Boniface Hospital	The Convalescent Home of Winnipeg	The Salvation Army Golden West Centennial Lodge
The Simkin Centre	Victoria Hospital	Women's Health Clinic
WRHA - Clinical Nurse Specialists	WRHA - Home Care Program	WRHA - Nurse Practitioners
WRHA - Primary Care Program	WRHA - Public Health Program	WRHA - Regional Programs

***June 1st @ Holy Family Home and LHC Personal Care Home**

A nurse who transfers to another unit/site after their vacation request has been approved, shall have their vacation scheduled by the Manager of the new unit/site in consultation with the nurse within the time periods remaining during that vacation year.

Notwithstanding the above, as much as reasonably possible, the approved vacation of deleted and bumped nurses shall continue to be approved regardless of the unit/site they are displaced to. This shall not impact previously approved vacation of nurses in the new unit/site. If the displaced nurse prefers to reschedule the vacation at a time that is mutually agreeable to both the Employer and the nurse, that shall occur.

A nurse must use current annual vacation, (which was earned during the previous vacation year), during the current vacation year. If the current annual vacation is not used or scheduled by January 15th, the Employer has the right to schedule the vacation prior to the end of the current vacation year. Vacation may be paid out only in extenuating circumstances.

Applicable for Public Health only: For former Civil Service nurses who have maintained their pension with the Civil Service Superannuation Plan, vacation days may be reserved in accordance with the Memorandum of Understanding Supplementary to the Collective Agreement.

The above Article is subject to MOU #41 Re: Article 2101 & 2109 and MOU #35 Re: Hours of Work.

ARTICLE 22 -- RECOGNIZED HOLIDAYS

2201 For purposes of this Agreement, Recognized (paid) Holidays shall be New Year's Day (January 1st), Louis Riel Day (la journée Louis Riel), Good Friday, Easter Monday, Victoria Day, Canada Day (July 1st), Terry Fox Day (la journée Terry Fox), Labour Day, National Day for Truth and Reconciliation (September 30th), Thanksgiving Day, Remembrance Day (November 11th), Christmas Day (December 25th), and Boxing Day (December 26th); and any other statutory holidays declared by federal or provincial authority.

2202 Whenever a Recognized Holiday falls on their scheduled days off, it is understood that this day off in lieu shall be banked in accordance with Article 2206, or the nurse may request that a day in lieu of the Recognized Holiday be scheduled on a date mutually agreed between the Employer and the nurse, or the nurse may request that they receive an extra day's pay at their basic rate of pay.

2203 A nurse required to work on a Recognized Holiday shall be paid at the rate of one and one-half (1.50) times their basic pay and in addition it is understood that one (1) day off shall be banked in accordance with Article 2206, or the nurse may request that a day in lieu of the Recognized Holiday be scheduled on a date mutually agreed between the Employer and the nurse, or the nurse may request that they receive an extra day's pay at the nurse's basic rate of pay.

2204 A day off given in lieu of a Recognized Holiday shall be added to a weekend off or to scheduled days off unless otherwise mutually agreed.

2205 The Employer agrees to assign time off as equitably as possible over Christmas and New Year's, endeavoring to grant each nurse as many consecutive days off as reasonably possible over either Christmas Day or New Year's Day.

As much as reasonably possible, Christmas Eve and Boxing Day shall be assigned with Christmas Day; New Year's Eve shall be assigned with New Year's Day, unless otherwise mutually agreed.

Nurses shall be assigned time off over Christmas or New Years in alternate years unless otherwise mutually agreed.

2206 A nurse may accumulate up to four (4) days off in lieu of Recognized Holidays to be taken with scheduled days off or to complete a partial week of vacation or at such other time as is requested and granted in accordance with Article 1501. Unless otherwise agreed between the nurse concerned and the Employer, accumulated lieu days must be taken within the fiscal year in which they were earned.

2207

Effective April 1, 2022: For the purpose of this Article, a day is equivalent to seven and three-quarter (7.75) hours.

Additional for Community Health and Public Health Nurses:

2208 Where the Employer requires a nurse to work a regular work day on December 24th when that day falls on Monday through Friday inclusive, such nurse shall be entitled to one-half (1/2) day of compensatory leave with pay to a maximum of four (4) hours.

The above referenced clause ceases to apply to any nurses hired into a WRHA Public Health Nurse position April 30, 2014.

Additional for Home Care, Primary Care and Nurse Practitioners:

2209 Assignment of Recognized Holidays on the actual day of their occurrence shall be made as equitably as reasonably possible.

2210 A nurse who is assigned to work a weekend shall be assigned and will work on a Recognized Holiday that falls on the Friday or Monday consecutive with that weekend, whenever reasonably possible.

ARTICLE 23 -- INCOME PROTECTION AND WORKERS COMPENSATION

2301 A nurse having accumulated income protection may claim basic pay for such income protection against such accumulation with respect to periods during which:

- (i) The nurse unable to work because of an incapacitation due to accident or illness, however, a nurse cannot receive income protection benefits for any period of time during which the nurse is eligible for wage loss benefits from either the Workers Compensation Board or the Manitoba Public Insurance as a result of a motor vehicle accident [subject to Article 2303], or
- (ii) In the opinion of the Employer, the nurse's presence constituted a health hazard for patient and/or other employees and the nurse was instructed by the Employer to leave the nurse's place of duty; or
- (iii) The nurse attends an appointment related to a medical/dental examination and/or treatment, subject to Article 3704.

Additional for WRHA - Public Health Program site only:

- (iv) A deduction shall be made from accumulated sick leave of all normal working days absent for sick leave. No deductions for absences on account of illness will be made for periods of two (2) hours or less, to a maximum of six (6) such absences per year.

A nurse who has had accumulated sick credits and subsequently used all their credits will be entitled to the benefit of this Article regarding absence for two (2) hours or less.

2302 Each nurse shall accumulate income protection at the rate of one and one-quarter (1.25) days for each full month of employment.

NOTE: For each one and one-quarter (1.25) days of income protection accumulated, one day* (80%) shall be reserved exclusively for the nurse's personal use as outlined in Article 2301. The remaining one-quarter (.25) of a day* (20%) shall be reserved for either the nurse's personal use as outlined in Article 2301, or for use in the event of family illness as specified in Article 2312. The Employer shall maintain an up to date record of the balance of income protection credits reserved for each of these purposes.

(*In the nurse's first year of employment, amend "one day" to read "three-quarters of a day" and amend "one-quarter of a day" to read "one-half of a day".)

2303

- (a)
- (i) A nurse who becomes injured or ill in the course of performing their duties must report such injury or illness as soon as possible to their immediate supervisor.
 - (ii) A nurse unable to work because of a work related injury or illness will inform the Employer immediately, in accordance with established procedures, so that a claim for compensation benefits can be forwarded to the Workers Compensation Board (WCB). Workers Compensation payment will be paid directly to the nurse by WCB.

Where a nurse is unable to work because of injuries sustained in a motor vehicle accident they must advise their supervisor as soon as possible and they must submit a claim for benefits to the Manitoba Public Insurance (MPI). The nurse shall be entitled to receive full income protection benefits for any period of time deemed to be a "waiting period" by MPI.
 - (iii) Where a nurse has applied for WCB or MPI benefits and where a loss of normal salary would result while awaiting a WCB/MPI decision, the nurse may elect to submit an application to the Employer requesting an advance subject to the following conditions:
 - (iv) Advance payment(s) shall not exceed the nurse's basic salary as defined in Article 3802 (exclusive of overtime), less the nurse's usual income tax deductions, Canada Pension Plan contributions, and EI contributions.
 - (v) The advance(s) will cover the period of time from the date of injury until the date the final WCB/MPI decision is received, however in

no case shall the total amount of the advance exceed seventy percent (70%) of the value of the nurse's accumulated income protection credits.

- (vi) The nurse shall reimburse the Employer by assigning sufficient WCB/MPI payments to be paid directly to the Employer to offset the total amount of the advance or by repayment to the Employer immediately upon receipt of payment made by WCB/MPI directly to the nurse.
 - (vii) In the event that the WCB/MPI disallows the claim, including any appeal, the nurse shall be paid for the absence in accordance with the income protection provisions of this Agreement and the Employer shall recover the total amount of the advance by payroll deduction.
 - (viii) Upon request, the Employer will provide a statement to the nurse indicating the amount of advance payment(s) made and repayment(s) received by the Employer.
- (b) (i) A nurse who has accumulated sufficient income protection credits may elect to submit an application to the Employer requesting that the Employer supplement the WCB/MPI payments. The amount of such supplement will equal ten percent (10%) of the nurse's regular net salary not earned due to the time loss. Regular net salary will be based on the nurse's basic salary as defined in Article 3802 of the Collective Agreement (exclusive of overtime), less the nurse's usual income tax deduction, Canada Pension Plan contributions and Employment Insurance contributions.

The Employer's supplement shall be charged to the nurse's accumulated income protection credits and such supplement shall be paid until the nurse's accumulated income protection credits are exhausted, or until 119 calendar days have elapsed since the first day of supplement, whichever is less.

- (ii) Subject to the provisions of each plan, the nurse may request the Employer to reimburse the nurse from the supplement, if sufficient, the contributions which would have been paid by the nurse to the Employer's pension plan, dental care plan, Disability & Rehabilitation plan, and group life insurance plan as if the nurse was not disabled. If the supplement is not sufficient, or where the nurse elects to receive an advance, the nurse may, subject to the provisions of each plan, forward self-payments to the Employer to ensure the continuation of these benefit plans. The Employer will contribute its usual contributions to these benefit plans while the nurse contributes.
 - (iii) Further to this, the Employer shall notify Workers Compensation/Manitoba Public Insurance of salary adjustments at the time they occur.
 - (iv) In accordance with Section 41(6)(b) of the Workers Compensation Act of Manitoba, the Employer shall make application to the WCB by January 1, 1994 so that the WCB may determine whether or not the supplements referenced in Article 2303(b)(i) shall continue in effect after January 1, 1995.
 - (v) If at any time it is decided by the WCB/MPI that any payment to be made to the nurse by the Employer must be offset against benefits otherwise payable by the WCB/MPI, then such payment shall not be payable.
- (c) Where the WCB/MPI recommends a work assessment period or a modified return to work period, the provisions of Article 7A06 shall apply.
- (d) A nurse who is on D&R/WCB/MPI prior to the commencement of their vacation shall, upon their request, have their vacation displaced and such vacation shall be re-scheduled at a time mutually agreed between the nurse and the Employer within the available time periods remaining during that vacation year. If the nurses' current annual vacation cannot be reasonably scheduled by the end of the current vacation year the nurse may elect to carry over to the next vacation year up to five (5) days of current annual vacation (pro-rated for part-time).

2304 The Employer shall be entitled to recover any income protection paid to a nurse if their employment is not continued beyond their probationary period, from the nurse's final termination cheque.

2305 A nurse who is unable to report for work due to illness shall inform the Employer prior to the commencement of their next scheduled shift(s). A nurse who fails, without valid reason, to give notice as specified below will not be entitled to receive income protection benefits for the shift(s) in question.

Prior to Day shift	–	One (1) hour
Prior to Evening shift	–	Three (3) hours
Prior to Night shift	–	Three (3) hours

A nurse returning to work following an absence of one (1) week or more shall inform the Employer by 1200 hours the day prior to returning to work.

2306 The Employer, either at the time of notification by the nurse of claiming income protection, or by advance notice prior to future income protection claims, may require a medical certificate or report as proof of the validity of any claim for income protection and as proof of the nurse's ability to perform their regular duties.

Failure to provide such a certificate when requested will disqualify a nurse from receiving paid income protection and may result in a refusal of permission for them to resume their duties.

2307 Days off and Recognized Holidays or days given in lieu of Recognized Holidays which fall within a period of sick leave shall not be considered a part of, or charged to, the nurse's accumulated income protection.

2308 At the effective date of this Agreement, each nurse will retain income protection benefits accumulated and not used to that date.

2309 As soon as a nurse is aware of a date upon which surgery will occur, they shall notify the Employer, in writing, of this date and any change thereto so that staff coverage for their intended absence may be arranged.

Where a nurse has been provided necessary time off due to scheduled surgery and where the surgery is subsequently cancelled, and where the Employer has made arrangements for alternate staffing to cover the anticipated absence, the Employer shall have the right to cancel the relief shifts.

These relief shifts shall be clearly identified as being subject to forty-eight (48) hours notice of cancellation.

2310 If hospitalized due to accident or illness while on scheduled vacation, a nurse may utilize income protection to cover the hospitalization and/or post-hospitalization period, and the displaced vacation shall be re-scheduled at a time mutually agreed between the nurse and the Employer within the available time periods remaining during that vacation year. Proof of such hospitalization and/or post-hospitalization period shall be provided if requested.

2311 The Employer will annually, on written request, provide each nurse with a statement of their accrued income protection credits.

2312 Subject to the provisions of Article 2302, a nurse may use income protection for the purpose of providing care in the event of an illness of a spouse, common law spouse including same sex partner and fiancé, dependent child, dependent step-child, parent, step-parent, or parent-in-law.

2313 A nurse who has completed the probationary period who is unable to perform their work by reason of an accident or illness not fully covered by income protection, upon providing an acceptable medical certificate, shall be granted unpaid leave of absence as required for recovery; subject to review at three (3) months, or lesser intervals, at the discretion of the Employer.

2314 Accumulation of income protection will continue during any unpaid leave of absence or layoff of four (4) weeks or less.

ARTICLE 24 -- LEAVE OF ABSENCE

2401 The nurse will be required to submit a written request for any leave of absence unless otherwise herein stipulated. These requests will specify the reason for the leave and will be considered on an individual basis and may be allowed at the discretion of the Employer unless otherwise indicated in the agreement; however, requests for education leave will be given special consideration. Except in emergencies, such requests must be made at least four (4) weeks in advance. The Employer shall notify the nurse of its decision in writing, within two (2) weeks of receipt of the request. Requests for extension of educational leave, maternity leave, parenting leave, adoption leave, and bereavement leave will be granted if reasonably possible.

Where a nurse requests to return to work prior to the expiry of the leave of absence as set out in the approved request, the Employer shall have no obligation to return the nurse to work until such time that the leave of absence would have expired, except as per Article 2408 C.6.

Where a nurse has been granted a leave of absence from their entire EFT, the nurse shall be eligible to work additional available shifts. However, the nurse shall not have preference over part-time nurses who offer to work these shifts. When the nurse is awarded additional available shifts, they are compensated in accordance with Article 2704 (a) – (f).

Where a nurse has requested and been granted a partial leave of absence, they will be entitled to accrual of vacation, income protection credits, pre-retirement leave, and Recognized Holiday pay on a pro-rata basis.

2402 Overstaying of leave of absence without valid reason may be deemed as a resignation.

2403 **Applicable for all sites/Employers within the WCRHEO**

The Employer shall make every reasonable effort to assure that a nurse granted leave of absence for any reason shall return to the same position. For leaves of absence of sixty (60) weeks or less, or eighty (80) weeks or less in the case of parenting leave or parental leave, the nurse is assured of being placed in the same occupational classification within the site and at the same step on their salary scale on their return, but the nurse cannot be assured of being placed in the same nursing unit, position or shift. In the case of longer leaves of absence, a nurse may be placed in any position within the site and shall be reinstated at their previous salary, provided that such salary shall not exceed the maximum for the position in which the nurse is placed. Notwithstanding Article 3001, a nurse not placed in their former position will be given consideration over other nurses for the first vacancy made available to the nurse in a similar position.

Applicable for St. Boniface Hospital site only:

The Employer shall make every reasonable effort to assure that a nurse granted leave of absence for any reason shall return to the same position. For leaves of absence of sixty (60) weeks or less, or eighty (80) weeks or less in the case of parenting leave or parental leave, the nurse is assured of being placed in the same occupational classification within the site and at the same step on their salary scale on their return, but only a Nurse III and IV can be assured of being placed in the same nursing unit, position, and shift. In the case of longer leaves of absence, a nurse may be placed in any position within the site and shall be reinstated at their previous salary, provided that such salary shall not exceed the maximum for the position in which the nurse is placed. Notwithstanding Article 3001, a nurse not placed in their former position will be given consideration over other nurses for the first vacancy made available to the nurse in a similar position.

2404 There shall be no loss of income protection accumulations or vacation accumulations up to the date of any leave of absence whether granted with or without pay.

2405 Income protection and vacation benefits will continue to accrue during any period of an unpaid leave of absence, approved by the Employer of four (4) weeks or less.

2406 **Professional Leave:** If, in the opinion of the Employer it is in the best interests of patient/resident/client care, nurses may, whenever practicable, be granted time off with pay in order to attend professional or educational meetings, conventions, workshops and institutes.

2407 Education Leave:

- (a) Where the Employer requires a nurse to attend educational conferences, workshops, programs or seminars during working hours, the Employer shall pay registration or tuition fees, and approved expenses and shall ensure that the nurse suffers no loss of salary.

- (b) Where the Employer requires a nurse to attend educational conferences, workshops, programs or seminars during non-working time, the Employer shall pay registration or tuition fees, and approved expenses and shall pay for the time of such attendance at straight time rates.

- (c) Employer Sponsored Educational Development:
A nurse shall be granted, upon written request, funding up to a maximum of \$200 per fiscal year, to attend approved workshops, courses, and other programs that are relevant to nursing practice. Such requests must be submitted to the senior nursing manager or designate prior to attendance at such program. The \$200 allowance referenced herein shall be for reimbursement of tuition or registration and recommended/required books and shall occur upon satisfactory completion of the workshop, course, or educational program.

2408 Parenting Leave

Parenting Leave consists of Maternity and Parental Leave. Parental Leave includes Paternity and Adoption Leave. A nurse shall be granted leave of absence for up to eighty (80) weeks where they qualify for Parenting Leave.

A nurse who qualifies for Maternity Leave may apply for such leave in accordance with either Maternity Leave Plan "A" or Maternity Leave Plan "B" but not both.

A. Maternity Leave Plan "A"

- 1. Up to seventeen (17) weeks of Maternity Leave without pay will be granted subject to the following conditions:
 - (a) a written request must be submitted no later than the end of the fifth (5th) month of pregnancy and not less than one (1) month before the intended date of the leave.

 - (b) if requested by the nurse, unpaid Maternity Leave of shorter duration may be granted at the discretion of the Employer.

- (c) the Employer is entitled to require a nurse to stop work in the case of unsatisfactory job performance or if the state of the nurse's health as verified by a qualified medical practitioner becomes incompatible with the requirements of their job.

B. Maternity Leave Plan "B"

1. In order to qualify for Plan B, a pregnant nurse must:
 - (a) submit to the Employer an application in writing, for leave under Plan B not less than one (1) month before the intended date of the leave.
 - (b) provide the Employer with a certificate of a duly qualified medical practitioner certifying that they are pregnant and specifying the estimated date of their delivery.
 - (c) provide the Employer with proof that they have applied for Employment Insurance benefits and that the Employment and Social Development Canada (ESDC) has agreed that the nurse has qualified for and is entitled to such Employment Insurance benefits pursuant to the Employment Insurance Act.
 - (d) the Employer is entitled to require a nurse to stop work in the case of unsatisfactory job performance or if the state of the nurse's health as verified by a qualified medical practitioner becomes incompatible with the requirements of their job.
2. An applicant for Maternity Leave under Plan B must sign an agreement with the Employer providing that:
 - (a) the nurse will return to work and remain in the employ of the Employer for at least six (6) months following their return to work, except that where a nurse is the successful applicant for a part-time position which commences on the date of their return from Maternity Leave or at any time during the six (6) months following their return from Maternity Leave, the nurse must remain in the employ of the Employer and work the working hours remaining in the balance of the six (6) months of the full-time employment; and
 - (b) the nurse will return to work on the date of the expiry of their Maternity Leave and where applicable, their Parental Leave, unless this date is modified as per C.6 below.

- (c) should the nurse fail to return to work as provided under (a) and/or (b) above, they are indebted to the Employer for the full amount of pay received from the Employer as a maternity allowance during the entire period of Maternity Leave.
- (d) In the event the nurse does not complete the full period of service as required under (a) and (b) above, the nurse shall repay a portion of the “top up” as follows:

$$\frac{\text{Monetary value of top up provided}}{\text{Hours of service required to be worked (based on monetary value)}} \times \frac{\text{number of hours not worked}}{\text{(value is based on hours paid at regular rate of pay in 6 months prior to leave)}}$$

3. A nurse who qualifies is entitled to a Maternity Leave consisting of:
 - (a) a period not exceeding seventeen (17) weeks if delivery occurs on or before the date of delivery specified in the certificate, as in B.1.(b).
 - (b) a period of seventeen (17) weeks plus an additional period equal to the period between the date of delivery specified in the certificate and the actual date of delivery, if delivery occurs after the date mentioned in that certificate, as in B.1.(b).
 - (c) the Employer may, notwithstanding the above, vary the length of Maternity Leave upon proper certification by the attending physician.
4. Within twelve (12) weeks of receiving the Employment and Social Development Canada (ESDC) approval for Employment Insurance benefits pursuant to the Employment Insurance Act, the nurse must provide proof to the Employer. Reasonable consideration will be given to extending the above period of time for the nurse in exceptional circumstances.

Following receipt of the above proof, the Employer shall provide the nurse a maternity leave allowance with the SUB Plan as follows:

- (a) for the first week a nurse shall receive ninety-three percent (93%) of their weekly rate of pay;

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- (b) for up to a maximum of sixteen (16) additional weeks, payments equivalent to the difference between the EI benefits the nurse is eligible to receive and ninety-three percent (93%) of their normal weekly earnings.
 - (c) All other time as may be provided under this Article, shall be on a leave without pay basis.
- 5. Plan B does not apply to a newly hired nurse occupying a term position.
 - 6. A leave of absence under Plan B shall be considered to be an unpaid leave of absence. Income protection credits and vacation entitlement shall not accrue.
- C.
- 1. Parental Leave
 - (i) In order to qualify for Parental Leave a nurse must be the natural mother of a child; or be the natural father of a child or must assume actual care and custody of their newborn child (Paternity Leave) or adopt a child under the law of the province (Adoption Leave), or be a partner in a same sex relationship who assumes care and custody of a child.
 - (ii) A nurse who qualifies for Parental Leave, except in the case of Adoption Leave as specified below, must submit to the Employer an application in writing for Parental Leave at least four (4) weeks before the intended date of the commencement of the leave.
 - (iii) In the case of Adoption Leave, the nurse must submit a written request for such leave. The nurse may commence Adoption Leave upon one (1) days' notice provided that application for such leave is made when the adoption has been approved and the Employer is kept informed of the progress of the adoption proceedings.
 - (iv) A nurse who qualifies in accordance with (i), (ii) and (iii) will be granted Parental Leave without pay for a continuous period of up to sixty-three (63) weeks inclusive of vacation as specified in (C.2.) below. If requested by the nurse, extensions to leaves under this clause will be granted in accordance with Article 2401.

2. Except as outlined below, any nurse must use current annual vacation, (which was earned during the previous vacation year), during the current vacation year. If the current annual vacation is not used, then the Employer has the right to schedule the vacation prior to the end of the current vacation year or pay out any monies owing.

Where Parenting Leave is forty-eight (48) weeks or less, vacation shall be scheduled and taken in accordance with the provisions of the Collective Agreement. No carry-over of vacation is permitted.

Where Maternity and/or Parental Leave exceeds forty-eight (48) weeks, the nurse may elect to carry over to the next vacation year, up to five (5) days of current annual vacation. The balance of the current annual vacation will be paid out at a time immediately following the period during which EI benefits were payable (even if this period extends into the following vacation year).

Any vacation earned up to the time of the commencement of leave will be retained and will be available to be taken in the following vacation year.

3. Subject to 4. below, Parental Leave must commence no later than eighteen (18) months following the birth or adoption of the child or of the date on which the child comes into actual care and custody of the nurse.
4. Where a nurse takes Parental Leave in addition to Maternity Leave, the nurse must commence the Parental Leave immediately on the expiry of the Maternity Leave without a return to work unless otherwise approved by the Employer.
5. Three (3) days of paid leave of absence (23.25 hours) shall be granted to a full-time nurse prior to the commencement of Maternity, Paternity, or Adoption Leave or at the time of the birth or adoption of a child. If the nurse is taking a Maternity, Paternity, or Adoption Leave, the nurse will use this three (3) days of paid leave to replace scheduled hours of work immediately prior to the Sunday of the week the Maternity, Paternity, or Adoption Leave commences.

Part-time nurses shall be entitled to a pro rata amount of this leave based on their hours paid at regular rate of pay in the previous six (6) months.

6. A nurse may end Maternity or Parental Leave earlier than the expiry date of the leave by giving the Employer written notice at least two (2) weeks or one pay period, whichever is longer, before the day the nurse wants to end the leave. This provision includes the cancellation of any term position. Where the Employer has made arrangements for alternate staffing to cover the nurse's absence, the Employer shall have the right to cancel shifts. A minimum of two (2) weeks notice shall be provided for any such cancelled shift.

2409**Union Leave:**

- (a) Subject to at least two (2) or more weeks written notice of request, and no additional costs to the Employer, leave of absence without loss of salary or benefits shall be granted to Union representatives for the purpose of attendance at Manitoba Nurses' Union/Canadian Federation of Nurses' Unions/Canadian Labour Congress meetings or seminars. It is understood that the Manitoba Nurses' Union will reimburse the Employer for salary, benefits and related payroll costs.
- (b) Subject to six (6) weeks' notice, a nurse elected or selected to a full-time or part-time position with the Manitoba Nurses' Union or the Canadian Federation of Nurses' Unions/Canadian Labour Congress shall be granted leave of absence without loss of seniority, salary or benefits for a period of up to two (2) years. Such leave shall be renewed each year, on request, during the nurse's term of office. It is understood that the Manitoba Nurses' Union will reimburse the Employer for the total recovery of payroll and related costs.

Notwithstanding Article 3006, the Employer may elect to post these terms as either fixed terms up to two (2) years or indefinite terms.

2410**Legal and Investigative Proceedings**

- a) A nurse required to attend a court proceeding, other than a court proceeding occasioned by the nurse's private affairs where they are a party to that proceeding, shall receive leave of absence at their regular basic rate of pay, and remit to the Employer any jury or witness fees received, only for those days they were normally scheduled to work. The nurse shall not request reimbursement for, or be required to remit any reimbursement of expenses for such duty.

If a nurse is subpoenaed as a witness in a work related matter on their scheduled day off, the Employer and the nurse will mutually agree on alternate time off in lieu.

- b) A nurse required to attend a court proceeding/inquest to provide medical/clinical evidence shall receive a leave of absence at their regular basic rate of pay, and shall remit to the Employer any witness fees received. The nurse shall not be required to remit any reimbursement of expenses for such duty.
- c) Where a nurse is required to prepare for a court proceeding/inquest where they will provide medical/clinical evidence, during time that the nurse is not scheduled to work, the Employer and the nurse will mutually agree on alternate time off in lieu or compensate for time at regular rates of pay, subject to the Employer's prior approval of the required preparation time.
- d) Where the Employer requires the nurse to participate in a workplace investigation that is required by legislation or Employer policy, and where such investigation meetings cannot be scheduled on the nurse's regular day of work, the Employer will compensate the nurse for the investigation meeting time at regular rates of pay.
- e) A nurse required to attend a court proceeding as a party to that proceeding, occasioned by the nurse's private affairs shall receive a leave of absence without pay for the required absence.

2411 Bereavement Leave:

- (a) Bereavement leave of up to four (4) working days without loss of pay shall be granted in the event of death of a spouse, common-law spouse, fiancé, same-sex partner, child, stepchild, parent, step-parent, sibling, mother-in-law, father-in-law, daughter-in-law, son-in-law, brother-in-law, sister-in-law, grandparent, grandparent-in-law, grandchild, former legal guardian, and any other relative who had recently been residing in the same household. Such days may be taken only in the period which extends from the date of death up to and including the day following interment, funeral or initial memorial service or four (4) calendar days following the death, whichever is the greater. For nurses residing above the 53rd parallel, leave will be extended one (1) additional working day.

Bereavement leave may be extended by up to two (2) additional working days as may be necessitated by reason of travel to attend the interment, funeral or initial memorial service.

One (1) bereavement leave day may be retained at the nurse's request for use in the case where actual interment, funeral or initial memorial service is at a later date.

- (b) Provided the nurse has not received bereavement leave in accordance with (a) above, necessary time off up to one (1) day at basic pay will be granted to a nurse to attend an interment, funeral or initial memorial service as a pallbearer.

Provided the nurse has not received bereavement leave in accordance with (a) above, necessary time off up to one (1) day at basic pay may be granted a nurse to attend either an internment, funeral or initial memorial service as a mourner. Special consideration will be given to requests for leave related to the death of significant other persons under this provision.

- (c) For the purpose of this Article, a day is defined as a calendar day irrespective of the number of hours per day scheduled for the affected nurse.

2412 Leave re Public Office: A nurse will be granted unpaid leave of absence to enable them, if nominated, to campaign for public office and, if elected, to serve their term(s) of office.

2413 Pre-retirement Leave:

(a) Full-time nurses who:

- (i) retire at age sixty-five (65) years; or
- (ii) retire after age sixty-five (65) years; or
- (iii) have completed at least ten (10) years continuous employment and retire after age fifty-five (55) years but before age sixty-five (65) years; or
- (iv) have completed at least ten (10) years of continuous employment and who meet the "Magic 80" provisions of the HEPP Retirement Pension Plan; or
- (v) terminate employment at any time due to permanent disability

shall be granted paid pre-retirement leave on the basis of four (4) days per year of employment.

Subject to the above, pre-retirement leave for any period of layoff up to a maximum of five (5) years will be calculated on a pro rata basis, based on the following formula:

$$\frac{\text{Hours Worked During Layoff}}{\text{Annual Full-time Hours}} \quad \times \quad \text{Entitlement of a Full-Time Nurse}$$

- (b) Part-time nurses who:
- (i) retire at age sixty-five (65) years; or
 - (ii) retire after age sixty-five (65) years; or
 - (iii) have completed at least ten (10) years continuous employment and retire after age fifty-five (55) years but before age sixty-five (65) years; or
 - (iv) have completed at least ten (10) years of continuous employment and who meet the "Magic 80" provisions of the HEPP Retirement Pension Plan; or
 - (v) terminate employment at any time due to permanent disability

shall be granted paid pre-retirement leave as specified above on a pro rata basis. Calculation will be based on the following formula:

$$\frac{\text{Average Annual Hours Actually Worked From Last Date of Employment}}{\text{Annual Full-time Hours}} \times \text{Entitlement of a Full-time Nurse}$$

Subject to the above, pre-retirement leave for any period of layoff up to a maximum of five (5) years will be calculated on a pro rata basis, based on the following formula:

$$\frac{\text{Hours Worked During Layoff}}{\text{Annual Full-time Hours}} \times \text{Entitlement of a Full-Time Nurse}$$

- (c) Calculation of pre-retirement leave entitlement shall begin from the date of the nurse's last commencing employment with the Employer and shall be based on the nurse's total length of continuous employment on the date of retirement.

Not applicable for non-transferred Employers:

NOTE: It is understood that for the purposes of calculation of pre-retirement leave entitlement, for nurses employed within two (2) or more sites comprising the same Employer, the earliest of their employment dates will apply.

- (d) Payment shall, at the option of the nurse, be made in a lump sum or as a continuation of salary until scheduled retirement date, or as a combination of continuation of salary followed by a lump sum payment.

NOTE: Where a nurse chooses to take a lump sum payment, the retirement date shall be their last day worked. The lump sum shall be payable as soon as reasonably possible after the last day paid.

- (e) Where a nurse is entitled to pre-retirement leave in accordance with the conditions listed above, and the nurse dies prior to receiving this benefit, it is understood that the pre-retirement leave benefit shall be paid to their estate.

Applicable for Riverview Health Centre site only:

2413 Pre-Retirement Leave:

- (a) Full time nurses who retire in accordance with the Winnipeg Civic Employee's Pension Plan shall be granted paid pre-retirement leave on the basis of four (4) days per year of employment.

The retirement eligibility provisions of The Winnipeg Civic Employee's Pension Plan are as follows:

Normal Retirement Date

Each Member's normal retirement date is the last day of the pay period in which the member attains age 65.

Alternative Retirement Date

A contributing Member may elect to retire from employment on the last day of any pay period in which the member:

- a. is age 55 or older,
- b. has completed at least 30 years of Eligibility Service,
- c. has completed a number of years of Eligibility Service that when added to their age totals at least 80, or
- d. is Totally and Permanently Disabled.

Subject to the above, pre-retirement leave for any period of layoff up to a maximum of five (5) years will be calculated on a pro rata basis, based on the following formula:

$$\frac{\text{Hours Worked During Layoff}}{\text{Annual Full-time Hours}} \times \text{Entitlement of a Full-Time Nurse}$$

- (b) Part-time nurses who retire in accordance with the Winnipeg Civic Employee's Pension Plan shall be granted paid pre-retirement leave as specified above on a pro rata basis. Calculation will be based on the following principle:

The retirement eligibility provisions of The Winnipeg Civic Employee's Pension Plan are as follows:

Normal Retirement Date

Each Member's normal retirement date is the last day of the pay period in which the member attains age 65.

Alternative Retirement Date

A contributing Member may elect to retire from employment on the last day of any pay period in which the member:

- a. is age 55 or older,
- b. has completed at least 30 years of Eligibility Service,
- c. has completed a number of years of Eligibility Service that when added to their age totals at least 80, or
- d. is Totally and Permanently Disabled.

Average Annual Hours

<u>Actually Worked From</u>		<u>Entitlement of</u>
<u>Last Date of Employment</u>	X	<u>a Full-time</u>
<u>Annual Full-time Hours</u>		<u>Nurse</u>

Subject to the above, pre-retirement leave for any period of layoff up to a maximum of five (5) years will be calculated on a pro rata basis, based on the following formula:

<u>Hours Worked</u>		<u>Entitlement</u>
<u>During Layoff</u>	X	<u>of a Full-Time</u>
<u>Annual Full-time Hours</u>		<u>Nurse</u>

- (c) Calculation of pre-retirement leave entitlement shall begin from the date of the nurse's last commencing employment with the Employer and shall be based on the nurse's total length of continuous employment on the date of retirement.
- (d) Payment shall, at the option of the nurse, be made in a lump sum or as a continuation of salary until scheduled retirement date, or as a combination of continuation of salary followed by a lump sum payment.

NOTE: Where a nurse chooses to take a lump sum payment, the retirement date shall be their last day worked. The lump sum shall be payable as soon as reasonably possible after the last day paid.

- (e) Where a nurse is entitled to pre-retirement leave in accordance with the conditions listed above, and the nurse dies prior to receiving this benefit, it is understood that the pre-retirement leave benefit shall be paid to their estate.

2414 Citizenship Leave: Nurses shall be allowed the necessary time off with pay to attend citizenship court to become a Canadian citizen. The nurse shall notify the Employer a minimum of seven (7) days prior to the date this leave is required.

2415 Subject to the provisions of each plan, a nurse granted leave of absence without pay for a period exceeding four (4) weeks may prepay all monthly payroll deductions which will become due during such absence, with the exception of Union dues.

2416 Compassionate Care Leave:

A nurse shall receive Compassionate Care Leave without pay to provide care or support to a seriously ill family member, subject to the following conditions:

- (a) A nurse must have completed at least thirty (30) days of employment as of the intended date of leave.
- (b) A nurse who wishes to take a leave under this Article must give the Employer notice of at least one (1) pay period, unless circumstances necessitate a shorter period.
- (c) A nurse may take no more than two (2) periods of leave, totaling no more than twenty-eight (28) weeks, which must end no later than fifty-two (52) weeks after the day the first period of leave began. No period of leave may be less than one (1) week's duration.
- (d) For a nurse to be eligible for leave, a physician or nurse practitioner who provides care to the family member must issue a certificate stating that:
 - (1) a family member of the nurse has a serious medical condition with a significant risk of death within twenty-six (26) weeks from
 - (i) the day the certificate is issued, or
 - (ii) if the leave was begun before the certificate was issued, the day the leave began; and
 - (2) the family member requires the care or support of one (1) or more family members.

The nurse must give the Employer a copy of the physician's or nurse practitioner's certificate as soon as possible.

- (e) A family member for the purpose of this article shall be defined as:
- (i) a spouse or common-law partner of the nurse;
 - (ii) a child of the nurse or a child of the nurse's spouse or common-law partner;
 - (iii) a parent of the nurse or a parent of the nurse's spouse or common-law partner;
 - (iv) a brother, sister, step-brother, step-sister, uncle, aunt, nephew, niece, grandchild or grandparent of the nurse or of the nurse's spouse or common-law partner;
 - (v) a current or former foster parent of the nurse or of the nurse's spouse or common-law partner;
 - (vi) a current or former foster child, ward or guardian of the nurse, or of the nurse's spouse or common-law partner;
 - (vii) the spouse or common-law partner of a person mentioned in any of the clauses (iii), (iv) (v) and (vi);
 - (viii) any other person whom the nurse considers to be like a close relative, whether or not they are related by blood, adoption, marriage or common-law relationship.
- (f) Unless otherwise mutually agreed, a nurse may end their Compassionate Care Leave earlier than twenty-eight (28) weeks by giving the Employer at least forty-eight (48) hours notice. Any additional available shifts resulting from Compassionate Care Leave being granted shall be clearly indicated as "Compassionate Care Leave shifts – subject to forty-eight (48) hours notice of cancellation".
- (g) Seniority shall be retained/accrued as per Article 25.
- (h) Subject to the provisions of Article 2302, a nurse may apply to utilize income protection to cover part or all of the Employment Insurance waiting period.
- (i) In the event that the death of a family member occurs during this period of leave, the nurse shall be eligible for Bereavement Leave as outlined in Article 2411.

2417 **Secondment to Educational Institutions**

The Parties understand and agree that there may be occasions where it is beneficial to allow a current nurse to move, without loss of employment status, seniority or benefit accruals, to work temporarily for nursing educational institutions.

These individuals will be placed on a paid leave of absence for the duration of the educational institution secondment.

ARTICLE 25 -- SENIORITY

2501 "Seniority" is defined as the length of the nurse's continuous employment from the last date on which the nurse commenced work with the Employer, subject to Article 34 herein.

2502

n/a @ St. Boniface Hospital site

Seniority shall be considered as a factor in vacancy selection (including promotion and transfer), demotion, and if all other posted selection criteria are equal, it shall be considered as the governing factor. Seniority of a nurse relates to the seniority of other nurses in the same occupational classification and shall transfer with the nurse when moving from one classification to another.

NOTE: Memo #21 Re: Transfer – Job Selection shall be in effect for the duration of this Collective Agreement.

Applicable for St. Boniface Hospital site only:

Seniority shall be used as a factor in cases of promotion, demotion, vacancy selection, lay-off and recall of a nurse subject to the provision of this Agreement.

- (a) General Duty Nurses – where required qualifications are met, preference will be given to the nurse with the most seniority.
- (b) All Nurse III positions and higher – if all other selection criteria are relatively equal, seniority shall be considered as the governing factor.

Seniority of a Registered Nurse relates only to that of other Registered Nurses; seniority of a Registered Psychiatric Nurse relates only to that of other Registered Psychiatric Nurses and seniority of a Licensed Practical Nurse relates only to that of other Licensed Practical Nurses.

2503

The seniority of a nurse will be retained but will not accrue if:

- (i) the nurse is on any unpaid leave of absence in excess of four (4) consecutive weeks except those referenced in (ii) below, and those referenced in Article 2504;
- (ii) the nurse is on an unpaid leave of absence due to injury or illness which may be compensable by Workers Compensation, MPI or D & R/LTD, for a period of more than two (2) years from the date of the first absence from work related to the injury or illness;
- (iii) the nurse is on an educational leave of absence in excess of two (2) years;
- (iv) the nurse is laid off for more than twenty-six (26) weeks and less than five (5) years;
- (v) the nurse obtains a term position of sixty (60) weeks or less, or up to a maximum of eighty (80) weeks to replace an employee who is on Parenting Leave or Parental Leave, outside the bargaining unit with the same Employer.

- 2504** The seniority of a nurse will be retained and will accrue if:
- (i) the nurse is on any period of paid leave of absence;
 - (ii) the nurse is on any period of Employer paid income protection;
 - (iii) the nurse is on an educational leave of absence up to two (2) years;
 - (iv) the nurse is on an unpaid leave of absence due to injury or illness which may be compensable by Workers Compensation, MPI or D & R/LTD for a period of up to two (2) years from the date of the first absence from work related to the injury or illness;
 - (v) the nurse is on any period of unpaid leave of absence of less than four (4) weeks, except those referenced in (iv) above;
 - (vi) the nurse is laid off for less than twenty-six (26) weeks;
 - (vii) the nurse is on parenting leave;
 - (viii) the nurse is on Compassionate Care Leave, Leave Related to Critical Illness, or Domestic Violence Leave, as provided for in the Employment Standards Code.

Note: Accrual under these provisions is based on the nurse's regular EFT.

- 2505** The seniority of a nurse will terminate if:
- (i) the nurse resigns;
 - (ii) the nurse is discharged, and not reinstated under the grievance procedure;
 - (iii) the nurse is laid off for more than five (5) years;
 - (iv) the nurse fails to report for duty within seven (7) days after notification to do so, subject to Article 2707;
 - (v) the nurse fails to report for work as scheduled at the end of a leave of absence, vacation, or suspension without valid reason;
 - (vi) the nurse obtains a permanent position outside the bargaining unit; or a term position which is greater than sixty (60) weeks, or up to a maximum of eighty (80) weeks to replace an employee who is on Parenting Leave or Parental Leave.

2506 The Employer shall once annually, by January 31st, provide the Union with a seniority listing of names of nurses within the scope of this Agreement, together with the length of each nurse's continuous employment with the Employer. Any alleged errors in the list will be reviewed by the Employer and corrected as soon as possible.

ARTICLE 26 -- NOTICE OF TERMINATION OF EMPLOYMENT

- 2601** Employment may be terminated voluntarily by a nurse or for just cause by the Employer subject to the following periods of written notice, exclusive of any vacation due:
- (a) for classifications other than Nurse IV or Nurse V -- four (4) weeks, and
 - (b) for Nurse IV and Nurse V classifications, Clinical Nurse Specialist and RNEP -- six (6) weeks.

2602 Employment may be terminated with less notice or without notice:

- (a) by mutual agreement between the nurse and the Employer for special circumstances, or
- (b) during the probationary period of a newly hired nurse subject to Article 31 herein, or
- (c) in the event a nurse is dismissed for sufficient cause to justify lesser or no notice.

2603 The Employer may give equivalent basic pay in lieu of notice.

2604 Subject to other provisions contained in this Agreement relative to termination of employment, each nurse shall, unless otherwise mutually agreed, upon termination of their employment receive pay in lieu of unused vacation, and all salary earned to date of termination on the pay date applicable to the pay period in which the termination date occurred.

ARTICLE 27 -- LAYOFF AND RECALL

2701 Employment Security:

It is understood that the terms of Article 2701 shall not be applicable to Home Care Nurses for circumstances arising out of short-term fluctuations in client need or service.

- (a) It will be incumbent upon the Employer to notify the Union, in writing, at least ninety (90) days prior to any alteration in the delivery of health care and/or in the current complement of nursing staff.
- (b) If it becomes necessary to reduce the staffing complement, all avenues relevant to the issue of employment security for the nurses will be examined and discussed between the Employer and the Union, no later than twenty (20) days after the notification in (a) above.
- (c) The Employer and the Union agree to meet to develop the process for the planned reductions within five (5) days after (b) above.
- (d) The Employer will, wherever reasonably possible, carry out these reductions by way of attrition.
- (e) In keeping with the Employer's commitment to ensure that any affected nurse shall retain employment with the Employer, and where reductions cannot be dealt with through attrition, Article 27 shall apply. Should the nurse choose to not exercise seniority rights under Article 27, then layoff in accordance with Article 27 shall apply.

- (f) In the event of (e) above occurring or in the event of the closure of a facility/site/program and in conjunction with (g) below, the Employer will make every reasonable effort to achieve necessary funding for retraining to assist with retention of employment for nurses.
- (g) The Employer will also cooperate with other Employers, the Provincial Health Labour Relations Services, and/or the Government of Manitoba, to participate in the establishment of a broader redeployment and retraining effort.

2702 *Applicable for WRHA (direct operations):*

When a reduction in the working force becomes necessary, nurses will be laid off in reverse order of seniority within their occupational classification within the site, subject only to more senior nurses being qualified, competent and willing to perform the required work.

Applicable for non-transferred sites:

When a reduction in the working force becomes necessary, nurses will be laid off in reverse order of seniority within their occupational classification, subject only to more senior nurses being qualified, competent and willing to perform the required work.

2703 Notice of intention of layoff or equivalent pay thereof shall be given to the nurse(s) concerned in writing and a copy of the notice forwarded to the Union. The parties agree that “in writing” includes electronic communications such as email.

Notice shall be as follows:

- Layoffs of six (6) weeks or less - two (2) weeks notice;
- Layoffs of longer than six (6) weeks - four (4) weeks notice.

A nurse who is on layoff shall not be entitled to notice of layoff when the nurse comes back to work on an incidental basis.

2704 No layoff of full-time or part-time nurses shall occur within a site when casual nurses are being employed within that site, unless no full-time or part-time nurse on staff within that site is qualified, competent and willing to fill the position(s) in question.

Notwithstanding Article 3402, additional available shifts shall be offered to a nurse on layoff, before part-time and casual nurses, provided the nurse is qualified, competent and willing to perform the required work. During the first three (3) years of a layoff, the nurse on layoff will receive preferential consideration for the assignment of such shifts at the site of layoff, provided that this will not result in the nurse working in excess of their regular EFT commitment.

If applicable, in addition to the above, during the first three (3) years of layoff, if a laid off nurse indicates their availability for additional available shifts at any of the other sites comprising the Employer, the nurse will receive preferential consideration over part-time nurses for the assignment of such shifts, provided that this will not result in the nurse working in excess of their regular EFT commitment. During the period between three (3) to five (5) years, a laid off nurse may indicate availability for additional available shifts within any of the sites comprising the Employer but will not receive preferential consideration over part-time nurses.

Notwithstanding Article 1405, during the period between three (3) to five (5) years where a nurse does not work all or part of said additional available shift(s), for any reason, payment shall be made only in respect of hours actually worked; this is not applicable to the base EFT of a term position occupied by a laid off nurse.

In the event the nurse accepts additional available shifts, the provisions of the Collective Agreement shall be applicable except as modified hereinafter:

- (a) vacation pay shall be calculated in accordance with Article 2103 and shall be paid at the prevailing rate for the nurse on each pay cheque and shall be prorated on the basis of hours paid at regular rate of pay,
- (b) income protection accumulation shall be calculated as follows:

Additional available hours worked by the laid-off nurse	-----	X	Entitlement of Full-time Nurse
Full-time hours			

- (c) in the event the layoff is longer than twenty-six (26) weeks, seniority shall be calculated in accordance with regular hours worked,
- (d) the nurse shall be paid four point six two percent (4.62%) (five percent (5.0%) effective September 30, 2021) of the basic rate of pay in lieu of time off on Recognized Holidays. Such holiday pay shall be calculated on all paid hours and shall be included in each pay cheque,
- (e) participation in benefit plans is subject to the provisions of each plan.
- (f) increments (calculated from the date of the nurse's last increment, or their starting date as the case may be) shall be provided on the basis of one (1) increment for each 1343 hours worked or one (1) calendar year from the date of their last increment, whichever occurs later. In the case of the increment being given on the basis of 1343 hours worked, it shall be applied to the pay period next following completion of 1343 hours worked.

Any period of time during the layoff when the nurse works additional available shifts or works in a term position shall not extend the five (5) year period referenced in Article 25.

However, a nurse on layoff who agrees to work in a term position shall retain their right to be recalled into a permanent position while working in the term position.

2705 No new nurses will be hired at a site when other nurses are on layoff from that site, except for reasons of a special skill requirement.

2706 All nursing job vacancies, permanent and term, shall be posted in accordance with the terms of this Agreement. Nurses on layoff shall be entitled to apply for these vacancies.

2707

Applicable for WRHA (direct operations):

Nurses shall be recalled in seniority order to available positions in equal or lower paid occupational classifications at the originating site or at other sites within a fifty (50) kilometre radius of the originating site provided they are qualified to perform the required work. In addition, at the time of layoff, nurses may request recall to sites outside the fifty (50) kilometre radius. Such recall shall be made in writing either by personal service, registered mail, or confirmed electronic mail and shall provide for at least one (1) weeks' notice to report back to work. Confirmation includes indication of receipt of such communication.

The nurses affected will contact the Employer by telephone not later than four (4) days, excluding Saturdays, Sundays and Recognized Holidays following the notice of recall being delivered. Failure to notify as above shall result in the nurse being placed last on the recall list.

A nurse being placed last on the recall list who is subsequently recalled to work and who fails to report for duty as scheduled without valid reason shall have their employment terminated.

Applicable for non-transferred sites:

Nurses shall be recalled in seniority order to available positions in equal or lower paid occupational classifications provided they are qualified to perform the required work. Such recall shall be made in writing either by personal service, registered mail, or confirmed electronic mail and shall provide for at least one (1) weeks' notice to report back to work. Confirmation includes indication of receipt of such communication.

The nurses affected will contact the Employer by telephone not later than four (4) days, excluding Saturdays, Sundays and Recognized Holidays following the notice of recall being delivered. Failure to notify as above shall result in the nurse being placed last on the recall list.

A nurse being placed last on the recall list who is subsequently recalled to work and who fails to report for duty as scheduled without valid reason shall have their employment terminated.

2708**Applicable for WRHA (direct operations):**

In the event of a deletion of an occupied position, as much notice as possible shall be given to the incumbent who will be entitled to exercise their seniority rights, subject to the nurse's ability, performance and qualifications, to displace a nurse in a position of equal or lower classification within the site. Where it is not possible due to seniority level or where there are no positions available within .2 of the EFT of the position occupied by the nurse at the time of the deletion, the nurse shall be entitled to exercise their seniority rights, subject to their ability, performance and qualifications, to displace a nurse in a position of equal or lower classification within any of the other sites comprising the Employer. Any nurse thus displaced shall also be entitled to a like exercise of seniority rights.

Applicable for non-transferred sites:

In the event of a deletion of an occupied position, as much notice as possible shall be given to the incumbent who will be entitled to exercise their seniority rights, subject to the nurse's ability, performance and qualifications, to displace a nurse in a position of equal or lower classification. Any nurse thus displaced shall also be entitled to a like exercise of seniority rights.

2709 Laid off nurses shall be entitled to apply for nursing job vacancies in any of the sites comprising the Employers Organization other than those to which they have recall rights. Copies of job postings will be sent to the President of the Local/Worksite during the period when any nurses are on layoff.

2710 Accumulated vacation entitlement shall be paid out at time of layoff except where, prior to the date of layoff, a nurse has been awarded a term or permanent position which commences within four (4) weeks of date of layoff.

2711 Nurses who are absent from work due to a leave of absence for any reason shall be advised of layoff or deletion of their position in accordance with this Agreement and shall be required to comply with all provisions of this Agreement except that they shall not be expected to return to work prior to the expiry of their leave of absence.

ARTICLE 28 -- PROMOTION AND REASSIGNMENT

2801 Upon promotion, a nurse shall receive a salary applicable to their new classification which provides an increase of at least one increment above their former salary. A promotion shall mean an increase in classification from one occupational classification to another.

2802 The nurse's anniversary date of employment prior to promotion shall continue to govern with respect to increments.

2803 The first three (3) calendar months following a nurse's promotion shall be considered to be a trial period, and the Union shall be notified by the Employer. During the first six (6) weeks of this trial period, the nurse may return to their former position at their request or be returned to their former position by the Employer. During the last six (6) weeks of this trial period, the nurse may return to their former classification at their request or be returned to their former classification by the Employer.

Applicable for St. Boniface Hospital site only:

Promotions will be on a six (6) month trial period.

During the first twelve (12) weeks of this trial period, the nurse may return to their former position at the nurse's request or be returned to their former position by the Employer. During the last twelve (12) weeks of this trial period, the nurse may return to their former classification at the nurse's request or be returned to their former classification by the Employer. A nurse who is unsuccessful in a position to which they were promoted will be guaranteed the same salary that the nurse received prior to the promotion. Notwithstanding Article 2802 above, the anniversary date of such nurse for receipt of next annual increment shall be the anniversary date on record prior to the promotion.

Applicable for WRHA (direct operations) and non-transferred multi-site Employers:
2804

A. Reassignments in the Event of Unforeseen Staffing Shortages

1. In the event of a temporary lateral work reassignment being necessitated by an unforeseen staffing shortage on a nursing unit in any site within the Employer, a nurse may be reassigned subject to the following condition:
 - (a) Where the reassigned nurse does not have the specific current competency for that similar patient/resident/client base, they would only be assigned functional tasks or would work directly with a nurse on that unit when providing patient/resident/client care.

B. Reassignments in the Event of Foreseen Staffing Shortages

1. In the event of a temporary lateral work reassignment being necessitated by a foreseen staffing shortage on a nursing unit in any site within the Employer, a nurse may be reassigned to meet patient care needs subject to the following conditions:
 - (a) No nurse shall be compelled to accept reassignment for a foreseen staffing shortage except as provided for under MOU # 37 Re: Involuntary Reassignments in the Event of Foreseen Staffing Shortages.

- (b) Where the reassigned nurse does not have the specific current competency for that similar patient/resident/client base, they would only be assigned functional tasks or would work directly with a nurse on that unit when providing patient/resident/client care.
- (c) Before reassigning a nurse for a foreseen staffing shortage, the Employer shall take the reasonable steps available to management to fill the vacant shift, based on relevant factors/circumstances including, but not limited to:
- timing and circumstances of the vacant shift;
 - maintenance of patient care;
 - wellbeing of nursing staff.
- (d) In the event of a long term or repetitive vacancy which the Employer has not been able to fill in accordance with the Collective Agreement, either party may refer the issue to the NAC and the Patient Care Optimization Committee provided for in Article 11 for consultation.
- (e) Where the Employer is unable to fill vacant shifts through other means, in accordance with the Collective Agreement, the Employer shall then seek volunteers for reassignment, to be applied equitably (on a quarterly basis), with the following compensation: nurses shall be paid the greater of six (\$6.00) per hour or fifteen percent (15%) (effective October 14, 2021) above their normal rate of pay for all hours worked at the reassigned facility/program/site/unit. (for clarity this premium is over and above overtime rates, where overtime is earned during reassignment).
- (f) Where a nurse is reassigned to a facility/site other than their regular facility/site within the Employer they shall also be compensated as follows:
- i. Provided with a daily “work disruption” allowance, for each day actually worked as follows:
 - Over 1 and up to – 49 km between sending and receiving site - \$40
 - Between 50 – 99 km between sending and receiving site - \$80
 - Between 100 – 149 km between sending and receiving site - \$130
 - 150 or more between sending and receiving site - \$180
- (g) Where a change in work schedule is required by the Employer (receiving unit/facility/program/site) as a result of a reassignment, the nurse(s) shall be compensated with a Shift Disruption Allowance as described below for each shift that has been changed and worked by the nurse. The following rules shall apply:
- i. Compensation of one of the following amounts as applicable per shift, whichever is greatest:

- \$25 Impact Shift Changes: an adjustment is made to the start and end times of a shift that is greater than 1 hour and up to 4 hours; or
 - \$35 Impact Shift Changes: a change is made to the calendar day that a nurse was scheduled to work (no change to shift length or shift description); or
 - \$50 Impact Shift Changes: an adjustment is made to the start and end times of a shift that is greater than 4 hours; a change is made to the shift length (eg: 8 to 12 hours); a change is made to the shift description (eg: from straight Days to Days/Nights, or from straight Days to Days/Evenings);
- ii. Shift disruption allowance will not be paid on days during which the nurse does not work or for shifts that have not been changed;
 - iii. Nurses shall not be eligible to receive overtime as a result of changes to their shift length (i.e. changing from 8 to 12 hour shifts), unless they are in an overtime situation as identified in the nurse(s) respective Collective Agreement and are now required to work additional hours. For clarity, adding hours to shift duration when a nurse has been reassigned during the course of their shift, shall result in daily overtime compensation.
 - iv. Changes to shift length must not cause a decrease to the nurses' EFT; and
 - v. Shift disruption allowance will cease to be paid, upon the effective date of the subsequent shift schedule which shall be posted in accordance with the Collective Agreement, and the nurse is scheduled as posted. If this posted schedule is disrupted the nurse shall be paid in accordance with a. above. When the reassigned nurse is returned to their regular assignment, the Shift Disruption Allowance is not applicable.
- C. This lateral work reassignment will be made by the out of scope manager with as much notice as possible, whether within one (1) site, or from one (1) site to another within the Employer. Selection of the nurse to be reassigned shall be based on ability and experience and shared as equally as possible amongst the nurses in each site. It is understood that lateral work reassignments will only occur within a fifty (50) kilometre radius of the originating site, unless a greater distance is mutually agreed between the Employer and the nurse.
- D. Orientation will be provided of sufficient duration to assist the nurse in becoming acquainted with essential information such as policies and procedures, routines, location of supplies and equipment, and fire and disaster plans.

E. Nurses who are reassigned from one site to another within the Employer shall be eligible for transportation reimbursement in accordance with the prevailing Province of Manitoba mileage rates subject to a minimum guarantee of four dollars (\$4.00) and in accordance with the following formula:

- Distance (in kms) from the nurse's home to the new worksite minus the distance (in kms) from the nurse's home to the nurse's originating worksite.

It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

Parking in close proximity to the "receiving facility/site" will be made available. Parking expenses shall be reimbursed to the nurse by the Employer.

NOTE: Please reference MOU #37 Re: Involuntary Reassignments in the Event of Foreseen Staffing Shortages.

Applicable for single site Employers:

A. Reassignments in the Event of Unforeseen Staffing Shortages

1. In the event of a temporary lateral work reassignment being necessitated by an unforeseen staffing shortage on a nursing unit within the same facility/site, a nurse may be reassigned subject to the following condition:
 - (a) Where the reassigned nurse does not have the specific current competency for that similar patient/resident/client base, they would only be assigned functional tasks or would work directly with a nurse on that unit when providing patient/resident/client care.

B. Reassignments in the Event of Foreseen Staffing Shortages

1. In the event of a temporary lateral work reassignment being necessitated by a foreseen staffing shortage on a nursing unit, a nurse from within the same site/facility/program may be reassigned to meet patient care needs subject to the following conditions:
 - (a) No nurse shall be compelled to accept reassignment for a foreseen staffing shortage except as provided for under MOU #37 Re: Involuntary Reassignments in the Event of Foreseen Staffing Shortages.
 - (b) Where the reassigned nurse does not have the specific current competency for that similar patient/resident/client base, they would only be assigned functional tasks or would work directly with a nurse on that unit when providing patient/resident/client care.

- (c) Before reassigning a nurse for a foreseen staffing shortage, the Employer shall take the reasonable steps available to management to fill the vacant shift, based on relevant factors/circumstances including, but not limited to:
- timing and circumstances of the vacant shift;
 - maintenance of patient care;
 - wellbeing of nursing staff.
- (d) In the event of a long term or repetitive vacancy which the Employer has not been able to fill in accordance with the Collective Agreement, either party may refer the issue to the NAC and the Patient Care Optimization Committee provided for in Article 11 for consultation.
- (e) Where the Employer is unable to fill vacant shifts through other means, in accordance with the Collective Agreement, the Employer shall then seek volunteers for reassignment, to be applied equitably (on a quarterly basis), with the following compensation; nurses shall be paid the greater of six dollars (\$6.00) per hour or fifteen percent (15%) (effective October 14, 2021) above their normal rate of pay for all hours worked at the reassigned facility/program/site/unit. (for clarity this premium is over and above overtime rates, where overtime is earned during reassignment).
- (f) Where a change in work schedule is required by the Employer (receiving unit/) as a result of a reassignment, the nurse(s) shall be compensated with a Shift Disruption Allowance as described below for each shift that has been changed and worked by the nurse. The following rules shall apply:
- i. Compensation of one of the following amounts as applicable per shift, whichever is greatest:
 - \$25 Impact Shift Changes: an adjustment is made to the start and end times of a shift that is greater than 1 hour and up to 4 hours; or
 - \$35 Impact Shift Changes: a change is made to the calendar day that a nurse was scheduled to work (no change to shift length or shift description); or
 - \$50 Impact Shift Changes: an adjustment is made to the start and end times of a shift that is greater than 4 hours; a change is made to the shift length (eg: 8 to 12 hours); a change is made to the shift description (eg: from straight Days to Days/Nights, or from straight Days to Days/Evenings);

- ii. Shift disruption allowance will not be paid on days during which the nurse does not work or for shifts that have not been changed;
 - iii. Nurses shall not be eligible to receive overtime as a result of changes to their shift length (i.e. changing from 8 to 12 hour shifts), unless they are in an overtime situation as identified in the nurse(s) respective Collective Agreement and are now required to work additional hours. For clarity, adding hours to shift duration when a nurse has been reassigned during the course of their shift, shall result in daily overtime compensation.
 - iv. Changes to shift length must not cause a decrease to the nurses' EFT; and
 - v. Shift disruption allowance will cease to be paid, upon the effective date of the subsequent shift schedule which shall be posted in accordance with the Collective Agreement, and the nurse is scheduled as posted. If this posted schedule is disrupted the nurse shall be paid in accordance with a. above. When the reassigned nurse is returned to their regular assignment, the Shift Disruption Allowance is not applicable.
- C. This lateral work reassignment will be made by the out of scope manager with as much notice as possible. Selection of the nurse to be reassigned shall be based on ability and experience and shared as equally as possible amongst the nurses in the site.
- D. Orientation will be provided of sufficient duration to assist the nurse in becoming acquainted with essential information such as policies and procedures, routines, location of supplies and equipment, and fire and disaster plans.

NOTE: Please reference MOU #37 Re: Involuntary Reassignments in the Event of Foreseen Staffing Shortages.

ARTICLE 29 -- DISCIPLINE, DEMOTION AND ACCESS TO PERSONNEL FILE

2901 In all instances where the Employer considers that a nurse warrants disciplinary action, the Employer shall make every effort to take such action at a meeting with the nurse and shall give the nurse advance notice of the nature of the complaint. The nurse may be accompanied at the meeting by a Union representative. The Employer shall inform the nurse of their right to have a Union representative present and advise the Union that this has been done.

2902 If the action referred to in the above clause results in a written warning, suspension, demotion or dismissal of a nurse, the Employer shall notify the nurse in writing of the action taken and the reasons either by personal service, registered mail, or confirmed electronic mail. Confirmation includes indication of receipt of such communication.

2903 A nurse who is demoted due to inadequate performance shall be paid at the step of the lower scale that corresponds to their level of experience.

2904 If a nurse is reclassified to a lower paid position because of changing conditions within the Employer, the nurse will retain their current salary level until the salary scale of the lower position reaches their level of salary.

The application of this provision as it relates to the deletion, layoff/recall procedure shall be limited to a three (3) year period from the date the nurse assumes a position in the lower paid classification or until the salary scale of the lower position reaches their level of salary whichever occurs first.

2905 A nurse shall be given the opportunity to examine any document which is placed in their personnel file, including, but not limited to, those documents which may be utilized to substantiate a disciplinary action against them, and their reply to any such document shall also be placed in their personnel file. Upon written request the nurse shall also receive an exact copy of such document.

2906 A nurse accompanied by a Union representative if they so elect may examine their personnel file upon request. A nurse shall have recourse to the grievance procedure to dispute any derogatory entry in their personnel file. The Employer agrees not to introduce as evidence any such derogatory entry at any hearing unless the nurse has been made aware of its contents at the time of filing or a reasonable time thereafter. Any nurse who has been terminated may consult their file and upon written request shall receive copies of specified documents so long as the written request is made within sixty (60) days of the nurse's termination.

2907 There shall be one (1) personnel file maintained by the Employer for each nurse.

ARTICLE 30 -- VACANCIES, TERM POSITIONS AND NEW POSITIONS

3001 Subject to Article 3002 herein, the Employer agrees to post notices of vacant, term or new positions covered under this Agreement for at least seven (7) days to enable nurses presently in the employ of the Employer to apply for same. Such posting shall not preclude the Employer from advertising outside the site premises. All postings shall state minimum qualifications required, the equivalent to full-time (E.F.T.) and date of closing of the competition. Job descriptions shall be available to applicants on request.

3002 The Employer will be required to post a notice of vacancy for only five (5) days for a vacancy that is created by:

- (a) a nurse terminating employment and not giving the full period of notice as specified in Article 26 herein, or
- (b) a transfer occasioned by posting.
- (c) Where a term position has been created due to a leave of absence where less than four (4) weeks notice has been given.

3003 Provided that equivalent qualifications are met, preference shall be given to nurses presently in the bargaining unit who have submitted a written application for the vacant, term or new positions in the following order:

- (a) applicants from the site where the vacancy occurs;
- (b) applicants from the Employer where the vacancy occurs;
- (c) applicants from other Employers within the Employers Organization;
- (d) applicants from other Employers Organizations.

NOTE: Refer to Appendix "D" for Site and Employer list.

Notwithstanding the above, a nurse will have unit or site preference when new positions are posted as a result of an Employment Security Notice.

3004 The name of the successful applicant and the position awarded will be posted on the bulletin board or per electronic format accessible to all nurses for a period of seven (7) calendar days with a copy of this information forwarded to the Local/Worksite President.

Any nurse who was interviewed but was not the successful applicant shall be entitled to consult with the hiring Manager. Such consultation will take place within two (2) weeks of the request. The purpose of the consultation shall be to provide the nurse with constructive feedback regarding their application.

An unsuccessful applicant may inquire of the hiring Manager or the Human Resources Consultant or designate to why they were not selected for an interview.

In the case of a nurse from the bargaining unit being awarded a position within the Employer, the transfer shall be carried out within the time frame of the period of notice of termination for the position from which the nurse is transferring, unless otherwise mutually agreed between the nurse and the Employer.

3005 The applicant selected for any position shall receive, within two (2) weeks of the selection being made, written confirmation of the salary scale, the nurse's placement on such scale, and any special conditions that may be applicable to their appointment.

3006 "Term Position":

A position occupied by a full-time or part-time nurse for a specified period of time, up to a maximum of sixty (60) weeks, or up to a maximum of eighty (80) weeks to replace a nurse(s) who is/are on Parenting Leave or Parental Leave, where patient/client/resident census or workload necessitates a temporary increase in staffing, if mutually agreed, to replace a nurse(s) who is/are on vacation or leave of absence, or to carry out a special short term project or where the Employer has provided notice of permanent deletion of position(s) under Employment Security provisions in Article 27, or as otherwise mutually agreed between the Union and the Employer. If the Employer determines there is a term position to be filled by a nurse, the term position shall be posted in accordance with Article 30. This shall not preclude the Employer from utilizing part-time nurses and/or casual nurses to work available shifts as specified in Articles 34 and 35 when the Employer decides that a term position is not required.

The Employer shall provide written confirmation of the start and expiry dates of the term position prior to the nurse's commencement in the position. This period may be extended if the Employer so requests and the Union agrees.

The maximum duration specified in paragraph 1 above for term positions shall not apply in situations where a nurse is absent indefinitely due to Workers Compensation and/or illness and/or accident or where there is a temporary vacancy due to leave for Public Office. In these cases, the Employer shall state on the job posting that the said term position is an "Indefinite Term" which will expire subject to a minimum of twenty-four (24) hours notice. The "Indefinite Term" will expire upon either the return to work or termination of employment of the nurse on leave. Any term positions directly resulting from the above procedure will be posted in the same manner.

In case a nurse on Maternity or Parental Leave wants to exercise their right to return from such leave earlier than anticipated, having given appropriate notice as per Article 2408 C.6, the Employer shall state on the job posting that the said term position is a "Maternity or Parental Leave of absence term" which may expire sooner than indicated, subject to minimum notice of two (2) weeks or one pay period, whichever is longer. Any term positions directly resulting from the filling of such a term position will be posted in the same manner.

The terms of this Collective Agreement shall be applicable to the nurse in the term position, except that a nurse occupying a term position may be required to complete the term before being considered for other term positions within the bargaining unit.

On expiry of the term position the nurse:

- (a) newly hired from outside the Employer, or a casual nurse from within the Employer, shall be entitled to exercise their seniority rights to obtain any vacant position within the site(s) comprising the Employer for which the nurse is qualified, without interruption of seniority or benefits if the position commences within six (6) weeks of the expiry of the term position. During this six (6) week period if a nurse secures casual employment, they may work available casual shifts.
- (b) who was employed by the Employer immediately prior to accepting the term position shall return to their former position if reasonably possible. A nurse not returned to their former position shall be returned to their former occupational classification and employment status within the site.
- (c) In accordance with the provisions of Article 21, if a nurse's term position ends prior to the start of the vacation year, the nurse shall schedule the next year's vacation on the unit they are returning/going to.

ARTICLE 30A -- NURSE-INITIATED MOBILITY

30A01 As vacancies arise that any of the Sites/Employers intend to fill, the following procedures will apply:

- (a) Vacancies will be filled in accordance with the provisions of the Collective Agreement.
- (b) An internal and external posting may occur simultaneously. Nurses from other Sites/Employers will have the right to apply for said vacancy.

If the selected nurse is a current employee of one of the Sites/Employers of an Employers Organization, that nurse will be entitled to transfer all seniority, service and other benefits herein and will be treated in all respects as if they had always been a nurse of the receiving Employer. In addition, hours worked since the last increment shall be credited towards the next increment level.

- (c) Where there are no qualified applicants, as per the order established in Article 3003, positions will be awarded to qualified nurses in the following order:
 - Recall of laid off workers from the Site/Employer posting the vacancy (unless otherwise stipulated in the applicable Collective Agreement);
 - Applicants from the Redeployment List;
 - Applicants external to (a) above.

30A02 A nurse who is employed by an Employer in an Employers Organization, who is awarded a position with another Employer with the same or in another Employers Organization, and who commences employment with this Employer within six (6) weeks of termination of employment from their former Employer, will be entitled to mobility of benefits as specified hereinafter:

- (a) continuous service date;
- (b) accumulated income protection benefits;
- (c) length of employment applicable to rate at which vacation is earned;
- (d) length of employment applicable to pre-retirement leave;
- (e) length of employment applicable for qualification for the Magic 80 (as per the terms and conditions of the applicable pension plan) pension provisions;
- (f) length of employment applicable to next increment date;
- (g) the terms and conditions of the benefit plan(s) for the new Employer apply; however, normal waiting periods would be waived, subject to the applicable benefit plans' terms and conditions;
- (h) seniority credits (in accordance with receiving Collective Agreement)
- (i) transfer of current vacation hours unless the nurse elects to have their current vacation hours paid out by the previous Employer at the time of the transfer;
- (j) placement at the greater of the nurse's salary level at the sending facility/program/site, or in accordance with the recognition of previous experience clause(s) in Article 38
- (k) where a nurse transfers prior to the completion of Maternity Leave return of service requirements, the nurse shall be allowed to complete the return of service requirements at the receiving Site/Employer.

30A03 For clarity the following guidelines shall govern with respect to the application of this Article:

- (a) The provisions of this Article shall be effective retroactive to October 14, 2021.
- (b) Where nurse-initiated mobility is implemented retroactively, the items transferred shall be on a "go forward" basis from October 14, 2021. No processes [e.g. vacation selection, vacancy selection] or access to benefits [e.g. income protection] shall be adjusted retroactively.
- (c) The onus is on the nurse to advise their new Employer that there are benefits/seniority to transfer.
- (d) The provisions of this Article only apply where a nurse terminates from one Employer and commences employment with another Employer. It does not apply to "merge" employment/benefits etc. from two or more Employers to one of those Employers.
- (e) Once notified of nurse-initiated mobility of benefits/seniority, the receiving Employer shall notify the sending Employer by forwarding a "Mobility Form" to the sending Site/Employer. That Site/Employer will complete the form as soon as possible and forward to the receiving Site/Employer. The Mobility Benefits Transfer Form shall be provided in its entirety to the receiving MNU Local/Worksite.

- (f) Nurse-initiated mobility applies for employment into either a permanent or term position. In the case of a term position, all benefits/seniority, etc. are transferred at the time of employment. Should the nurse not obtain a permanent position in accordance with the new Employer's Collective Agreement, all seniority and benefits shall terminate, unless the nurse obtains employment with another MNU Employer where nurse--initiated mobility applies, and within the timelines specified.
- (g) Employment terminates with the sending Employer and commences with the receiving Employer, in order for nurse-initiated mobility to apply. However, a nurse may accept a casual position with the sending Employer. Such shall not affect the nurse's ability to mobilize seniority, service and benefits accrued while employed in a permanent or term position at the sending Employer to the receiving Employer as long as the nurse secures a permanent or term position within six (6) weeks of terminating regular (non-casual) employment.
- (h) Any banked Recognized Holidays and/or overtime will be paid out by the sending Employer at the time of transfer.
- (i) A nurse who occupies a casual position at a receiving Employer AND a permanent or term position at a sending Employer, AND who subsequently obtains a permanent or term position at a receiving Employer, will be allowed to transfer seniority and benefits accrued in the permanent or term position at the sending Employer, to the newly acquired permanent or term position in the receiving Employer. The seniority accrued as a casual at a receiving Employer cannot be added to the seniority being transferred with the permanent/term position.

30A04

- (a) Increments: Nurses having a permanent or term position in a sending Employer, will be allowed to transfer their "hours worked" for purposes of determining when they are entitled to their next increment, when they secure a permanent or term position at a receiving Employer. Casual nurses are NOT allowed to transfer such hours.
- (b) Vacation: Vacation earned at the sending Employer shall not be paid out upon transfer unless the nurse requests. In the event a nurse elects to have their vacation transferred, it does not mean that the previously approved vacation dates will be honored at the receiving site. The receiving Employer will schedule the remaining vacation in consultation with the nurse, based on operational requirements and in accordance with Article 21.
- (c) Probationary Period: As with any other voluntary transfer to a permanent position in an Employer other than one in which a nurse is currently working, the nurse is subject to a probationary period.
- (d) Pre-Retirement Credits: To be calculated in days at the sending Employer.

- (e) Term Positions: Nurse-initiated mobility applies for voluntary transfers into either a permanent or term position. In the case of a term position, all benefits/seniority, etc. are transferred at the time of employment. Should the nurse not obtain a permanent position in accordance with the new Employer's Collective Agreement, all seniority and benefits shall terminate, unless the nurse in turn obtains employment with another MNU Employer in the same or in another Employers Organization where nurse-initiated mobility applies, and within six (6) weeks-
- (f) More Than One Position at Same Employer:
There can only be one sending and one receiving Employer. If a nurse has two (2) or more permanent positions with the same Employer, the nurse must resign from both positions with the sending Employer in order to transfer the seniority and benefits from the sending Employer to a receiving Employer.
- (g) Positions at More Than One Employer:
There can only be one sending and one receiving Employer. Even if a nurse has two (2) or more permanent positions, (at more than one Employer) the nurse will only be able to transfer the seniority and benefits from one of the Employers when they voluntarily transfer to a receiving Employer.

Transfer of seniority and benefits shall be applicable to all nurses, including those who are on lay off, currently employed in a permanent or term position who secure a permanent or term position in a receiving Employer in which they don't currently hold a permanent position.

- (h) The Local/Worksite President at a receiving Site/Employer will be provided with written notification regarding each nurse's mobility seniority at the time of their transfer. The Mobility Benefits Transfer Form shall be provided to the receiving Local/Worksite in its entirety. At minimum, the following specific data shall be provided:
- Start date at sending Employer
 - Seniority (hours)
 - Seniority date at sending Employer
 - Termination date at sending Employer
 - Start date at receiving Employer.
- (i) Bridging Time for the Purposes of Mobility: A nurse who commences employment with the receiving Employer within six (6) weeks-of termination of employment with the sending Employer will be entitled to mobility of seniority, service and benefits as above.
- (j) The parties agree that seniority shall not transfer across sectors.

ARTICLE 31 -- PROBATIONARY PERIOD

3101 *Applicable for all nurses except those nurses as designated in 3101 (b) herein.*

- (a) The period from the date of last employment to the completion of three (3) calendar months of employment for full-time nurses [and from the date of last employment to the later of completion of four (4) calendar months or thirty (30) shifts worked for part-time nurses] will be recognized as a probationary period. During such period the nurse shall not have recourse to the grievance procedure for reasons of termination of employment for unsuitability or unsatisfactory performance. This clause shall not preclude the Employer from extending the probationary period of a full-time or part-time nurse up to an additional three (3) calendar months providing that the Employer gives written notification to the Union specifying the reason(s) for the extension.

Applicable for WRHA - Home Care Program, WRHA - Public Health Program, WRHA - Clinical Nurse Specialists, WRHA - Nurse Practitioners, and WRHA Regional Programs sites only:

- (b) The period from the date of last employment to the completion of six (6) calendar months of employment for full-time and part-time nurses. During such period the nurse shall not have recourse to the grievance procedure for reasons of termination of employment for unsuitability or unsatisfactory performance. This clause shall not preclude the Employer from extending the probationary period of a full-time or part-time nurse up to an additional three (3) calendar months providing that the Employer gives written notification to the Union specifying the reason(s) for the extension.

ARTICLE 32 -- PERFORMANCE APPRAISALS

3201 The Employer shall complete a written appraisal of a nurse's performance at least bi-annually. Upon request, the nurse shall be given an exact copy of the appraisal.

3202 The nurse shall have an opportunity to read such document.

3203 The nurse's signature on such document merely signifies that the contents of the document have been read.

3204 If the nurse disputes the appraisal, the nurse may file a reply to the document in accordance with Article 29, and/or the nurse may file a grievance under Article 12 of this Agreement.

ARTICLE 33 -- DAMAGE TO PERSONAL PROPERTY

3301 In recognition of the fact that during the performance of their duties nurses may have their clothing or other personal property damaged, the Employer agrees to make appropriate compensation for same in accordance with Employer policy.

ARTICLE 34 -- SPECIAL UNDERSTANDINGS RE PART-TIME NURSES

3401 A part-time nurse shall be assigned and committed to work their EFT as agreed to in writing at the time of commencing employment. This written agreement shall only be revised when the nurse secures an alternate position in accordance with the provisions of the Collective Agreement.

3402 Part-time nurses who make known to the Employer that they wish to work occasional additional available shifts shall be given preference for such shifts unless the part-time nurse has already worked in that day with such preference being given on the following basis within the sites comprising the Employer:

- (i) First, among nurses on each unit/ward where the shift is available who meet the provisions above, and who have requested additional shifts, if mutually agreed between the Employer and the Union;
- (ii) Second, among those nurses within that site, who meet the provisions above, and who have requested additional shifts;
- (iii) Third, among those nurses from other sites comprising the Employer who meet the provisions above and who have requested additional shifts.

NOTE: *For the sites comprising the WRHA (direct operations) Employer, please refer to the MOU Re: Application of Offering of Overtime and Additional Available Shifts.*

Applicable for non-transferred sites:

Part-time nurses who make known to the Employer that they wish to work occasional additional available shifts shall be given preference for such shifts unless the part-time nurse has been scheduled to work in that day.

Applicable for WRHA - Home Care Program, WRHA - Primary Care Program, and WRHA - Public Health Program sites only:

- (i) *First, among nurses in each community paired area (Home Care), where the shift is available who meet the provisions above, and who have requested additional shifts or; among nurses in each work location including specific centralized program teams, where the shift is available who meet the provisions above, and who have requested additional shifts or;*

- (ii) *Second, among those nurses within the same site from other WRHA community paired areas, work locations, or specific centralized program teams who meet the provisions above, and who have requested additional shifts;*
- (iii) *Third, among those other WRHA Community Health Services in other sites who meet the provisions above and who have requested additional shifts*

3403 A part-time nurse called back to work hours in excess of a shift (as defined in Article 1404) in any one (1) day shall be paid at overtime rates of pay with a guaranteed minimum of three (3) hours at overtime rates. If the extra time worked under this subsection commences within less than three (3) hours before the start of a shift, the guaranteed minimum of overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time the nurse starts to work to the beginning of their shift.

Applicable for Home Care nurses:

A part-time nurse called back to work hours in excess of a seven and three-quarter (7.75) hour shift in any one (1) day shall be paid at overtime rates of pay with a guaranteed minimum of one (1) hour at overtime rates. If the extra time worked under this subsection commences within less than one (1) hour before the start of a shift, the guaranteed minimum of overtime pay will not apply. In such cases, the nurse will be paid at overtime rates from the time the nurse starts to work to the beginning of their shift.

3404 Except for part-time nurses who agree to work on a greater number of weekends, it is understood that a part-time nurse may be required to work on alternate weekends.

Applicable for Victoria General Hospital site only:

Except for part-time nurses who agree to work on a greater number of weekends, it is understood that a part-time nurse may be required to work on every third weekend and may be assigned to work either over Christmas or New Year's.

3405

- (a) Vacation pay shall be calculated as follows:

Hours Paid at Regular Rate of Pay <u>(during vacation year)</u>	X	Entitlement of a Full-time Nurse
Full-time Hours		

- (b) Part-time nurses shall receive their entitled vacation over a period of time equivalent to the vacation period of a full-time nurse and shall be paid their earned vacation pay proportionately during each week of scheduled vacation.

3406 Income protection accumulation for part-time nurses shall be calculated as follows:

$$\frac{\text{Hours Paid at Regular Rate of Pay}}{\text{Full-time Hours}} \times \text{Entitlement of Full-time Nurses}$$

3407 Part-time nurses will be paid four point six two percent (4.62%) (five percent (5%) effective September 30, 2021) of their basic pay in lieu of time off on Recognized Holidays. Such holiday pay shall be calculated on all paid hours (excluding overtime hours as defined in Article 16) and shall be included in each regular pay cheque.

3408 *Effective for all nurses April 1, 2022 subject to MOU #34 Re: Article 3408 (Increments) and MOU for Misericordia Health Centre & St. Boniface Hospital.*

A part-time nurse shall receive increments (calculated from the date of their last increment, or their starting date as the case may be) on the basis of one (1) increment for each 1343 hours worked or one (1) years' service, whichever occurs later. In the case of the increment being given on the basis of 1343 hours worked, it shall be applied to the pay period next following completion of 1343 hours worked.

3409 *n/a @ St. Boniface Hospital and Misericordia Health Centre sites:*

Seniority accumulated by a part-time nurse up to October 14, 2021 shall be retained. Seniority hours calculated after October 14, 2021 shall be in accordance with hours paid at the regular rate of pay.

3410 Subject to Article 3806, a nurse whose employment status changes from full-time to part-time shall be entitled to receive an increment on the later of:

- (a) one (1) calendar year from the date of their last increment, or date of employment as the case may be;
- (b) on completion of 1343 hours calculated under the formula:

$$B = 1343 - (A \times 2/3)$$

A = number of hours during which seniority was accrued under full-time status since the date of their last increment, or starting date as the case may be.

B = number of hours remaining to be worked as part-time to earn an increment.

3411 Where a Recognized Holiday (or the Employer's designated lieu day) falls on a part-time nurse's normally scheduled day of work but the nurse's department/unit/program is closed, it is recognized that the nurse shall receive an unpaid leave of absence unless the nurse requests one of the following options:

- The nurse(s) may request to use one (1) of their retained vacation days or banked overtime in accordance with Article 1501; or
- Notwithstanding Article 3402 the nurse may request to be scheduled for an alternate shift, subject to the availability of work and provided the nurse is qualified to perform the required work. This alternate shift must be requested a minimum of **two (2)** weeks in advance of, and scheduled within, the posted shift schedule in which the Recognized Holiday falls. It is understood that this rescheduled shift will be payable at the nurse's basic rate of pay.

ARTICLE 35 -- SPECIAL UNDERSTANDINGS RE CASUAL NURSES

3501 A casual nurse is one called in occasionally by the Employer to replace a full-time or part-time nurse or to supplement regular staff coverage in situations of unforeseen staff shortage.

Applicable for Home Care nurses:

A casual nurse is called in by the Employer to replace a full-time or part-time nurse or to supplement regular staffing requirements.

3502 Casual nurses will receive vacation pay at the rate of six percent (6%) of all hours paid at basic salary including hours worked on Recognized Holidays in a bi-weekly pay period.

3503 Casual nurses are paid in accordance with the salaries specified in Appendices "A" and "B" and receive a starting salary as described in Article 38.

A casual nurse shall receive increments on the basis of one (1) increment for each 2015 regular hours worked. Such increment shall be applied on the first day of the first pay period following completion of 2015 hours.

When a nurse elects to terminate their full-time or part-time position and makes application to be hired as a casual nurse, the following conditions will apply:

- (a) Such casual nurse will be paid in accordance with the salary specified in Appendices "A" and "B";
- (b) The nurse will receive the salary of the occupational classification into which they are assigned and at the same increment level that had been attained while working as a full-time or part-time nurse.

- 3504** Casual nurses will be entitled to:
- compensation for overtime worked in accordance with Article 16;
 - shift premium and weekend premium outlined in Article 17;
 - the allowance as outlined in Article 18;
 - Responsibility Pay premium outlined in Article 19;
 - transportation allowance/escort duty outlined in Article 20;
 - the rights outlined in Articles 2905, 2906, 2907;
 - the Employer Sponsored Educational Development allowance in Article 2407(a) (b) (c)
 - the Legal and Investigative Proceedings in Article 2410.
 - continuation of placement at the twenty (20) year rate if rehired after a period of no longer than six (6) months. For clarity a period of pre-retirement leave does not count towards the six (6) month qualification time limit.

3505 Casual nurses required to work on a Recognized Holiday, excluding Remembrance Day, shall be paid at the rate of time and one-half (1.50) their basic rate of pay. Casual nurses required to work on Remembrance Day shall be paid at the rate of double their basic rate of pay.

If there is a change in Manitoba legislation that extends Recognized Holidays to all employees, the parties agree that casual nurses as defined in Article 35 shall receive this benefit.

3506 The Employer agrees to deduct union dues in an amount specified by the Union in any pay period for which the casual nurse receives any payment, and such dues shall be forwarded to the Manitoba Nurses' Union monthly in accordance with Article 501.

In the event that no payment is made during the pay period, the Employer shall have no responsibility to deduct and submit dues for that period.

3507 A casual nurse reporting for work and finding no work available will be guaranteed three (3) hours pay at their basic rate of pay.

Applicable for Home Care nurses:

Where a Home Care nurse is unable to complete their scheduled shift due to client circumstances, the nurse may be reassigned to other clients, or may be reassigned to other work for which they are qualified within any of the sites comprising the Employer. It is understood that such reassignment will only occur within a fifty (50) km. radius of the originating site, unless a greater distance is mutually agreed between the Employer and the nurse. Travel time and Transportation Allowance as outlined in Article 20 shall be paid to the nurse to travel to the reassigned site.

Should reassignment as contemplated above not be possible, the Home Care nurse shall receive pay for the scheduled hours not worked.

3508 Articles 12 and 13 herein apply only with respect to the terms of this Article.

3509 Previous nursing experience of casuals will be considered in terms of applicability to the position applied for and, provided that equivalent qualifications are met, preference shall be given to the casual nurses over applicants from outside the site.

3510 Casual nurses shall accrue seniority for hours worked only for the purposes of Article 30 and only in situations where there are no qualified full-time or part-time applicants at the site where the vacancy occurs. On expiry of a term position, if a casual nurse is not successful in obtaining another term or permanent position in accordance with Article 3006 (a), the nurse shall retain any previous casual seniority and seniority accrued while in the term position shall be converted to casual seniority.

- (a) Subject to (b) and (c) below, casual nurses will receive payment for one (1) orientation day following the completion of every two (2) shifts worked.
- (b) Should the above-noted casual nurse, within eighteen (18) calendar months of obtaining a casual employment status, obtain a permanent or term full-time or part-time position in any unit or department, they shall be paid their outstanding orientation pay at regular rates on their first pay cheque subsequent to obtaining the said position.
- (c) When the orientation is six (6) days or greater, the casual nurse shall be paid two-thirds of the orientation period at the time of taking the orientation. The outstanding unpaid orientation period shall be subject to the recovery process outlined above.

ARTICLE 36 -- SPECIAL UNDERSTANDINGS RE GRADUATE NURSES, GRADUATE PRACTICAL NURSES AND GRADUATE PSYCHIATRIC NURSES

The terms of this Agreement shall be applicable to the graduate nurse, graduate practical nurse and graduate psychiatric nurse except as follows:

3601 Salaries and Increments of the Graduate Nurse, Graduate Practical Nurse and Graduate Psychiatric Nurse:

- (a) Starting salary of the newly graduated graduate nurse, graduate practical nurse or graduate psychiatric nurse awaiting initial registration as a Registered Nurse, Licensed Practical Nurse or Registered Psychiatric Nurse shall be discounted by eight percent (8%) until such time as registration/license is achieved.
- (b) The anniversary date of a newly graduated graduate nurse or graduate psychiatric nurse who obtains registration within one (1) year of commencing employment shall be the date of their commencement of employment.

- (c) The anniversary date of a newly graduated graduate practical nurse who obtains their license within an eighteen (18) month period of commencing employment (or within the time period as amended in the regulations of the LPN Act) shall be the date of their commencement of employment.

3602 **Out of Province Nurses**

- (a) A person in good standing as a Registered Nurse or a Registered Psychiatric Nurse in another province, country or territory whose name appears on the graduate nurse or graduate psychiatric nurse register may commence employment at the Nurse II start rate and upon providing proof of registration in Manitoba not later than eight (8) months following commencement of their employment, shall receive recognition of previous experience as specified in Article 3803, retroactive to the date of their employment.
- (b) When registration of a nurse in good standing as a Registered Nurse or a Registered Psychiatric Nurse in another province, country or territory is obtained later than eight (8) months but before one (1) year the anniversary date shall be the date on which registration is obtained.
- (c) A person in good standing as a Licensed Practical Nurse in another province, country or territory whose name appears on the graduate practical nurse register may commence employment at the LPN start rate and upon providing proof of registration in Manitoba not later than eight (8) months following commencement of their employment, shall receive recognition of previous experience as specified in Article 3804, retroactive to the date of their employment.
- (d) When registration of a nurse in good standing as a Licensed Practical Nurse in another province, country or territory is obtained later than eight (8) months but before one (1) year the anniversary date shall be the date on which registration is obtained.

3603 **Termination**

- (a) In accordance with the Regulated Health Professions Act or the relevant regulations to this Act, failure of the graduate nurse to successfully complete the examination required for registration within a time period prescribed by the CRNM will be deemed to be just cause for termination.
- (b) In accordance with the Registered Psychiatric Nurses Act or the relevant regulations to this Act, failure of the graduate psychiatric nurse to successfully complete the examination required for registration within a time period prescribed by the CRPNM will be deemed to be just cause for termination.

- (c) In accordance with the Licensed Practical Nurses Act or the relevant regulations to this Act, failure of the graduate practical nurse to successfully complete the examination required for licensure within a time period prescribed by the CLPNM will be deemed to be just cause for termination.

ARTICLE 37 -- HEALTH PROGRAM

3701 Health examinations required by the Employer shall be provided by the Employer and shall be at the expense of the Employer.

3702 Time off without loss of regular pay shall be allowed at a time determined by the Employer for such medical examinations and laboratory tests, provided that these are performed on the Employer's premises, or at a facility designated by the Employer.

3703 With the approval of the Employer, a nurse may choose to be examined by a physician, nurse practitioner, or physician/clinical assistant of their own choice, at their own expense, as long as the Employer receives a statement as to the fitness of the nurse from the physician, nurse practitioner, or physician/clinical assistant.

3704 Time off for medical and dental examinations and/or treatments, may be granted and such time off including necessary travel time, shall be chargeable against accumulated income protection benefits.

ARTICLE 38 -- SALARIES AND INCREMENTS

3801 Nurses shall be paid in accordance with the salary schedule as outlined in Appendix "A", forming part of the Agreement.

3802 "Basic or Regular Salary or Pay" shall mean the rates of pay shown in Appendix "A" (Salaries) and Appendix "B" (Academic Allowance).

3803 Recognition of Previous Experience Applicable to Registered Nurses and Registered Psychiatric Nurses:

- (a) The starting salary of a Registered Nurse or Registered Psychiatric Nurse newly employed as a Registered Nurse or Registered Psychiatric Nurse shall recognize previous experience applicable to the position applied for on the basis of equivalent full-time experience as specified hereinafter:

<u>Length of Experience</u>	<u>Starting Rate</u>
Less than 2015 hours	Start Rate
2015 hours within past 4 years	1 Year Rate
4030 hours within past 5 years	2 Year Rate
6045 hours within past 6 years	3 Year Rate
8060 hours within past 6 years	4 Year Rate
10075 hours within past 7 years (Effective April 1, 2021)	5 Year Rate
12090 hours within past 8 years (Effective April 1, 2022)	6 Year Rate
14105 hours within past 9 years	7 Year Rate

For all CNS and Nurse Practitioners:

<u>Length of Experience</u>	<u>Starting Rate</u>
Less than 10,075 hours	Start Rate
10,075 hours within past 6 years	1 Year Rate
12,090 hours within past 7 years	2 Year Rate
14,105 hours within past 8 years	3 Year Rate
16,120 hours within past 9 years	4 Year Rate

- (b) A nurse employed at a Nurse III, IV, V classification shall be granted a starting salary that is not less than one (1) increment step above what their starting salary would be if the nurse were employed as a Nurse II.
- (c) A nurse in good standing as a Registered Nurse or Registered Psychiatric Nurse in another country, province, or territory will commence employment at the "R.N/R.P.N." start rate presently in effect at the facility/site and, upon providing proof of Manitoba registration not later than six (6) calendar months following commencement of their employment, shall receive recognition of previous experience as specified in sub-clauses (a) and (b) above, retroactively to the date of commencing employment.

- (d) The starting salary of a Registered Nurse or Registered Psychiatric Nurse who has had previous experience as a Licensed Practical Nurse shall commence at the R.N./R.P.N. 1 Year rate as specified in Appendix "A", and after not more than three (3) months from the date of commencement of their employment as a Registered Nurse or Registered Psychiatric Nurse, the Employer shall, on the basis of written performance appraisal discussed with the nurse, grant such additional increments as performance warrants, with a minimum of one (1) increment for each two (2) years worked as a Licensed Practical Nurse within the previous five (5) year period.
- (e) Notwithstanding Article 3803 (d), a nurse returning from a leave of absence who has completed the Registered Nurse program having had previous experience as a Registered Psychiatric Nurse, and who returns to work in the psychiatric area, or who obtains a position that requires psychiatric nursing experience, shall receive full recognition for previous experience when placed on the salary schedule, and in addition, would receive the applicable academic allowance.
- (f) Applicable for Graduate Nurse Practitioners
The starting salary of the newly graduated Nurse Practitioner who is employed as a Registered Nurse (Graduate Nurse Extended Practice) [RN(GNEP)] or as a Registered Nurse Graduate Nurse Practitioner [RN(GNP)], shall be at the start rate and, once licensure is obtained as a Nurse Practitioner (Registered Nurse, Extended Practice) [NP(RNEP)], probation, if applicable, shall begin and the Nurse Practitioner will be granted increments in accordance with Article 3803(a) retroactive to start date.

3804 Recognition of Previous Experience Applicable to Licensed Practical Nurses:

The starting salary of a newly employed Licensed Practical Nurse shall recognize previous experience on the basis of equivalent full-time experience as specified hereinafter:

Placement of an LPN or ORT on scale:

<u>Length of Experience</u>	<u>Starting Rate</u>
Less than 2015 hours	Start Rate
2015 hours within past 4 years	1 Year Rate
4030 hours within past 5 years	2 Year Rate
6045 hours within past 6 years	3 Year Rate
8060 hours within past 6 years	4 Year Rate
10075 hours within past 7 years	5 Year Rate
12090 hours within past 7 years (Effective April 1, 2021)	6 Year Rate
14105 hours within past 8 years	7 Year Rate

Starting salary of a nurse who has completed the Licensed Practical Nurse Program, having had previous experience as a Certified Nursing Assistant or as a Registered Nursing Assistant shall commence at the L.P.N. Start Rate as specified in Appendix "A", and after not more than three (3) months in said position, the Employer shall, on the basis of written performance appraisal discussed with the nurse, grant such additional increments as performance warrants.

3805 Starting salaries, as specified above, are to be regarded as minimum and shall not prevent the Employer from granting a higher starting salary to any nurse, when, in the judgment of the Employer, additional experience or other qualifications so warrant it.

3806 Increments:

- (a) Increments as specified in salary schedule Appendix "A" shall be granted annually on the anniversary date of the nurse's employment, or as altered by the terms of this Agreement, the latter of which shall take precedence, however, the Employer may, with reasonable cause and on the basis of a written performance appraisal previously discussed with the nurse, withhold an annual increment, subject to review within and not later than three (3) months of the date such increment was withheld.
- (b) If a nurse takes an unpaid leave of absence, the annual date on which they will be paid an increment will be delayed for one (1) month for every full month the nurse is on leave of absence except that salary increases will not be delayed because of educational leave of up to two (2) years.

3807 If new classifications which come under the scope of this Agreement are created during the term of this Agreement, or if there is a substantial change in the job content of an existing classification falling within the bargaining unit, the Employer will inform the Union of the proposed rates of pay for such positions. If the Union wishes to enter into negotiations on these rates of pay it will so inform the Employer within seven (7) days and negotiations will commence within an additional ten (10) days, which time may be extended by mutual agreement between the Employer and the Union. If the parties are unable to reach agreement concerning the rates of pay the dispute shall, at the request of either or both parties, be dealt with in accordance with the provisions as set forth in Article 13 Arbitration Procedure herein, commencing at Article 1302.

3808 Retroactivity:

Should there be retroactive wage and benefit adjustments, such shall be made payable within ninety (90) days of the date of ratification of the Collective Agreement.

Upon written application to the Employer within ninety (90) days of ratification of the Collective Agreement, nurses who have terminated employment with the Employer shall be entitled to retroactive pay.

3809 Should an error be made in a nurse's pay which results in a loss of seven and three-quarter (7.75) hours or more of regular pay, the Employer agrees to issue a manual cheque or direct deposit as soon as possible after becoming aware of the error. If the error results in a loss of less than seven and three-quarter (7.75) hours of regular pay, the correction will be made on the next scheduled pay day.

ARTICLE 39 -- EMPLOYEE BENEFIT PROGRAM

3901 Dental Plan:

The parties agree that the Health Care Employees Benefit Plan sponsored dental plan is effective on a 50-50 cost shared basis.

Applicable for WRHA - Public Health Program site only:

Dental Plan:

Commencing January 1, 1981, the Employer shall pay one hundred percent (100%) of the premium cost of a Dental Plan, the terms of which will be supplied by the Employer to Winnipeg Public Health Nurses Worksite 1. Pursuant to the terms of the Dental Plan, coverage will be provided to eligible employees and eligible dependents.

Effective December 27, 1992, the current year Manitoba Dental Association fee guide will be implemented as a basis for payment.

The Employer will provide the Union with a summary of the Dental benefit in effect on January 1, 1991 as well as the contract number.

3902 Disability & Rehabilitation:

The Employer agrees to participate in the Disability and Rehabilitation Plan. The Employer will pay the entire premium to a maximum of 2.3%.

The parties agree that income protection credits and Workers Compensation benefits will be used where applicable, to offset the elimination period. Once the elimination period has been exhausted, the nurse will commence drawing disability benefits. It is understood that the elimination period for the Disability and Rehabilitation Plan is one hundred and nineteen (119) calendar days. A nurse may claim income protection benefits for the period of time not to exceed this elimination period.

3903 Health Spending Account

A Health Spending Account (HSA) shall be made available for eligible nurses. The HSA shall only apply and be made available to top up the existing benefits provided in the HEBP “Enhanced” Extended Health Benefit Plan and the HEBP Dental Plan.

The annual HSA benefit amounts shall be:

April 1, 2011	- \$500.00 for full-time nurses - \$250.00 for part-time nurses
April 1, 2022	- \$700.00 for full-time nurses - \$350.00 for part-time nurses

For the purpose of the HSA, a nurse is deemed to qualify for the full-time benefit if the nurse has been paid for a minimum of 1,500 hours in the previous calendar year. Hours paid at overtime rates do not count in the annual determination of whether a nurse qualifies for the full-time benefit.

A “year” or “the annual HSA benefit” is defined as the calendar year – January 1st to December 31st.

In order to be eligible for the HSA, a nurse must be enrolled in the “Enhanced” Extended Health Care Plan.

Nurses who become enrolled in the “Enhanced” Extended Health Care Plan will commence HSA coverage following one (1) year participation in the “Enhanced” Extended Health Care Plan.

Unutilized HSA monies are not carried over to the subsequent year.

3904 Applicable for WRHA - Public Health Nurses:

All Manitoba Nurses' Union members transitioned to the Employers Organization from the Civil Service will remain in the Government of Manitoba benefit plans consistent with those in place in the Civil Service at the time of the nurse's transition to the Employers Organization. These Benefits programs include the Ambulance & Hospital Semi-Private (AHSP), Dental, Vision, Prescription Drugs, Extended Health, Travel Health, Long-Term Disability (LTD) plans and Health Spending Account and nurses will be "grandparented" to those plans for the duration of their employment.

All future changes to Benefit Plans negotiated in the Civil Service shall be applicable to the MNU members who are "grandparented" to these plans.

*Current plan details and claim forms can be reviewed and downloaded at:
<http://www.gov.mb.ca/finance/labour/blue.html>*

Note: Those Community Health Nurses that were already MNU members and those who are newly organized into the MNU, will be covered by the Health Care Employees' Benefit Plans (HEBP) and the Health Care Employees' Pension Plan (HEPP).

Applicable for WRHA - Public Health Nurses:

3905 *In the event a reduction in the permanent working force becomes necessary, permanent nurses that are unable to maintain positions in accordance with the bumping provisions of the Collective Agreement and who are severed, will receive dental care and vision care benefits in accordance with this Article for a period of three (3) years from the actual date of termination.*

Applicable for Riverview Health Centre site only:

3906 *It is understood and agreed that this Agreement incorporates the terms and conditions of By-Law No. 5300/89 that merges the Pension Plan and Pension Funds No. 0397877 established and maintained under the Employee Benefits Program inclusive of D & R Program, being City of Winnipeg By-Law No. 1125/75 and Prior Pension Plan By-Law No. 2819/80 only insofar as Employee Benefits Program By-Law No. 1125/75 and Prior Pension Plan By-Law 2819/80 are applicable to each individual member of the Manitoba Nurses' Union Local 1a.*

The parties agree to endorse the contribution rates and benefit levels as provided by the Winnipeg Civic Benefits Program and any changes that may be agreed to between the City of Winnipeg and the Civic Unions from time to time.

Applicable for Riverview Health Centre site only:**3907 **Group Insurance:****

Employees presently enrolled in Group Life Insurance Plan – City of Winnipeg By-Law No. 5644/91 shall continue to receive such coverage as provided. Before any changes are made by the City to any benefit plan, as it now exists, the Union will be notified and given the opportunity to make known its view on the proposed change.

ARTICLE 40 -- OVERPAYMENTS

4001 The Employer may not make deductions from wages unless authorized by statute, by Court Order, by Arbitration Award, by this Agreement, by the Union or to correct an overpayment error made in good faith. Where an error has been made in good faith, the Employer shall be entitled to recover any overpayment made, for a period of time that does not extend further back than twelve (12) months from date of discovery, provided:

- (a) Once the error is discovered, notice and a detailed breakdown of the error is given by the Employer to the affected nurse and the Union within twenty (20) business days of discovery;
- (b) The proposed recovery is made in as fair and reasonable a manner as possible; and,
- (c) The proposed recovery is made over a period of time which is no less than the period during which the overpayment was made unless otherwise agreed between the Employer and the nurse.

In the event the nurse retires from, or leaves the employ of the Employer before the Employer is able to fully recover an overpayment as contemplated in this Article, the Employer shall be entitled to make a full recovery at the time of retirement or termination of employment of that nurse and reduce accordingly any payments that might be owing to that nurse to recover the overpayment.

4002 “Under deduction” shall include, but is not limited to, any statutory deduction, or any other amount for which the nurse has provided their consent to be deducted from their wages, that has not been deducted by the Employer as a result of a good faith error on the part of the Employer.

It is understood that where the Employer is required, or has received consent, to remit a deduction from the wages of a nurse, that the Employer is responsible to ensure those deductions are remitted appropriately and in compliance with the necessary conditions of such remittance. Where the Employer has failed to remit as required and as a result of that failure the nurse has been denied access to a benefit which they would otherwise have received but for the failure to remit, the Union on behalf of the nurse is able to seek, through the grievance process, appropriate redress for any and all incurred losses. All appeal processes under the applicable plan must be exhausted prior to any grievance being initiated through the grievance process. The jurisdiction of an arbitrator appointed pursuant to the grievance process to interpret and apply any applicable benefit plan shall be limited to the application of this provision.

4003 All under deductions are considered to be an accounts receivable and will be deducted from a nurse's wages when discovered by the Employer.

The deduction will be made in a fair and reasonable manner after notification to the nurse and taking into consideration the amount of the account receivable and the purpose of the amount under deducted.

Where an error has been made in good faith, the Employer shall be entitled to recover any under deduction made, for a period of time that does not extend further back than twelve (12) months from date of discovery.

ARTICLE 41 -- STAFF ORIENTATION

4101 The Employer shall provide an appropriate orientation program for nurses newly employed. The orientation program shall include such essential information as policies, nursing procedures, the location of supplies and equipment, fire, safety and disaster plans. Further, an orientation program shall be provided upon request for nurses returning from an extended leave of absence or moving to a new area of practice. Notwithstanding the above, specialty areas may require extended orientation programs.

4102 The Employer shall provide a program of inservice education for nurses pertinent to patient/resident/client care. Such program of inservice shall be of sufficient nature to properly familiarize the nurse with all relevant aspects of duties and responsibilities.

4103 The Employer shall provide, access to reference materials as is required in relation to maintaining current knowledge of general nursing care.

ARTICLE 42 -- EMPLOYER-INITIATED MOBILITY

4201 It is the desire of, and in the best interest of, the parties to work toward the avoidance of job loss by providing for the mobility of nurses within and between Employers Organizations.

The parties recognize that it is in the best interest of patient/resident/client care to retain the knowledge and expertise of health care providers within the programs and the parties wish to promote career opportunities by removing systemic barriers.

The parties agree to work towards a systemic labour adjustment plan utilizing a provincial attrition model where reasonable, and utilizing any other programs as agreed to by the parties.

4202 In the event that this Article conflicts with the terms of any other existing Article within the Collective Agreement, the terms of this Article shall prevail (unless otherwise specified).

4203

(a) In the event of a transfer/closure/consolidation/merger of one or more of the programs and/or facilities and/or sites, the Employer(s) will notify the Union, where possible*, at least ninety (90) days prior to the implementation date unless otherwise provided for in the applicable Collective Agreement. The Employer(s) will determine the estimated number and types of positions available, and update such data as the reconfiguration/implementation plans are defined.

*lesser notice may be given only in exceptional circumstances.

(b) The Employer(s) and Union shall meet within thirty (30) days of notice provided for in Article 4203 (a) to discuss issues arising out of the transfer of nurses.

(c) The Employer(s) shall prepare and provide the following data relative to the transfer/closure/consolidation/merger to the Union:

- any positions affected
- where applicable, number of vacancies and/or new positions created at the receiving facility/program/site
- up to date seniority lists
- pertinent classification information
- relevant time frames

4204 Staff Mobility**A. Transfers with Programs**

1. When programs are transferred, consolidated, or merged from one or more facilities/programs/sites to another, the Employer(s) will determine the number of nurses required by classification.

Where, in the event of a transfer/closure/consolidation/merger of one or more of the programs and/or facilities and/or sites, an affected nurse's worksite/originating site is moved from one (1) city or town to another city or town potentially requiring a change of residence by the nurse, the Union and the nurse shall be given notice of the move three (3) months in advance of the date upon which the move of the nurse is to be effected. Such notice shall be provided in writing to the Union and the affected nurse by the Employer.

Should the nurse accept the position requiring relocation they may request that the effective date of the relocation be deferred by up to one (1) month for personal reasons such as the impact on school-age children.

Where a nurse has accepted relocation involving a change in residence, they shall be reimbursed as per the MOU #26 re: Relocation Expenses for Program Transfers.

Qualified nurses affected will first be given the opportunity to move with the facility(ies)/program(s)/site(s), before other nurses. Where excess numbers of nurses wish to move, nurses will be selected in descending order of seniority. Where an insufficient number of nurses by classification volunteer to move, the remaining vacancies shall be filled by utilizing the job posting/recall procedures in the applicable Collective Agreement. Where a nurse is not able or elects not to move, the provisions of Article 27 will apply.

2. If vacancies continue to exist after the job competition, the Employer(s) reserves the right to transfer affected nurses from the sending facility(ies)/program(s)/site(s) to fill the vacancies commencing with the most junior qualified nurse. A nurse shall not be compelled to accept a transfer where the receiving facility/program/site is greater than fifty (50) kilometres from the sending facility/program/site. In such case, where a nurse declines to accept a position at the receiving facility(ies)/program(s)/site(s), and no similar position is available at the sending facility(ies)/program(s)/site(s) for which the nurse is qualified, the nurse may exercise their seniority rights (deletion/bumping) or be placed on layoff in accordance with Article 27. Where it is not possible due to seniority level or where there are no positions available within .2 of the EFT of the position occupied by the nurse at the time of the deletion, the nurse shall be entitled to exercise their seniority rights, subject to their ability, performance and qualifications, to displace a nurse in a position of equal or lower classification within any of the other sites comprising the Employer. Any nurse thus displaced shall also be entitled to a like exercise of seniority rights.
3. Nurses who are transferred in accordance with this Article shall retain seniority, service, and all other benefits as specified hereinafter:
 - (a) continuous service date;
 - (b) accumulated income protection benefits;
 - (c) length of employment applicable to rate at which vacation is earned;
 - (d) length of employment applicable to pre-retirement leave;
 - (e) length of employment applicable for qualification for the Magic 80 (as per the terms and conditions of the applicable pension plan) pension provisions;
 - (f) length of employment applicable to next increment date;
 - (g) the terms and conditions of the benefit plan(s) for the new Employer apply; however, normal waiting periods would be waived, subject to the applicable benefit plans' terms and condition;
 - (h) seniority credits (in accordance with receiving Collective Agreement).
 - (i) transfer of current vacation hours unless the nurse elects to have their current vacation hours paid out by the previous Employer at the time of the transfer;
 - (j) placement at the greater of the nurse's salary level at the sending facility/program/site, or in accordance with the recognition of previous experience clause(s) in Article 38.
 - (k) Where a nurse transfers prior to the completion of maternity leave return of service requirements, the nurse shall be allowed to complete the return of service requirements at the receiving facility(s)/site(s)/program(s).
4. Nurses who are transferred in accordance with this Article will be treated in all respects as if they had always been nurses of the receiving facility(s)/site(s)/program(s).

To ensure the accuracy of the calculation of seniority and service of transferred nurses, the Employer(s) will provide sufficient information to verify an accurate calculation has been made.

5. The receiving facility(ies)/program(s)/site(s) will provide an orientation period to nurses transferring to new facility(ies)/program(s)/site(s) and shall take into consideration the individual needs of the transferring nurse(s). The orientation period shall be of sufficient duration to assist the nurse in becoming familiarized with essential information such as policies and procedures, routines, location of supplies and equipment, and fire and disaster plans.

It is further agreed that periods of orientation shall be considered time worked.

Issues related to orientation will be referred immediately to the Employers Organization Nursing Advisory Committee, in order to ensure a standardized, effective orientation structure, duration and content across the Employers Organizations.

6. No new probationary/trial period will be served by transferring nurses. Any transferring nurse who had not yet completed their probationary/trial period at the sending facility/program/site will complete the balance of the period required at the receiving facility/program/site.
7. Should the transferred nurse decide not to remain at the receiving facility/program/site, such nurse shall provide written notice to the receiving facility/program/site no later than sixty (60) days following the date of transfer. The nurse shall be entitled to be placed on the Central Redeployment list and the recall list of the sending facility(ies)/program(s)/site(s).
8. It is agreed that vacation earned at the sending facility/program/site shall not be paid out upon transfer unless the nurse requests.

In the event a nurse elects to have their accrued vacation transferred, it does not mean that the previously approved vacation dates will be honored at the receiving facility/program/site. The receiving Employer will schedule the remaining vacation in consultation with the nurse, based on operational requirements and in accordance with Article 21.

In the event a Transfer of Program as per Article 4204 (A), the parties agree that where affected nurses hold accrued seniority and service at multiple Employers/facilities/programs/sites, the parties will review the effect of the restructuring on such nurses to ensure fairness and equity in the recognition of seniority and service.

B. Temporary Transfer of Nurses

1. To facilitate temporary transfers within and between Employers Organizations to facilities/programs/sites experiencing a need for additional nurses on a sporadic or episodic basis, nurses qualified to perform the work from other facilities/programs/sites, as determined by the Employer(s), shall be offered the opportunity to work in the facility(ies)/program(s)/site(s) experiencing the need for additional nurses.

Temporarily transferred nurses shall be paid the greater of six dollars (\$6.00) per hour or fifteen percent (15%) (effective October 14, 2021) above their normal rate of pay for all hours worked at the receiving facility/program/site.

2. Temporary transfers shall not be implemented until the applicable provisions of the Collective Agreement of the receiving facility/program/site relating to the assigning of occasional additional shifts are fulfilled. Before transferring nurses, the Employer shall first seek to prebook remaining available shifts on the basis of voluntary eligible overtime.
3. The temporarily transferred nurses will continue to be covered by the terms of the sending facility's/program's/site's Collective Agreement.
4. Where an insufficient number of qualified nurses volunteer to be temporarily transferred, the Employer reserves the right to transfer nurses (based on operational requirements at affected facilities/programs/sites) from such facility(ies)/program(s)/site(s) as determined by the Employer, commencing with the most junior qualified nurse (regardless of classification) at the sending facility(ies)/program(s)/site(s) for a maximum of six (6) weeks duration, unless otherwise mutually agreed between the nurse and the Employer.

A nurse shall not be compelled to transfer to a facility/program/site greater than fifty (50) kilometres from their home facility/program/site.

The Employer agrees that this provision (#4) shall be utilized only under extenuating and emergency circumstances, and further, shall be implemented only in accordance with the provisions of Article 1001 of the Collective Agreement.

5. Temporarily transferred nurses will be provided with a daily "work disruption" allowance, for each day actually worked as follows:
 - (a) Between 1 – 49 km between sending and receiving site - \$40
 - Between 50 – 99 km between sending and receiving site - \$80
 - Between 100 – 149 km between sending and receiving site - \$130
 - 150 km or more between sending and receiving site - \$180

and

- (b) Where a nurse is temporarily transferred and due to the distance involved requires accommodations, the Employer shall pay actual travel time at the nurse's regular rate of pay for one-time return travel between the sending and receiving locations. All travel expenses, accommodations, as well as a daily per diem of sixty dollars (\$60.00) will be paid for the duration of the transfer, including days in which the nurse has not worked.
6. The receiving facility/program/site will provide an orientation period to the temporarily transferred nurse. The orientation shall be of sufficient duration to assist the nurse in becoming familiarized with essential information such as policies, procedures, routines, location of supplies and equipment, and fire and disaster plans. The orientation shall take into consideration the individual needs of the transferring nurse(s).

It is further agreed that periods of orientation shall be considered time worked.

Issues related to orientation will be referred immediately to the Employers Organization Nursing Advisory Committee, in order to ensure a standardized, effective orientation structure, duration and content across the Employers Organizations.

7. It is further agreed that should it be necessary to temporarily transfer nurses from one facility/program/site to another, in accordance with this Article as much notice as possible shall be provided to such nurse. Should the temporary transfer be required during the course of a scheduled shift, travel time from the sending to the receiving facility/program/site shall be considered time worked. If personal transportation is not available, transportation will be provided. Where a change in work schedule is required by the Employer (receiving facility/program/site) as a result of a transfer, the nurse(s) shall be compensated as per #10 below.
8. "Personal transportation" will be expanded to include the following:

Return transportation will be provided by the Employer, if the nurse requests transportation or if personal transportation is not available. If personal transportation is utilized, the following shall apply:

- (a) Parking in close proximity to the "receiving facility/site" will be made available.
- (b) Parking expenses shall be reimbursed to the nurse by the Employer.
- (c) The nurse shall be eligible for transportation reimbursement in accordance with the prevailing Province of Manitoba mileage rates in accordance with the following formula, subject to a minimum guarantee of four dollars (\$4.00):

Distance (in kms) from the nurse's home to the "receiving facility/site" minus the distance (in kms) from the nurse's home to the "sending facility/site".

It is understood that any adjustments in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.

9. In the event of a temporary transfer which exceeds six (6) weeks in duration, and where a nurse has requested to discontinue their transfer and return to the sending facility/program/site, the Employer shall conduct a recanvass for volunteers amongst qualified nurses. Where there are insufficient volunteers to replace the temporarily transferred nurse, as per #4 above, the sending facility shall send the next most qualified junior nurse in order of ascending seniority to replace the temporarily transferred nurse requesting return.
10. Where a change in work schedule is required by the Employer (receiving facility/program/site) as a result of a temporary transfer, the nurse(s) shall be compensated with a Shift Disruption Allowance as described below for each shift that has been changed and worked by the nurse. The following rules shall apply:
 - (a) Compensation of one of the following amounts as applicable per shift, whichever is greatest:
 - i. \$25 Impact Shift Changes: an adjustment is made to the start and end times of a shift that is greater than 1 hour and up to 4 hours; or
 - ii. \$35 Impact Shift Changes: a change is made to the calendar day that a nurse was scheduled to work (no change to shift length or shift description); or
 - iii. \$50 Impact Shift Changes: an adjustment is made to the start and end times of a shift that is greater than 4 hours; a change is made to the shift length (eg: 8 to 12 hours); a change is made to the shift description (eg: from straight Days to Days/Nights, or from straight Days to Days/Evenings);
 - (b) Shift disruption allowance will not be paid on days during which the nurse does not work or for shifts that have not been changed;
 - (c) Nurses shall not be eligible to receive overtime as a result of changes to their shift length (i.e. changing from 8 to 12 hour shifts), unless they are in an overtime situation as identified in the nurse(s) respective Collective Agreement and are now required to work additional hours.

- (d) Changes to shift length must not cause a decrease to the nurses' EFT; and
 - (e) Shift disruption allowance will cease to be paid, upon the effective date of the subsequent shift schedule which shall be posted in accordance with the Collective Agreement, and the nurse is scheduled as posted. If this posted schedule is disrupted the nurse shall be paid in accordance with 10. (a) above. When the transferred nurse is returned to their owned position, the Shift Disruption Allowance is not applicable.
11. The parties agree that the provisions of this Article are intended to satisfy the requirements of Article 1001 (b) except where unusual working conditions related to such emergency are not specifically contemplated herein.
 12. Where distance is indicated herein, it is understood to be the distance measured in kilometres by the most direct route by serviceable public roadway between applicable locations.

APPENDIX “A” -- SALARIES

Each nurse currently employed within an Employers Organization on October 14, 2021 shall be entitled to a one-time lump sum payment calculated on the following basis:

\$0.50 per hour for all hours paid at the nurse’s regular rate of pay between October 1, 2020 and September 30, 2021, subject to a minimum payment of \$500 total between all employers for which the nurse is employed.

For the purposes of this calculation, hours paid excludes all overtime worked.

All statutory deductions will apply to this payment. The lump-sum payment is deemed non-pensionable and is not subject to benefit deductions.

Nurses on a leave of absence shall be deemed to be paid their regular rates based on their pre leave EFT subject to the time period above. Such nurses will receive the payment and will be required to report all earnings to any applicable third party payer/insurer.

As it relates to the minimum \$500 total, where a nurse has not received a minimum payment of \$500 as a total for all Employers from which the nurse has received such payment, the nurse shall have ninety (90) days to provide documentation of all information relevant to entitlements under signing bonus to their Employer(s) and the MNU in order to be appropriately compensated.

MNU & Winnipeg Health Employer Organization
1885 ANNUAL HOURS- APPENDIX A - SALARIES

A1. Effective April 1, 2017

- Monthly salaries include a 1.25% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification ⁽¹⁾	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	20 Year	
Nursing Instructor 2 - Mental Health	1885	Hourly	35.100	36.288	37.639	39.000	40.433	41.935	43.553	45.264	46.975	47.916
		Monthly	5,513.625	5,700.240	5,912.460	6,126.250	6,351.350	6,587.290	6,841.450	7,110.220	7,378.990	7,526.805
		Annual	66,163.500	68,402.880	70,949.515	73,515.000	76,216.205	79,047.475	82,097.405	85,322.640	88,547.875	90,321.660
Nursing Instructor 3 - Mental Health	1885	Hourly	36.288	37.627	38.954	40.362	41.783	43.308	44.939	46.614	48.395	49.363
		Monthly	5,700.240	5,910.575	6,119.024	6,340.198	6,563.413	6,802.965	7,059.168	7,322.283	7,602.048	7,754.105
		Annual	68,402.880	70,926.895	73,428.290	76,082.370	78,760.955	81,635.580	84,710.015	87,867.390	91,224.575	93,049.255
Nurse Educator	1885	Hourly	38.035	39.421	40.840	42.377	44.146	45.857	47.708	49.641		50.635
		Monthly	5,974.665	6,192.382	6,415.283	6,656.720	6,934.601	7,203.370	7,494.132	7,797.774		7,953.915
		Annual	71,695.975	74,308.585	76,983.400	79,880.645	83,215.210	86,440.445	89,929.580	93,573.285		95,446.975
Nurse II	1885	Hourly	38.606	39.953	41.305	42.713	44.089	45.519				46.428
		Monthly	6,064.310	6,275.885	6,488.300	6,709.446	6,925.723	7,150.228				7,293.125
		Annual	72,771.725	75,310.625	77,859.600	80,513.355	83,108.675	85,802.730				87,517.495
Nurse II (20 Year Scale)	1885	Hourly	39.379	40.752	42.131	43.568	44.971	46.428				
		Monthly	6,185.714	6,401.487	6,618.100	6,843.780	7,064.254	7,293.125				
		Annual	74,228.570	76,817.845	79,417.195	82,125.355	84,771.050	87,517.495				
Nurse IV	1885	Hourly	41.448	42.982	44.519	46.194	48.114	49.975	51.925			52.963
		Monthly	6,510.801	6,751.761	6,993.225	7,256.351	7,557.929	7,850.272	8,156.552			8,319.599
		Annual	78,129.610	81,021.135	83,918.705	87,076.210	90,695.150	94,203.265	97,878.625			99,835.190
Nurse IV (20 Year Scale)	1885	Hourly	42.277	43.841	45.409	47.118	49.076	50.976	52.963			
		Monthly	6,640.936	6,886.766	7,132.932	7,401.431	7,709.054	8,007.442	8,319.599			
		Annual	79,691.235	82,641.195	85,595.185	88,817.170	92,508.650	96,089.305	99,835.190			
Nurse V	1885	Hourly	43.752	45.428	47.347	49.208	51.241	53.232	55.307			56.414
		Monthly	6,872.661	7,135.955	7,437.365	7,729.708	8,049.085	8,361.914	8,687.840			8,861.634
		Annual	82,471.935	85,631.455	89,248.380	92,756.495	96,589.025	100,342.970	104,254.085			106,339.610
Nurse V (20 Year Scale)	1885	Hourly	44.626	46.335	48.294	50.193	52.266	54.296	56.414			
		Monthly	7,010.017	7,278.516	7,586.139	7,884.527	8,210.118	8,528.991	8,861.634			
		Annual	84,120.205	87,342.190	91,033.670	94,614.325	98,521.410	102,347.895	106,339.610			
Nurse Practitioner	1885	Hourly	49.863	53.521	55.723	57.921	60.293					61.499
		Monthly	7,832.641	8,407.252	8,753.160	9,098.397	9,471.004					9,660.414
		Annual	93,991.690	100,887.020	105,037.920	109,180.760	113,652.045					115,924.965
Nurse Practitioner (20 Year Scale)	1885	Hourly	50.859	54.591	56.836	59.079	61.499					
		Monthly	7,989.139	8,575.336	8,927.961	9,280.250	9,660.414					
		Annual	95,869.670	102,904.035	107,135.535	111,363.005	115,924.965					

Weekend Worker - Nurse II	1885	Hourly	44.397	45.946	47.501	49.120	50.704	52.347	53.394	
		Monthly	6,974.083	7,217.394	7,461.545	7,715.939	7,964.791	8,222.879	8,387.270	
		Annual	83,688.995	86,608.730	89,538.540	92,591.265	95,577.495	98,674.550	100,647.235	
Weekend Worker - Nurse II (20 Year Scale)	1885	Hourly	45.285	46.865	48.451	50.103	51.718	53.394		
		Monthly	7,113.454	7,361.635	7,610.823	7,870.422	8,123.976	8,387.270		
		Annual	85,361.445	88,339.615	91,329.875	94,445.065	97,487.715	100,647.235		
Weekend Worker - Nurse IV	1885	Hourly	47.664	49.430	51.196	53.123	55.331	57.472	59.713	60.906
		Monthly	7,487.236	7,764.635	8,042.033	8,344.787	8,691.535	9,027.872	9,379.993	9,567.388
		Annual	89,846.835	93,175.615	96,504.395	100,137.440	104,298.415	108,334.460	112,559.915	114,808.655
Weekend Worker - Nurse IV (20 Year Scale)	1885	Hourly	48.619	50.418	52.220	54.186	56.437	58.621	60.906	
		Monthly	7,637.186	7,919.790	8,202.897	8,511.696	8,865.328	9,208.382	9,567.388	
		Annual	91,646.230	95,037.475	98,434.765	102,140.350	106,383.940	110,500.585	114,808.655	
Weekend Worker - Nurse V	1885	Hourly	50.314	52.240	54.448	56.590	58.928	61.216	63.602	64.874
		Monthly	7,903.502	8,206.088	8,552.835	8,889.340	9,256.574	9,616.084	9,990.874	10,190.695
		Annual	94,842.020	98,473.050	102,634.025	106,672.085	111,078.890	115,393.005	119,890.485	122,288.335
Weekend Worker - Nurse V (20 Year Scale)	1885	Hourly	51.321	53.286	55.537	57.722	60.106	62.440	64.874	
		Monthly	8,061.679	8,370.310	8,723.943	9,067.164	9,441.618	9,808.348	10,190.695	
		Annual	96,740.150	100,443.720	104,687.310	108,805.970	113,299.420	117,700.180	122,288.335	

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2018

- Monthly salaries include a 1.25% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification ⁽¹⁾	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	20 Year	
Nursing Instructor 2 - Mental Health	1885	Hourly	35.539	36.742	38.109	39.488	40.938	42.459	44.097	45.830	47.562	48.515
		Monthly	5,582.585	5,771.556	5,986.289	6,202.907	6,430.678	6,669.601	6,926.904	7,199.129	7,471.198	7,620.898
		Annual	66,991.015	69,258.670	71,835.465	74,434.880	77,168.130	80,035.215	83,122.845	86,389.550	89,654.370	91,450.775
Nursing Instructor 3 - Mental Health	1885	Hourly	36.742	38.097	39.441	40.867	42.305	43.849	45.501	47.197	49.000	49.980
		Monthly	5,771.556	5,984.404	6,195.524	6,419.525	6,645.410	6,887.947	7,147.449	7,413.862	7,697.083	7,851.025
		Annual	69,258.670	71,812.845	74,346.285	77,034.295	79,744.925	82,655.365	85,769.385	88,966.345	92,365.000	94,212.300
Nurse Educator	1885	Hourly	38.510	39.914	41.351	42.907	44.698	46.430	48.304	50.262		51.268
		Monthly	6,049.279	6,269.824	6,495.553	6,739.975	7,021.311	7,293.379	7,587.753	7,895.323		8,053.348
		Annual	72,591.350	75,237.890	77,946.635	80,879.695	84,255.730	87,520.550	91,053.040	94,743.870		96,640.180
Nurse II	1885	Hourly	39.088	40.452	41.821	43.246	44.641	46.087				47.009
		Monthly	6,140.041	6,354.303	6,569.404	6,793.237	7,012.368	7,239.559				7,384.303
		Annual	73,680.490	76,251.630	78,832.845	81,518.840	84,148.415	86,874.710				88,611.640
Nurse II (20 Year Scale)	1885	Hourly	39.870	41.262	42.658	44.112	45.534	47.009				
		Monthly	6,262.956	6,481.583	6,700.883	6,929.249	7,152.578	7,384.303				
		Annual	75,155.470	77,779.000	80,410.590	83,150.990	85,830.940	88,611.640				
Nurse IV	1885	Hourly	41.967	43.520	45.076	46.772	48.716	50.599	52.574			53.625
		Monthly	6,592.240	6,836.223	7,080.710	7,347.026	7,652.466	7,948.335	8,258.478			8,423.540
		Annual	79,106.885	82,034.680	84,968.520	88,164.310	91,829.595	95,380.025	99,101.730			101,082.475
Nurse IV (20 Year Scale)	1885	Hourly	42.805	44.390	45.976	47.707	49.690	51.613	53.625			
		Monthly	6,723.887	6,972.908	7,222.096	7,493.953	7,805.438	8,107.520	8,423.540			
		Annual	80,686.645	83,674.890	86,665.150	89,927.435	93,665.260	97,290.245	101,082.475			
Nurse V	1885	Hourly	44.299	45.995	47.939	49.822	51.881	53.897	55.999			57.119
		Monthly	6,958.635	7,225.118	7,530.391	7,826.260	8,149.668	8,466.358	8,796.483			8,972.459
		Annual	83,503.615	86,701.420	90,364.690	93,915.120	97,796.010	101,596.300	105,557.790			107,669.510
Nurse V (20 Year Scale)	1885	Hourly	45.184	46.915	48.898	50.821	52.919	54.975	57.119			
		Monthly	7,097.670	7,369.527	7,681.012	7,983.094	8,312.715	8,635.618	8,972.459			
		Annual	85,172.035	88,434.320	92,172.145	95,797.130	99,752.575	103,627.420	107,669.510			
Nurse Practitioner	1885	Hourly	50.486	54.190	56.420	58.645	61.046					62.267
		Monthly	7,930.536	8,512.368	8,862.642	9,212.076	9,589.385					9,781.146
		Annual	95,166.435	102,148.410	106,351.700	110,544.915	115,072.620					117,373.750
Nurse Practitioner (20 Year Scale)	1885	Hourly	51.495	55.273	57.547	59.817	62.267					
		Monthly	8,089.050	8,682.467	9,039.626	9,396.281	9,781.146					
		Annual	97,068.595	104,189.605	108,475.510	112,755.370	117,373.750					

Weekend Worker - Nurse II	1885	Hourly	44.952	46.520	48.094	49.734	51.338	53.001	54.061
		Monthly	7,061.232	7,307.565	7,554.739	7,812.323	8,064.366	8,325.644	8,492.050
		Annual	84,734.780	87,690.785	90,656.865	93,747.875	96,772.390	99,907.730	101,904.595
Weekend Worker - Nurse II (20 Year Scale)	1885	Hourly	45.851	47.450	49.057	50.730	52.364	54.061	
		Monthly	7,202.450	7,453.653	7,706.032	7,968.821	8,225.566	8,492.050	
		Annual	86,429.395	89,443.835	92,472.380	95,625.855	98,706.790	101,904.595	
Weekend Worker - Nurse IV	1885	Hourly	48.260	50.048	51.836	53.787	56.022	58.190	60.460
		Monthly	7,580.766	7,861.690	8,142.615	8,449.063	8,800.177	9,140.712	9,497.199
		Annual	90,969.190	94,340.285	97,711.380	101,388.755	105,602.120	109,688.540	113,966.385
Weekend Worker - Nurse IV (20 Year Scale)	1885	Hourly	49.227	51.048	52.873	54.864	57.143	59.353	61.668
		Monthly	7,732.730	8,018.860	8,305.494	8,618.155	8,976.153	9,323.405	9,686.945
		Annual	92,792.765	96,226.325	99,665.930	103,417.860	107,713.840	111,880.860	116,243.335
Weekend Worker - Nurse V	1885	Hourly	50.943	52.893	55.129	57.298	59.664	61.982	64.398
		Monthly	8,002.237	8,308.685	8,659.798	9,000.501	9,372.269	9,736.312	10,115.804
		Annual	96,026.840	99,704.215	103,917.580	108,006.015	112,467.225	116,835.745	121,389.645
Weekend Worker - Nurse V (20 Year Scale)	1885	Hourly	51.962	53.952	56.231	58.444	60.857	63.221	65.686
		Monthly	8,162.429	8,474.922	8,832.920	9,180.508	9,559.664	9,930.928	10,318.143
		Annual	97,949.150	101,699.065	105,995.045	110,166.095	114,715.965	119,171.130	123,817.720

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2019

- Monthly salaries include a 1.4% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification ⁽¹⁾	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	20 Year	
Nursing Instructor 2 - Mental Health	1885	Hourly	36.037	37.256	38.643	40.041	41.511	43.053	44.714	46.472	48.228	49.194
		Monthly	5,660.812	5,852.297	6,070.171	6,289.774	6,520.686	6,762.909	7,023.824	7,299.977	7,575.815	7,727.558
		Annual	67,929.745	70,227.560	72,842.055	75,477.285	78,248.235	81,154.905	84,285.890	87,599.720	90,909.780	92,730.690
Nursing Instructor 3 - Mental Health	1885	Hourly	37.256	38.630	39.993	41.439	42.897	44.463	46.138	47.858	49.686	50.680
		Monthly	5,852.297	6,068.129	6,282.234	6,509.376	6,738.404	6,984.396	7,247.511	7,517.694	7,804.843	7,960.983
		Annual	70,227.560	72,817.550	75,386.805	78,112.515	80,860.845	83,812.755	86,970.130	90,212.330	93,658.110	95,531.800
Nurse Educator	1885	Hourly	39.049	40.473	41.930	43.508	45.324	47.080	48.980	50.966		51.986
		Monthly	6,133.947	6,357.634	6,586.504	6,834.382	7,119.645	7,395.483	7,693.942	8,005.909		8,166.134
		Annual	73,607.365	76,291.605	79,038.050	82,012.580	85,435.740	88,745.800	92,327.300	96,070.910		97,993.610
Nurse II	1885	Hourly	39.635	41.018	42.407	43.851	45.266	46.733				47.667
		Monthly	6,226.014	6,443.298	6,661.422	6,888.278	7,110.599	7,340.981				7,487.740
		Annual	74,712.170	77,319.580	79,937.065	82,659.330	85,327.190	88,091.770				89,852.880
Nurse II (20 Year Scale)	1885	Hourly	40.428	41.839	43.256	44.730	46.171	47.667				
		Monthly	6,350.608	6,572.258	6,794.748	7,026.305	7,252.657	7,487.740				
		Annual	76,207.300	78,867.100	81,536.975	84,315.660	87,031.880	89,852.880				
Nurse IV	1885	Hourly	42.554	44.129	45.707	47.427	49.398	51.308	53.310			54.375
		Monthly	6,684.595	6,931.936	7,179.781	7,449.959	7,759.597	8,059.664	8,374.172			8,541.417
		Annual	80,215.135	83,183.230	86,157.370	89,399.505	93,115.165	96,715.970	100,490.065			102,497.005
Nurse IV (20 Year Scale)	1885	Hourly	43.404	45.011	46.620	48.375	50.386	52.335	54.375			
		Monthly	6,818.088	7,070.467	7,323.182	7,598.901	7,914.752	8,221.032	8,541.417			
		Annual	81,817.060	84,845.605	87,878.180	91,186.810	94,977.025	98,652.385	102,497.005			
Nurse V	1885	Hourly	44.919	46.639	48.610	50.520	52.607	54.652	56.782			57.919
		Monthly	7,056.026	7,326.204	7,635.843	7,935.910	8,263.683	8,584.908	8,919.565			9,098.061
		Annual	84,672.315	87,914.450	91,630.110	95,230.915	99,164.195	103,018.890	107,034.785			109,176.730
Nurse V (20 Year Scale)	1885	Hourly	45.817	47.571	49.582	51.533	53.660	55.744	57.919			
		Monthly	7,197.076	7,472.628	7,788.479	8,094.927	8,429.081	8,756.518	9,098.061			
		Annual	86,364.915	89,671.530	93,461.745	97,139.120	101,148.970	105,078.220	109,176.730			
Nurse Practitioner	1885	Hourly	51.193	54.949	57.210	59.465	61.902					63.140
		Monthly	8,041.529	8,631.588	8,986.732	9,341.036	9,723.718					9,918.166
		Annual	96,498.350	103,579.060	107,840.785	112,092.435	116,684.620					119,017.990
Nurse Practitioner (20 Year Scale)	1885	Hourly	52.216	56.047	58.353	60.654	63.140					
		Monthly	8,202.225	8,804.039	9,166.235	9,527.760	9,918.166					
		Annual	98,426.705	105,648.465	109,994.820	114,333.115	119,017.990					

Weekend Worker - Nurse II	1885	Hourly	45.582	47.171	48.767	50.430	52.056	53.743	54.818
		Monthly	7,160.135	7,409.827	7,660.526	7,921.637	8,177.206	8,442.178	8,610.935
		Annual	85,921.615	88,917.920	91,926.315	95,059.640	98,126.470	101,306.140	103,331.215
Weekend Worker - Nurse II (20 Year Scale)	1885	Hourly	46.494	48.114	49.743	51.440	53.098	54.818	
		Monthly	7,303.368	7,557.929	7,813.834	8,080.318	8,340.757	8,610.935	
		Annual	87,640.410	90,695.150	93,766.010	96,963.815	100,089.080	103,331.215	
Weekend Worker - Nurse IV	1885	Hourly	48.935	50.748	52.562	54.540	56.807	59.005	61.306
		Monthly	7,686.889	7,971.676	8,256.630	8,567.276	8,923.428	9,268.664	9,630.189
		Annual	92,242.670	95,660.110	99,079.565	102,807.315	107,081.130	111,223.970	115,562.265
Weekend Worker - Nurse IV (20 Year Scale)	1885	Hourly	49.916	51.764	53.613	55.632	57.942	60.184	62.531
		Monthly	7,841.037	8,131.197	8,421.693	8,738.887	9,101.755	9,453.876	9,822.621
		Annual	94,092.440	97,574.360	101,060.310	104,866.645	109,221.060	113,446.515	117,871.455
Weekend Worker - Nurse V	1885	Hourly	51.656	53.634	55.900	58.099	60.499	62.850	65.299
		Monthly	8,114.237	8,425.051	8,781.034	9,126.439	9,503.412	9,872.660	10,257.358
		Annual	97,370.845	101,100.610	105,372.410	109,517.265	114,040.940	118,471.925	123,088.290
Weekend Worker - Nurse V (20 Year Scale)	1885	Hourly	52.690	54.708	57.018	59.261	61.709	64.106	66.605
		Monthly	8,276.780	8,593.639	8,956.507	9,308.964	9,693.493	10,069.963	10,462.552
		Annual	99,321.365	103,123.670	107,478.085	111,707.570	116,321.920	120,839.550	125,550.620

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2020

- Monthly salaries include a 0.5% increase
 Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification ⁽¹⁾	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	20 Year	
Nursing Instructor 2 - Mental Health	1885	Hourly	36.217	37.442	38.836	40.241	41.719	43.268	44.938	46.704	48.469	49.440
		Monthly	5,689.087	5,881.514	6,100.488	6,321.190	6,553.360	6,796.682	7,059.011	7,336.420	7,613.672	7,766.200
		Annual	68,269.045	70,578.170	73,205.860	75,854.285	78,640.315	81,560.180	84,708.130	88,037.040	91,364.065	93,194.400
Nursing Instructor 3 - Mental Health	1885	Hourly	37.442	38.823	40.193	41.646	43.111	44.685	46.369	48.097	49.934	50.933
		Monthly	5,881.514	6,098.446	6,313.650	6,541.893	6,772.020	7,019.269	7,283.797	7,555.237	7,843.799	8,000.725
		Annual	70,578.170	73,181.355	75,763.805	78,502.710	81,264.235	84,231.225	87,405.565	90,662.845	94,125.590	96,008.705
Nurse Educator	1885	Hourly	39.244	40.675	42.140	43.726	45.551	47.315	49.225	51.221		52.246
		Monthly	6,164.578	6,389.365	6,619.492	6,868.626	7,155.303	7,432.398	7,732.427	8,045.965		8,206.976
		Annual	73,974.940	76,672.375	79,433.900	82,423.510	85,863.635	89,188.775	92,789.125	96,551.585		98,483.710
Nurse II	1885	Hourly	39.833	41.224	42.619	44.070	45.493	46.967				47.906
		Monthly	6,257.079	6,475.538	6,694.670	6,922.700	7,146.198	7,377.755				7,525.185
		Annual	75,084.945	77,706.460	80,336.035	83,072.405	85,754.370	88,533.055				90,302.225
Nurse II (20 Year Scale)	1885	Hourly	40.630	42.049	43.472	44.953	46.402	47.906				
		Monthly	6,382.345	6,605.170	6,828.667	7,061.400	7,288.927	7,525.185				
		Annual	76,588.135	79,262.040	81,944.005	84,736.795	87,467.120	90,302.225				
Nurse IV	1885	Hourly	42.767	44.349	45.936	47.664	49.645	51.565	53.577			54.647
		Monthly	6,718.010	6,966.527	7,215.715	7,487.236	7,798.386	8,099.964	8,415.983			8,584.068
		Annual	80,616.120	83,598.320	86,588.580	89,846.835	93,580.630	97,199.570	100,991.800			103,008.815
Nurse IV (20 Year Scale)	1885	Hourly	43.621	45.236	46.853	48.617	50.638	52.597	54.647			
		Monthly	6,852.175	7,105.898	7,359.788	7,636.850	7,954.380	8,262.172	8,584.068			
		Annual	82,226.105	85,270.770	88,317.450	91,642.200	95,452.565	99,146.060	103,008.815			
Nurse V	1885	Hourly	45.143	46.872	48.853	50.773	52.870	54.926	57.067			58.208
		Monthly	7,091.289	7,362.810	7,673.960	7,975.538	8,304.990	8,627.894	8,964.231			9,143.566
		Annual	85,095.465	88,353.720	92,087.515	95,706.455	99,659.885	103,534.730	107,570.775			109,722.795
Nurse V (20 Year Scale)	1885	Hourly	46.046	47.809	49.830	51.790	53.928	56.023	58.208			
		Monthly	7,233.010	7,510.073	7,827.435	8,135.395	8,471.228	8,800.345	9,143.566			
		Annual	86,796.125	90,120.875	93,929.225	97,624.735	101,654.735	105,604.135	109,722.795			
Nurse Practitioner	1885	Hourly	51.448	55.224	57.496	59.763	62.212					63.455
		Monthly	8,081.661	8,674.743	9,031.734	9,387.717	9,772.414					9,967.701
		Annual	96,979.935	104,096.915	108,380.805	112,652.605	117,268.970					119,612.415
Nurse Practitioner (20 Year Scale)	1885	Hourly	52.477	56.327	58.645	60.958	63.455					
		Monthly	8,243.197	8,848.033	9,212.076	9,575.448	9,967.701					
		Annual	98,918.365	106,176.395	110,544.915	114,905.375	119,612.415					

Weekend Worker - Nurse II	1885	Hourly	45.809	47.408	49.011	50.682	52.316	54.012	55.091	
		Monthly	7,195.901	7,446.936	7,698.811	7,961.265	8,218.010	8,484.325	8,653.921	
		Annual	86,350.810	89,363.235	92,385.735	95,535.180	98,616.115	101,811.905	103,847.055	
Weekend Worker - Nurse II (20 Year Scale)	1885	Hourly	46.726	48.355	49.992	51.697	53.363	55.091		
		Monthly	7,339.805	7,595.710	7,852.959	8,120.786	8,382.400	8,653.921		
		Annual	88,077.665	91,148.525	94,235.505	97,449.430	100,588.800	103,847.055		
Weekend Worker - Nurse IV	1885	Hourly	49.180	51.001	52.825	54.812	57.091	59.300	61.613	62.843
		Monthly	7,725.342	8,011.472	8,297.938	8,610.095	8,968.093	9,315.009	9,678.381	9,871.653
		Annual	92,704.105	96,137.665	99,575.255	103,321.140	107,617.120	111,780.110	116,140.570	118,459.835
Weekend Worker - Nurse IV (20 Year Scale)	1885	Hourly	50.165	52.022	53.881	55.910	58.232	60.485	62.843	
		Monthly	7,880.161	8,171.833	8,463.840	8,782.545	9,147.260	9,501.229	9,871.653	
		Annual	94,561.935	98,061.990	101,566.075	105,390.545	109,767.125	114,014.745	118,459.835	
Weekend Worker - Nurse V	1885	Hourly	51.914	53.903	56.179	58.390	60.802	63.164	65.625	66.939
		Monthly	8,154.873	8,467.198	8,824.860	9,172.112	9,550.932	9,922.028	10,308.572	10,514.942
		Annual	97,858.475	101,606.375	105,898.325	110,065.345	114,611.185	119,064.335	123,702.865	126,179.300
Weekend Worker - Nurse V (20 Year Scale)	1885	Hourly	52.953	54.981	57.303	59.557	62.018	64.427	66.939	
		Monthly	8,318.088	8,636.626	9,001.341	9,355.477	9,742.021	10,120.338	10,514.942	
		Annual	99,817.055	103,639.510	108,016.090	112,265.725	116,904.255	121,444.050	126,179.300	

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2021

- Monthly salaries include a 1.2% increase
 Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification ⁽¹⁾	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	20 Year	
Nursing Instructor 2 - Mental Health	1885	Hourly	36.652	37.891	39.302	40.724	42.220	43.787	45.477	47.264	49.051	50.033
		Monthly	5,757.418	5,952.045	6,173.689	6,397.062	6,632.058	6,878.208	7,143.679	7,424.387	7,705.095	7,859.350
		Annual	69,089.020	71,424.535	74,084.270	76,764.740	79,584.700	82,538.495	85,724.145	89,092.640	92,461.135	94,312.205
Nursing Instructor 3 - Mental Health	1885	Hourly	37.891	39.289	40.675	42.146	43.628	45.221	46.925	48.674	50.533	51.544
		Monthly	5,952.045	6,171.647	6,389.365	6,620.434	6,853.232	7,103.465	7,371.135	7,645.874	7,937.892	8,096.703
		Annual	71,424.535	74,059.765	76,672.375	79,445.210	82,238.780	85,241.585	88,453.625	91,750.490	95,254.705	97,160.440
Nurse Educator	1885	Hourly	39.715	41.163	42.646	44.251	46.098	47.883	49.816	51.836		52.873
		Monthly	6,238.565	6,466.021	6,698.976	6,951.095	7,241.228	7,521.621	7,825.263	8,142.572		8,305.467
		Annual	74,862.775	77,592.255	80,387.710	83,413.135	86,894.730	90,259.455	93,903.160	97,710.860		99,665.605
Nurse II ⁽²⁾	1885	Hourly	40.311	41.719	43.130	44.599	46.039	47.530	48.481			49.450
		Monthly	6,332.138	6,553.284	6,774.934	7,005.819	7,232.003	7,466.247	7,615.525			7,767.825
		Annual	75,985.650	78,639.405	81,299.205	84,069.830	86,784.035	89,594.960	91,386.295			93,213.900
Nurse II (20 Year Scale) ⁽²⁾	1885	Hourly	41.118	42.553	43.993	45.493	46.959	48.481	49.450			
		Monthly	6,458.915	6,684.427	6,910.610	7,146.198	7,376.411	7,615.525	7,767.825			
		Annual	77,506.975	80,213.120	82,927.325	85,754.370	88,516.935	91,386.295	93,213.900			
Nurse IV ⁽³⁾	1885	Hourly	43.280	44.882	46.487	48.236	50.240	52.184	54.307	56.517		57.647
		Monthly	6,798.610	7,050.149	7,302.360	7,577.072	7,891.915	8,197.188	8,530.670	8,877.922		9,055.410
		Annual	81,583.320	84,601.790	87,628.320	90,924.860	94,702.985	98,366.255	102,368.045	106,535.065		108,664.920
Nurse IV (20 Year Scale) ⁽³⁾	1885	Hourly	44.145	45.780	47.415	49.200	51.245	53.228	55.392	57.647		
		Monthly	6,934.455	7,191.199	7,448.112	7,728.533	8,049.757	8,361.243	8,701.106	9,055.410		
		Annual	83,213.455	86,294.390	89,377.340	92,742.390	96,597.085	100,334.910	104,413.270	108,664.920		
Nurse V	1885	Hourly	45.685	47.434	49.439	51.382	53.505	55.585	57.752			58.906
		Monthly	7,176.423	7,451.134	7,765.978	8,071.250	8,404.733	8,731.499	9,071.866			9,253.216
		Annual	86,117.070	89,413.610	93,191.735	96,855.005	100,856.795	104,777.985	108,862.390			111,038.590
Nurse V (20 Year Scale)	1885	Hourly	46.598	48.384	50.427	52.411	54.575	56.696	58.906			
		Monthly	7,319.823	7,600.244	7,921.301	8,232.954	8,572.818	8,905.964	9,253.216			
		Annual	87,837.880	91,202.930	95,055.610	98,795.450	102,873.810	106,871.570	111,038.590			
Nurse Practitioner	1885	Hourly	52.066	55.887	58.186	60.480	62.958					64.216
		Monthly	8,178.717	8,778.851	9,140.040	9,500.389	9,889.620					10,087.258
		Annual	98,144.605	105,346.215	109,680.480	114,004.670	118,675.440					121,047.095
Nurse Practitioner (20 Year Scale)	1885	Hourly	53.106	57.003	59.348	61.689	64.216					
		Monthly	8,342.100	8,954.156	9,322.565	9,690.303	10,087.258					
		Annual	100,105.200	107,449.875	111,870.785	116,283.635	121,047.095					

Weekend Worker - Nurse II ⁽²⁾	1885	Hourly	46.359	47.976	49.599	51.290	52.944	54.659	55.753	56.868	
		Monthly	7,282.210	7,536.268	7,791.165	8,056.810	8,316.577	8,586.083	8,757.862	8,932.999	
		Annual	87,386.520	90,435.215	93,493.985	96,681.715	99,798.920	103,032.995	105,094.340	107,195.985	
Weekend Worker - Nurse II (20 Year Scale) ⁽²⁾	1885	Hourly	47.287	48.935	50.592	52.317	54.003	55.752	56.868		
		Monthly	7,427.962	7,686.889	7,947.160	8,218.178	8,482.982	8,757.694	8,932.999		
		Annual	89,135.540	92,242.670	95,365.920	98,618.130	101,795.785	105,092.325	107,195.985		
Weekend Worker - Nurse IV ⁽³⁾	1885	Hourly	49.770	51.614	53.459	55.470	57.777	60.012	62.452	64.994	66.293
		Monthly	7,818.032	8,107.688	8,397.513	8,713.364	9,075.728	9,426.842	9,810.195	10,209.501	10,413.520
		Annual	93,816.385	97,292.260	100,770.150	104,560.365	108,908.735	113,122.100	117,722.345	122,514.015	124,962.240
Weekend Worker - Nurse IV (20 Year Scale) ⁽³⁾	1885	Hourly	50.767	52.647	54.528	56.581	58.931	61.211	63.702	66.293	
		Monthly	7,974.698	8,269.896	8,565.429	8,887.997	9,257.078	9,615.244	10,006.490	10,413.520	
		Annual	95,696.380	99,238.750	102,785.150	106,655.965	111,084.935	115,382.930	120,077.880	124,962.240	
Weekend Worker - Nurse V	1885	Hourly	52.538	54.549	56.854	59.090	61.532	63.922	66.413	67.741	
		Monthly	8,252.768	8,568.788	8,930.816	9,282.098	9,665.619	10,041.081	10,432.327	10,641.047	
		Annual	99,033.220	102,825.450	107,169.790	111,385.170	115,987.430	120,492.970	125,187.920	127,692.565	
Weekend Worker - Nurse V (20 Year Scale)	1885	Hourly	53.588	55.641	57.990	60.273	62.762	65.199	67.741		
		Monthly	8,417.830	8,740.230	9,109.311	9,467.813	9,858.891	10,241.741	10,641.047		
		Annual	101,013.965	104,882.765	109,311.735	113,613.760	118,306.695	122,900.895	127,692.565		

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

² New "Year 6" Step-on-Scale for Nurse II Effective April 1, 2021

³ New "Year 7" Step-on-Scale for Nurse III Effective April 1, 2021

**MNU & Winnipeg Health Employer Organization
1950 ANNUAL HOURS- APPENDIX A - SALARIES**

A1. Effective April 1, 2017

- Monthly salaries include a 1.25% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours		Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse / Foot Care LPN	1950	Hourly	28.567	29.502	30.425	31.547	32.574	33.723	34.924		35.622
		Monthly	4,642.056	4,794.021	4,944.138	5,126.328	5,293.237	5,479.960	5,675.080		5,788.591
		Annual	55,704.675	57,528.250	59,329.660	61,515.935	63,518.845	65,759.525	68,100.955		69,463.095
Nurse II / Prenatal Nurse, Psychiatric Nurse, Prenatal Nurse, Foot Care Coordinator	1950	Hourly	37.319	38.621	39.928	41.289	42.620	44.001			44.881
		Monthly	6,064.310	6,275.885	6,488.300	6,709.446	6,925.723	7,150.228			7,293.125
		Annual	72,771.725	75,310.625	77,859.600	80,513.355	83,108.675	85,802.730			87,517.495
Nurse II (20 Year Scale)	1950	Hourly	38.066	39.394	40.727	42.116	43.472	44.881			
		Monthly	6,185.714	6,401.487	6,618.100	6,843.780	7,064.254	7,293.125			
		Annual	74,228.570	76,817.845	79,417.195	82,125.355	84,771.050	87,517.495			
Nurse III / Primary Care Nurse, Team Leader Clinical Resource Nurse, Diabetes Educator Reproductive Health Educator, Senior Prenatal Nurse	1950	Hourly	38.738	40.044	41.408	42.739	43.974	45.320	46.711		47.645
		Monthly	6,294.860	6,507.107	6,728.757	6,945.033	7,145.694	7,364.489	7,590.505		7,742.302
		Annual	75,538.320	78,085.280	80,745.080	83,340.400	85,748.325	88,373.870	91,086.060		92,907.620
Nurse III (20 Year Scale)	1950	Hourly	39.512	40.845	42.235	43.593	44.853	46.227	47.645		
		Monthly	6,420.630	6,637.242	6,863.258	7,083.900	7,288.591	7,511.920	7,742.302		
		Annual	77,047.555	79,646.905	82,359.095	85,006.805	87,463.090	90,143.040	92,907.620		
Nurse V / PHN Coordinator, Community Health Nurse - Sage House Nursing Team Leader	1950	Hourly	42.293	43.914	45.768	47.567	49.533	51.458	53.464		54.533
		Monthly	6,872.661	7,135.955	7,437.365	7,729.708	8,049.085	8,361.914	8,687.840		8,861.634
		Annual	82,471.935	85,631.455	89,248.380	92,756.495	96,589.025	100,342.970	104,254.085		106,339.610
Nurse V (20 Year Scale)	1950	Hourly	43.139	44.791	46.684	48.520	50.524	52.486	54.533		
		Monthly	7,010.017	7,278.516	7,586.139	7,884.527	8,210.118	8,528.991	8,861.634		
		Annual	84,120.205	87,342.190	91,033.670	94,614.325	98,521.410	102,347.895	106,339.610		
Nurse Practitioner / Advanced Nurse Practitioner	1950	Hourly	48.201	51.737	53.866	55.990	58.283				59.449
		Monthly	7,832.641	8,407.252	8,753.160	9,098.397	9,471.004				9,660.414
		Annual	93,991.690	100,887.020	105,037.920	109,180.760	113,652.045				115,924.965
Nurse Practitioner (20 Year Scale)	1950	Hourly	49.164	52.771	54.941	57.109	59.449				
		Monthly	7,989.139	8,575.336	8,927.961	9,280.250	9,660.414				
		Annual	95,869.670	102,904.035	107,135.535	111,363.005	115,924.965				

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2018

- Monthly salaries include a 1.25% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse / Foot Care LPN	1950	Hourly	28.924	29.871	30.806	31.941	32.981	34.144	35.360	36.067
		Monthly	4,700.155	4,853.967	5,005.932	5,190.472	5,359.396	5,548.470	5,745.940	5,860.963
		Annual	56,401.865	58,247.605	60,071.180	62,285.665	64,312.755	66,581.645	68,951.285	70,331.560
Nurse II / Prenatal Nurse, Psychiatric Nurse, Prenatal Nurse, Foot Care Coordinator	1950	Hourly	37.785	39.103	40.427	41.805	43.153	44.551		45.442
		Monthly	6,140.041	6,354.303	6,569.404	6,793.237	7,012.368	7,239.559		7,384.303
		Annual	73,680.490	76,251.630	78,832.845	81,518.840	84,148.415	86,874.710		88,611.640
Nurse II (20 Year Scale)	1950	Hourly	38.541	39.887	41.236	42.642	44.016	45.442		
		Monthly	6,262.956	6,481.583	6,700.883	6,929.249	7,152.578	7,384.303		
		Annual	75,155.470	77,779.000	80,410.590	83,150.990	85,830.940	88,611.640		
Nurse III / Primary Care Nurse, Team Leader Clinical Resource Nurse, Diabetes Educator Reproductive Health Educator, Senior Prenatal Nurse	1950	Hourly	39.222	40.544	41.925	43.273	44.523	45.886	47.295	48.240
		Monthly	6,373.613	6,588.378	6,812.883	7,031.846	7,235.025	7,456.508	7,685.378	7,839.022
		Annual	76,483.355	79,060.540	81,754.595	84,382.155	86,820.305	89,478.090	92,224.535	94,068.260
Nurse III (20 Year Scale)	1950	Hourly	40.006	41.355	42.763	44.138	45.414	46.805	48.240	
		Monthly	6,500.894	6,720.193	6,949.063	7,172.393	7,379.770	7,605.785	7,839.022	
		Annual	78,010.725	80,642.315	83,388.760	86,068.710	88,557.235	91,269.425	94,068.260	
Nurse V / PHN Coordinator, Community Health Nurse - Sage House Nursing Team Leader	1950	Hourly	42.822	44.462	46.341	48.162	50.152	52.101	54.132	55.215
		Monthly	6,958.635	7,225.118	7,530.391	7,826.260	8,149.668	8,466.358	8,796.483	8,972.459
		Annual	83,503.615	86,701.420	90,364.690	93,915.120	97,796.010	101,596.300	105,557.790	107,669.510
Nurse V (20 Year Scale)	1950	Hourly	43.678	45.351	47.268	49.127	51.155	53.142	55.215	
		Monthly	7,097.670	7,369.527	7,681.012	7,983.094	8,312.715	8,635.618	8,972.459	
		Annual	85,172.035	88,434.320	92,172.145	95,797.130	99,752.575	103,627.420	107,669.510	
Nurse Practitioner / Advanced Nurse Practitioner	1950	Hourly	48.803	52.384	54.539	56.690	59.012			60.192
		Monthly	7,930.536	8,512.368	8,862.642	9,212.076	9,589.385			9,781.146
		Annual	95,166.435	102,148.410	106,351.700	110,544.915	115,072.620			117,373.750
Nurse Practitioner (20 Year Scale)	1950	Hourly	49.779	53.431	55.628	57.823	60.192			
		Monthly	8,089.050	8,682.467	9,039.626	9,396.281	9,781.146			
		Annual	97,068.595	104,189.605	108,475.510	112,755.370	117,373.750			

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2019

- Monthly salaries include a 1.4% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse / Foot Care LPN	1950	Hourly	29.329	30.289	31.237	32.389	33.443	34.623	35.855	36.573
		Monthly	4,765.979	4,921.973	5,075.953	5,263.180	5,434.455	5,626.216	5,826.373	5,943.075
		Annual	57,191.745	59,063.680	60,911.435	63,158.160	65,213.460	67,514.590	69,916.470	71,316.895
Nurse II / Prenatal Nurse, Psychiatric Nurse, Prenatal Nurse, Foot Care Coordinator	1950	Hourly	38.314	39.651	40.993	42.389	43.758	45.175		46.078
		Monthly	6,226.014	6,443.298	6,661.422	6,888.278	7,110.599	7,340.981		7,487.740
		Annual	74,712.170	77,319.580	79,937.065	82,659.330	85,327.190	88,091.770		89,852.880
Nurse II (20 Year Scale)	1950	Hourly	39.081	40.445	41.814	43.239	44.632	46.078		
		Monthly	6,350.608	6,572.258	6,794.748	7,026.305	7,252.657	7,487.740		
		Annual	76,207.300	78,867.100	81,536.975	84,315.660	87,031.880	89,852.880		
Nurse III / Primary Care Nurse, Team Leader Clinical Resource Nurse, Diabetes Educator Reproductive Health Educator, Senior Prenatal Nurse	1950	Hourly	39.771	41.111	42.512	43.878	45.146	46.529	47.957	48.916
		Monthly	6,462.777	6,680.565	6,908.260	7,130.245	7,336.279	7,560.952	7,793.013	7,948.839
		Annual	77,553.320	80,166.775	82,899.115	85,562.945	88,035.350	90,731.420	93,516.150	95,386.070
Nurse III (20 Year Scale)	1950	Hourly	40.566	41.934	43.362	44.756	46.049	47.460	48.916	
		Monthly	6,591.905	6,814.226	7,046.287	7,272.807	7,483.038	7,712.245	7,948.839	
		Annual	79,102.855	81,770.715	84,555.445	87,273.680	89,796.460	92,546.935	95,386.070	
Nurse V / PHN Coordinator, Community Health Nurse - Sage House Nursing Team Leader	1950	Hourly	43.422	45.084	46.990	48.836	50.853	52.830	54.890	55.988
		Monthly	7,056.026	7,326.204	7,635.843	7,935.910	8,263.683	8,584.908	8,919.565	9,098.061
		Annual	84,672.315	87,914.450	91,630.110	95,230.915	99,164.195	103,018.890	107,034.785	109,176.730
Nurse V (20 Year Scale)	1950	Hourly	44.290	45.985	47.929	49.815	51.871	53.886	55.988	
		Monthly	7,197.076	7,472.628	7,788.479	8,094.927	8,429.081	8,756.518	9,098.061	
		Annual	86,364.915	89,671.530	93,461.745	97,139.120	101,148.970	105,078.220	109,176.730	
Nurse Practitioner / Advanced Nurse Practitioner	1950	Hourly	49.486	53.117	55.303	57.483	59.838			61.035
		Monthly	8,041.529	8,631.588	8,986.732	9,341.036	9,723.718			9,918.166
		Annual	96,498.350	103,579.060	107,840.785	112,092.435	116,684.620			119,017.990
Nurse Practitioner (20 Year Scale)	1950	Hourly	50.475	54.179	56.408	58.632	61.035			
		Monthly	8,202.225	8,804.039	9,166.235	9,527.760	9,918.166			
		Annual	98,426.705	105,648.465	109,994.820	114,333.115	119,017.990			

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2020

- Monthly salaries include a 0.5% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse / Foot Care LPN	1950	Hourly	29.476	30.441	31.393	32.551	33.610	34.796	36.033	36.756
		Monthly	4,789.823	4,946.657	5,101.308	5,289.543	5,461.658	5,654.426	5,855.422	5,972.796
		Annual	57,477.875	59,359.885	61,215.700	63,474.515	65,539.890	67,853.110	70,265.065	71,673.550
Nurse II / Prenatal Nurse, Psychiatric Nurse, Prenatal Nurse, Foot Care Coordinator	1950	Hourly	38.505	39.849	41.198	42.601	43.977	45.402		46.309
		Monthly	6,257.079	6,475.538	6,694.670	6,922.700	7,146.198	7,377.755		7,525.185
		Annual	75,084.945	77,706.460	80,336.035	83,072.405	85,754.370	88,533.055		90,302.225
Nurse II (20 Year Scale)	1950	Hourly	39.276	40.647	42.023	43.455	44.855	46.309		
		Monthly	6,382.345	6,605.170	6,828.667	7,061.400	7,288.927	7,525.185		
		Annual	76,588.135	79,262.040	81,944.005	84,736.795	87,467.120	90,302.225		
Nurse III / Primary Care Nurse, Team Leader Clinical Resource Nurse, Diabetes Educator Reproductive Health Educator, Senior Prenatal Nurse	1950	Hourly	39.969	41.317	42.725	44.098	45.372	46.761	48.197	49.161
		Monthly	6,495.017	6,713.980	6,942.850	7,165.844	7,372.885	7,598.733	7,831.969	7,988.635
		Annual	77,940.200	80,567.760	83,314.205	85,990.125	88,474.620	91,184.795	93,983.630	95,863.625
Nurse III (20 Year Scale)	1950	Hourly	40.768	42.143	43.579	44.980	46.280	47.698	49.161	
		Monthly	6,624.816	6,848.313	7,081.550	7,309.245	7,520.484	7,750.865	7,988.635	
		Annual	79,497.795	82,179.760	84,978.595	87,710.935	90,245.805	93,010.385	95,863.625	
Nurse V / PHN Coordinator, Community Health Nurse - Sage House Nursing Team Leader	1950	Hourly	43.639	45.310	47.224	49.080	51.108	53.095	55.165	56.268
		Monthly	7,091.289	7,362.810	7,673.960	7,975.538	8,304.990	8,627.894	8,964.231	9,143.566
		Annual	85,095.465	88,353.720	92,087.515	95,706.455	99,659.885	103,534.730	107,570.775	109,722.795
Nurse V (20 Year Scale)	1950	Hourly	44.511	46.216	48.169	50.064	52.131	54.156	56.268	
		Monthly	7,233.010	7,510.073	7,827.435	8,135.395	8,471.228	8,800.345	9,143.566	
		Annual	86,796.125	90,120.875	93,929.225	97,624.735	101,654.735	105,604.135	109,722.795	
Nurse Practitioner / Advanced Nurse Practitioner	1950	Hourly	49.733	53.383	55.580	57.771	60.138			61.340
		Monthly	8,081.661	8,674.743	9,031.734	9,387.717	9,772.414			9,967.701
		Annual	96,979.935	104,096.915	108,380.805	112,652.605	117,268.970			119,612.415
Nurse Practitioner (20 Year Scale)	1950	Hourly	50.727	54.449	56.690	58.926	61.340			
		Monthly	8,243.197	8,848.033	9,212.076	9,575.448	9,967.701			
		Annual	98,918.365	106,176.395	110,544.915	114,905.375	119,612.415			

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2021

- Monthly salaries include a 1.2% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification ⁽¹⁾	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse / ⁽¹⁾ Foot Care LPN	1950	Hourly	29.829	30.807	31.770	32.942	34.013	35.214	36.465	37.560	38.311
		Monthly	4,847.250	5,006.100	5,162.598	5,353.015	5,527.145	5,722.264	5,925.611	6,103.435	6,225.510
		Annual	58,167.005	60,073.195	61,951.175	64,236.185	66,325.740	68,667.170	71,107.335	73,241.220	74,706.125
Nurse II / ⁽²⁾ Prenatal Nurse, Psychiatric Nurse, Prenatal Nurse, Foot Care Coordinator	1950	Hourly	38.967	40.328	41.692	43.113	44.505	45.946	46.865		47.802
		Monthly	6,332.138	6,553.284	6,774.934	7,005.819	7,232.003	7,466.247	7,615.525		7,767.825
		Annual	75,985.650	78,639.405	81,299.205	84,069.830	86,784.035	89,594.960	91,386.295		93,213.900
Nurse II (20 Year Scale) ⁽²⁾	1950	Hourly	39.747	41.135	42.527	43.977	45.393	46.865	47.802		
		Monthly	6,458.915	6,684.427	6,910.610	7,146.198	7,376.411	7,615.525	7,767.825		
		Annual	77,506.975	80,213.120	82,927.325	85,754.370	88,516.935	91,386.295	93,213.900		
Nurse III / Primary Care Nurse, Team Leader ⁽³⁾ Clinical Resource Nurse, Diabetes Educator Reproductive Health Educator, Senior Prenatal Nurse	1950	Hourly	40.449	41.813	43.238	44.627	45.916	47.323	48.775	49.751	50.746
		Monthly	6,572.930	6,794.580	7,026.137	7,251.817	7,461.377	7,689.912	7,926.003	8,084.516	8,246.220
		Annual	78,875.160	81,534.960	84,313.645	87,021.805	89,536.525	92,278.940	95,112.030	97,014.190	98,954.635
Nurse III (20 Year Scale) ⁽³⁾	1950	Hourly	41.257	42.649	44.102	45.519	46.835	48.270	49.751	50.746	
		Monthly	6,704.241	6,930.425	7,166.515	7,396.897	7,610.655	7,843.891	8,084.516	8,246.220	
		Annual	80,450.890	83,165.095	85,998.185	88,762.765	91,327.860	94,126.695	97,014.190	98,954.635	
Nurse V / PHN Coordinator, Community Health Nurse - Sage House Nursing Team Leader	1950	Hourly	44.163	45.853	47.791	49.669	51.721	53.732	55.827		56.943
		Monthly	7,176.423	7,451.134	7,765.978	8,071.250	8,404.733	8,731.499	9,071.866		9,253.216
		Annual	86,117.070	89,413.610	93,191.735	96,855.005	100,856.795	104,777.985	108,862.390		111,038.590
Nurse V (20 Year Scale)	1950	Hourly	45.045	46.771	48.746	50.664	52.756	54.806	56.943		
		Monthly	7,319.823	7,600.244	7,921.301	8,232.954	8,572.818	8,905.964	9,253.216		
		Annual	87,837.880	91,202.930	95,055.610	98,795.450	102,873.810	106,871.570	111,038.590		
Nurse Practitioner / Advanced Nurse Practitioner	1950	Hourly	50.331	54.024	56.246	58.464	60.859				62.075
		Monthly	8,178.717	8,778.851	9,140.040	9,500.389	9,889.620				10,087.258
		Annual	98,144.605	105,346.215	109,680.480	114,004.670	118,675.440				121,047.095
Nurse Practitioner (20 Year Scale)	1950	Hourly	51.336	55.103	57.370	59.633	62.075				
		Monthly	8,342.100	8,954.156	9,322.565	9,690.303	10,087.258				
		Annual	100,105.200	107,449.875	111,870.785	116,283.635	121,047.095				

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.² New 'Year 7' Step-on-Scale for Licensed Practical Nurse Effective April 1, 2021³ New 'Year 6' Step-on-Scale for Nurse II Effective April 1, 2021⁴ New 'Year 7' Step-on-Scale for Nurse III Effective April 1, 2021

MNU & Winnipeg Health Employer Organization
APPENDIX "A" - SALARIES

A1. Effective April 1, 2017

- Monthly salaries include a 1.25% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse / ORT I	2015	Hourly	27.645	28.550	29.444	30.529	31.523	32.635	33.797	34.473	
		Monthly	4,642.056	4,794.021	4,944.138	5,126.328	5,293.237	5,479.960	5,675.080	5,788.591	
		Annual	55,704.675	57,528.250	59,329.660	61,515.935	63,518.845	65,759.525	68,100.955	69,463.095	
ORT II	2015	Hourly	29.444	30.529	31.523	32.644	33.679	34.729	35.801	36.517	
		Monthly	4,944.138	5,126.328	5,293.237	5,481.472	5,655.265	5,831.578	6,011.585	6,131.813	
		Annual	59,329.660	61,515.935	63,518.845	65,777.660	67,863.185	69,978.935	72,139.015	73,581.755	
Nurse II	2015	Hourly	36.115	37.375	38.640	39.957	41.245	42.582	43.433	43.433	
		Monthly	6,064.310	6,275.885	6,488.300	6,709.446	6,925.723	7,150.228	7,293.125	7,293.125	
		Annual	72,771.725	75,310.625	77,859.600	80,513.355	83,108.675	85,802.730	87,517.495	87,517.495	
Nurse II (20 Year Scale)	2015	Hourly	36.838	38.123	39.413	40.757	42.070	43.433	43.433	43.433	
		Monthly	6,185.714	6,401.487	6,618.100	6,843.780	7,064.254	7,293.125	7,293.125	7,293.125	
		Annual	74,228.570	76,817.845	79,417.195	82,125.355	84,771.050	87,517.495	87,517.495	87,517.495	
Nurse III	2015	Hourly	37.488	38.752	40.072	41.360	42.555	43.858	45.204	46.108	
		Monthly	6,294.860	6,507.107	6,728.757	6,945.033	7,145.694	7,364.489	7,590.505	7,742.302	
		Annual	75,538.320	78,085.280	80,745.080	83,340.400	85,748.325	88,373.870	91,086.060	92,907.620	
Nurse III (20 Year Scale)	2015	Hourly	38.237	39.527	40.873	42.187	43.406	44.736	46.108	46.108	
		Monthly	6,420.630	6,637.242	6,863.258	7,083.900	7,288.591	7,511.920	7,742.302	7,742.302	
		Annual	77,047.555	79,646.905	82,359.095	85,006.805	87,463.090	90,143.040	92,907.620	92,907.620	
Nurse III - WRHA Community PIO	2015	Hourly	36.766	37.999	39.315	40.572	41.737	42.994	44.333	45.219	
		Monthly	6,173.624	6,380.665	6,601.644	6,812.715	7,008.338	7,219.409	7,444.250	7,593.024	
		Annual	74,083.490	76,567.985	79,219.725	81,752.580	84,100.055	86,632.910	89,330.995	91,116.285	
Nurse IV St. B, Grace, Victoria, Riverview- ICP, Misericordia ICP, OESH- PIO	2015	Hourly	38.774	40.209	41.647	43.214	45.010	46.751	48.575	49.546	
		Monthly	6,510.801	6,751.761	6,993.225	7,256.351	7,557.929	7,850.272	8,156.552	8,319.599	
		Annual	78,129.610	81,021.135	83,918.705	87,076.210	90,695.150	94,203.265	97,878.625	99,835.190	
Nurse IV (20 Year Scale) St. B, Grace, Victoria, Riverview- ICP, Misericordia ICP, OESH- PIO	2015	Hourly	39.549	41.013	42.479	44.078	45.910	47.687	49.546	49.546	
		Monthly	6,640.936	6,886.766	7,132.932	7,401.431	7,709.054	8,007.442	8,319.599	8,319.599	
		Annual	79,691.235	82,641.195	85,595.185	88,817.170	92,508.650	96,089.305	99,835.190	99,835.190	
Nurse IV - HSC	2015	Hourly	38.774	40.209	41.647	43.214	45.010	46.751	48.653	50.633	51.646
		Monthly	6,510.801	6,751.761	6,993.225	7,256.351	7,557.929	7,850.272	8,169.650	8,502.125	8,672.224
		Annual	78,129.610	81,021.135	83,918.705	87,076.210	90,695.150	94,203.265	98,035.795	102,025.495	104,066.690
Nurse IV - HSC (20 Year Scale)	2015	Hourly	39.549	41.013	42.479	44.078	45.910	47.687	49.626	51.646	
		Monthly	6,640.936	6,886.766	7,132.932	7,401.431	7,709.054	8,007.442	8,333.033	8,672.224	
		Annual	79,691.235	82,641.195	85,595.185	88,817.170	92,508.650	96,089.305	99,996.390	104,066.690	

ICP-Clinical Team Leader / Infection Control Specialist	2015	Hourly	40.845	43.194	45.787	48.378	50.969	53.560	54.631	
		Monthly	6,858.556	7,252.993	7,688.400	8,123.473	8,558.545	8,993.617	9,173.455	
		Annual	82,302.675	87,035.910	92,260.805	97,481.670	102,702.535	107,923.400	110,081.465	
ICP-Clinical Team Leader / Infection Control Specialist (20 Year Scale)	2015	Hourly	41.662	44.058	46.703	49.345	51.988	54.631		
		Monthly	6,995.744	7,398.073	7,842.212	8,285.848	8,729.652	9,173.455		
		Annual	83,948.930	88,776.870	94,106.545	99,430.175	104,755.820	110,081.465		
Nurse V	2015	Hourly	40.929	42.497	44.292	46.033	47.935	49.798	51.739	52.774
		Monthly	6,872.661	7,135.955	7,437.365	7,729.708	8,049.085	8,361.914	8,687.840	8,861.634
		Annual	82,471.935	85,631.455	89,248.380	92,756.495	96,589.025	100,342.970	104,254.085	106,339.610
Nurse V (20 Year Scale)	2015	Hourly	41.747	43.346	45.178	46.955	48.894	50.793	52.774	
		Monthly	7,010.017	7,278.516	7,586.139	7,884.527	8,210.118	8,528.991	8,861.634	
		Annual	84,120.205	87,342.190	91,033.670	94,614.325	98,521.410	102,347.895	106,339.610	
Clinical Nurse Specialist	2015	Hourly	46.646	50.068	52.128	54.184	56.403		57.531	
		Monthly	7,832.641	8,407.252	8,753.160	9,098.397	9,471.004		9,660.414	
		Annual	93,991.690	100,887.020	105,037.920	109,180.760	113,652.045		115,924.965	
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	47.578	51.069	53.169	55.267	57.531			
		Monthly	7,989.139	8,575.336	8,927.961	9,280.250	9,660.414			
		Annual	95,869.670	102,904.035	107,135.535	111,363.005	115,924.965			
Nurse Practitioner	2015	Hourly	46.646	50.068	52.128	54.184	56.403		57.531	
		Monthly	7,832.641	8,407.252	8,753.160	9,098.397	9,471.004		9,660.414	
		Annual	93,991.690	100,887.020	105,037.920	109,180.760	113,652.045		115,924.965	
Nurse Practitioner (20 Year Scale)	2015	Hourly	47.578	51.069	53.169	55.267	57.531			
		Monthly	7,989.139	8,575.336	8,927.961	9,280.250	9,660.414			
		Annual	95,869.670	102,904.035	107,135.535	111,363.005	115,924.965			
Licensed Practical Nurse - Churchill	2015	Hourly	28.963	29.910	30.845	31.982	33.025	34.189	35.406	36.114
		Monthly	4,863.370	5,022.388	5,179.390	5,370.311	5,545.448	5,740.903	5,945.258	6,064.143
		Annual	58,360.445	60,268.650	62,152.675	64,443.730	66,545.375	68,890.835	71,343.090	72,769.710
Nurse II - Churchill	2015	Hourly	37.835	39.155	40.480	41.860	43.209	44.605	45.497	
		Monthly	6,353.127	6,574.777	6,797.267	7,028.992	7,255.511	7,489.923	7,639.705	
		Annual	76,237.525	78,897.325	81,567.200	84,347.900	87,066.135	89,879.075	91,676.455	
Nurse II (20 Year Scale) - Churchill	2015	Hourly	38.591	39.938	41.290	42.697	44.074	45.497		
		Monthly	6,480.072	6,706.256	6,933.279	7,169.538	7,400.759	7,639.705		
		Annual	77,760.865	80,475.070	83,199.350	86,034.455	88,809.110	91,676.455		
Nurse III - Churchill	2015	Hourly	39.273	40.597	41.979	43.329	44.581	45.947	47.357	48.303
		Monthly	6,594.591	6,816.913	7,048.974	7,275.661	7,485.893	7,715.267	7,952.030	8,110.879
		Annual	79,135.095	81,802.955	84,587.685	87,307.935	89,830.715	92,583.205	95,424.355	97,330.545
Nurse III (20 Year Scale) - Churchill	2015	Hourly	40.059	41.409	42.820	44.196	45.473	46.867	48.303	
		Monthly	6,726.574	6,953.261	7,190.192	7,421.245	7,635.675	7,869.750	8,110.879	
		Annual	80,718.885	83,439.135	86,282.300	89,054.940	91,628.095	94,437.005	97,330.545	

Nurse IV - Churchill	2015	Hourly	40.620	42.124	43.630	45.272	47.152	48.978	50.887	51.905
		Monthly	6,820.775	7,073.322	7,326.204	7,601.923	7,917.607	8,224.223	8,544.775	8,715.715
		Annual	81,849.300	84,879.860	87,914.450	91,223.080	95,011.280	98,690.670	102,537.305	104,588.575
Nurse IV (20 Year Scale) - Churchill	2015	Hourly	41.433	42.966	44.502	46.177	48.096	49.958	51.905	
		Monthly	6,957.291	7,214.708	7,472.628	7,753.888	8,076.120	8,388.781	8,715.715	
		Annual	83,487.495	86,576.490	89,671.530	93,046.655	96,913.440	100,665.370	104,588.575	
Nurse V - Churchill	2015	Hourly	42.878	44.520	46.401	48.225	50.218	52.169	54.202	55.287
		Monthly	7,199.931	7,475.650	7,791.501	8,097.781	8,432.439	8,760.045	9,101.419	9,283.609
		Annual	86,399.170	89,707.800	93,498.015	97,173.375	101,189.270	105,120.535	109,217.030	111,403.305
Nurse V (20 Year Scale) - Churchill	2015	Hourly	43.736	45.411	47.328	49.190	51.222	53.212	55.287	
		Monthly	7,344.003	7,625.264	7,947.160	8,259.821	8,601.028	8,935.182	9,283.609	
		Annual	88,128.040	91,503.165	95,365.920	99,117.850	103,212.330	107,222.180	111,403.305	
Nurse Practitioner - Churchill	2015	Hourly	48.867	52.453	54.609	56.764	59.088			60.270
		Monthly	8,205.584	8,807.733	9,169.761	9,531.622	9,921.860			10,120.338
		Annual	98,467.005	105,692.795	110,037.135	114,379.460	119,062.320			121,444.050
Nurse Practitioner (20 Year Scale) - Churchill	2015	Hourly	49.844	53.502	55.702	57.899	60.270			
		Monthly	8,369.638	8,983.878	9,353.294	9,722.207	10,120.338			
		Annual	100,435.660	107,806.530	112,239.530	116,666.485	121,444.050			
Weekend Worker - Licensed Practical Nurse / ORT I	2015	Hourly	31.793	32.833	33.860	35.107	36.253	37.529	38.866	39.643
		Monthly	5,338.575	5,513.208	5,685.658	5,895.050	6,087.483	6,301.745	6,526.249	6,656.720
		Annual	64,062.895	66,158.495	68,227.900	70,740.605	73,049.795	75,620.935	78,314.990	79,880.645
Weekend Worker Rates - ORT II	2015	Hourly	33.860	35.107	36.253	37.540	38.730	39.938	41.170	41.994
		Monthly	5,685.658	5,895.050	6,087.483	6,303.592	6,503.413	6,706.256	6,913.129	7,051.493
		Annual	68,227.900	70,740.605	73,049.795	75,643.100	78,040.950	80,475.070	82,957.550	84,617.910
Weekend Worker - Nurse II	2015	Hourly	41.533	42.982	44.436	45.951	47.433	48.970		49.949
		Monthly	6,974.083	7,217.394	7,461.545	7,715.939	7,964.791	8,222.879		8,387.270
		Annual	83,688.995	86,608.730	89,538.540	92,591.265	95,577.495	98,674.550		100,647.235
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	42.363	43.841	45.325	46.871	48.381	49.949		
		Monthly	7,113.454	7,361.635	7,610.823	7,870.422	8,123.976	8,387.270		
		Annual	85,361.445	88,339.615	91,329.875	94,445.065	97,487.715	100,647.235		
Weekend Worker - Nurse III	2015	Hourly	43.111	44.565	46.082	47.563	48.938	50.438	51.985	53.025
		Monthly	7,239.055	7,483.206	7,737.936	7,986.620	8,217.506	8,469.381	8,729.148	8,903.781
		Annual	86,868.665	89,798.475	92,855.230	95,839.445	98,610.070	101,632.570	104,749.775	106,845.375
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	43.973	45.456	47.004	48.515	49.917	51.446	53.025	
		Monthly	7,383.800	7,632.820	7,892.755	8,146.477	8,381.896	8,638.641	8,903.781	
		Annual	88,605.595	91,593.840	94,713.060	97,757.725	100,582.755	103,663.690	106,845.375	
Weekend Worker - Nurse IV	2015	Hourly	44.589	46.241	47.893	49.696	51.761	53.764	55.861	56.977
		Monthly	7,487.236	7,764.635	8,042.033	8,344.787	8,691.535	9,027.872	9,379.993	9,567.388
		Annual	89,846.835	93,175.615	96,504.395	100,137.440	104,298.415	108,334.460	112,559.915	114,808.655
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	45.482	47.165	48.851	50.690	52.796	54.839	56.977	
		Monthly	7,637.186	7,919.790	8,202.897	8,511.696	8,865.328	9,208.382	9,567.388	
		Annual	91,646.230	95,037.475	98,434.765	102,140.350	106,383.940	110,500.585	114,808.655	

Weekend Worker - Nurse IV-HSC	2015	Hourly	44.589	46.241	47.893	49.696	51.761	53.764	55.951	58.228	59.392
		Monthly	7,487.236	7,764.635	8,042.033	8,344.787	8,691.535	9,027.872	9,395.105	9,777.452	9,972.907
		Annual	89,846.835	93,175.615	96,504.395	100,137.440	104,298.415	108,334.460	112,741.265	117,329.420	119,674.880
Weekend Worker - Nurse IV-HSC (20 Year Scale)	2015	Hourly	45.482	47.165	48.851	50.690	52.796	54.839	57.070	59.392	
		Monthly	7,637.186	7,919.790	8,202.897	8,511.696	8,865.328	9,208.382	9,583.004	9,972.907	
		Annual	91,646.230	95,037.475	98,434.765	102,140.350	106,383.940	110,500.585	114,996.050	119,674.880	
Weekend Worker - Nurse V	2015	Hourly	47.068	48.870	50.935	52.939	55.126	57.267	59.499	60.689	
		Monthly	7,903.502	8,206.088	8,552.835	8,889.340	9,256.574	9,616.084	9,990.874	10,190.695	
		Annual	94,842.020	98,473.050	102,634.025	106,672.085	111,078.890	115,393.005	119,890.485	122,288.335	
Weekend Worker - Nurse V (20 Year Scale)	2015	Hourly	48.010	49.848	51.954	53.998	56.228	58.412	60.689		
		Monthly	8,061.679	8,370.310	8,723.943	9,067.164	9,441.618	9,808.348	10,190.695		
		Annual	96,740.150	100,443.720	104,687.310	108,805.970	113,299.420	117,700.180	122,288.335		
Weekend Worker - Licensed Practical Nurse -	2015	Hourly	33.306	34.397	35.472	36.780	37.979	39.317	40.717	41.532	
		Monthly	5,592.633	5,775.830	5,956.340	6,175.975	6,377.307	6,601.980	6,837.063	6,973.915	
		Annual	67,111.590	69,309.955	71,476.080	74,111.700	76,527.685	79,223.755	82,044.755	83,686.980	
Weekend Worker - Nurse II - Churchill	2015	Hourly	43.510	45.029	46.552	48.139	49.691	51.295		52.321	
		Monthly	7,306.054	7,561.120	7,816.857	8,083.340	8,343.947	8,613.285		8,785.568	
		Annual	87,672.650	90,733.435	93,802.280	97,000.085	100,127.365	103,359.425		105,426.815	
Weekend Worker - Nurse II (20 Year Scale) - C1	2015	Hourly	44.380	45.929	47.483	49.102	50.685	52.321			
		Monthly	7,452.142	7,712.245	7,973.187	8,245.044	8,510.856	8,785.568			
		Annual	89,425.700	92,546.935	95,678.245	98,940.530	102,130.275	105,426.815			
Weekend Worker - Nurse III - Churchill	2015	Hourly	45.164	46.687	48.277	49.828	51.269	52.839	54.460	55.549	
		Monthly	7,583.788	7,839.525	8,106.513	8,366.952	8,608.920	8,872.549	9,144.742	9,327.603	
		Annual	91,005.460	94,074.305	97,278.155	100,403.420	103,307.035	106,470.585	109,736.900	111,931.235	
Weekend Worker - Nurse III (20 Year Scale) - C	2015	Hourly	46.067	47.621	49.242	50.825	52.295	53.896	55.549		
		Monthly	7,735.417	7,996.360	8,268.553	8,534.365	8,781.202	9,050.037	9,327.603		
		Annual	92,825.005	95,956.315	99,222.630	102,412.375	105,374.425	108,600.440	111,931.235		
Weekend Worker - Nurse IV - Churchill	2015	Hourly	46.713	48.442	50.174	52.063	54.225	56.324	58.520	59.691	
		Monthly	7,843.891	8,134.219	8,425.051	8,742.245	9,105.281	9,457.738	9,826.483	10,023.114	
		Annual	94,126.695	97,610.630	101,100.610	104,906.945	109,263.375	113,492.860	117,917.800	120,277.365	
Weekend Worker - Nurse IV (20 Year Scale) - C1	2015	Hourly	47.647	49.411	51.178	53.104	55.310	57.451	59.691		
		Monthly	8,000.725	8,296.930	8,593.639	8,917.047	9,287.471	9,646.980	10,023.114		
		Annual	96,008.705	99,563.165	103,123.670	107,004.560	111,449.650	115,763.765	120,277.365		
Weekend Worker - Nurse V - Churchill	2015	Hourly	49.310	51.198	53.361	55.460	57.751	59.994	62.333	63.579	
		Monthly	8,279.971	8,596.998	8,960.201	9,312.658	9,697.355	10,073.993	10,466.750	10,675.974	
		Annual	99,359.650	103,163.970	107,522.415	111,751.900	116,368.265	120,887.910	125,600.995	128,111.685	
Weekend Worker - Nurse V (20 Year Scale) - C1	2015	Hourly	50.296	52.222	54.428	56.568	58.905	61.193	63.579		
		Monthly	8,445.537	8,768.944	9,139.368	9,498.710	9,891.131	10,275.325	10,675.974		
		Annual	101,346.440	105,227.330	109,672.420	113,984.520	118,693.575	123,303.895	128,111.685		

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

APPENDIX "A" - SALARIES

A1. Effective April 1, 2018

- Monthly salaries include a 1.25% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse / ORT I	2015	Hourly	27.991	28.907	29.812	30.911	31.917	33.043	34.219	34.904	
		Monthly	4,700.155	4,853.967	5,005.932	5,190.472	5,359.396	5,548.470	5,745.940	5,860.963	
		Annual	56,401.865	58,247.605	60,071.180	62,285.665	64,312.755	66,581.645	68,951.285	70,331.560	
ORT II	2015	Hourly	29.812	30.911	31.917	33.052	34.100	35.163	36.249	36.973	
		Monthly	5,005.932	5,190.472	5,359.396	5,549.982	5,725.958	5,904.454	6,086.811	6,208.383	
		Annual	60,071.180	62,285.665	64,312.755	66,599.780	68,711.500	70,853.445	73,041.735	74,500.595	
Nurse II	2015	Hourly	36.566	37.842	39.123	40.456	41.761	43.114		43.976	
		Monthly	6,140.041	6,354.303	6,569.404	6,793.237	7,012.368	7,239.559		7,384.303	
		Annual	73,680.490	76,251.630	78,832.845	81,518.840	84,148.415	86,874.710		88,611.640	
Nurse II (20 Year Scale)	2015	Hourly	37.298	38.600	39.906	41.266	42.596	43.976			
		Monthly	6,262.956	6,481.583	6,700.883	6,929.249	7,152.578	7,384.303			
		Annual	75,155.470	77,779.000	80,410.590	83,150.990	85,830.940	88,611.640			
Nurse III	2015	Hourly	37.957	39.236	40.573	41.877	43.087	44.406	45.769	46.684	
		Monthly	6,373.613	6,588.378	6,812.883	7,031.846	7,235.025	7,456.508	7,685.378	7,839.022	
		Annual	76,483.355	79,060.540	81,754.595	84,382.155	86,820.305	89,478.090	92,224.535	94,068.260	
Nurse III (20 Year Scale)	2015	Hourly	38.715	40.021	41.384	42.714	43.949	45.295	46.684		
		Monthly	6,500.894	6,720.193	6,949.063	7,172.393	7,379.770	7,605.785	7,839.022		
		Annual	78,010.725	80,642.315	83,388.760	86,068.710	88,557.235	91,269.425	94,068.260		
Nurse III - WRHA Community PIO	2015	Hourly	37.226	38.474	39.806	41.079	42.259	43.531	44.887	45.784	
		Monthly	6,250.866	6,460.426	6,684.091	6,897.849	7,095.990	7,309.580	7,537.275	7,687.897	
		Annual	75,010.390	77,525.110	80,209.090	82,774.185	85,151.885	87,714.965	90,447.305	92,254.760	
Nurse IV St. B, Grace, Victoria, Riverview- ICP, Misericordia ICP, OESH- PIO	2015	Hourly	39.259	40.712	42.168	43.754	45.573	47.335	49.182	50.165	
		Monthly	6,592.240	6,836.223	7,080.710	7,347.026	7,652.466	7,948.335	8,258.478	8,423.540	
		Annual	79,106.885	82,034.680	84,968.520	88,164.310	91,829.595	95,380.025	99,101.730	101,082.475	
Nurse IV (20 Year Scale) St. B, Grace, Victoria, Riverview- ICP, Misericordia ICP, OESH- PIO	2015	Hourly	40.043	41.526	43.010	44.629	46.484	48.283	50.165		
		Monthly	6,723.887	6,972.908	7,222.096	7,493.953	7,805.438	8,107.520	8,423.540		
		Annual	80,686.645	83,674.890	86,665.150	89,927.435	93,665.260	97,290.245	101,082.475		
Nurse IV - HSC	2015	Hourly	39.259	40.712	42.168	43.754	45.573	47.335	49.261	51.266	52.292
		Monthly	6,592.240	6,836.223	7,080.710	7,347.026	7,652.466	7,948.335	8,271.743	8,608.416	8,780.698
		Annual	79,106.885	82,034.680	84,968.520	88,164.310	91,829.595	95,380.025	99,260.915	103,300.990	105,368.380
Nurse IV - HSC (20 Year Scale)	2015	Hourly	40.043	41.526	43.010	44.629	46.484	48.283	50.246	52.292	
		Monthly	6,723.887	6,972.908	7,222.096	7,493.953	7,805.438	8,107.520	8,437.141	8,780.698	
		Annual	80,686.645	83,674.890	86,665.150	89,927.435	93,665.260	97,290.245	101,245.690	105,368.380	

ICP-Clinical Team Leader / Infection Control Specialist	2015	Hourly	41.356	43.734	46.359	48.983	51.606	54.230	55.314	
		Monthly	6,944.362	7,343.668	7,784.449	8,225.062	8,665.508	9,106.121	9,288.143	
		Annual	83,332.340	88,124.010	93,413.385	98,700.745	103,986.090	109,273.450	111,457.710	
ICP-Clinical Team Leader / Infection Control Specialist (20 Year Scale)	2015	Hourly	42.183	44.609	47.287	49.962	52.638	55.314		
		Monthly	7,083.229	7,490.595	7,940.275	8,389.453	8,838.798	9,288.143		
		Annual	84,998.745	89,887.135	95,283.305	100,673.430	106,065.570	111,457.710		
Nurse V	2015	Hourly	41.441	43.028	44.846	46.608	48.534	50.420	52.386	53.434
		Monthly	6,958.635	7,225.118	7,530.391	7,826.260	8,149.668	8,466.358	8,796.483	8,972.459
		Annual	83,503.615	86,701.420	90,364.690	93,915.120	97,796.010	101,596.300	105,557.790	107,669.510
Nurse V (20 Year Scale)	2015	Hourly	42.269	43.888	45.743	47.542	49.505	51.428	53.434	
		Monthly	7,097.670	7,369.527	7,681.012	7,983.094	8,312.715	8,635.618	8,972.459	
		Annual	85,172.035	88,434.320	92,172.145	95,797.130	99,752.575	103,627.420	107,669.510	
Clinical Nurse Specialist	2015	Hourly	47.229	50.694	52.780	54.861	57.108		58.250	
		Monthly	7,930.536	8,512.368	8,862.642	9,212.076	9,589.385		9,781.146	
		Annual	95,166.435	102,148.410	106,351.700	110,544.915	115,072.620		117,373.750	
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	48.173	51.707	53.834	55.958	58.250			
		Monthly	8,089.050	8,682.467	9,039.626	9,396.281	9,781.146			
		Annual	97,068.595	104,189.605	108,475.510	112,755.370	117,373.750			
Nurse Practitioner	2015	Hourly	47.229	50.694	52.780	54.861	57.108		58.250	
		Monthly	7,930.536	8,512.368	8,862.642	9,212.076	9,589.385		9,781.146	
		Annual	95,166.435	102,148.410	106,351.700	110,544.915	115,072.620		117,373.750	
Nurse Practitioner (20 Year Scale)	2015	Hourly	48.173	51.707	53.834	55.958	58.250			
		Monthly	8,089.050	8,682.467	9,039.626	9,396.281	9,781.146			
		Annual	97,068.595	104,189.605	108,475.510	112,755.370	117,373.750			
Licensed Practical Nurse - Churchill	2015	Hourly	29.325	30.284	31.231	32.382	33.438	34.616	35.849	36.565
		Monthly	4,924.156	5,085.188	5,244.205	5,437.478	5,614.798	5,812.603	6,019.645	6,139.873
		Annual	59,089.875	61,022.260	62,930.465	65,249.730	67,377.570	69,751.240	72,235.735	73,678.475
Nurse II - Churchill	2015	Hourly	38.308	39.644	40.986	42.383	43.749	45.163	46.066	
		Monthly	6,432.552	6,656.888	6,882.233	7,116.812	7,346.186	7,583.620	7,735.249	
		Annual	77,190.620	79,882.660	82,586.790	85,401.745	88,154.235	91,003.445	92,822.990	
Nurse II (20 Year Scale) - Churchill	2015	Hourly	39.073	40.437	41.806	43.231	44.625	46.066		
		Monthly	6,561.008	6,790.046	7,019.924	7,259.205	7,493.281	7,735.249		
		Annual	78,732.095	81,480.555	84,239.090	87,110.465	89,919.375	92,822.990		
Nurse III - Churchill	2015	Hourly	39.764	41.104	42.504	43.871	45.138	46.521	47.949	48.907
		Monthly	6,677.038	6,902.047	7,137.130	7,366.672	7,579.423	7,811.651	8,051.436	8,212.300
		Annual	80,124.460	82,824.560	85,645.560	88,400.065	90,953.070	93,739.815	96,617.235	98,547.605
Nurse III (20 Year Scale) - Churchill	2015	Hourly	40.560	41.927	43.355	44.748	46.041	47.453	48.907	
		Monthly	6,810.700	7,040.242	7,280.027	7,513.935	7,731.051	7,968.150	8,212.300	
		Annual	81,728.400	84,482.905	87,360.325	90,167.220	92,772.615	95,617.795	98,547.605	

Nurse IV - Churchill	2015	Hourly	41.128	42.651	44.175	45.838	47.741	49.590	51.523	52.554
		Monthly	6,906.077	7,161.814	7,417.719	7,696.964	8,016.510	8,326.988	8,651.570	8,824.693
		Annual	82,872.920	85,941.765	89,012.625	92,363.570	96,198.115	99,923.850	103,818.845	105,896.310
Nurse IV (20 Year Scale) - Churchill	2015	Hourly	41.951	43.503	45.058	46.754	48.697	50.582	52.554	
		Monthly	7,044.272	7,304.879	7,565.989	7,850.776	8,177.038	8,493.561	8,824.693	
		Annual	84,531.265	87,658.545	90,791.870	94,209.310	98,124.455	101,922.730	105,896.310	
Nurse V - Churchill	2015	Hourly	43.414	45.077	46.981	48.828	50.846	52.821	54.880	55.978
		Monthly	7,289.934	7,569.180	7,888.893	8,199.035	8,537.891	8,869.526	9,215.267	9,399.639
		Annual	87,479.210	90,830.155	94,666.715	98,388.420	102,454.690	106,434.315	110,583.200	112,795.670
Nurse V (20 Year Scale) - Churchill	2015	Hourly	44.283	45.979	47.920	49.805	51.862	53.877	55.978	
		Monthly	7,435.854	7,720.640	8,046.567	8,363.090	8,708.494	9,046.846	9,399.639	
		Annual	89,230.245	92,647.685	96,558.800	100,357.075	104,501.930	108,562.155	112,795.670	
Nurse Practitioner - Churchill	2015	Hourly	49.478	53.109	55.292	57.474	59.827			61.023
		Monthly	8,308.181	8,917.886	9,284.448	9,650.843	10,045.950			10,246.779
		Annual	99,698.170	107,014.635	111,413.380	115,810.110	120,551.405			122,961.345
Nurse Practitioner (20 Year Scale) - Churchill	2015	Hourly	50.467	54.171	56.398	58.623	61.023			
		Monthly	8,474.250	9,096.214	9,470.164	9,843.779	10,246.779			
		Annual	101,691.005	109,154.565	113,641.970	118,125.345	122,961.345			
Weekend Worker - Licensed Practical Nurse / ORT I	2015	Hourly	32.190	33.243	34.283	35.546	36.706	37.998	39.352	40.139
		Monthly	5,405.238	5,582.054	5,756.687	5,968.766	6,163.549	6,380.498	6,607.857	6,740.007
		Annual	64,862.850	66,984.645	69,080.245	71,625.190	73,962.590	76,565.970	79,294.280	80,880.085
Weekend Worker Rates - ORT II	2015	Hourly	34.283	35.546	36.706	38.009	39.214	40.437	41.685	42.519
		Monthly	5,756.687	5,968.766	6,163.549	6,382.345	6,584.684	6,790.046	6,999.606	7,139.649
		Annual	69,080.245	71,625.190	73,962.590	76,588.135	79,016.210	81,480.555	83,995.275	85,675.785
Weekend Worker - Nurse II	2015	Hourly	42.052	43.519	44.991	46.525	48.026	49.582		50.573
		Monthly	7,061.232	7,307.565	7,554.739	7,812.323	8,064.366	8,325.644		8,492.050
		Annual	84,734.780	87,690.785	90,656.865	93,747.875	96,772.390	99,907.730		101,904.595
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	42.893	44.389	45.892	47.457	48.986	50.573		
		Monthly	7,202.450	7,453.653	7,706.032	7,968.821	8,225.566	8,492.050		
		Annual	86,429.395	89,443.835	92,472.380	95,625.855	98,706.790	101,904.595		
Weekend Worker - Nurse III	2015	Hourly	43.650	45.122	46.658	48.158	49.550	51.068	52.635	53.688
		Monthly	7,329.563	7,576.736	7,834.656	8,086.531	8,320.271	8,575.168	8,838.294	9,015.110
		Annual	87,954.750	90,920.830	94,015.870	97,038.370	99,843.250	102,902.020	106,059.525	108,181.320
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	44.523	46.024	47.592	49.121	50.541	52.089	53.688	
		Monthly	7,476.154	7,728.197	7,991.490	8,248.235	8,486.676	8,746.611	9,015.110	
		Annual	89,713.845	92,738.360	95,897.880	98,978.815	101,840.115	104,959.335	108,181.320	
Weekend Worker - Nurse IV	2015	Hourly	45.146	46.819	48.492	50.317	52.408	54.436	56.559	57.689
		Monthly	7,580.766	7,861.690	8,142.615	8,449.063	8,800.177	9,140.712	9,497.199	9,686.945
		Annual	90,969.190	94,340.285	97,711.380	101,388.755	105,602.120	109,688.540	113,966.385	116,243.335
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	46.051	47.755	49.462	51.324	53.456	55.524	57.689	
		Monthly	7,732.730	8,018.860	8,305.494	8,618.155	8,976.153	9,323.405	9,686.945	
		Annual	92,792.765	96,226.325	99,665.930	103,417.860	107,713.840	111,880.860	116,243.335	

Weekend Worker - Nurse IV-HSC	2015	Hourly	45.146	46.819	48.492	50.317	52.408	54.436	56.650	58.956	60.134
		Monthly	7,580.766	7,861.690	8,142.615	8,449.063	8,800.177	9,140.712	9,512.479	9,899.695	10,097.501
		Annual	90,969.190	94,340.285	97,711.380	101,388.755	105,602.120	109,688.540	114,149.750	118,796.340	121,170.010
Weekend Worker - Nurse IV-HSC (20 Year Scale)	2015	Hourly	46.051	47.755	49.462	51.324	53.456	55.524	57.783	60.134	
		Monthly	7,732.730	8,018.860	8,305.494	8,618.155	8,976.153	9,323.405	9,702.729	10,097.501	
		Annual	92,792.765	96,226.325	99,665.930	103,417.860	107,713.840	111,880.860	116,432.745	121,170.010	
Weekend Worker - Nurse V	2015	Hourly	47.656	49.481	51.572	53.601	55.815	57.983	60.243	61.448	
		Monthly	8,002.237	8,308.685	8,659.798	9,000.501	9,372.269	9,736.312	10,115.804	10,318.143	
		Annual	96,026.840	99,704.215	103,917.580	108,006.015	112,467.225	116,835.745	121,389.645	123,817.720	
Weekend Worker - Nurse V (20 Year Scale)	2015	Hourly	48.610	50.471	52.603	54.673	56.931	59.142	61.448		
		Monthly	8,162.429	8,474.922	8,832.920	9,180.508	9,559.664	9,930.928	10,318.143		
		Annual	97,949.150	101,699.065	105,995.045	110,166.095	114,715.965	119,171.130	123,817.720		
Weekend Worker - Licensed Practical Nurse -	2015	Hourly	33.722	34.827	35.915	37.240	38.454	39.808	41.226	42.051	
		Monthly	5,662.486	5,848.034	6,030.727	6,253.217	6,457.068	6,684.427	6,922.533	7,061.064	
		Annual	67,949.830	70,176.405	72,368.725	75,038.600	77,484.810	80,213.120	83,070.390	84,732.765	
Weekend Worker - Nurse II - Churchill	2015	Hourly	44.054	45.592	47.134	48.741	50.312	51.936		52.975	
		Monthly	7,397.401	7,655.657	7,914.584	8,184.426	8,448.223	8,720.920		8,895.385	
		Annual	88,768.810	91,867.880	94,975.010	98,213.115	101,378.680	104,651.040		106,744.625	
Weekend Worker - Nurse II (20 Year Scale) - C	2015	Hourly	44.935	46.503	48.077	49.716	51.319	52.975			
		Monthly	7,545.335	7,808.629	8,072.930	8,348.145	8,617.315	8,895.385			
		Annual	90,544.025	93,703.545	96,875.155	100,177.740	103,407.785	106,744.625			
Weekend Worker - Nurse III - Churchill	2015	Hourly	45.729	47.271	48.880	50.451	51.910	53.499	55.141	56.243	
		Monthly	7,678.661	7,937.589	8,207.767	8,471.564	8,716.554	8,983.374	9,259.093	9,444.137	
		Annual	92,143.935	95,251.065	98,493.200	101,658.765	104,598.650	107,800.485	111,109.115	113,329.645	
Weekend Worker - Nurse III (20 Year Scale) - C	2015	Hourly	46.643	48.216	49.858	51.460	52.949	54.570	56.243		
		Monthly	7,832.137	8,096.270	8,371.989	8,640.992	8,891.020	9,163.213	9,444.137		
		Annual	93,985.645	97,155.240	100,463.870	103,691.900	106,692.235	109,958.550	113,329.645		
Weekend Worker - Nurse IV - Churchill	2015	Hourly	47.297	49.048	50.801	52.714	54.903	57.028	59.252	60.437	
		Monthly	7,941.955	8,235.977	8,530.335	8,851.559	9,219.129	9,575.952	9,949.398	10,148.380	
		Annual	95,303.455	98,831.720	102,364.015	106,218.710	110,629.545	114,911.420	119,392.780	121,780.555	
Weekend Worker - Nurse IV (20 Year Scale) - C	2015	Hourly	48.243	50.029	51.818	53.768	56.001	58.169	60.437		
		Monthly	8,100.804	8,400.703	8,701.106	9,028.543	9,403.501	9,767.545	10,148.380		
		Annual	97,209.645	100,808.435	104,413.270	108,342.520	112,842.015	117,210.535	121,780.555		
Weekend Worker - Nurse V - Churchill	2015	Hourly	49.926	51.838	54.028	56.153	58.473	60.744	63.112	64.374	
		Monthly	8,383.408	8,704.464	9,072.202	9,429.025	9,818.591	10,199.930	10,597.557	10,809.468	
		Annual	100,600.890	104,453.570	108,866.420	113,148.295	117,823.095	122,399.160	127,170.680	129,713.610	
Weekend Worker - Nurse V (20 Year Scale) - C	2015	Hourly	50.925	52.875	55.108	57.275	59.641	61.958	64.374		
		Monthly	8,551.156	8,878.594	9,253.552	9,617.427	10,014.718	10,403.781	10,809.468		
		Annual	102,613.875	106,543.125	111,042.620	115,409.125	120,176.615	124,845.370	129,713.610		

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

MNU & Winnipeg Health Employer Organization
APPENDIX "A" - SALARIES

A1. Effective April 1, 2019

- Monthly salaries include a 1.4% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse / ORT I	2015	Hourly	28.383	29.312	30.229	31.344	32.364	33.506	34.698	35.393	
		Monthly	4,765.979	4,921.973	5,075.953	5,263.180	5,434.455	5,626.216	5,826.373	5,943.075	
		Annual	57,191.745	59,063.680	60,911.435	63,158.160	65,213.460	67,514.590	69,916.470	71,316.895	
ORT II	2015	Hourly	30.229	31.344	32.364	33.515	34.577	35.655	36.756	37.491	
		Monthly	5,075.953	5,263.180	5,434.455	5,627.727	5,806.055	5,987.069	6,171.945	6,295.364	
		Annual	60,911.435	63,158.160	65,213.460	67,532.725	69,672.655	71,844.825	74,063.340	75,544.365	
Nurse II	2015	Hourly	37.078	38.372	39.671	41.022	42.346	43.718		44.592	
		Monthly	6,226.014	6,443.298	6,661.422	6,888.278	7,110.599	7,340.981		7,487.740	
		Annual	74,712.170	77,319.580	79,937.065	82,659.330	85,327.190	88,091.770		89,852.880	
Nurse II (20 Year Scale)	2015	Hourly	37.820	39.140	40.465	41.844	43.192	44.592			
		Monthly	6,350.608	6,572.258	6,794.748	7,026.305	7,252.657	7,487.740			
		Annual	76,207.300	78,867.100	81,536.975	84,315.660	87,031.880	89,852.880			
Nurse III	2015	Hourly	38.488	39.785	41.141	42.463	43.690	45.028	46.410	47.338	
		Monthly	6,462.777	6,680.565	6,908.260	7,130.245	7,336.279	7,560.952	7,793.013	7,948.839	
		Annual	77,553.320	80,166.775	82,899.115	85,562.945	88,035.350	90,731.420	93,516.150	95,386.070	
Nurse III (20 Year Scale)	2015	Hourly	39.257	40.581	41.963	43.312	44.564	45.929	47.338		
		Monthly	6,591.905	6,814.226	7,046.287	7,272.807	7,483.038	7,712.245	7,948.839		
		Annual	79,102.855	81,770.715	84,555.445	87,273.680	89,796.460	92,546.935	95,386.070		
Nurse III - WRHA Community PIO	2015	Hourly	37.747	39.013	40.363	41.654	42.851	44.140	45.515	46.425	
		Monthly	6,338.350	6,550.933	6,777.620	6,994.401	7,195.397	7,411.842	7,642.727	7,795.531	
		Annual	76,060.205	78,611.195	81,331.445	83,932.810	86,344.765	88,942.100	91,712.725	93,546.375	
Nurse IV St. B, Grace, Victoria, Riverview- ICP, Misericordia ICP, OESH- PIO	2015	Hourly	39.809	41.282	42.758	44.367	46.211	47.998	49.871	50.867	
		Monthly	6,684.595	6,931.936	7,179.781	7,449.959	7,759.597	8,059.664	8,374.172	8,541.417	
		Annual	80,215.135	83,183.230	86,157.370	89,399.505	93,115.165	96,715.970	100,490.065	102,497.005	
Nurse IV (20 Year Scale) St. B, Grace, Victoria, Riverview- ICP, Misericordia ICP, OESH- PIO	2015	Hourly	40.604	42.107	43.612	45.254	47.135	48.959	50.867		
		Monthly	6,818.088	7,070.467	7,323.182	7,598.901	7,914.752	8,221.032	8,541.417		
		Annual	81,817.060	84,845.605	87,878.180	91,186.810	94,977.025	98,652.385	102,497.005		
Nurse IV - HSC	2015	Hourly	39.809	41.282	42.758	44.367	46.211	47.998	49.951	51.984	53.024
		Monthly	6,684.595	6,931.936	7,179.781	7,449.959	7,759.597	8,059.664	8,387.605	8,728.980	8,903.613
		Annual	80,215.135	83,183.230	86,157.370	89,399.505	93,115.165	96,715.970	100,651.265	104,747.760	106,843.360
Nurse IV - HSC (20 Year Scale)	2015	Hourly	40.604	42.107	43.612	45.254	47.135	48.959	50.949	53.024	
		Monthly	6,818.088	7,070.467	7,323.182	7,598.901	7,914.752	8,221.032	8,555.186	8,903.613	
		Annual	81,817.060	84,845.605	87,878.180	91,186.810	94,977.025	98,652.385	102,662.235	106,843.360	

ICP-Clinical Team Leader / Infection Control Specialist	2015	Hourly	41.935	44.346	47.008	49.669	52.328	54.989	56.088	
		Monthly	7,041.585	7,446.433	7,893.427	8,340.253	8,786.743	9,233.570	9,418.110	
		Annual	84,499.025	89,357.190	94,721.120	100,083.035	105,440.920	110,802.835	113,017.320	
ICP-Clinical Team Leader / Infection Control Specialist (20 Year Scale)	2015	Hourly	42.774	45.234	47.949	50.661	53.375	56.088		
		Monthly	7,182.468	7,595.543	8,051.436	8,506.826	8,962.552	9,418.110		
		Annual	86,189.610	91,146.510	96,617.235	102,081.915	107,550.625	113,017.320		
Nurse V	2015	Hourly	42.021	43.630	45.474	47.261	49.213	51.126	53.119	54.182
		Monthly	7,056.026	7,326.204	7,635.843	7,935.910	8,263.683	8,584.908	8,919.565	9,098.061
		Annual	84,672.315	87,914.450	91,630.110	95,230.915	99,164.195	103,018.890	107,034.785	109,176.730
Nurse V (20 Year Scale)	2015	Hourly	42.861	44.502	46.383	48.208	50.198	52.148	54.182	
		Monthly	7,197.076	7,472.628	7,788.479	8,094.927	8,429.081	8,756.518	9,098.061	
		Annual	86,364.915	89,671.530	93,461.745	97,139.120	101,148.970	105,078.220	109,176.730	
Clinical Nurse Specialist	2015	Hourly	47.890	51.404	53.519	55.629	57.908		59.066	
		Monthly	8,041.529	8,631.588	8,986.732	9,341.036	9,723.718		9,918.166	
		Annual	96,498.350	103,579.060	107,840.785	112,092.435	116,684.620		119,017.990	
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	48.847	52.431	54.588	56.741	59.066			
		Monthly	8,202.225	8,804.039	9,166.235	9,527.760	9,918.166			
		Annual	98,426.705	105,648.465	109,994.820	114,333.115	119,017.990			
Nurse Practitioner	2015	Hourly	47.890	51.404	53.519	55.629	57.908		59.066	
		Monthly	8,041.529	8,631.588	8,986.732	9,341.036	9,723.718		9,918.166	
		Annual	96,498.350	103,579.060	107,840.785	112,092.435	116,684.620		119,017.990	
Nurse Practitioner (20 Year Scale)	2015	Hourly	48.847	52.431	54.588	56.741	59.066			
		Monthly	8,202.225	8,804.039	9,166.235	9,527.760	9,918.166			
		Annual	98,426.705	105,648.465	109,994.820	114,333.115	119,017.990			
Licensed Practical Nurse - Churchill	2015	Hourly	29.736	30.708	31.668	32.835	33.906	35.101	36.351	37.077
		Monthly	4,993.170	5,156.385	5,317.585	5,513.544	5,693.383	5,894.043	6,103.939	6,225.846
		Annual	59,918.040	61,876.620	63,811.020	66,162.525	68,320.590	70,728.515	73,247.265	74,710.155
Nurse II - Churchill	2015	Hourly	38.844	40.199	41.560	42.976	44.361	45.795	46.711	
		Monthly	6,522.555	6,750.082	6,978.617	7,216.387	7,448.951	7,689.744	7,843.555	
		Annual	78,270.660	81,000.985	83,743.400	86,596.640	89,387.415	92,276.925	94,122.665	
Nurse II (20 Year Scale) - Churchill	2015	Hourly	39.620	41.003	42.391	43.836	45.250	46.711		
		Monthly	6,652.858	6,885.087	7,118.155	7,360.795	7,598.229	7,843.555		
		Annual	79,834.300	82,621.045	85,417.865	88,329.540	91,178.750	94,122.665		
Nurse III - Churchill	2015	Hourly	40.321	41.679	43.099	44.485	45.770	47.172	48.620	49.592
		Monthly	6,770.568	6,998.599	7,237.040	7,469.773	7,685.546	7,920.965	8,164.108	8,327.323
		Annual	81,246.815	83,983.185	86,844.485	89,637.275	92,226.550	95,051.580	97,969.300	99,927.880
Nurse III (20 Year Scale) - Churchill	2015	Hourly	41.128	42.514	43.962	45.374	46.686	48.117	49.592	
		Monthly	6,906.077	7,138.809	7,381.953	7,619.051	7,839.358	8,079.646	8,327.323	
		Annual	82,872.920	85,665.710	88,583.430	91,428.610	94,072.290	96,955.755	99,927.880	

Nurse IV - Churchill	2015	Hourly	41.704	43.248	44.793	46.480	48.409	50.284	52.244	53.290
		Monthly	7,002.797	7,262.060	7,521.491	7,804.767	8,128.678	8,443.522	8,772.638	8,948.279
		Annual	84,033.560	87,144.720	90,257.895	93,657.200	97,544.135	101,322.260	105,271.660	107,379.350
Nurse IV (20 Year Scale) - Churchill	2015	Hourly	42.538	44.112	45.689	47.409	49.379	51.290	53.290	
		Monthly	7,142.839	7,407.140	7,671.945	7,960.761	8,291.557	8,612.446	8,948.279	
		Annual	85,714.070	88,885.680	92,063.335	95,529.135	99,498.685	103,349.350	107,379.350	
Nurse V - Churchill	2015	Hourly	44.022	45.708	47.639	49.512	51.558	53.560	55.648	56.762
		Monthly	7,392.028	7,675.135	7,999.382	8,313.890	8,657.448	8,993.617	9,344.227	9,531.286
		Annual	88,704.330	92,101.620	95,992.585	99,766.680	103,889.370	107,923.400	112,130.720	114,375.430
Nurse V (20 Year Scale) - Churchill	2015	Hourly	44.903	46.623	48.591	50.502	52.588	54.631	56.762	
		Monthly	7,539.962	7,828.779	8,159.239	8,480.128	8,830.402	9,173.455	9,531.286	
		Annual	90,479.545	93,945.345	97,910.865	101,761.530	105,964.820	110,081.465	114,375.430	
Nurse Practitioner - Churchill	2015	Hourly	50.171	53.853	56.066	58.279	60.665			61.877
		Monthly	8,424.547	9,042.816	9,414.416	9,786.015	10,186.665			10,390.180
		Annual	101,094.565	108,513.795	112,972.990	117,432.185	122,239.975			124,682.155
Nurse Practitioner (20 Year Scale) - Churchill	2015	Hourly	51.174	54.929	57.188	59.444	61.877			
		Monthly	8,592.968	9,223.495	9,602.818	9,981.638	10,390.180			
		Annual	103,115.610	110,681.935	115,233.820	119,779.660	124,682.155			
Weekend Worker - Licensed Practical Nurse / ORT I	2015	Hourly	32.641	33.708	34.763	36.044	37.220	38.530	39.903	40.701
		Monthly	5,480.968	5,660.135	5,837.287	6,052.388	6,249.858	6,469.829	6,700.379	6,834.376
		Annual	65,771.615	67,921.620	70,047.445	72,628.660	74,998.300	77,637.950	80,404.545	82,012.515
Weekend Worker Rates - ORT II	2015	Hourly	34.763	36.044	37.220	38.541	39.763	41.003	42.269	43.114
		Monthly	5,837.287	6,052.388	6,249.858	6,471.676	6,676.870	6,885.087	7,097.670	7,239.559
		Annual	70,047.445	72,628.660	74,998.300	77,660.115	80,122.445	82,621.045	85,172.035	86,874.710
Weekend Worker - Nurse II	2015	Hourly	42.641	44.128	45.621	47.176	48.698	50.276		51.281
		Monthly	7,160.135	7,409.827	7,660.526	7,921.637	8,177.206	8,442.178		8,610.935
		Annual	85,921.615	88,917.920	91,926.315	95,059.640	98,126.470	101,306.140		103,331.215
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	43.494	45.010	46.534	48.121	49.672	51.281		
		Monthly	7,303.368	7,557.929	7,813.834	8,080.318	8,340.757	8,610.935		
		Annual	87,640.410	90,695.150	93,766.010	96,963.815	100,089.080	103,331.215		
Weekend Worker - Nurse III	2015	Hourly	44.261	45.754	47.311	48.832	50.244	51.783	53.372	54.440
		Monthly	7,432.160	7,682.859	7,944.305	8,199.707	8,436.805	8,695.229	8,962.048	9,141.383
		Annual	89,185.915	92,194.310	95,331.665	98,396.480	101,241.660	104,342.745	107,544.580	109,696.600
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	45.146	46.668	48.258	49.809	51.249	52.818	54.440	
		Monthly	7,580.766	7,836.335	8,103.323	8,363.761	8,605.561	8,869.023	9,141.383	
		Annual	90,969.190	94,036.020	97,239.870	100,365.135	103,266.735	106,428.270	109,696.600	

Weekend Worker - Nurse IV	2015	Hourly	45.778	47.474	49.171	51.021	53.142	55.198	57.351	58.497	
		Monthly	7,686.889	7,971.676	8,256.630	8,567.276	8,923.428	9,268.664	9,630.189	9,822.621	
		Annual	92,242.670	95,660.110	99,079.565	102,807.315	107,081.130	111,223.970	115,562.265	117,871.455	
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	46.696	48.424	50.154	52.043	54.204	56.301	58.497		
		Monthly	7,841.037	8,131.197	8,421.693	8,738.887	9,101.755	9,453.876	9,822.621		
		Annual	94,092.440	97,574.360	101,060.310	104,866.645	109,221.060	113,446.515	117,871.455		
Weekend Worker - Nurse IV-HSC	2015	Hourly	45.778	47.474	49.171	51.021	53.142	55.198	57.443	59.781	60.976
		Monthly	7,686.889	7,971.676	8,256.630	8,567.276	8,923.428	9,268.664	9,645.637	10,038.226	10,238.887
		Annual	92,242.670	95,660.110	99,079.565	102,807.315	107,081.130	111,223.970	115,747.645	120,458.715	122,866.640
Weekend Worker - Nurse IV-HSC (20 Year Scale)	2015	Hourly	46.696	48.424	50.154	52.043	54.204	56.301	58.592	60.976	
		Monthly	7,841.037	8,131.197	8,421.693	8,738.887	9,101.755	9,453.876	9,838.573	10,238.887	
		Annual	94,092.440	97,574.360	101,060.310	104,866.645	109,221.060	113,446.515	118,062.880	122,866.640	
Weekend Worker - Nurse V	2015	Hourly	48.323	50.174	52.294	54.351	56.596	58.795	61.086	62.308	
		Monthly	8,114.237	8,425.051	8,781.034	9,126.439	9,503.412	9,872.660	10,257.358	10,462.552	
		Annual	97,370.845	101,100.610	105,372.410	109,517.265	114,040.940	118,471.925	123,088.290	125,550.620	
Weekend Worker - Nurse V (20 Year Scale)	2015	Hourly	49.291	51.178	53.339	55.438	57.728	59.970	62.308		
		Monthly	8,276.780	8,593.639	8,956.507	9,308.964	9,693.493	10,069.963	10,462.552		
		Annual	99,321.365	103,123.670	107,478.085	111,707.570	116,321.920	120,839.550	125,550.620		
Weekend Worker - Licensed Practical Nurse -	2015	Hourly	34.194	35.315	36.418	37.761	38.992	40.365	41.803	42.640	
		Monthly	5,741.743	5,929.977	6,115.189	6,340.701	6,547.407	6,777.956	7,019.420	7,159.967	
		Annual	68,900.910	71,159.725	73,382.270	76,088.415	78,568.880	81,335.475	84,233.045	85,919.600	
Weekend Worker - Nurse II - Churchill	2015	Hourly	44.671	46.230	47.794	49.423	51.016	52.663	53.717		
		Monthly	7,501.005	7,762.788	8,025.409	8,298.945	8,566.437	8,842.995		9,019.980	
		Annual	90,012.065	93,153.450	96,304.910	99,587.345	102,797.240	106,115.945		108,239.755	
Weekend Worker - Nurse II (20 Year Scale) - Ct	2015	Hourly	45.564	47.154	48.750	50.412	52.037	53.717			
		Monthly	7,650.955	7,917.943	8,185.938	8,465.015	8,737.880	9,019.980			
		Annual	91,811.460	95,015.310	98,231.250	101,580.180	104,854.555	108,239.755			
Weekend Worker - Nurse III - Churchill	2015	Hourly	46.369	47.933	49.564	51.157	52.637	54.248	55.913	57.030	
		Monthly	7,786.128	8,048.750	8,322.622	8,590.113	8,838.630	9,109.143	9,388.725	9,576.288	
		Annual	93,433.535	96,584.995	99,871.460	103,081.355	106,063.555	109,309.720	112,664.695	114,915.450	
Weekend Worker - Nurse III (20 Year Scale) - C	2015	Hourly	47.296	48.891	50.556	52.180	53.690	55.334	57.030		
		Monthly	7,941.787	8,209.614	8,489.195	8,761.892	9,015.446	9,291.501	9,576.288		
		Annual	95,301.440	98,515.365	101,870.340	105,142.700	108,185.350	111,498.010	114,915.450		
Weekend Worker - Nurse IV - Churchill	2015	Hourly	47.959	49.735	51.512	53.452	55.672	57.826	60.082	61.283	
		Monthly	8,053.115	8,351.335	8,649.723	8,975.482	9,348.257	9,709.949	10,088.769	10,290.437	
		Annual	96,637.385	100,216.025	103,796.680	107,705.780	112,179.080	116,519.390	121,065.230	123,485.245	
Weekend Worker - Nurse IV (20 Year Scale) - Ct	2015	Hourly	48.918	50.729	52.543	54.521	56.785	58.983	61.283		
		Monthly	8,214.148	8,518.245	8,822.845	9,154.985	9,535.148	9,904.229	10,290.437		
		Annual	98,569.770	102,218.935	105,874.145	109,859.815	114,421.775	118,850.745	123,485.245		
Weekend Worker - Nurse V - Churchill	2015	Hourly	50.625	52.564	54.784	56.939	59.292	61.594	63.996	65.275	
		Monthly	8,500.781	8,826.372	9,199.147	9,561.007	9,956.115	10,342.659	10,745.995	10,960.760	
		Annual	102,009.375	105,916.460	110,389.760	114,732.085	119,473.380	124,111.910	128,951.940	131,529.125	
Weekend Worker - Nurse V (20 Year Scale) - Ct	2015	Hourly	51.638	53.615	55.880	58.077	60.476	62.825	65.275		
		Monthly	8,670.881	9,002.852	9,383.183	9,752.096	10,154.928	10,549.365	10,960.760		
		Annual	104,050.570	108,034.225	112,598.200	117,025.155	121,859.140	126,592.375	131,529.125		

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

**MNU & Winnipeg Health Employer Organization
2015 ANNUAL HOURS- APPENDIX A - SALARIES**

A1. Effective April 1, 2020

- Monthly salaries include a 0.5% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse / ORT I	2015	Hourly	28.525	29.459	30.380	31.501	32.526	33.674	34.871	35.570
		Monthly	4,789.823	4,946.657	5,101.308	5,289.543	5,461.658	5,654.426	5,855.422	5,972.796
		Annual	57,477.875	59,359.885	61,215.700	63,474.515	65,539.890	67,853.110	70,265.065	71,673.550
ORT II	2015	Hourly	30.380	31.501	32.526	33.683	34.750	35.833	36.940	37.678
		Monthly	5,101.308	5,289.543	5,461.658	5,655.937	5,835.104	6,016.958	6,202.842	6,326.764
		Annual	61,215.700	63,474.515	65,539.890	67,871.245	70,021.250	72,203.495	74,434.100	75,921.170
Nurse II	2015	Hourly	37.263	38.564	39.869	41.227	42.558	43.937		44.815
		Monthly	6,257.079	6,475.538	6,694.670	6,922.700	7,146.198	7,377.755		7,525.185
		Annual	75,084.945	77,706.460	80,336.035	83,072.405	85,754.370	88,533.055		90,302.225
Nurse II (20 Year Scale)	2015	Hourly	38.009	39.336	40.667	42.053	43.408	44.815		
		Monthly	6,382.345	6,605.170	6,828.667	7,061.400	7,288.927	7,525.185		
		Annual	76,588.135	79,262.040	81,944.005	84,736.795	87,467.120	90,302.225		
Nurse III	2015	Hourly	38.680	39.984	41.347	42.675	43.908	45.253	46.642	47.575
		Monthly	6,495.017	6,713.980	6,942.850	7,165.844	7,372.885	7,598.733	7,831.969	7,988.635
		Annual	77,940.200	80,567.760	83,314.205	85,990.125	88,474.620	91,184.795	93,983.630	95,863.625
Nurse III (20 Year Scale)	2015	Hourly	39.453	40.784	42.173	43.529	44.787	46.159	47.575	
		Monthly	6,624.816	6,848.313	7,081.550	7,309.245	7,520.484	7,750.865	7,988.635	
		Annual	79,497.795	82,179.760	84,978.595	87,710.935	90,245.805	93,010.385	95,863.625	
Nurse III - WRHA Community PIO	2015	Hourly	37.936	39.208	40.565	41.862	43.065	44.361	45.743	46.657
		Monthly	6,370.087	6,583.677	6,811.540	7,029.328	7,231.331	7,448.951	7,681.012	7,834.488
		Annual	76,441.040	79,004.120	81,738.475	84,351.930	86,775.975	89,387.415	92,172.145	94,013.855
Nurse IV St. B, Grace, Victoria, Riverview- ICP, Misericordia ICP, OESH- PIO	2015	Hourly	40.008	41.488	42.972	44.589	46.442	48.238	50.120	51.121
		Monthly	6,718.010	6,966.527	7,215.715	7,487.236	7,798.386	8,099.964	8,415.983	8,584.068
		Annual	80,616.120	83,598.320	86,588.580	89,846.835	93,580.630	97,199.570	100,991.800	103,008.815
Nurse IV(20 Year Scale) St. B, Grace, Victoria, Riverview- ICP, Misericordia ICP, OESH- PIO	2015	Hourly	40.807	42.318	43.830	45.480	47.371	49.204	51.121	
		Monthly	6,852.175	7,105.898	7,359.788	7,636.850	7,954.380	8,262.172	8,584.068	
		Annual	82,226.105	85,270.770	88,317.450	91,642.200	95,452.565	99,146.060	103,008.815	
Nurse IV - HSC	2015	Hourly	40.008	41.488	42.972	44.589	46.442	48.238	50.201	52.244
		Monthly	6,718.010	6,966.527	7,215.715	7,487.236	7,798.386	8,099.964	8,429.585	8,772.638
		Annual	80,616.120	83,598.320	86,588.580	89,846.835	93,580.630	97,199.570	101,155.015	105,271.660
Nurse IV - HSC (20 Year Scale)	2015	Hourly	40.807	42.318	43.830	45.480	47.371	49.204	51.204	53.289
		Monthly	6,852.175	7,105.898	7,359.788	7,636.850	7,954.380	8,262.172	8,598.005	8,948.111
		Annual	82,226.105	85,270.770	88,317.450	91,642.200	95,452.565	99,146.060	103,176.060	107,377.335

ICP-Clinical Team Leader / Infection Control Specialist	2015	Hourly	42.145	44.568	47.243	49.917	52.590	55.264	56.368	
		Monthly	7,076.848	7,483.710	7,932.887	8,381.896	8,830.738	9,279.747	9,465.127	
		Annual	84,922.175	89,804.520	95,194.645	100,582.755	105,968.850	111,356.960	113,581.520	
ICP-Clinical Team Leader / Infection Control Specialist (20 Year Scale)	2015	Hourly	42.988	45.460	48.189	50.914	53.642	56.368		
		Monthly	7,218.402	7,633.492	8,091.736	8,549.309	9,007.386	9,465.127		
		Annual	86,620.820	91,601.900	97,100.835	102,591.710	108,088.630	113,581.520		
Nurse V	2015	Hourly	42.231	43.848	45.701	47.497	49.459	51.382	53.385	54.453
		Monthly	7,091.289	7,362.810	7,673.960	7,975.538	8,304.990	8,627.894	8,964.231	9,143.566
		Annual	85,095.465	88,353.720	92,087.515	95,706.455	99,659.885	103,534.730	107,570.775	109,722.795
Nurse V (20 Year Scale)	2015	Hourly	43.075	44.725	46.615	48.449	50.449	52.409	54.453	
		Monthly	7,233.010	7,510.073	7,827.435	8,135.395	8,471.228	8,800.345	9,143.566	
		Annual	86,796.125	90,120.875	93,929.225	97,624.735	101,654.735	105,604.135	109,722.795	
Clinical Nurse Specialist	2015	Hourly	48.129	51.661	53.787	55.907	58.198		59.361	
		Monthly	8,081.661	8,674.743	9,031.734	9,387.717	9,772.414		9,967.701	
		Annual	96,979.935	104,096.915	108,380.805	112,652.605	117,268.970		119,612.415	
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	49.091	52.693	54.861	57.025	59.361			
		Monthly	8,243.197	8,848.033	9,212.076	9,575.448	9,967.701			
		Annual	98,918.365	106,176.395	110,544.915	114,905.375	119,612.415			
Nurse Practitioner	2015	Hourly	48.129	51.661	53.787	55.907	58.198		59.361	
		Monthly	8,081.661	8,674.743	9,031.734	9,387.717	9,772.414		9,967.701	
		Annual	96,979.935	104,096.915	108,380.805	112,652.605	117,268.970		119,612.415	
Nurse Practitioner (20 Year Scale)	2015	Hourly	49.091	52.693	54.861	57.025	59.361			
		Monthly	8,243.197	8,848.033	9,212.076	9,575.448	9,967.701			
		Annual	98,918.365	106,176.395	110,544.915	114,905.375	119,612.415			
Licensed Practical Nurse - Churchill	2015	Hourly	29.885	30.862	31.826	32.999	34.076	35.277	36.533	37.262
		Monthly	5,018.190	5,182.244	5,344.116	5,541.082	5,721.928	5,923.596	6,134.500	6,256.911
		Annual	60,218.275	62,186.930	64,129.390	66,492.985	68,663.140	71,083.155	73,613.995	75,082.930
Nurse II - Churchill	2015	Hourly	39.038	40.400	41.768	43.191	44.583	46.024	46.945	
		Monthly	6,555.131	6,783.833	7,013.543	7,252.489	7,486.229	7,728.197	7,882.848	
		Annual	78,661.570	81,406.000	84,162.520	87,029.865	89,834.745	92,738.360	94,594.175	
Nurse II (20 Year Scale) - Churchill	2015	Hourly	39.818	41.208	42.603	44.055	45.476	46.945		
		Monthly	6,686.106	6,919.510	7,153.754	7,397.569	7,636.178	7,882.848		
		Annual	80,233.270	83,034.120	85,845.045	88,770.825	91,634.140	94,594.175		
Nurse III - Churchill	2015	Hourly	40.523	41.887	43.314	44.707	45.999	47.408	48.863	49.840
		Monthly	6,804.487	7,033.525	7,273.143	7,507.050	7,723.999	7,960.593	8,204.912	8,368.967
		Annual	81,653.845	84,402.305	87,277.710	90,084.605	92,687.985	95,527.120	98,458.945	100,427.600
Nurse III (20 Year Scale) - Churchill	2015	Hourly	41.334	42.727	44.182	45.601	46.919	48.358	49.840	
		Monthly	6,940.668	7,174.575	7,418.894	7,657.168	7,878.482	8,120.114	8,368.967	
		Annual	83,288.010	86,094.905	89,026.730	91,886.015	94,541.785	97,441.370	100,427.600	

Nurse IV - Churchill	2015	Hourly	41.913	43.464	45.017	46.712	48.651	50.535	52.505	53.556
		Monthly	7,037.891	7,298.330	7,559.105	7,843.723	8,169.314	8,485.669	8,816.465	8,992.945
		Annual	84,454.695	87,579.960	90,709.255	94,124.680	98,031.765	101,828.025	105,797.575	107,915.340
Nurse IV (20 Year Scale) - Churchill	2015	Hourly	42.751	44.333	45.917	47.646	49.626	51.546	53.556	
		Monthly	7,178.605	7,444.250	7,710.230	8,000.558	8,333.033	8,655.433	8,992.945	
		Annual	86,143.265	89,330.995	92,522.755	96,006.690	99,996.390	103,865.190	107,915.340	
Nurse V - Churchill	2015	Hourly	44.242	45.937	47.877	49.760	51.816	53.828	55.926	57.046
		Monthly	7,428.969	7,713.588	8,039.346	8,355.533	8,700.770	9,038.618	9,390.908	9,578.974
		Annual	89,147.630	92,563.055	96,472.155	100,266.400	104,409.240	108,463.420	112,690.890	114,947.690
Nurse V (20 Year Scale) - Churchill	2015	Hourly	45.128	46.856	48.834	50.755	52.851	54.904	57.046	
		Monthly	7,577.743	7,867.903	8,200.043	8,522.610	8,874.564	9,219.297	9,578.974	
		Annual	90,932.920	94,414.840	98,400.510	102,271.325	106,494.765	110,631.560	114,947.690	
Nurse Practitioner - Churchill	2015	Hourly	50.422	54.122	56.346	58.570	60.968			62.186
		Monthly	8,466.694	9,087.986	9,461.433	9,834.879	10,237.543			10,442.066
		Annual	101,600.330	109,055.830	113,537.190	118,018.550	122,850.520			125,304.790
Nurse Practitioner (20 Year Scale) - Churchill	2015	Hourly	51.430	55.204	57.474	59.741	62.186			
		Monthly	8,635.954	9,269.672	9,650.843	10,031.510	10,442.066			
		Annual	103,631.450	111,236.060	115,810.110	120,378.115	125,304.790			
Weekend Worker - Licensed Practical Nurse / ORT I	2015	Hourly	32.804	33.877	34.937	36.224	37.406	38.723	40.103	40.905
		Monthly	5,508.338	5,688.513	5,866.505	6,082.613	6,281.091	6,502.237	6,733.962	6,868.631
		Annual	66,100.060	68,262.155	70,398.055	72,991.360	75,373.090	78,026.845	80,807.545	82,423.575
Weekend Worker Rates - ORT II	2015	Hourly	34.937	36.224	37.406	38.734	39.962	41.208	42.480	43.330
		Monthly	5,866.505	6,082.613	6,281.091	6,504.084	6,710.286	6,919.510	7,133.100	7,275.829
		Annual	70,398.055	72,991.360	75,373.090	78,049.010	80,523.430	83,034.120	85,597.200	87,309.950
Weekend Worker - Nurse II	2015	Hourly	42.854	44.349	45.849	47.412	48.941	50.527		51.537
		Monthly	7,195.901	7,446.936	7,698.811	7,961.265	8,218.010	8,484.325		8,653.921
		Annual	86,350.810	89,363.235	92,385.735	95,535.180	98,616.115	101,811.905		103,847.055
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	43.711	45.235	46.767	48.362	49.920	51.537		
		Monthly	7,339.805	7,595.710	7,852.959	8,120.786	8,382.400	8,653.921		
		Annual	88,077.665	91,148.525	94,235.505	97,449.430	100,588.800	103,847.055		
Weekend Worker - Nurse III	2015	Hourly	44.482	45.983	47.548	49.076	50.495	52.042	53.639	54.712
		Monthly	7,469.269	7,721.312	7,984.102	8,240.678	8,478.952	8,738.719	9,006.882	9,187.057
		Annual	89,631.230	92,655.745	95,809.220	98,888.140	101,747.425	104,864.630	108,082.585	110,244.680
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	45.372	46.901	48.499	50.058	51.505	53.082	54.712	
		Monthly	7,618.715	7,875.460	8,143.790	8,405.573	8,648.548	8,913.353	9,187.057	
		Annual	91,424.580	94,505.515	97,725.485	100,866.870	103,782.575	106,960.230	110,244.680	
Weekend Worker - Nurse IV	2015	Hourly	46.007	47.711	49.417	51.276	53.408	55.474	57.638	58.789
		Monthly	7,725.342	8,011.472	8,297.938	8,610.095	8,968.093	9,315.009	9,678.381	9,871.653
		Annual	92,704.105	96,137.665	99,575.255	103,321.140	107,617.120	111,780.110	116,140.570	118,459.835
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	46.929	48.666	50.405	52.303	54.475	56.583	58.789	
		Monthly	7,880.161	8,171.833	8,463.840	8,782.545	9,147.260	9,501.229	9,871.653	
		Annual	94,561.935	98,061.990	101,566.075	105,390.545	109,767.125	114,014.745	118,459.835	

Weekend Worker - Nurse IV-HSC	2015	Hourly	46.007	47.711	49.417	51.276	53.408	55.474	57.730	60.080	61.281
		Monthly	7,725.342	8,011.472	8,297.938	8,610.095	8,968.093	9,315.009	9,693.829	10,088.433	10,290.101
		Annual	92,704.105	96,137.665	99,575.255	103,321.140	107,617.120	111,780.110	116,325.950	121,061.200	123,481.215
Weekend Worker - Nurse IV-HSC (20 Year Scale)	2015	Hourly	46.929	48.666	50.405	52.303	54.475	56.583	58.885	61.281	
		Monthly	7,880.161	8,171.833	8,463.840	8,782.545	9,147.260	9,501.229	9,887.773	10,290.101	
		Annual	94,561.935	98,061.990	101,566.075	105,390.545	109,767.125	114,014.745	118,653.275	123,481.215	
Weekend Worker - Nurse V	2015	Hourly	48.565	50.425	52.555	54.623	56.879	59.089	61.391	62.620	
		Monthly	8,154.873	8,467.198	8,824.860	9,172.112	9,550.932	9,922.028	10,308.572	10,514.942	
		Annual	97,858.475	101,606.375	105,898.325	110,065.345	114,611.185	119,064.335	123,702.865	126,179.300	
Weekend Worker - Nurse V (20 Year Scale)	2015	Hourly	49.537	51.434	53.606	55.715	58.017	60.270	62.620		
		Monthly	8,318.088	8,636.626	9,001.341	9,355.477	9,742.021	10,120.338	10,514.942		
		Annual	99,817.055	103,639.510	108,016.090	112,265.725	116,904.255	121,444.050	126,179.300		
Weekend Worker - Licensed Practical Nurse -	2015	Hourly	34.365	35.492	36.600	37.950	39.187	40.567	42.012	42.853	
		Monthly	5,770.456	5,959.698	6,145.750	6,372.438	6,580.150	6,811.875	7,054.515	7,195.733	
		Annual	69,245.475	71,516.380	73,749.000	76,469.250	78,961.805	81,742.505	84,654.180	86,348.795	
Weekend Worker - Nurse II - Churchill	2015	Hourly	44.894	46.461	48.033	49.670	51.271	52.926	53.986	53.986	
		Monthly	7,538.451	7,801.576	8,065.541	8,340.421	8,609.255	8,887.158	9,065.149	9,065.149	
		Annual	90,461.410	93,618.915	96,786.495	100,085.050	103,311.065	106,645.890	108,781.790	108,781.790	
Weekend Worker - Nurse II (20 Year Scale) - Ct	2015	Hourly	45.792	47.390	48.994	50.664	52.297	53.986			
		Monthly	7,689.240	7,957.571	8,226.909	8,507.330	8,781.538	9,065.149			
		Annual	92,270.880	95,490.850	98,722.910	102,087.960	105,378.455	108,781.790			
Weekend Worker - Nurse III - Churchill	2015	Hourly	46.601	48.173	49.812	51.413	52.900	54.519	56.193	57.315	
		Monthly	7,825.085	8,089.050	8,364.265	8,633.100	8,882.792	9,154.649	9,435.741	9,624.144	
		Annual	93,901.015	97,068.595	100,371.180	103,597.195	106,593.500	109,855.785	113,228.895	115,489.725	
Weekend Worker - Nurse III (20 Year Scale) - C	2015	Hourly	47.532	49.135	50.809	52.441	53.958	55.611	57.315		
		Monthly	7,981.415	8,250.585	8,531.678	8,805.718	9,060.448	9,338.014	9,624.144		
		Annual	95,776.980	99,007.025	102,380.135	105,668.615	108,725.370	112,056.165	115,489.725		
Weekend Worker - Nurse IV - Churchill	2015	Hourly	48.199	49.984	51.770	53.719	55.950	58.115	60.382	61.589	
		Monthly	8,093.415	8,393.147	8,693.046	9,020.315	9,394.938	9,758.477	10,139.144	10,341.820	
		Annual	97,120.985	100,717.760	104,316.550	108,243.785	112,739.250	117,101.725	121,669.730	124,101.835	
Weekend Worker - Nurse IV (20 Year Scale) - C	2015	Hourly	49.163	50.983	52.806	54.794	57.069	59.278	61.589		
		Monthly	8,255.287	8,560.895	8,867.008	9,200.826	9,582.836	9,953.764	10,341.820		
		Annual	99,063.445	102,730.745	106,404.090	110,409.910	114,994.035	119,445.170	124,101.835		
Weekend Worker - Nurse V - Churchill	2015	Hourly	50.878	52.827	55.058	57.224	59.588	61.902	64.316	65.601	
		Monthly	8,543.264	8,870.534	9,245.156	9,608.863	10,005.818	10,394.378	10,799.728	11,015.501	
		Annual	102,519.170	106,446.405	110,941.870	115,306.360	120,069.820	124,732.530	129,596.740	132,186.015	
Weekend Worker - Nurse V (20 Year Scale) - Ct	2015	Hourly	51.896	53.883	56.159	58.367	60.778	63.139	65.601		
		Monthly	8,714.203	9,047.854	9,430.032	9,800.792	10,205.639	10,602.090	11,015.501		
		Annual	104,570.440	108,574.245	113,160.385	117,609.505	122,467.670	127,225.085	132,186.015		

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2021

- Monthly salaries include a 1.2% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification ⁽¹⁾	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse ⁽²⁾ ORT I	2015	Hourly	28.867	29.813	30.745	31.879	32.916	34.078	35.289	36.348	37.075
		Monthly	4,847.250	5,006.100	5,162.598	5,353.015	5,527.145	5,722.264	5,925.611	6,103.435	6,225.510
		Annual	58,167.005	60,073.195	61,951.175	64,236.185	66,325.740	68,667.170	71,107.335	73,241.220	74,706.125
Undergraduate Nursing Employee	2015	Hourly	28.867								
		Monthly	4,847.250								
		Annual	58,167.005								
ORT II ⁽²⁾	2015	Hourly	30.745	31.879	32.916	34.087	35.167	36.263	37.383	38.504	39.274
		Monthly	5,162.598	5,353.015	5,527.145	5,723.775	5,905.125	6,089.162	6,277.229	6,465.463	6,594.759
		Annual	61,951.175	64,236.185	66,325.740	68,685.305	70,861.505	73,069.945	75,326.745	77,585.560	79,137.110
Nurse II ⁽³⁾	2015	Hourly	37.710	39.027	40.347	41.722	43.069	44.464	45.353		46.260
		Monthly	6,332.138	6,553.284	6,774.934	7,005.819	7,232.003	7,466.247	7,615.525		7,767.825
		Annual	75,985.650	78,639.405	81,299.205	84,069.830	86,784.035	89,594.960	91,386.295		93,213.900
Nurse II (20 Year Scale) ⁽³⁾	2015	Hourly	38.465	39.808	41.155	42.558	43.929	45.353	46.260		
		Monthly	6,458.915	6,684.427	6,910.610	7,146.198	7,376.411	7,615.525	7,767.825		
		Annual	77,506.975	80,213.120	82,927.325	85,754.370	88,516.935	91,386.295	93,213.900		
LPN - CRN	2015	Hourly	38.427	39.746	41.095	42.455	43.752	45.130	46.278	47.203	48.147
		Monthly	6,452.534	6,674.016	6,900.535	7,128.902	7,346.690	7,578.079	7,770.848	7,926.170	8,084.684
		Annual	77,430.405	80,088.190	82,806.425	85,546.825	88,160.280	90,936.950	93,250.170	95,114.045	97,016.205
LPN - CRN (20 Year Scale)	2015	Hourly	39.196	40.541	41.917	43.304	44.627	46.033	47.204	48.147	
		Monthly	6,581.662	6,807.510	7,038.563	7,271.463	7,493.617	7,729.708	7,926.338	8,084.684	
		Annual	78,979.940	81,690.115	84,462.755	87,257.560	89,923.405	92,756.495	95,116.060	97,016.205	
Nurse III ⁽⁴⁾	2015	Hourly	39.144	40.464	41.843	43.187	44.435	45.796	47.202	48.146	49.109
		Monthly	6,572.930	6,794.580	7,026.137	7,251.817	7,461.377	7,689.912	7,926.003	8,084.516	8,246.220
		Annual	78,875.160	81,534.960	84,313.645	87,021.805	89,536.525	92,278.940	95,112.030	97,014.190	98,954.635
Nurse III (20 Year Scale) ⁽⁴⁾	2015	Hourly	39.926	41.273	42.679	44.051	45.324	46.713	48.146	49.109	
		Monthly	6,704.241	6,930.425	7,166.515	7,396.897	7,610.655	7,843.891	8,084.516	8,246.220	
		Annual	80,450.890	83,165.095	85,998.185	88,762.765	91,327.860	94,126.695	97,014.190	98,954.635	
Nurse III - WRHA Community PIO	2015	Hourly	38.391	39.678	41.052	42.364	43.582	44.893	46.292	47.218	48.162
		Monthly	6,446.489	6,662.598	6,893.315	7,113.622	7,318.144	7,538.283	7,773.198	7,928.689	8,087.203
		Annual	77,357.865	79,951.170	82,719.780	85,363.460	87,817.730	90,459.395	93,278.380	95,144.270	97,046.430
Nurse IV ⁽⁵⁾	2015	Hourly	40.488	41.986	43.488	45.124	46.999	48.817	50.803	52.871	53.928
		Monthly	6,798.610	7,050.149	7,302.360	7,577.072	7,891.915	8,197.188	8,530.670	8,877.922	9,055.410
		Annual	81,583.320	84,601.790	87,628.320	90,924.860	94,702.985	98,366.255	102,368.045	106,535.065	108,664.920
Nurse IV (20 Year Scale) ⁽⁵⁾	2015	Hourly	41.297	42.826	44.356	46.026	47.939	49.794	51.818	53.928	
		Monthly	6,934.455	7,191.199	7,448.112	7,728.533	8,049.757	8,361.243	8,701.106	9,055.410	
		Annual	83,213.455	86,294.390	89,377.340	92,742.390	96,597.085	100,334.910	104,413.270	108,664.920	

ICP-Clinical Team Leader / Infection Control Specialist	2015	Hourly	42.651	45.103	47.810	50.516	53.221	55.927		
		Monthly	7,161.814	7,573.545	8,028.096	8,482.478	8,936.693	9,391.075		
		Annual	85,941.765	90,882.545	96,337.150	101,789.740	107,240.315	112,692.905		
ICP-Clinical Team Leader / Infection Control Specialist (20 Year Scale)	2015	Hourly	43.504	46.006	48.767	51.525	54.286	57.044		
		Monthly	7,305.047	7,725.174	8,188.792	8,651.906	9,115.524	9,578.638		
		Annual	87,660.560	92,702.090	98,265.505	103,822.875	109,386.290	114,943.660		
Nurse V	2015	Hourly	42.738	44.374	46.249	48.067	50.053	51.999	54.026	
		Monthly	7,176.423	7,451.134	7,765.978	8,071.250	8,404.733	8,731.499	9,071.866	
		Annual	86,117.070	89,413.610	93,191.735	96,855.005	100,856.795	104,777.985	108,862.390	
Nurse V (20 Year Scale)	2015	Hourly	43.592	45.262	47.174	49.030	51.054	53.038	55.106	
		Monthly	7,319.823	7,600.244	7,921.301	8,232.954	8,572.818	8,905.964	9,253.216	
		Annual	87,837.880	91,202.930	95,055.610	98,795.450	102,873.810	106,871.570	111,038.590	
Clinical Nurse Specialist	2015	Hourly	48.707	52.281	54.432	56.578	58.896			
		Monthly	8,178.717	8,778.851	9,140.040	9,500.389	9,889.620			
		Annual	98,144.605	105,346.215	109,680.480	114,004.670	118,675.440			
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	49.680	53.325	55.519	57.709	60.073			
		Monthly	8,342.100	8,954.156	9,322.565	9,690.303	10,087.258			
		Annual	100,105.200	107,449.875	111,870.785	116,283.635	121,047.095			
Nurse Practitioner	2015	Hourly	48.707	52.281	54.432	56.578	58.896			
		Monthly	8,178.717	8,778.851	9,140.040	9,500.389	9,889.620			
		Annual	98,144.605	105,346.215	109,680.480	114,004.670	118,675.440			
Nurse Practitioner (20 Year Scale)	2015	Hourly	49.680	53.325	55.519	57.709	60.073			
		Monthly	8,342.100	8,954.156	9,322.565	9,690.303	10,087.258			
		Annual	100,105.200	107,449.875	111,870.785	116,283.635	121,047.095			
Licensed Practical Nurse - Churchill ⁽²⁾	2015	Hourly	30.244	31.232	32.208	33.395	34.485	35.700	36.971	38.080
		Monthly	5,078.472	5,244.373	5,408.260	5,607.577	5,790.606	5,994.625	6,208.047	6,394.267
		Annual	60,941.660	62,932.480	64,899.120	67,290.925	69,487.275	71,935.500	74,496.565	76,731.200
Undergraduate Nursing Employee - Churchill	2015	Hourly	30.244							
		Monthly	5,078.472							
		Annual	60,941.660							
Nurse II - Churchill ⁽³⁾	2015	Hourly	39.506	40.885	42.269	43.709	45.118	46.576	47.508	
		Monthly	6,633.716	6,865.273	7,097.670	7,339.470	7,576.064	7,820.887	7,977.385	
		Annual	79,604.590	82,383.275	85,172.035	88,073.635	90,912.770	93,850.640	95,728.620	
Nurse II (20 Year Scale) - Churchill ⁽³⁾	2015	Hourly	40.296	41.702	43.114	44.584	46.022	47.508	48.458	
		Monthly	6,766.370	7,002.461	7,239.559	7,486.397	7,727.861	7,977.385	8,136.906	
		Annual	81,196.440	84,029.530	86,874.710	89,836.760	92,734.330	95,728.620	97,642.870	
LPN - CRN - Churchill	2015	Hourly	40.258	41.638	43.052	44.476	45.835	47.277	48.479	49.448
		Monthly	6,759.989	6,991.714	7,229.148	7,468.262	7,696.460	7,938.596	8,140.432	8,303.143
		Annual	81,119.870	83,900.570	86,749.780	89,619.140	92,357.525	95,263.155	97,685.185	99,637.720
LPN - CRN - Churchill (20 Year Scale)	2015	Hourly	41.063	42.471	43.913	45.366	46.752	48.223	49.449	50.437
		Monthly	6,895.162	7,131.589	7,373.725	7,617.708	7,850.440	8,097.445	8,303.311	8,469.213
		Annual	82,741.945	85,579.065	88,484.695	91,412.490	94,205.280	97,169.345	99,639.735	101,630.555

Nurse III - Churchill ⁽⁴⁾	2015	Hourly	41.009	42.390	43.834	45.243	46.551	47.977	49.449	50.438	51.447
		Monthly	6,886.095	7,117.988	7,360.459	7,597.054	7,816.689	8,056.138	8,303.311	8,469.381	8,638.809
		Annual	82,633.135	85,415.850	88,325.510	91,164.645	93,800.265	96,673.655	99,639.735	101,632.570	103,665.705
Nurse III (20 Year Scale) - Churchill ⁽⁴⁾	2015	Hourly	41.830	43.240	44.712	46.148	47.482	48.938	50.438	51.447	
		Monthly	7,023.954	7,260.717	7,507.890	7,749.018	7,973.019	8,217.506	8,469.381	8,638.809	
		Annual	84,287.450	87,128.600	90,094.680	92,988.220	95,676.230	98,610.070	101,632.570	103,665.705	
Nurse IV - Churchill ⁽⁵⁾	2015	Hourly	42.415	43.985	45.557	47.272	49.235	51.140	53.220	55.387	56.495
		Monthly	7,122.185	7,385.815	7,649.780	7,937.757	8,267.377	8,587.258	8,936.525	9,300.400	9,486.452
		Annual	85,466.225	88,629.775	91,797.355	95,253.080	99,208.525	103,047.100	107,238.300	111,604.805	113,837.425
Nurse IV - (20 Year Scale) - Churchill ⁽⁵⁾	2015	Hourly	43.263	44.864	46.467	48.217	50.221	52.164	54.286	56.495	
		Monthly	7,264.579	7,533.413	7,802.584	8,096.438	8,432.943	8,759.205	9,115.524	9,486.452	
		Annual	87,174.945	90,400.960	93,631.005	97,157.255	101,195.315	105,110.460	109,386.290	113,837.425	
Nurse V - Churchill	2015	Hourly	44.773	46.488	48.452	50.357	52.438	54.474	56.597	57.731	
		Monthly	7,518.133	7,806.110	8,135.898	8,455.780	8,805.214	9,147.093	9,503.580	9,693.997	
		Annual	90,217.595	93,673.320	97,630.780	101,469.355	105,662.570	109,765.110	114,042.955	116,327.965	
Nurse V (20 Year Scale) - Churchill	2015	Hourly	45.670	47.418	49.420	51.364	53.485	55.563	57.731		
		Monthly	7,668.754	7,962.273	8,298.442	8,624.872	8,981.023	9,329.954	9,693.997		
		Annual	92,025.050	95,547.270	99,581.300	103,498.460	107,772.275	111,959.445	116,327.965		
Nurse Practitioner - Churchill	2015	Hourly	51.027	54.771	57.022	59.273	61.700				62.932
		Monthly	8,568.284	9,196.964	9,574.944	9,952.925	10,360.458				10,567.332
		Annual	102,819.405	110,363.565	114,899.330	119,435.095	124,325.500				126,807.980
Nurse Practitioner (20 Year Scale) - Churchill	2015	Hourly	52.047	55.866	58.164	60.458	62.932				
		Monthly	8,739.559	9,380.833	9,766.705	10,151.906	10,567.332				
		Annual	104,874.705	112,569.990	117,200.460	121,822.870	126,807.980				
Weekend Worker - Licensed Practical Nurse / ORT I	2015	Hourly	33.198	34.284	35.356	36.659	37.855	39.188	40.584	41.800	42.636
		Monthly	5,574.498	5,756.855	5,936.862	6,155.657	6,356.485	6,580.318	6,814.730	7,018.917	7,159.295
		Annual	66,893.970	69,082.260	71,242.340	73,867.885	76,277.825	78,963.820	81,776.760	84,227.000	85,911.540
Weekend Worker Rates - ORT II ⁽²⁾	2015	Hourly	35.356	36.659	37.855	39.199	40.442	41.702	42.990	44.280	45.166
		Monthly	5,936.862	6,155.657	6,356.485	6,582.165	6,790.886	7,002.461	7,218.738	7,435.350	7,584.124
		Annual	71,242.340	73,867.885	76,277.825	78,985.985	81,490.630	84,029.530	86,624.850	89,224.200	91,009.490
Weekend Worker - Nurse II ⁽³⁾	2015	Hourly	43.368	44.881	46.399	47.981	49.528	51.133	52.156		53.199
		Monthly	7,282.210	7,536.268	7,791.165	8,056.810	8,316.577	8,586.083	8,757.862		8,932.999
		Annual	87,386.520	90,435.215	93,493.985	96,681.715	99,798.920	103,032.995	105,094.340		107,195.985
Weekend Worker - Nurse II (20 Year Scale) ⁽³⁾	2015	Hourly	44.236	45.778	47.328	48.942	50.519	52.155	53.199		
		Monthly	7,427.962	7,686.889	7,947.160	8,218.178	8,482.982	8,757.694	8,932.999		
		Annual	89,135.540	92,242.670	95,365.920	98,618.130	101,795.785	105,092.325	107,195.985		

Weekend Worker - LPN - CRN	2015	Hourly	44.192	45.708	47.259	48.823	50.315	51.900	53.220	54.284	55.370
		Monthly	7,420.573	7,675.135	7,935.574	8,198.195	8,448.727	8,714.875	8,936.525	9,115.188	9,297.546
		Annual	89,046.880	92,101.620	95,226.885	98,378.345	101,384.725	104,578.500	107,238.300	109,382.260	111,570.550
Weekend Worker - LPN - CRN (20 Year Scale)	2015	Hourly	45.076	46.622	48.204	49.799	51.321	52.938	54.284	55.370	
		Monthly	7,569.012	7,828.611	8,094.255	8,362.082	8,617.651	8,889.173	9,115.188	9,297.546	
		Annual	90,828.140	93,943.330	97,131.060	100,344.985	103,411.815	106,670.070	109,382.260	111,570.550	
Weekend Worker - Nurse III ⁽⁴⁾	2015	Hourly	45.016	46.535	48.119	49.665	51.101	52.667	54.283	55.368	56.475
		Monthly	7,558.937	7,814.002	8,079.982	8,339.581	8,580.710	8,843.667	9,115.020	9,297.210	9,483.094
		Annual	90,707.240	93,768.025	96,959.785	100,074.975	102,968.515	106,124.005	109,380.245	111,566.520	113,797.125
Weekend Worker - Nurse III (20 Year Scale) ⁽⁴⁾	2015	Hourly	45.916	47.464	49.081	50.659	52.123	53.719	55.369	56.475	
		Monthly	7,710.062	7,969.997	8,241.518	8,506.490	8,752.320	9,020.315	9,297.378	9,483.094	
		Annual	92,520.740	95,639.960	98,898.215	102,077.885	105,027.845	108,243.785	111,568.535	113,797.125	
Weekend Worker - Nurse IV ⁽⁵⁾	2015	Hourly	46.559	48.284	50.010	51.891	54.049	56.140	58.423	60.801	62.016
		Monthly	7,818.032	8,107.688	8,397.513	8,713.364	9,075.728	9,426.842	9,810.195	10,209.501	10,413.520
		Annual	93,816.385	97,292.260	100,770.150	104,560.365	108,908.735	113,122.100	117,722.345	122,514.015	124,962.240
Weekend Worker - Nurse IV (20 Year Scale) ⁽⁵⁾	2015	Hourly	47.492	49.250	51.010	52.931	55.129	57.262	59.592	62.016	
		Monthly	7,974.698	8,269.896	8,565.429	8,887.997	9,257.078	9,615.244	10,006.490	10,413.520	
		Annual	95,696.380	99,238.750	102,785.150	106,655.965	111,084.935	115,382.930	120,077.880	124,962.240	
Weekend Worker - Nurse V	2015	Hourly	49.148	51.030	53.186	55.278	57.562	59.798	62.128		63.371
		Monthly	8,252.768	8,568.788	8,930.816	9,282.098	9,665.619	10,041.081	10,432.327		10,641.047
		Annual	99,033.220	102,825.450	107,169.790	111,385.170	115,987.430	120,492.970	125,187.920		127,692.565
Weekend Worker - Nurse V (20 Year Scale)	2015	Hourly	50.131	52.051	54.249	56.384	58.713	60.993	63.371		
		Monthly	8,417.830	8,740.230	9,109.311	9,467.813	9,858.891	10,241.741	10,641.047		
		Annual	101,013.965	104,882.765	109,311.735	113,613.760	118,306.695	122,900.895	127,692.565		
Weekend Worker - Licensed Practical Nurse -	2015	Hourly	34.777	35.918	37.039	38.405	39.657	41.054	42.516	43.792	44.668
		Monthly	5,839.638	6,031.231	6,219.465	6,448.840	6,659.071	6,893.651	7,139.145	7,353.407	7,500.502
		Annual	70,075.655	72,374.770	74,633.585	77,386.075	79,908.855	82,723.810	85,669.740	88,240.880	90,006.020
Weekend Worker - Nurse II - Churchill ⁽³⁾	2015	Hourly	45.433	47.019	48.609	50.266	51.886	53.561	54.634		55.727
		Monthly	7,628.958	7,895.274	8,162.261	8,440.499	8,712.524	8,993.785	9,173.959		9,357.492
		Annual	91,547.495	94,743.285	97,947.135	101,285.990	104,550.290	107,925.415	110,087.510		112,289.905
Weekend Worker - Nurse II (20 Year Scale) - Ct	2015	Hourly	46.342	47.959	49.582	51.272	52.925	54.634	55.727		
		Monthly	7,781.594	8,053.115	8,325.644	8,609.423	8,886.990	9,173.959	9,357.492		
		Annual	93,379.130	96,637.385	99,907.730	103,313.080	106,643.875	110,087.510	112,289.905		

Weekend Worker - LPN - CRN - Churchill	2015	Hourly	46.297	47.885	49.510	51.148	52.711	54.367	55.751	56.866	58.003
		Monthly	7,774.038	8,040.690	8,313.554	8,588.602	8,851.055	9,129.125	9,361.522	9,548.749	9,739.670
		Annual	93,288.455	96,488.275	99,762.650	103,063.220	106,212.665	109,549.505	112,338.265	114,584.990	116,876.045
Weekend Worker - LPN - CRN (20 Year Scale) - 1	2015	Hourly	47.223	48.843	50.500	52.171	53.765	55.454	56.866	58.003	
		Monthly	7,929.529	8,201.554	8,479.792	8,760.380	9,028.040	9,311.651	9,548.749	9,739.670	
		Annual	95,154.345	98,418.645	101,757.500	105,124.565	108,336.475	111,739.810	114,584.990	116,876.045	
Weekend Worker - Nurse III - Churchill ⁽³⁾	2015	Hourly	47.160	48.751	50.410	52.030	53.535	55.173	56.867	58.004	59.164
		Monthly	7,918.950	8,186.105	8,464.679	8,736.704	8,989.419	9,264.466	9,548.917	9,739.838	9,934.622
		Annual	95,027.400	98,233.265	101,576.150	104,840.450	107,873.025	111,173.595	114,587.005	116,878.060	119,215.460
Weekend Worker - Nurse III (20 Year Scale) - C	2015	Hourly	48.102	49.725	51.419	53.070	54.605	56.278	58.003	59.164	
		Monthly	8,077.128	8,349.656	8,634.107	8,911.338	9,169.090	9,450.014	9,739.670	9,934.622	
		Annual	96,925.530	100,195.875	103,609.285	106,936.050	110,029.075	113,400.170	116,876.045	119,215.460	
Weekend Worker - Nurse IV - Churchill ⁽⁵⁾	2015	Hourly	48.777	50.584	52.391	54.364	56.621	58.812	61.205	63.694	64.968
		Monthly	8,190.471	8,493.897	8,797.322	9,128.622	9,507.610	9,875.515	10,277.340	10,695.284	10,909.210
		Annual	98,285.655	101,926.760	105,567.865	109,543.460	114,091.315	118,506.180	123,328.075	128,343.410	130,910.520
Weekend Worker - Nurse IV (20 Year Scale) - Ct	2015	Hourly	49.753	51.595	53.440	55.452	57.754	59.989	62.427	64.968	
		Monthly	8,354.358	8,663.660	8,973.467	9,311.315	9,697.859	10,073.153	10,482.534	10,909.210	
		Annual	100,252.295	103,963.925	107,681.600	111,735.780	116,374.310	120,877.835	125,790.405	130,910.520	
Weekend Worker - Nurse V - Churchill	2015	Hourly	51.489	53.461	55.719	57.911	60.303	62.645	65.088	66.388	
		Monthly	8,645.861	8,976.993	9,356.149	9,724.222	10,125.879	10,519.140	10,929.360	11,147.652	
		Annual	103,750.335	107,723.915	112,273.785	116,690.665	121,510.545	126,229.675	131,152.320	133,771.820	
Weekend Worker - Nurse V (20 Year Scale) - Ct	2015	Hourly	52.519	54.530	56.833	59.067	61.507	63.897	66.388		
		Monthly	8,818.815	9,156.496	9,543.208	9,918.334	10,328.050	10,729.371	11,147.652		
		Annual	105,825.785	109,877.950	114,518.495	119,020.005	123,936.605	128,752.455	133,771.820		

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

² New 'Year 7' Step-on-Scale for Licensed Practical Nurse Effective April 1, 2021

³ New 'Year 6' Step-on-Scale for Nurse II Effective April 1, 2021

⁴ New 'Year 7' Step-on-Scale for Nurse III Effective April 1, 2021

⁵ Nurse IV Standardized to 'Year 7' Step-on-Scale Effective April 1, 2021

A1. Effective April 1, 2022

- Monthly salaries include a 2.0% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse / ORT I	2015	Hourly	29.444	30.409	31.360	32.517	33.574	34.760	35.995	37.075	37.817
		Monthly	4,944.138	5,106.178	5,265.867	5,460.146	5,637.634	5,836.783	6,044.160	6,225.510	6,350.105
		Annual	59,329.660	61,274.135	63,190.400	65,521.755	67,651.610	70,041.400	72,529.925	74,706.125	76,201.255
Undergraduate Nursing Employee	2015	Hourly	29.444								
		Monthly	4,944.138								
		Annual	59,329.660								
ORT II	2015	Hourly	31.360	32.517	33.574	34.769	35.870	36.988	38.131	39.274	40.059
		Monthly	5,265.867	5,460.146	5,637.634	5,838.295	6,023.171	6,210.902	6,402.830	6,594.759	6,726.574
		Annual	63,190.400	65,521.755	67,651.610	70,059.535	72,278.050	74,530.820	76,833.965	79,137.110	80,718.885
Nurse II ⁽²⁾	2015	Hourly	38.464	39.808	41.154	42.556	43.930	45.353	46.260	47.185	48.129
		Monthly	6,458.747	6,684.427	6,910.443	7,145.862	7,376.579	7,615.525	7,767.825	7,923.148	8,081.661
		Annual	77,504.960	80,213.120	82,925.310	85,750.340	88,518.950	91,386.295	93,213.900	95,077.775	96,979.935
Nurse II (20 Year Scale) ⁽³⁾	2015	Hourly	39.234	40.604	41.978	43.409	44.808	46.260	47.185	48.129	
		Monthly	6,588.043	6,818.088	7,048.806	7,289.095	7,524.010	7,767.825	7,923.148	8,081.661	
		Annual	79,056.510	81,817.060	84,585.670	87,469.135	90,288.120	93,213.900	95,077.775	96,979.935	
LPN - CRN	2015	Hourly	39.196	40.541	41.917	43.304	44.627	46.033	47.204	48.147	49.110
		Monthly	6,581.662	6,807.510	7,038.563	7,271.463	7,493.617	7,729.708	7,926.338	8,084.684	8,246.388
		Annual	78,979.940	81,690.115	84,462.755	87,257.560	89,923.405	92,756.495	95,116.060	97,016.205	98,956.650
LPN - CRN (20 Year Scale)	2015	Hourly	39.980	41.352	42.755	44.170	45.520	46.954	48.148	49.110	
		Monthly	6,713.308	6,943.690	7,179.277	7,416.879	7,643.567	7,884.359	8,084.852	8,246.388	
		Annual	80,559.700	83,324.280	86,151.325	89,002.550	91,722.800	94,612.310	97,018.220	98,956.650	
Nurse III	2015	Hourly	39.927	41.273	42.680	44.051	45.324	46.712	48.146	49.109	50.091
		Monthly	6,704.409	6,930.425	7,166.683	7,396.897	7,610.655	7,843.723	8,084.516	8,246.220	8,411.114
		Annual	80,452.905	83,165.095	86,000.200	88,762.765	91,327.860	94,124.680	97,014.190	98,954.635	100,933.365
Nurse III (20 Year Scale)	2015	Hourly	40.725	42.098	43.533	44.932	46.230	47.647	49.109	50.091	
		Monthly	6,838.406	7,068.956	7,309.916	7,544.832	7,762.788	8,000.725	8,246.220	8,411.114	
		Annual	82,060.875	84,827.470	87,718.995	90,537.980	93,153.450	96,008.705	98,954.635	100,933.365	
Nurse III - WRHA Community PIO	2015	Hourly	39.159	40.472	41.873	43.211	44.454	45.791	47.218	48.162	49.125
		Monthly	6,575.449	6,795.923	7,031.175	7,255.847	7,464.568	7,689.072	7,928.689	8,087.203	8,248.906
		Annual	78,905.385	81,551.080	84,374.095	87,070.165	89,574.810	92,268.865	95,144.270	97,046.430	98,986.875
Nurse IV	2015	Hourly	41.298	42.826	44.358	46.026	47.939	49.793	51.819	53.928	55.007
		Monthly	6,934.623	7,191.199	7,448.448	7,728.533	8,049.757	8,361.075	8,701.274	9,055.410	9,236.592
		Annual	83,215.470	86,294.390	89,381.370	92,742.390	96,597.085	100,332.895	104,415.285	108,664.920	110,839.105
Nurse IV (20 Year Scale)	2015	Hourly	42.123	43.683	45.243	46.947	48.898	50.790	52.854	55.007	
		Monthly	7,073.154	7,335.104	7,597.054	7,883.184	8,210.789	8,528.488	8,875.068	9,236.592	
		Annual	84,877.845	88,021.245	91,164.645	94,598.205	98,529.470	102,341.850	106,500.810	110,839.105	
ICP-Clinical Team Leader / Infection Control Specialist	2015	Hourly	43.504	46.005	48.766	51.526	54.285	57.046			58.185
		Monthly	7,305.047	7,725.006	8,188.624	8,652.074	9,115.356	9,578.974			9,770.231
		Annual	87,660.560	92,700.075	98,263.490	103,824.890	109,384.275	114,947.690			117,242.775
ICP-Clinical Team Leader / Infection Control Specialist (20 Year Scale)	2015	Hourly	44.374	46.926	49.742	52.556	55.372	58.185			
		Monthly	7,451.134	7,879.658	8,352.511	8,825.028	9,297.882	9,770.231			
		Annual	89,413.610	94,555.890	100,230.130	105,900.340	111,574.580	117,242.775			

Nurse V	2015	Hourly	43.593	45.261	47.174	49.028	51.054	53.039	55.107	56.208	
		Monthly	7,319.991	7,600.076	7,921.301	8,232.618	8,572.818	8,906.132	9,253.384	9,438.260	
		Annual	87,839.895	91,200.915	95,055.610	98,791.420	102,873.810	106,873.585	111,040.605	113,259.120	
Nurse V (20 Year Scale)	2015	Hourly	44.464	46.167	48.117	50.011	52.075	54.099	56.208		
		Monthly	7,466.247	7,752.209	8,079.646	8,397.680	8,744.260	9,084.124	9,438.260		
		Annual	89,594.960	93,026.505	96,955.755	100,772.165	104,931.125	109,009.485	113,259.120		
Clinical Nurse Specialist	2015	Hourly	49.681	53.327	55.521	57.710	60.074			61.274	
		Monthly	8,342.268	8,954.492	9,322.901	9,690.471	10,087.426			10,288.926	
		Annual	100,107.215	107,453.905	111,874.815	116,285.650	121,049.110			123,467.110	
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	50.674	54.392	56.629	58.863	61.274				
		Monthly	8,509.009	9,133.323	9,508.953	9,884.079	10,288.926				
		Annual	102,108.110	109,599.880	114,107.435	118,608.945	123,467.110				
Nurse Practitioner	2015	Hourly	49.681	53.327	55.521	57.710	60.074			61.274	
		Monthly	8,342.268	8,954.492	9,322.901	9,690.471	10,087.426			10,288.926	
		Annual	100,107.215	107,453.905	111,874.815	116,285.650	121,049.110			123,467.110	
Nurse Practitioner (20 Year Scale)	2015	Hourly	50.674	54.392	56.629	58.863	61.274				
		Monthly	8,509.009	9,133.323	9,508.953	9,884.079	10,288.926				
		Annual	102,108.110	109,599.880	114,107.435	118,608.945	123,467.110				
Licensed Practical Nurse - Churchill	2015	Hourly	30.849	31.857	32.852	34.063	35.175	36.414	37.710	38.842	39.619
		Monthly	5,180.061	5,349.321	5,516.398	5,719.745	5,906.469	6,114.518	6,332.138	6,522.219	6,652.690
		Annual	62,160.735	64,191.855	66,196.780	68,636.945	70,877.625	73,374.210	75,985.650	78,266.630	79,832.285
Undergraduate Nursing Employee - Churchill	2015	Hourly	30.849								
		Monthly	5,180.061								
		Annual	62,160.735								
Nurse II - Churchill ⁽²⁾	2015	Hourly	40.296	41.703	43.114	44.583	46.020	47.508	48.458	49.427	50.416
		Monthly	6,766.370	7,002.629	7,239.559	7,486.229	7,727.525	7,977.385	8,136.906	8,299.617	8,465.687
		Annual	81,196.440	84,031.545	86,874.710	89,834.745	92,730.300	95,728.620	97,642.870	99,595.405	101,588.240
Nurse II (20 Year Scale) - Churchill ⁽²⁾	2015	Hourly	41.102	42.536	43.976	45.476	46.942	48.458	49.427	50.416	
		Monthly	6,901.711	7,142.503	7,384.303	7,636.178	7,882.344	8,136.906	8,299.617	8,465.687	
		Annual	82,820.530	85,710.040	88,611.640	91,634.140	94,588.130	97,642.870	99,595.405	101,588.240	
LPN - CRN - Churchill	2015	Hourly	41.063	42.471	43.913	45.366	46.752	48.223	49.449	50.437	51.446
		Monthly	6,895.162	7,131.589	7,373.725	7,617.708	7,850.440	8,097.445	8,303.311	8,469.213	8,638.641
		Annual	82,741.945	85,579.065	88,484.695	91,412.490	94,205.280	97,169.345	99,639.735	101,630.555	103,663.690
LPN - CRN - Churchill (20 Year Scale)	2015	Hourly	41.884	43.320	44.791	46.273	47.687	49.187	50.438	51.446	
		Monthly	7,033.022	7,274.150	7,521.155	7,770.008	8,007.442	8,259.317	8,469.381	8,638.641	
		Annual	84,396.260	87,289.800	90,253.865	93,240.095	96,089.305	99,111.805	101,632.570	103,663.690	

Nurse III - Churchill	2015	Hourly	41.829	43.238	44.711	46.148	47.482	48.937	50.438	51.447	52.476
		Monthly	7,023.786	7,260.381	7,507.722	7,749.018	7,973.019	8,217.338	8,469.381	8,638.809	8,811.595
		Annual	84,285.435	87,124.570	90,092.665	92,988.220	95,676.230	98,608.055	101,632.570	103,665.705	105,739.140
Nurse III (20 Year Scale) - Churchill	2015	Hourly	42.667	44.105	45.606	47.071	48.432	49.917	51.447	52.476	
		Monthly	7,164.500	7,405.965	7,658.008	7,904.005	8,132.540	8,381.896	8,638.809	8,811.595	
		Annual	85,974.005	88,871.575	91,896.090	94,848.065	97,590.480	100,582.755	103,665.705	105,739.140	
Nurse IV - Churchill	2015	Hourly	43.263	44.865	46.468	48.217	50.220	52.163	54.284	56.495	57.625
		Monthly	7,264.579	7,533.581	7,802.752	8,096.438	8,432.775	8,759.037	9,115.188	9,486.452	9,676.198
		Annual	87,174.945	90,402.975	93,633.020	97,157.255	101,193.300	105,108.445	109,382.260	113,837.425	116,114.375
Nurse IV - (20 Year Scale) - Churchill	2015	Hourly	44.128	45.761	47.396	49.181	51.225	53.207	55.372	57.625	
		Monthly	7,409.827	7,684.035	7,958.578	8,258.310	8,601.531	8,934.342	9,297.882	9,676.198	
		Annual	88,917.920	92,208.415	95,502.940	99,099.715	103,218.375	107,212.105	111,574.580	116,114.375	
Nurse V - Churchill	2015	Hourly	45.668	47.418	49.421	51.364	53.487	55.563	57.729		58.886
		Monthly	7,668.418	7,962.273	8,298.610	8,624.872	8,981.359	9,329.954	9,693.661		9,887.941
		Annual	92,021.020	95,547.270	99,583.315	103,498.460	107,776.305	111,959.445	116,323.935		118,655.290
Nurse V (20 Year Scale) - Churchill	2015	Hourly	46.583	48.366	50.408	52.391	54.555	56.674	58.886		
		Monthly	7,822.062	8,121.458	8,464.343	8,797.322	9,160.694	9,516.509	9,887.941		
		Annual	93,864.745	97,457.490	101,572.120	105,567.865	109,928.325	114,198.110	118,655.290		
Nurse Practitioner - Churchill	2015	Hourly	52.048	55.866	58.162	60.458	62.934				64.191
		Monthly	8,739.727	9,380.833	9,766.369	10,151.906	10,567.668				10,778.739
		Annual	104,876.720	112,569.990	117,196.430	121,822.870	126,812.010				129,344.865
Nurse Practitioner (20 Year Scale) - Churchill	2015	Hourly	53.088	56.983	59.327	61.667	64.191				
		Monthly	8,914.360	9,568.395	9,961.992	10,354.917	10,778.739				
		Annual	106,972.320	114,820.745	119,543.905	124,259.005	129,344.865				
Weekend Worker - Licensed Practical Nurse / ORT I	2015	Hourly	33.862	34.970	36.063	37.392	38.612	39.972	41.396	42.636	43.489
		Monthly	5,685.994	5,872.046	6,055.579	6,278.740	6,483.598	6,711.965	6,951.078	7,159.295	7,302.528
		Annual	68,231.930	70,464.550	72,666.945	75,344.880	77,803.180	80,543.580	83,412.940	85,911.540	87,630.335
Weekend Worker Rates - ORT II	2015	Hourly	36.063	37.392	38.612	39.983	41.251	42.536	43.850	45.166	46.069
		Monthly	6,055.579	6,278.740	6,483.598	6,713.812	6,926.730	7,142.503	7,363.146	7,584.124	7,735.753
		Annual	72,666.945	75,344.880	77,803.180	80,565.745	83,120.765	85,710.040	88,357.750	91,009.490	92,829.035
Weekend Worker - Nurse II ⁽²⁾	2015	Hourly	44.235	45.779	47.327	48.941	50.519	52.156	53.199	54.263	55.348
		Monthly	7,427.794	7,687.057	7,946.992	8,218.010	8,482.982	8,757.862	8,932.999	9,111.662	9,293.852
		Annual	89,133.525	92,244.685	95,363.905	98,616.115	101,795.785	105,094.340	107,195.985	109,339.945	111,526.220
Weekend Worker - Nurse II (20 Year Scale) ⁽²⁾	2015	Hourly	45.121	46.694	48.275	49.921	51.529	53.198	54.263	55.348	
		Monthly	7,576.568	7,840.701	8,106.177	8,382.568	8,652.578	8,932.831	9,111.662	9,293.852	
		Annual	90,918.815	94,088.410	97,274.125	100,590.815	103,830.935	107,193.970	109,339.945	111,526.220	

Weekend Worker - LPN - CRN	2015	Hourly	45.076	46.622	48.204	49.799	51.321	52.938	54.284	55.370	56.477
		Monthly	7,569.012	7,828.611	8,094.255	8,362.082	8,617.651	8,889.173	9,115.188	9,297.546	9,483.430
		Annual	90,828.140	93,943.330	97,131.060	100,344.985	103,411.815	106,670.070	109,382.260	111,570.550	113,801.155
Weekend Worker - LPN - CRN (20 Year Scale)	2015	Hourly	45.978	47.554	49.168	50.795	52.347	53.997	55.370	56.477	
		Monthly	7,720.473	7,985.109	8,256.127	8,529.327	8,789.934	9,066.996	9,297.546	9,483.430	
		Annual	92,645.670	95,821.310	99,073.520	102,351.925	105,479.205	108,803.955	111,570.550	113,801.155	
Weekend Worker - Nurse III	2015	Hourly	45.916	47.466	49.081	50.658	52.123	53.720	55.369	56.475	57.605
		Monthly	7,710.062	7,970.333	8,241.518	8,506.323	8,752.320	9,020.483	9,297.378	9,483.094	9,672.840
		Annual	92,520.740	95,643.990	98,898.215	102,075.870	105,027.845	108,245.800	111,568.535	113,797.125	116,074.075
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	46.834	48.413	50.063	51.672	53.165	54.793	56.476	57.605	
		Monthly	7,864.209	8,129.350	8,406.412	8,676.590	8,927.290	9,200.658	9,483.262	9,672.840	
		Annual	94,370.510	97,552.195	100,876.945	104,119.080	107,127.475	110,407.895	113,799.140	116,074.075	
Weekend Worker - Nurse IV	2015	Hourly	47.490	49.250	51.010	52.929	55.130	57.263	59.591	62.017	63.256
		Monthly	7,974.363	8,269.896	8,565.429	8,887.661	9,257.246	9,615.412	10,006.322	10,413.688	10,621.737
		Annual	95,692.350	99,238.750	102,785.150	106,651.935	111,086.950	115,384.945	120,075.865	124,964.255	127,460.840
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	48.442	50.235	52.030	53.990	56.232	58.407	60.784	63.256	
		Monthly	8,134.219	8,435.294	8,736.704	9,065.821	9,442.290	9,807.509	10,206.647	10,621.737	
		Annual	97,610.630	101,223.525	104,840.450	108,789.850	113,307.480	117,690.105	122,479.760	127,460.840	
Weekend Worker - Nurse V	2015	Hourly	50.131	52.051	54.250	56.384	58.713	60.994	63.371	64.638	
		Monthly	8,417.830	8,740.230	9,109.479	9,467.813	9,858.891	10,241.909	10,641.047	10,853.798	
		Annual	101,013.965	104,882.765	109,313.750	113,613.760	118,306.695	122,902.910	127,692.565	130,245.570	
Weekend Worker - Nurse V (20 Year Scale)	2015	Hourly	51.134	53.092	55.334	57.512	59.887	62.213	64.638		
		Monthly	8,586.251	8,915.032	9,291.501	9,657.223	10,056.025	10,446.600	10,853.798		
		Annual	103,035.010	106,980.380	111,498.010	115,886.680	120,672.305	125,359.195	130,245.570		
Weekend Worker - Licensed Practical Nurse -	2015	Hourly	35.473	36.636	37.780	39.173	40.450	41.875	43.366	44.668	45.561
		Monthly	5,956.508	6,151.795	6,343.892	6,577.800	6,792.229	7,031.510	7,281.874	7,500.502	7,650.451
		Annual	71,478.095	73,821.540	76,126.700	78,933.595	81,506.750	84,378.125	87,382.490	90,006.020	91,805.415
Weekend Worker - Nurse II - Churchill ⁽²⁾	2015	Hourly	46.342	47.959	49.581	51.271	52.924	54.632	55.727	56.841	57.978
		Monthly	7,781.594	8,053.115	8,325.476	8,609.255	8,886.822	9,173.623	9,357.492	9,544.551	9,735.473
		Annual	93,379.130	96,637.385	99,905.715	103,311.065	106,641.860	110,083.480	112,289.905	114,534.615	116,825.670
Weekend Worker - Nurse II (20 Year Scale) - Ct	2015	Hourly	47.269	48.918	50.574	52.297	53.984	55.727	56.842	57.978	
		Monthly	7,937.253	8,214.148	8,492.218	8,781.538	9,064.813	9,357.492	9,544.719	9,735.473	
		Annual	95,247.035	98,569.770	101,906.610	105,378.455	108,777.760	112,289.905	114,536.630	116,825.670	
Weekend Worker - LPN - CRN - Churchill	2015	Hourly	47.223	48.843	50.500	52.171	53.765	55.454	56.866	58.003	59.163
		Monthly	7,929.529	8,201.554	8,479.792	8,760.380	9,028.040	9,311.651	9,548.749	9,739.670	9,934.454
		Annual	95,154.345	98,418.645	101,757.500	105,124.565	108,336.475	111,739.810	114,584.990	116,876.045	119,213.445
Weekend Worker - LPN - CRN (20 Year Scale) -	2015	Hourly	48.167	49.820	51.510	53.214	54.840	56.563	58.003	59.163	
		Monthly	8,088.042	8,365.608	8,649.388	8,935.518	9,208.550	9,497.870	9,739.670	9,934.454	
		Annual	97,056.505	100,387.300	103,792.650	107,226.210	110,502.600	113,974.445	116,876.045	119,213.445	
Weekend Worker - Nurse III - Churchill	2015	Hourly	48.103	49.726	51.418	53.071	54.606	56.276	58.004	59.164	60.347
		Monthly	8,077.295	8,349.824	8,633.939	8,911.505	9,169.258	9,449.678	9,739.838	9,934.622	10,133.267
		Annual	96,927.545	100,197.890	103,607.270	106,938.065	110,031.090	113,396.140	116,878.060	119,215.460	121,599.205
Weekend Worker - Nurse III (20 Year Scale) - C	2015	Hourly	49.064	50.720	52.447	54.131	55.697	57.404	59.163	60.347	
		Monthly	8,238.663	8,516.733	8,806.725	9,089.497	9,352.455	9,639.088	9,934.454	10,133.267	
		Annual	98,863.960	102,200.800	105,680.705	109,073.965	112,229.455	115,669.060	119,213.445	121,599.205	

Weekend Worker - Nurse IV - Churchill	2015	Hourly	49.753	51.596	53.439	55.451	57.753	59.988	62.429	64.968	66.267
		Monthly	8,354.358	8,663.828	8,973.299	9,311.147	9,697.691	10,072.985	10,482.870	10,909.210	11,127.334
		Annual	100,252.295	103,965.940	107,679.585	111,733.765	116,372.295	120,875.820	125,794.435	130,910.520	133,528.005
Weekend Worker - Nurse IV (20 Year Scale) - Ct	2015	Hourly	50.748	52.627	54.509	56.561	58.909	61.189	63.676	66.267	
		Monthly	8,521.435	8,836.950	9,152.970	9,497.535	9,891.803	10,274.653	10,692.262	11,127.334	
		Annual	102,257.220	106,043.405	109,835.635	113,970.415	118,701.635	123,295.835	128,307.140	133,528.005	
Weekend Worker - Nurse V - Churchill	2015	Hourly	52.519	54.530	56.833	59.069	61.509	63.898	66.390	67.716	
		Monthly	8,818.815	9,156.496	9,543.208	9,918.670	10,328.386	10,729.539	11,147.988	11,370.645	
		Annual	105,825.785	109,877.950	114,518.495	119,024.035	123,940.635	128,754.470	133,775.850	136,447.740	
Weekend Worker - Nurse V (20 Year Scale) - Ct	2015	Hourly	53.569	55.621	57.970	60.248	62.737	65.175	67.716		
		Monthly	8,995.128	9,339.693	9,734.129	10,116.643	10,534.588	10,943.969	11,370.645		
		Annual	107,941.535	112,076.315	116,809.550	121,399.720	126,415.055	131,327.625	136,447.740		

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

² New 'Year 7' Step-on-Scale for Nurse II Effective April 1, 2022

A1. Effective April 1, 2023		- Monthly salaries include a 2.0% increase Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.									
Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse / ORT I	2015	Hourly	30.033	31.017	31.987	33.167	34.245	35.455	36.715	37.817	38.573
		Monthly	5,043.041	5,208.271	5,371.150	5,569.292	5,750.306	5,953.485	6,165.060	6,350.105	6,477.050
		Annual	60,516.495	62,499.255	64,453.805	66,831.505	69,003.675	71,441.825	73,980.725	76,201.255	77,724.595
Undergraduate Nursing Employee	2015	Hourly	30.033								
		Monthly	5,043.041								
		Annual	60,516.495								
ORT II	2015	Hourly	31.987	33.167	34.245	35.464	36.587	37.728	38.894	40.059	40.860
		Monthly	5,371.150	5,569.292	5,750.306	5,954.997	6,143.567	6,335.160	6,530.951	6,726.574	6,861.075
		Annual	64,453.805	66,831.505	69,003.675	71,459.960	73,722.805	76,021.920	78,371.410	80,718.885	82,332.900
Nurse II	2015	Hourly	39.233	40.604	41.977	43.407	44.809	46.260	47.185	48.129	49.092
		Monthly	6,587.875	6,818.088	7,048.638	7,288.759	7,524.178	7,767.825	7,923.148	8,081.661	8,243.365
		Annual	79,054.495	81,817.060	84,583.655	87,465.105	90,290.135	93,213.900	95,077.775	96,979.935	98,920.380
Nurse II (20 Year Scale) ⁽³⁾	2015	Hourly	40.019	41.416	42.818	44.277	45.704	47.185	48.129	49.092	
		Monthly	6,719.857	6,954.437	7,189.856	7,434.846	7,674.463	7,923.148	8,081.661	8,243.365	
		Annual	80,638.285	83,453.240	86,278.270	89,218.155	92,093.560	95,077.775	96,979.935	98,920.380	
LPN - CRN	2015	Hourly	39.980	41.352	42.755	44.170	45.520	46.954	48.148	49.110	50.092
		Monthly	6,713.308	6,943.690	7,179.277	7,416.879	7,643.567	7,884.359	8,084.852	8,246.388	8,411.282
		Annual	80,559.700	83,324.280	86,151.325	89,002.550	91,722.800	94,612.310	97,018.220	98,956.650	100,935.380
LPN - CRN (20 Year Scale)	2015	Hourly	40.780	42.179	43.610	45.053	46.430	47.893	49.111	50.092	
		Monthly	6,847.642	7,082.557	7,322.846	7,565.150	7,796.371	8,042.033	8,246.555	8,411.282	
		Annual	82,171.700	84,990.685	87,874.150	90,781.795	93,556.450	96,504.395	98,958.665	100,935.380	
Nurse III	2015	Hourly	40.726	42.098	43.534	44.932	46.230	47.646	49.109	50.091	51.093
		Monthly	6,838.574	7,068.956	7,310.084	7,544.832	7,762.788	8,000.558	8,246.220	8,411.114	8,579.366
		Annual	82,062.890	84,827.470	87,721.010	90,537.980	93,153.450	96,006.690	98,954.635	100,933.365	102,952.395
Nurse III (20 Year Scale)	2015	Hourly	41.540	42.940	44.404	45.831	47.155	48.600	50.091	51.093	
		Monthly	6,975.258	7,210.342	7,456.172	7,695.789	7,918.110	8,160.750	8,411.114	8,579.366	
		Annual	83,703.100	86,524.100	89,474.060	92,349.465	95,017.325	97,929.000	100,933.365	102,952.395	
Nurse III - WRHA Community PIO	2015	Hourly	39.942	41.281	42.710	44.075	45.343	46.707	48.162	49.125	50.108
		Monthly	6,706.928	6,931.768	7,171.721	7,400.927	7,613.845	7,842.884	8,087.203	8,248.906	8,413.968
		Annual	80,483.130	83,181.215	86,060.650	88,811.125	91,366.145	94,114.605	97,046.430	98,986.875	100,967.620
Nurse IV	2015	Hourly	42.124	43.683	45.245	46.947	48.898	50.789	52.855	55.007	56.107
		Monthly	7,073.322	7,335.104	7,597.390	7,883.184	8,210.789	8,528.320	8,875.235	9,236.592	9,421.300
		Annual	84,879.860	88,021.245	91,168.675	94,598.205	98,529.470	102,339.835	106,502.825	110,839.105	113,055.605
Nurse IV (20 Year Scale)	2015	Hourly	42.965	44.557	46.148	47.886	49.876	51.806	53.911	56.107	
		Monthly	7,214.540	7,481.863	7,749.018	8,040.858	8,375.012	8,699.091	9,052.555	9,421.300	
		Annual	86,574.475	89,782.355	92,988.220	96,490.290	100,500.140	104,389.090	108,630.665	113,055.605	

ICP-Clinical Team Leader / Infection Control Specialist	2015	Hourly	44.374	46.925	49.741	52.557	55.371	58.187		59.349	
		Monthly	7,451.134	7,879.490	8,352.343	8,825.196	9,297.714	9,770.567		9,965.686	
		Annual	89,413.610	94,553.875	100,228.115	105,902.355	111,572.565	117,246.805		119,588.235	
ICP-Clinical Team Leader / Infection Control Specialist (20 Year Scale)	2015	Hourly	45.261	47.865	50.737	53.607	56.479	59.349			
		Monthly	7,600.076	8,037.331	8,519.588	9,001.509	9,483.765	9,965.686			
		Annual	91,200.915	96,447.975	102,235.055	108,018.105	113,805.185	119,588.235			
Nurse V	2015	Hourly	44.465	46.166	48.117	50.009	52.075	54.100	56.209	57.332	
		Monthly	7,466.415	7,752.041	8,079.646	8,397.345	8,744.260	9,084.292	9,438.428	9,626.998	
		Annual	89,596.975	93,024.490	96,955.755	100,768.135	104,931.125	109,011.500	113,261.135	115,523.980	
Nurse V (20 Year Scale)	2015	Hourly	45.353	47.090	49.079	51.011	53.117	55.181	57.332		
		Monthly	7,615.525	7,907.196	8,241.182	8,565.597	8,919.230	9,265.810	9,626.998		
		Annual	91,386.295	94,886.350	98,894.185	102,787.165	107,030.755	111,189.715	115,523.980		
Clinical Nurse Specialist	2015	Hourly	50.675	54.394	56.631	58.864	61.275			62.499	
		Monthly	8,509.177	9,133.659	9,509.289	9,884.247	10,289.094			10,494.624	
		Annual	102,110.125	109,603.910	114,111.465	118,610.960	123,469.125			125,935.485	
Clinical Nurse Specialist (20 Year Scale)	2015	Hourly	51.687	55.480	57.762	60.040	62.499				
		Monthly	8,679.109	9,316.017	9,699.203	10,081.717	10,494.624				
		Annual	104,149.305	111,792.200	116,390.430	120,980.600	125,935.485				
Nurse Practitioner ⁽²⁾	2015	Hourly	50.675	54.394	56.631	58.864	61.275	63.113		64.375	
		Monthly	8,509.177	9,133.659	9,509.289	9,884.247	10,289.094	10,597.725		10,809.635	
		Annual	102,110.125	109,603.910	114,111.465	118,610.960	123,469.125	127,172.695		129,715.625	
Nurse Practitioner (20 Year Scale)	2015	Hourly	51.687	55.480	57.762	60.040	62.499	64.375			
		Monthly	8,679.109	9,316.017	9,699.203	10,081.717	10,494.624	10,809.635			
		Annual	104,149.305	111,792.200	116,390.430	120,980.600	125,935.485	129,715.625			
Licensed Practical Nurse - Churchill	2015	Hourly	31.466	32.494	33.509	34.744	35.879	37.142	38.464	39.619	40.411
		Monthly	5,283.666	5,456.284	5,626.720	5,834.097	6,024.682	6,236.761	6,458.747	6,652.690	6,785.680
		Annual	63,403.990	65,475.410	67,520.635	70,009.160	72,296.185	74,841.130	77,504.960	79,832.285	81,428.165
Undergraduate Nursing Employee - Churchill	2015	Hourly	31.466								
		Monthly	5,283.666								
		Annual	63,403.990								
Nurse II - Churchill	2015	Hourly	41.102	42.537	43.976	45.475	46.940	48.458	49.427	50.416	51.424
		Monthly	6,901.711	7,142.671	7,384.303	7,636.010	7,882.008	8,136.906	8,299.617	8,465.687	8,634.947
		Annual	82,820.530	85,712.055	88,611.640	91,632.125	94,584.100	97,642.870	99,595.405	101,588.240	103,619.360
Nurse II (20 Year Scale) - Churchill	2015	Hourly	41.924	43.387	44.856	46.386	47.881	49.427	50.416	51.424	
		Monthly	7,039.738	7,285.400	7,532.070	7,788.983	8,040.018	8,299.617	8,465.687	8,634.947	
		Annual	84,476.860	87,424.805	90,384.840	93,467.790	96,480.215	99,595.405	101,588.240	103,619.360	
LPN - CRN - Churchill	2015	Hourly	41.884	43.320	44.791	46.273	47.687	49.187	50.438	51.446	52.475
		Monthly	7,033.022	7,274.150	7,521.155	7,770.008	8,007.442	8,259.317	8,469.381	8,638.641	8,811.427
		Annual	84,396.260	87,289.800	90,253.865	93,240.095	96,089.305	99,111.805	101,632.570	103,663.690	105,737.125
LPN - CRN - Churchill (20 Year Scale)	2015	Hourly	42.722	44.186	45.687	47.198	48.641	50.171	51.447	52.475	
		Monthly	7,173.736	7,419.566	7,671.609	7,925.331	8,167.635	8,424.547	8,638.809	8,811.427	
		Annual	86,084.830	89,034.790	92,059.305	95,103.970	98,011.615	101,094.565	103,665.705	105,737.125	

Nurse III - Churchill	2015	Hourly	42.666	44.103	45.605	47.071	48.432	49.916	51.447	52.476	53.526
		Monthly	7,164.333	7,405.629	7,657.840	7,904.005	8,132.540	8,381.728	8,638.809	8,811.595	8,987.908
		Annual	85,971.990	88,867.545	91,894.075	94,848.065	97,590.480	100,580.740	103,665.705	105,739.140	107,854.890
Nurse III (20 Year Scale) - Churchill	2015	Hourly	43.520	44.987	46.518	48.012	49.401	50.915	52.476	53.526	
		Monthly	7,307.733	7,554.067	7,811.148	8,062.015	8,295.251	8,549.477	8,811.595	8,987.908	
		Annual	87,692.800	90,648.805	93,733.770	96,744.180	99,543.015	102,593.725	105,739.140	107,854.890	
Nurse IV - Churchill	2015	Hourly	44.128	45.762	47.397	49.181	51.224	53.206	55.370	57.625	58.778
		Monthly	7,409.827	7,684.203	7,958.746	8,258.310	8,601.363	8,934.174	9,297.546	9,676.198	9,869.806
		Annual	88,917.920	92,210.430	95,504.955	99,099.715	103,216.360	107,210.090	111,570.550	116,114.375	118,437.670
Nurse IV - (20 Year Scale) - Churchill	2015	Hourly	45.011	46.676	48.344	50.165	52.250	54.271	56.479	58.778	
		Monthly	7,558.097	7,837.678	8,117.763	8,423.540	8,773.646	9,113.005	9,483.765	9,869.806	
		Annual	90,697.165	94,052.140	97,413.160	101,082.475	105,283.750	109,356.065	113,805.185	118,437.670	
Nurse V - Churchill	2015	Hourly	46.581	48.366	50.409	52.391	54.557	56.674	58.884		60.064
		Monthly	7,821.726	8,121.458	8,464.511	8,797.322	9,161.030	9,516.509	9,887.605		10,085.747
		Annual	93,860.715	97,457.490	101,574.135	105,567.865	109,932.355	114,198.110	118,651.260		121,028.960
Nurse V (20 Year Scale) - Churchill	2015	Hourly	47.515	49.333	51.416	53.439	55.646	57.807	60.064		
		Monthly	7,978.560	8,283.833	8,633.603	8,973.299	9,343.891	9,706.759	10,085.747		
		Annual	95,742.725	99,405.995	103,603.240	107,679.585	112,126.690	116,481.105	121,028.960		
Nurse Practitioner - Churchill ⁽²⁾	2015	Hourly	53.089	56.983	59.325	61.667	64.193	66.119			67.441
		Monthly	8,914.528	9,568.395	9,961.656	10,354.917	10,779.075	11,102.482			11,324.468
		Annual	106,974.335	114,820.745	119,539.875	124,259.005	129,348.895	133,229.785			135,893.615
Nurse Practitioner (20 Year Scale) - Churchill	2015	Hourly	54.150	58.123	60.514	62.900	65.475	67.441			
		Monthly	9,092.688	9,759.820	10,161.309	10,561.958	10,994.344	11,324.468			
		Annual	109,112.250	117,117.845	121,935.710	126,743.500	131,932.125	135,893.615			
Weekend Worker - Licensed Practical Nurse / ORT I	2015	Hourly	34.539	35.669	36.784	38.140	39.384	40.771	42.224	43.489	44.359
		Monthly	5,799.674	5,989.420	6,176.647	6,404.342	6,613.230	6,846.130	7,090.113	7,302.528	7,448.615
		Annual	69,596.085	71,873.035	74,119.760	76,852.100	79,358.760	82,153.565	85,081.360	87,630.335	89,383.385
Weekend Worker Rates - ORT II	2015	Hourly	36.784	38.140	39.384	40.783	42.076	43.387	44.727	46.069	46.990
		Monthly	6,176.647	6,404.342	6,613.230	6,848.145	7,065.262	7,285.400	7,510.409	7,735.753	7,890.404
		Annual	74,119.760	76,852.100	79,358.760	82,177.745	84,783.140	87,424.805	90,124.905	92,829.035	94,684.850
Weekend Worker - Nurse II	2015	Hourly	45.120	46.695	48.274	49.920	51.529	53.199	54.263	55.348	56.455
		Monthly	7,576.400	7,840.869	8,106.009	8,382.400	8,652.578	8,932.999	9,111.662	9,293.852	9,479.735
		Annual	90,916.800	94,090.425	97,272.110	100,588.800	103,830.935	107,195.985	109,339.945	111,526.220	113,756.825
Weekend Worker - Nurse II (20 Year Scale)	2015	Hourly	46.023	47.628	49.241	50.919	52.560	54.262	55.348	56.455	
		Monthly	7,728.029	7,997.535	8,268.385	8,550.149	8,825.700	9,111.494	9,293.852	9,479.735	
		Annual	92,736.345	95,970.420	99,220.615	102,601.785	105,908.400	109,337.930	111,526.220	113,756.825	
Weekend Worker - LPN - CRN	2015	Hourly	45.978	47.554	49.168	50.795	52.347	53.997	55.370	56.477	57.607
		Monthly	7,720.473	7,985.109	8,256.127	8,529.327	8,789.934	9,066.996	9,297.546	9,483.430	9,673.175
		Annual	92,645.670	95,821.310	99,073.520	102,351.925	105,479.205	108,803.955	111,570.550	113,801.155	116,078.105
Weekend Worker - LPN - CRN (20 Year Scale)	2015	Hourly	46.898	48.505	50.151	51.811	53.394	55.077	56.477	57.607	
		Monthly	7,874.956	8,144.798	8,421.189	8,699.930	8,965.743	9,248.346	9,483.430	9,673.175	
		Annual	94,499.470	97,737.575	101,054.265	104,399.165	107,588.910	110,980.155	113,801.155	116,078.105	

Weekend Worker - Nurse III	2015	Hourly	46.834	48.415	50.063	51.671	53.165	54.794	56.476	57.605	58.757
		Monthly	7,864.209	8,129.685	8,406.412	8,676.422	8,927.290	9,200.826	9,483.262	9,672.840	9,866.280
		Annual	94,370.510	97,556.225	100,876.945	104,117.065	107,127.475	110,409.910	113,799.140	116,074.075	118,395.355
Weekend Worker - Nurse III (20 Year Scale)	2015	Hourly	47.771	49.381	51.064	52.705	54.228	55.889	57.606	58.757	
		Monthly	8,021.547	8,291.893	8,574.497	8,850.048	9,105.785	9,384.695	9,673.008	9,866.280	
		Annual	96,258.565	99,502.715	102,893.960	106,200.575	109,269.420	112,616.335	116,076.090	118,395.355	
Weekend Worker - Nurse IV	2015	Hourly	48.440	50.235	52.030	53.988	56.233	58.408	60.783	63.257	64.521
		Monthly	8,133.883	8,435.294	8,736.704	9,065.485	9,442.458	9,807.677	10,206.479	10,621.905	10,834.151
		Annual	97,606.600	101,223.525	104,840.450	108,785.820	113,309.495	117,692.120	122,477.745	127,462.855	130,009.815
Weekend Worker - Nurse IV (20 Year Scale)	2015	Hourly	49.411	51.240	53.071	55.070	57.357	59.575	62.000	64.521	
		Monthly	8,296.930	8,604.050	8,911.505	9,247.171	9,631.196	10,003.635	10,410.833	10,834.151	
		Annual	99,563.165	103,248.600	106,938.065	110,966.050	115,574.355	120,043.625	124,930.000	130,009.815	
Weekend Worker - Nurse V	2015	Hourly	51.134	53.092	55.335	57.512	59.887	62.214	64.638	65.931	
		Monthly	8,586.251	8,915.032	9,291.669	9,657.223	10,056.025	10,446.768	10,853.798	11,070.914	
		Annual	103,035.010	106,980.380	111,500.025	115,886.680	120,672.305	125,361.210	130,245.570	132,850.965	
Weekend Worker - Nurse V (20 Year Scale)	2015	Hourly	52.157	54.154	56.441	58.662	61.085	63.457	65.931		
		Monthly	8,758.030	9,093.359	9,477.385	9,850.328	10,257.190	10,655.488	11,070.914		
		Annual	105,096.355	109,120.310	113,728.615	118,203.930	123,086.275	127,865.855	132,850.965		
Weekend Worker - Licensed Practical Nurse - Churc	2015	Hourly	36.182	37.369	38.536	39.956	41.259	42.713	44.233	45.561	46.472
		Monthly	6,075.561	6,274.878	6,470.837	6,709.278	6,928.074	7,172.225	7,427.458	7,650.451	7,803.423
		Annual	72,906.730	75,298.535	77,650.040	80,511.340	83,136.885	86,066.695	89,129.495	91,805.415	93,641.080
Weekend Worker - Nurse II - Churchill	2015	Hourly	47.269	48.918	50.573	52.296	53.982	55.725	56.842	57.978	59.138
		Monthly	7,937.253	8,214.148	8,492.050	8,781.370	9,064.478	9,357.156	9,544.719	9,735.473	9,930.256
		Annual	95,247.035	98,569.770	101,904.595	105,376.440	108,773.730	112,285.875	114,536.630	116,825.670	119,163.070
Weekend Worker - Nurse II (20 Year Scale) - Churchi	2015	Hourly	48.214	49.896	51.585	53.343	55.064	56.842	57.979	59.138	
		Monthly	8,095.934	8,378.370	8,661.981	8,957.179	9,246.163	9,544.719	9,735.640	9,930.256	
		Annual	97,151.210	100,540.440	103,943.775	107,486.145	110,953.960	114,536.630	116,827.685	119,163.070	
Weekend Worker - LPN - CRN - Churchill	2015	Hourly	48.167	49.820	51.510	53.214	54.840	56.563	58.003	59.163	60.346
		Monthly	8,088.042	8,365.608	8,649.388	8,935.518	9,208.550	9,497.870	9,739.670	9,934.454	10,133.099
		Annual	97,056.505	100,387.300	103,792.650	107,226.210	110,502.600	113,974.445	116,876.045	119,213.445	121,597.190
Weekend Worker - LPN - CRN (20 Year Scale) - Churc	2015	Hourly	49.130	50.816	52.540	54.278	55.937	57.694	59.163	60.346	
		Monthly	8,249.746	8,532.853	8,822.342	9,114.181	9,392.755	9,687.784	9,934.454	10,133.099	
		Annual	98,996.950	102,394.240	105,868.100	109,370.170	112,713.055	116,253.410	119,213.445	121,597.190	
Weekend Worker - Nurse III - Churchill	2015	Hourly	49.065	50.721	52.446	54.132	55.698	57.402	59.164	60.347	61.554
		Monthly	8,238.831	8,516.901	8,806.558	9,089.665	9,352.623	9,638.753	9,934.622	10,133.267	10,335.943
		Annual	98,865.975	102,202.815	105,678.690	109,075.980	112,231.470	115,665.030	119,215.460	121,599.205	124,031.310
Weekend Worker - Nurse III (20 Year Scale) - Church	2015	Hourly	50.045	51.734	53.496	55.214	56.811	58.552	60.346	61.554	
		Monthly	8,403.390	8,687.001	8,982.870	9,271.351	9,539.514	9,831.857	10,133.099	10,335.943	
		Annual	100,840.675	104,244.010	107,794.440	111,256.210	114,474.165	117,982.280	121,597.190	124,031.310	
Weekend Worker - Nurse IV - Churchill	2015	Hourly	50.748	52.628	54.508	56.560	58.908	61.188	63.678	66.267	67.592
		Monthly	8,521.435	8,837.118	9,152.802	9,497.367	9,891.635	10,274.485	10,692.598	11,127.334	11,349.823
		Annual	102,257.220	106,045.420	109,833.620	113,968.400	118,699.620	123,293.820	128,311.170	133,528.005	136,197.880
Weekend Worker - Nurse IV (20 Year Scale) - Churchi	2015	Hourly	51.763	53.680	55.599	57.692	60.087	62.413	64.950	67.592	
		Monthly	8,691.870	9,013.767	9,335.999	9,687.448	10,089.609	10,480.183	10,906.188	11,349.823	
		Annual	104,302.445	108,165.200	112,031.985	116,249.380	121,075.305	125,762.195	130,874.250	136,197.880	

Weekend Worker - Nurse V - Churchill	2015	Hourly	53.569	55.621	57.970	60.250	62.739	65.176	67.718	69.070
		Monthly	8,995.128	9,339.693	9,734.129	10,116.979	10,534.924	10,944.137	11,370.981	11,598.004
		Annual	107,941.535	112,076.315	116,809.550	121,403.750	126,419.085	131,329.640	136,451.770	139,176.050
Weekend Worker - Nurse V (20 Year Scale) - Churchil	2015	Hourly	54.640	56.733	59.129	61.453	63.992	66.479	69.070	
		Monthly	9,174.967	9,526.416	9,928.745	10,318.983	10,745.323	11,162.932	11,598.004	
		Annual	110,099.600	114,316.995	119,144.935	123,827.795	128,943.880	133,955.185	139,176.050	

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

² New 'Year 5' Step-on-Scale for Nurse Practitioner Effective April 1, 2023

**MNU & Winnipeg Health Employer Organization
2080 ANNUAL HOURS- APPENDIX A - SALARIES**

A1. Effective April 1, 2017

- Monthly salaries include a 1.25% increase
Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse	2080	Hourly	26.781	27.658	28.524	29.575	30.538	31.615	32.741	33.396	
		Monthly	4,642.056	4,794.021	4,944.138	5,126.328	5,293.237	5,479.960	5,675.080	5,788.591	
		Annual	55,704.675	57,528.250	59,329.660	61,515.935	63,518.845	65,759.525	68,100.955	69,463.095	
Nurse II	2080	Hourly	34.986	36.207	37.433	38.708	39.956	41.251		42.076	
		Monthly	6,064.310	6,275.885	6,488.300	6,709.446	6,925.723	7,150.228		7,293.125	
		Annual	72,771.725	75,310.625	77,859.600	80,513.355	83,108.675	85,802.730		87,517.495	
Nurse II (20 Year Scale)	2080	Hourly	35.687	36.932	38.181	39.483	40.755	42.076			
		Monthly	6,185.714	6,401.487	6,618.100	6,843.780	7,064.254	7,293.125			
		Annual	74,228.570	76,817.845	79,417.195	82,125.355	84,771.050	87,517.495			
Nurse III	2080	Hourly	36.317	37.541	38.820	40.068	41.225	42.487	43.791	44.667	
		Monthly	6,294.860	6,507.107	6,728.757	6,945.033	7,145.694	7,364.489	7,590.505	7,742.302	
		Annual	75,538.320	78,085.280	80,745.080	83,340.400	85,748.325	88,373.870	91,086.060	92,907.620	
Nurse III (20 Year Scale)	2080	Hourly	37.042	38.292	39.596	40.869	42.050	43.338	44.667		
		Monthly	6,420.630	6,637.242	6,863.258	7,083.900	7,288.591	7,511.920	7,742.302		
		Annual	77,047.555	79,646.905	82,359.095	85,006.805	87,463.090	90,143.040	92,907.620		
Nurse III - WRHA Community PIO	2080	Hourly	36.766	37.999	39.315	40.572	41.737	42.994	44.333	45.219	
		Monthly	6,372.773	6,586.493	6,814.600	7,032.480	7,234.413	7,452.293	7,684.387	7,837.960	
		Annual	76,473.280	79,037.920	81,775.200	84,389.760	86,812.960	89,427.520	92,212.640	94,055.520	
Nurse IV	2080	Hourly	37.562	38.952	40.346	41.864	43.603	45.290	47.057	47.998	
		Monthly	6,510.801	6,751.761	6,993.225	7,256.351	7,557.929	7,850.272	8,156.552	8,319.599	
		Annual	78,129.610	81,021.135	83,918.705	87,076.210	90,695.150	94,203.265	97,878.625	99,835.190	
Nurse IV (20 Year Scale)	2080	Hourly	38.313	39.731	41.152	42.701	44.475	46.197	47.998		
		Monthly	6,640.936	6,886.766	7,132.932	7,401.431	7,709.054	8,007.442	8,319.599		
		Annual	79,691.235	82,641.195	85,595.185	88,817.170	92,508.650	96,089.305	99,835.190		
Nurse IV - WHC	2080	Hourly	37.562	38.952	40.346	41.864	43.603	45.290	47.133	49.051	50.032
		Monthly	6,510.801	6,751.761	6,993.225	7,256.351	7,557.929	7,850.272	8,169.650	8,502.125	8,672.224
		Annual	78,129.610	81,021.135	83,918.705	87,076.210	90,695.150	94,203.265	98,035.795	102,025.495	104,066.690
Nurse IV - WHC (20 Year Scale)	2080	Hourly	38.313	39.731	41.152	42.701	44.475	46.197	48.075	50.032	
		Monthly	6,640.936	6,886.766	7,132.932	7,401.431	7,709.054	8,007.442	8,333.033	8,672.224	
		Annual	79,691.235	82,641.195	85,595.185	88,817.170	92,508.650	96,089.305	99,996.390	104,066.690	
Nurse V	2080	Hourly	39.650	41.169	42.908	44.594	46.437	48.242	50.122	51.125	
		Monthly	6,872.661	7,135.955	7,437.365	7,729.708	8,049.085	8,361.914	8,687.840	8,861.634	
		Annual	82,471.935	85,631.455	89,248.380	92,756.495	96,589.025	100,342.970	104,254.085	106,339.610	
Nurse V (20 Year Scale)	2080	Hourly	40.442	41.991	43.766	45.488	47.366	49.206	51.125		
		Monthly	7,010.017	7,278.516	7,586.139	7,884.527	8,210.118	8,528.991	8,861.634		
		Annual	84,120.205	87,342.190	91,033.670	94,614.325	98,521.410	102,347.895	106,339.610		
Nurse Practitioner	2080	Hourly	45.188	48.503	50.499	52.491	54.640			55.733	
		Monthly	7,832.641	8,407.252	8,753.160	9,098.397	9,471.004			9,660.414	
		Annual	93,991.690	100,887.020	105,037.920	109,180.760	113,652.045			115,924.965	
Nurse Practitioner (20 Year Scale)	2080	Hourly	46.091	49.473	51.507	53.540	55.733				
		Monthly	7,989.139	8,575.336	8,927.961	9,280.250	9,660.414				
		Annual	95,869.670	102,904.035	107,135.535	111,363.005	115,924.965				

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2018

- Monthly salaries include a 1.25% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse	2080	Hourly	27.116	28.004	28.880	29.945	30.920	32.010	33.150	33.813	
		Monthly	4,700.155	4,853.967	5,005.932	5,190.472	5,359.396	5,548.470	5,745.940	5,860.963	
		Annual	56,401.865	58,247.605	60,071.180	62,285.665	64,312.755	66,581.645	68,951.285	70,331.560	
Nurse II	2080	Hourly	35.423	36.659	37.900	39.192	40.456	41.767		42.602	
		Monthly	6,140.041	6,354.303	6,569.404	6,793.237	7,012.368	7,239.559		7,384.303	
		Annual	73,680.490	76,251.630	78,832.845	81,518.840	84,148.415	86,874.710		88,611.640	
Nurse II (20 Year Scale)	2080	Hourly	36.132	37.394	38.659	39.976	41.265	42.602			
		Monthly	6,262.956	6,481.583	6,700.883	6,929.249	7,152.578	7,384.303			
		Annual	75,155.470	77,779.000	80,410.590	83,150.990	85,830.940	88,611.640			
Nurse III	2080	Hourly	36.771	38.010	39.305	40.568	41.741	43.018	44.339		45.225
		Monthly	6,373.613	6,588.378	6,812.883	7,031.846	7,235.025	7,456.508	7,685.378		7,839.022
		Annual	76,483.355	79,060.540	81,754.595	84,382.155	86,820.305	89,478.090	92,224.535		94,068.260
Nurse III (20 Year Scale)	2080	Hourly	37.505	38.770	40.091	41.379	42.576	43.880	45.225		
		Monthly	6,500.894	6,720.193	6,949.063	7,172.393	7,379.770	7,605.785	7,839.022		
		Annual	78,010.725	80,642.315	83,388.760	86,068.710	88,557.235	91,269.425	94,068.260		
Nurse III - WRHA Community PIO	2080	Hourly	37.226	38.474	39.806	41.079	42.259	43.531	44.887		45.784
		Monthly	6,452.507	6,668.827	6,899.707	7,120.360	7,324.893	7,545.373	7,780.413		7,935.893
		Annual	77,430.080	80,025.920	82,796.480	85,444.320	87,898.720	90,544.480	93,364.960		95,230.720
Nurse IV	2080	Hourly	38.032	39.440	40.850	42.387	44.149	45.856	47.645		48.597
		Monthly	6,592.240	6,836.223	7,080.710	7,347.026	7,652.466	7,948.335	8,258.478		8,423.540
		Annual	79,106.885	82,034.680	84,968.520	88,164.310	91,829.595	95,380.025	99,101.730		101,082.475
Nurse IV (20 Year Scale)	2080	Hourly	38.792	40.228	41.666	43.234	45.031	46.774	48.597		
		Monthly	6,723.887	6,972.908	7,222.096	7,493.953	7,805.438	8,107.520	8,423.540		
		Annual	80,686.645	83,674.890	86,665.150	89,927.435	93,665.260	97,290.245	101,082.475		
Nurse IV - WHC	2080	Hourly	38.032	39.440	40.850	42.387	44.149	45.856	47.722	49.664	50.658
		Monthly	6,592.240	6,836.223	7,080.710	7,347.026	7,652.466	7,948.335	8,271.743	8,608.416	8,780.698
		Annual	79,106.885	82,034.680	84,968.520	88,164.310	91,829.595	95,380.025	99,260.915	103,300.990	105,368.380
Nurse IV - WHC (20 Year Scale)	2080	Hourly	38.792	40.228	41.666	43.234	45.031	46.774	48.676	50.658	
		Monthly	6,723.887	6,972.908	7,222.096	7,493.953	7,805.438	8,107.520	8,437.141	8,780.698	
		Annual	80,686.645	83,674.890	86,665.150	89,927.435	93,665.260	97,290.245	101,245.690	105,368.380	
Nurse V	2080	Hourly	40.146	41.683	43.445	45.152	47.017	48.844	50.749		51.764
		Monthly	6,958.635	7,225.118	7,530.391	7,826.260	8,149.668	8,466.358	8,796.483		8,972.459
		Annual	83,503.615	86,701.420	90,364.690	93,915.120	97,796.010	101,596.300	105,557.790		107,669.510
Nurse V (20 Year Scale)	2080	Hourly	40.948	42.517	44.314	46.056	47.958	49.821	51.764		
		Monthly	7,097.670	7,369.527	7,681.012	7,983.094	8,312.715	8,635.618	8,972.459		
		Annual	85,172.035	88,434.320	92,172.145	95,797.130	99,752.575	103,627.420	107,669.510		
Nurse Practitioner	2080	Hourly	45.753	49.110	51.131	53.147	55.323				56.430
		Monthly	7,930.536	8,512.368	8,862.642	9,212.076	9,589.385				9,781.146
		Annual	95,166.435	102,148.410	106,351.700	110,544.915	115,072.620				117,373.750
Nurse Practitioner (20 Year Scale)	2080	Hourly	46.668	50.091	52.152	54.209	56.430				
		Monthly	8,089.050	8,682.467	9,039.626	9,396.281	9,781.146				
		Annual	97,068.595	104,189.605	108,475.510	112,755.370	117,373.750				

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2019

- Monthly salaries include a 1.4% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year
Licensed Practical Nurse	2080	Hourly	27.496	28.396	29.284	30.365	31.353	32.459	33.614	34.287
		Monthly	4,765.979	4,921.973	5,075.953	5,263.180	5,434.455	5,626.216	5,826.373	5,943.075
		Annual	57,191.745	59,063.680	60,911.435	63,158.160	65,213.460	67,514.590	69,916.470	71,316.895
Nurse II	2080	Hourly	35.919	37.173	38.431	39.740	41.023	42.352		43.199
		Monthly	6,226.014	6,443.298	6,661.422	6,888.278	7,110.599	7,340.981		7,487.740
		Annual	74,712.170	77,319.580	79,937.065	82,659.330	85,327.190	88,091.770		89,852.880
Nurse II (20 Year Scale)	2080	Hourly	36.638	37.917	39.200	40.536	41.842	43.199		
		Monthly	6,350.608	6,572.258	6,794.748	7,026.305	7,252.657	7,487.740		
		Annual	76,207.300	78,867.100	81,536.975	84,315.660	87,031.880	89,852.880		
Nurse III	2080	Hourly	37.285	38.542	39.855	41.136	42.325	43.621	44.960	
		Monthly	6,462.777	6,680.565	6,908.260	7,130.245	7,336.279	7,560.952	7,793.013	7,948.839
		Annual	77,553.320	80,166.775	82,899.115	85,562.945	88,035.350	90,731.420	93,516.150	95,386.070
Nurse III (20 Year Scale)	2080	Hourly	38.030	39.313	40.652	41.959	43.171	44.494	45.859	
		Monthly	6,591.905	6,814.226	7,046.287	7,272.807	7,483.038	7,712.245	7,948.839	
		Annual	79,102.855	81,770.715	84,555.445	87,273.680	89,796.460	92,546.935	95,386.070	
Nurse III - WRHA Community PIO	2080	Hourly	37.747	39.013	40.363	41.654	42.851	44.140	45.515	
		Monthly	6,542.813	6,762.253	6,996.253	7,220.027	7,427.507	7,650.933	7,889.267	8,047.000
		Annual	78,513.760	81,147.040	83,955.040	86,640.320	89,130.080	91,811.200	94,671.200	96,564.000
Nurse IV	2080	Hourly	38.565	39.992	41.422	42.981	44.767	46.498	48.313	
		Monthly	6,684.595	6,931.936	7,179.781	7,449.959	7,759.597	8,059.664	8,374.172	8,541.417
		Annual	80,215.135	83,183.230	86,157.370	89,399.505	93,115.165	96,715.970	100,490.065	102,497.005
Nurse IV (20 Year Scale)	2080	Hourly	39.335	40.791	42.249	43.840	45.662	47.429	49.277	
		Monthly	6,818.088	7,070.467	7,323.182	7,598.901	7,914.752	8,221.032	8,541.417	
		Annual	81,817.060	84,845.605	87,878.180	91,186.810	94,977.025	98,652.385	102,497.005	
Nurse IV - WHC	2080	Hourly	38.565	39.992	41.422	42.981	44.767	46.498	48.390	50.360
		Monthly	6,684.595	6,931.936	7,179.781	7,449.959	7,759.597	8,059.664	8,387.605	8,728.980
		Annual	80,215.135	83,183.230	86,157.370	89,399.505	93,115.165	96,715.970	100,651.265	104,747.760
Nurse IV - WHC (20 Year Scale)	2080	Hourly	39.335	40.791	42.249	43.840	45.662	47.429	49.357	51.367
		Monthly	6,818.088	7,070.467	7,323.182	7,598.901	7,914.752	8,221.032	8,555.186	8,903.613
		Annual	81,817.060	84,845.605	87,878.180	91,186.810	94,977.025	98,652.385	102,662.235	106,843.360
Nurse V	2080	Hourly	40.708	42.267	44.053	45.784	47.675	49.528	51.459	
		Monthly	7,056.026	7,326.204	7,635.843	7,935.910	8,263.683	8,584.908	8,919.565	9,098.061
		Annual	84,672.315	87,914.450	91,630.110	95,230.915	99,164.195	103,018.890	107,034.785	109,176.730
Nurse V (20 Year Scale)	2080	Hourly	41.522	43.111	44.934	46.702	48.629	50.518	52.489	
		Monthly	7,197.076	7,472.628	7,788.479	8,094.927	8,429.081	8,756.518	9,098.061	
		Annual	86,364.915	89,671.530	93,461.745	97,139.120	101,148.970	105,078.220	109,176.730	
Nurse Practitioner	2080	Hourly	46.393	49.798	51.847	53.891	56.098			57.220
		Monthly	8,041.529	8,631.588	8,986.732	9,341.036	9,723.718			9,918.166
		Annual	96,498.350	103,579.060	107,840.785	112,092.435	116,684.620			119,017.990
Nurse Practitioner (20 Year Scale)	2080	Hourly	47.321	50.793	52.882	54.968	57.220			
		Monthly	8,202.225	8,804.039	9,166.235	9,527.760	9,918.166			
		Annual	98,426.705	105,648.465	109,994.820	114,333.115	119,017.990			

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2020

- Monthly salaries include a 0.5% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse	2080	Hourly	27.634	28.538	29.431	30.517	31.510	32.622	33.781	34.458	
		Monthly	4,789.823	4,946.657	5,101.308	5,289.543	5,461.658	5,654.426	5,855.422	5,972.796	
		Annual	57,477.875	59,359.885	61,215.700	63,474.515	65,539.890	67,853.110	70,265.065	71,673.550	
Nurse II	2080	Hourly	36.099	37.359	38.623	39.939	41.228	42.564		43.415	
		Monthly	6,257.079	6,475.538	6,694.670	6,922.700	7,146.198	7,377.755		7,525.185	
		Annual	75,084.945	77,706.460	80,336.035	83,072.405	85,754.370	88,533.055		90,302.225	
Nurse II (20 Year Scale)	2080	Hourly	36.821	38.107	39.396	40.739	42.052	43.415			
		Monthly	6,382.345	6,605.170	6,828.667	7,061.400	7,288.927	7,525.185			
		Annual	76,588.135	79,262.040	81,944.005	84,736.795	87,467.120	90,302.225			
Nurse III	2080	Hourly	37.471	38.735	40.055	41.341	42.536	43.839	45.184	46.088	
		Monthly	6,495.017	6,713.980	6,942.850	7,165.844	7,372.885	7,598.733	7,831.969	7,988.635	
		Annual	77,940.200	80,567.760	83,314.205	85,990.125	88,474.620	91,184.795	93,983.630	95,863.625	
Nurse III (20 Year Scale)	2080	Hourly	38.220	39.510	40.855	42.169	43.387	44.717	46.088		
		Monthly	6,624.816	6,848.313	7,081.550	7,309.245	7,520.484	7,750.865	7,988.635		
		Annual	79,497.795	82,179.760	84,978.595	87,710.935	90,245.805	93,010.385	95,863.625		
Nurse III - WRHA Community PIO	2080	Hourly	37.936	39.208	40.565	41.862	43.065	44.361	45.743	46.657	
		Monthly	6,575.573	6,796.053	7,031.267	7,256.080	7,464.600	7,689.240	7,928.787	8,087.213	
		Annual	78,906.880	81,552.640	84,375.200	87,072.960	89,575.200	92,270.880	95,145.440	97,046.560	
Nurse IV	2080	Hourly	38.758	40.192	41.629	43.196	44.991	46.731	48.554	49.523	
		Monthly	6,718.010	6,966.527	7,215.715	7,487.236	7,798.386	8,099.964	8,415.983	8,584.068	
		Annual	80,616.120	83,598.320	86,588.580	89,846.835	93,580.630	97,199.570	100,991.800	103,008.815	
Nurse IV (20 Year Scale)	2080	Hourly	39.532	40.996	42.460	44.059	45.891	47.666	49.523		
		Monthly	6,852.175	7,105.898	7,359.788	7,636.850	7,954.380	8,262.172	8,584.068		
		Annual	82,226.105	85,270.770	88,317.450	91,642.200	95,452.565	99,146.060	103,008.815		
Nurse IV - WHC	2080	Hourly	38.758	40.192	41.629	43.196	44.991	46.731	48.632	50.611	51.624
		Monthly	6,718.010	6,966.527	7,215.715	7,487.236	7,798.386	8,099.964	8,429.585	8,772.638	8,948.111
		Annual	80,616.120	83,598.320	86,588.580	89,846.835	93,580.630	97,199.570	101,155.015	105,271.660	107,377.335
Nurse IV - WHC (20 Year Scale)	2080	Hourly	39.532	40.996	42.460	44.059	45.891	47.666	49.604	51.624	
		Monthly	6,852.175	7,105.898	7,359.788	7,636.850	7,954.380	8,262.172	8,598.005	8,948.111	
		Annual	82,226.105	85,270.770	88,317.450	91,642.200	95,452.565	99,146.060	103,176.060	107,377.335	
Nurse V	2080	Hourly	40.911	42.478	44.273	46.013	47.913	49.776	51.717	52.751	
		Monthly	7,091.289	7,362.810	7,673.960	7,975.538	8,304.990	8,627.894	8,964.231	9,143.566	
		Annual	85,095.465	88,353.720	92,087.515	95,706.455	99,659.885	103,534.730	107,570.775	109,722.795	
Nurse V (20 Year Scale)	2080	Hourly	41.729	43.327	45.158	46.935	48.872	50.771	52.751		
		Monthly	7,233.010	7,510.073	7,827.435	8,135.395	8,471.228	8,800.345	9,143.566		
		Annual	86,796.125	90,120.875	93,929.225	97,624.735	101,654.735	105,604.135	109,722.795		
Nurse Practitioner	2080	Hourly	46.625	50.047	52.106	54.160	56.379			57.506	
		Monthly	8,081.661	8,674.743	9,031.734	9,387.717	9,772.414			9,967.701	
		Annual	96,979.935	104,096.915	108,380.805	112,652.605	117,268.970			119,612.415	
Nurse Practitioner (20 Year Scale)	2080	Hourly	47.557	51.046	53.147	55.243	57.506				
		Monthly	8,243.197	8,848.033	9,212.076	9,575.448	9,967.701				
		Annual	98,918.365	106,176.395	110,544.915	114,905.375	119,612.415				

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.

A1. Effective April 1, 2021

- Monthly salaries include a 1.2% increase

Hourly salary is calculated as (monthly salary x 12) ÷ annual hours.

Nurse Classification ⁽¹⁾	Annual Hours	Start	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	20 Year	
Licensed Practical Nurse	2080	Hourly	27.965	28.881	29.784	30.883	31.887	33.013	34.186	35.212	35.916
		Monthly	4,847.250	5,006.100	5,162.598	5,353.015	5,527.145	5,722.264	5,925.611	6,103.435	6,225.510
		Annual	58,167.005	60,073.195	61,951.175	64,236.185	66,325.740	68,667.170	71,107.335	73,241.220	74,706.125
Nurse II ⁽²⁾	2080	Hourly	36.532	37.807	39.086	40.418	41.723	43.075	43.936		44.814
		Monthly	6,332.138	6,553.284	6,774.934	7,005.819	7,232.003	7,466.247	7,615.525		7,767.825
		Annual	75,985.650	78,639.405	81,299.205	84,069.830	86,784.035	89,594.960	91,386.295		93,213.900
Nurse II (20 Year Scale) ⁽²⁾	2080	Hourly	37.263	38.564	39.869	41.228	42.556	43.936	44.814		
		Monthly	6,458.915	6,684.427	6,910.610	7,146.198	7,376.411	7,615.525	7,767.825		
		Annual	77,506.975	80,213.120	82,927.325	85,754.370	88,516.935	91,386.295	93,213.900		
Nurse III ⁽³⁾	2080	Hourly	37.921	39.200	40.535	41.837	43.046	44.365	45.727	46.641	47.574
		Monthly	6,572.930	6,794.580	7,026.137	7,251.817	7,461.377	7,689.912	7,926.003	8,084.516	8,246.220
		Annual	78,875.160	81,534.960	84,313.645	87,021.805	89,536.525	92,278.940	95,112.030	97,014.190	98,954.635
Nurse III (20 Year Scale) ⁽³⁾	2080	Hourly	38.678	39.983	41.345	42.674	43.908	45.253	46.641	47.574	
		Monthly	6,704.241	6,930.425	7,166.515	7,396.897	7,610.655	7,843.891	8,084.516	8,246.220	
		Annual	80,450.890	83,165.095	85,998.185	88,762.765	91,327.860	94,126.695	97,014.190	98,954.635	
Nurse III - WRHA Community PIO ⁽³⁾	2080	Hourly	38.391	39.678	41.052	42.364	43.582	44.893	46.292	47.218	48.162
		Monthly	6,654.440	6,877.520	7,115.680	7,343.093	7,554.213	7,781.453	8,023.947	8,184.453	8,348.080
		Annual	79,853.280	82,530.240	85,388.160	88,117.120	90,650.560	93,377.440	96,287.360	98,213.440	100,176.960
Nurse IV ⁽⁴⁾	2080	Hourly	39.223	40.674	42.129	43.714	45.530	47.291	49.215	51.219	52.243
		Monthly	6,798.610	7,050.149	7,302.360	7,577.072	7,891.915	8,197.188	8,530.670	8,877.922	9,055.410
		Annual	81,583.320	84,601.790	87,628.320	90,924.860	94,702.985	98,366.255	102,368.045	106,535.065	108,664.920
Nurse IV (20 Year Scale) ⁽⁴⁾	2080	Hourly	40.006	41.488	42.970	44.588	46.441	48.238	50.199	52.243	
		Monthly	6,934.455	7,191.199	7,448.112	7,728.533	8,049.757	8,361.243	8,701.106	9,055.410	
		Annual	83,213.455	86,294.390	89,377.340	92,742.390	96,597.085	100,334.910	104,413.270	108,664.920	
Nurse V	2080	Hourly	41.402	42.987	44.804	46.565	48.489	50.374	52.338		53.384
		Monthly	7,176.423	7,451.134	7,765.978	8,071.250	8,404.733	8,731.499	9,071.866		9,253.216
		Annual	86,117.070	89,413.610	93,191.735	96,855.005	100,856.795	104,777.985	108,862.390		111,038.590
Nurse V (20 Year Scale)	2080	Hourly	42.230	43.848	45.700	47.498	49.459	51.381	53.384		
		Monthly	7,319.823	7,600.244	7,921.301	8,232.954	8,572.818	8,905.964	9,253.216		
		Annual	87,837.880	91,202.930	95,055.610	98,795.450	102,873.810	106,871.570	111,038.590		
Nurse Practitioner	2080	Hourly	47.185	50.647	52.731	54.810	57.056				58.196
		Monthly	8,178.717	8,778.851	9,140.040	9,500.389	9,889.620				10,087.258
		Annual	98,144.605	105,346.215	109,680.480	114,004.670	118,675.440				121,047.095
Nurse Practitioner (20 Year Scale)	2080	Hourly	48.128	51.659	53.784	55.906	58.196				
		Monthly	8,342.100	8,954.156	9,322.565	9,690.303	10,087.258				
		Annual	100,105.200	107,449.875	111,870.785	116,283.635	121,047.095				

¹ Eligibility for the 20 Year increment is determined in accordance with Article 2105.² New 'Year 6' Step-on-Scale for Nurse II Effective April 1, 2021³ New 'Year 7' Step-on-Scale for Nurse III Effective April 1, 2021⁴ Nurse IV Standardized to 'Year 7' Step-on-Scale Effective April 1, 2021

APPENDIX “B” -- ACADEMIC ALLOWANCE

The non-cumulative additional rates of pay hereinafter set forth shall be paid to a nurse for academic attainments herein set forth:

- (a) Upon completion of an approved clinical course/program, or CNA Certification in a nursing specialty, or an approved course in Gerontology, or the Nursing Unit Administration Course, or a Registered Nurse with a Registered Psychiatric Nurse Diploma, or an approved midwifery course, or an Operating Room Technician course in addition to a Licensed Practical Nurse Certificate/Diploma or Registered Nurse Diploma, or the Adult Education Certificate, or an Occupational Health Nursing course, or Nursing Foot Care Certification where the nurse is certified, and is using the certification in the practice area assigned, or the University Certificate in Nursing (one year course also called University Diploma in Nursing), or a Baccalaureate Degree in Arts or Science from a recognized university, (or the equivalent), provided such degree (or the equivalent) is relevant to the position held by the nurse:

\$0.298 per hour for all paid hours (2015 annual hours)

\$0.318 per hour for all paid hours (1885 annual hours)

\$0.308 per hour for all paid hours (1950 annual hours)

\$0.288 per hour for all paid hours (2080 annual hours)

- (b) For a Baccalaureate Degree in Nursing, or a Baccalaureate Degree in Psychiatric Nursing, or a Baccalaureate Degree in Science-Mental Health, or a University Certificate in Nursing, as described in (a) above, in addition to a Baccalaureate Degree in Arts or Science, or the equivalent in the opinion of the Employer. Newly graduated nurses with a Baccalaureate Degree in Nursing or Psychiatric Nursing shall have the allowance paid effective first day of work, subject to proof of degree provided within six (6) months of Employer request.

\$0.596 per hour for all paid hours (2015 annual hours)

\$0.637 per hour for all paid hours (1885 annual hours)

\$0.615 per hour for all paid hours (1950 annual hours)

\$0.577 per hour for all paid hours (2080 annual hours)

- (c) For a Master’s Degree in Nursing from a recognized university, or the equivalent in the opinion of the Employer. Effective April 1, 2022, this allowance is applicable for all classifications other than Nurse Practitioners.

\$0.893 per hour for all paid hours (2015 annual hours)

\$0.955 per hour for all paid hours (1885 annual hours)

\$0.923 per hour for all paid hours (1950 annual hours)

\$0.865 per hour for all paid hours (2080 annual hours)

(d) Effective April 1, 2021 - Applicable for Nurse Practitioners only:

\$1.50 per hour for all paid hours

NOTE: Nurses, as at April 17, 2002, receiving academic allowances in excess of the above specified amounts shall continue to be paid at the higher rate.

NOTE: Nurses, as at April 17, 2002, receiving academic allowances for courses/degrees/certificates not listed above shall continue to receive Academic Allowances for these courses/degrees/certificates.

APPENDIX “C” -- OCCUPATIONAL CLASSIFICATIONS

Applicable to all sites unless otherwise noted below

- (a) **LICENSED PRACTICAL NURSE (L.P.N.)** -- is a nurse licensed to practice under the Licensed Practical Nurses' Act of Manitoba.
- (b) **LICENSED PRACTICAL NURSE- CLINICAL RESOURCE NURSE** – A Licensed Practical Nurse entitled to practice under the Licensed Practical Nurses Act of Manitoba and who is employed in a LPN-CRN position.
- (c) **REGISTERED PSYCHIATRIC NURSE (R.P.N.)** -- is a nurse licensed to practice as a Registered Psychiatric Nurse under the Registered Psychiatric Nurses' Act of Manitoba.
- (d) **REGISTERED NURSE (R.N.)** -- is a nurse licensed to practice under the Registered Nurses' Act of Manitoba and employed in a general duty RN position, or its equivalent.
- (e) **NURSE III** -- is a Registered Nurse who is assigned the responsibility for the activities on a nursing unit or program, either permanently or as part of a developmental program; or who deputizes for a Nurse IV, or Nurse Educator in their absence, or who has successfully completed a special clinical practice program approved by the Employer; or is a Registered Nurse or a Registered Psychiatric Nurse employed as an Ambulatory Care Nurse - Department of Psychiatry; Psychiatric Emergency Nurses; or is a Research Nurse.
- (f) **NURSE IV** -- is a Registered Nurse or is a Registered Psychiatric Nurse, in a position of equivalent responsibility as determined by the Employer, who is permanently assigned responsibility for activities within a clinical program, or a Registered Nurse whose primary role function is teaching of students enrolled in a post basic course, e.g. Intensive Care Course, or a Registered Nurse whose primary role function is provision of continuing education activities to nursing staff; and Unit Co-ordinators;
- (g) **CLINICAL NURSE SPECIALIST** -- is a Registered Nurse with advanced academic preparation at the Masters level, and with expanded expertise in a Clinical Nursing Specialty, who advances the practice of nursing through a role which integrates the components of practice, research, education, consultation, and community service.
- (h) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ WRHA Nurse Practitioners, WRHA Clinical Nurse Specialists, WRHA Home Care Program, WRHA Primary Care Program, WRHA Regional Programs, Pan Am Clinic

C.1 Occupational classifications are as follows:

L.P.N. -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.

NURSE II -- A Registered Nurse or a Registered Psychiatric Nurse employed in a general duty position or its equivalent; or a Registered Nurse employed as an Immunization Nurse, STD Clinic Liaison Nurse or Community Based Direct Service Nurse.

NURSE III -- A nurse employed as a Primary Care Nurse or a nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence or a nurse employed as a Clinical Resource Nurse or a nurse employed as a Nurse Clinician.

NURSE IV- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor); or a nurse employed as a Public Health Nurse or Occupational Health Nurse

NURSE V - A Public Health Nurse employed as a Team Leader or Coordinator

CLINICAL NURSE SPECIALIST - A Registered Nurse with academic preparation at the Master's level (nursing science), possessing expertise in a clinical nursing speciality, and who is employed in a position designated by the Employer as Clinical Nurse Specialist.

NURSE PRACTITIONER -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Pan Am Clinic only:

OPERATING ROOM TECHNICIAN II -- is a nurse who has graduated from a formal Operating Room Technology course approved by the Employer, with additional responsibilities for evaluating and orientating Operating Room Technicians.

Applicable @ Churchill Health Centre

- C.1 Occupational classifications are as follows:
- (a) **Nurse II:** A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
 - (b) **Nurse III:** A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence or Infection Control/Staff Health, Team Leader, Nurse Clinicians.
 - (c) **Nurse IV –** A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a 24 hour basis; a nurse responsible for supervision of the clinical experience of student nurses; or a nurse responsible for inservice education instruction (Clinical Instructor, Inservice Education Instructor, Public Health Nurse).
 - (d) **Nurse V –** A nurse who is responsible for the nursing activities and staff of more than one (1) nursing unit on a permanent basis (Nurse Practitioner, Nursing Supervisors and Program Managers).
 - (e) **LPN -** A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
 - (f) **Nurse Practitioner --** is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Victoria Hospital

- C.1 **GENERAL DUTY L.P.N. --** A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurses' Act of Manitoba.
- C.2 **GENERAL DUTY RN/RPN --** A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- C.3 **PRIMARY NURSE --** A Registered Nurse or Registered Psychiatric Nurse who is clinically responsible for a specific number of patients and the assessment, planning, intervention and evaluation of nursing care for those patients during their total stay in hospital.
- C.4 **CLINICAL INSTRUCTOR OR INSERVICE EDUCATION INSTRUCTOR --** A Registered Nurse or a Registered Psychiatric Nurse responsible for the teaching and supervision of clinical experience.

C.5 **CLINICAL RESOURCE NURSE –**

- (i) **Psychiatric Community Nurse** -- A Registered Nurse or Registered Psychiatric Nurse employed as a Psychiatric Community Nurse
- (ii) **Clinical Resource Nurse** - A Registered Nurse or Registered Psychiatric Nurse employed as a Clinical Resource Nurse

C.6 **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Deer Lodge Centre

- Nurse II A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position.
- Nurse III A Registered Nurse or Registered Psychiatric Nurse, who is permanently assigned additional, specialized responsibilities on a work unit or program.
- Nurse Practitioner A Registered Nurse who is on the Extended Practice Roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Centre as a Nurse Practitioner.
- Clinical Nurse Specialist A Registered Nurse or Registered Psychiatric Nurse prepared at the Masters level and practices in an advanced role.

Applicable @ Grace Hospital

- C.1 Occupational classifications are as follows:
- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
 - (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may deputize for a Nurse IV in their absence (Unit Co-ordinator); Mental Health Ambulatory Care Nurse; Care of Psychiatric Patients in Emergency (COPE) Nurse; Clinical Resource Nurse (CRN).
 - (c) **NURSE IV** -- A Registered Nurse whose primary responsibility is the provision of in-service education instruction (Educational Resources Teachers); Infection Control Practitioner; Clinical Teacher; High Risk Anesthesia Nurse, Acute Pain and Perioperative Care Nurse.

- (d) **L.P.N.** -- A person entitled to practice as a Licensed Practical Nurse under the Licensed Practical Nurse's Act of Manitoba.
- (e) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.
- (f) **CLINICAL NURSE SPECIALIST** -- is a Registered Nurse or a Registered Psychiatric Nurse with academic preparation at the Master's level (nursing science), possessing expertise in a clinical nursing speciality, and who is assigned to a position designated by the Employer as Clinical Nurse Specialist.

Applicable @ River Park Gardens

- C.1 Occupational classifications are as follows:
- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
 - (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence.
 - (c) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
 - (d) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.

Applicable @ Middlechurch Home of Winnipeg

- C.1 Occupational classifications are as follows:
- (a) **R.N. II** — A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
 - (b) **Clinical Resource (Nurse III)** — A Registered Nurse or Registered Psychiatric Nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on one or more unit(s).

- (c) **L.P.N.**— A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurses' Act of Manitoba.
- (d) **Nurse Practitioner** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Actionmarquerite (Saint-Boniface) and Actionmarquerite (St. Joseph)

C.1 Occupational classifications are as follows:

- (a) **LICENSED PRACTICAL NURSE (L.P.N.)** -- A nurse licensed to practice as a Licensed Practical Nurse under the Licensed Practical Nurse's Act of Manitoba.
- (b) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (c) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a ward or unit. A nurse who is employed as a Clinical Resource Nurse (CRN).
- (d) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Actionmarquerite (Saint-Vital)

C.1 Occupational classifications are as follows:

- (a) **LICENSED PRACTICAL NURSE (L.P.N.)** -- A nurse licensed to practice as a Licensed Practical Nurse under the Licensed Practical Nurse's Act of Manitoba.
- (b) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (c) **CLINICAL RESOURCE NURSE (C.R.N.) (NURSE III)** -- A Registered Nurse or Registered Psychiatric Nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on one or more units.

- (d) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
- (e) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Bethania Mennonite Personal Care Home

C.1 Occupational classifications are as follows:

- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence; Behaviour Outreach Specialist.
- (c) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
- (d) **NURSE V** -- A nurse who is responsible for the nursing activities and staff of more than one (1) nursing unit on a permanent basis.
- (e) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
- (f) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Concordia Hospital

C.1 Occupational classifications are as follows:

- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.

- (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence; or is a Psychiatric Liaison Worker.
- (c) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
- (d) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
- (e) **Nurse Practitioner** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ The Convalescent Home of Winnipeg

C.1 Occupational classifications are as follows:

- (a) **UNIT NURSE** -- a Registered Nurse who is responsible to the Charge Nurse for nursing activities and nursing staff on one or more units of the Home.
- (b) **CHARGE NURSE** -- A Registered Nurse who is responsible to the Director of Nursing for the nursing activities and nursing staff of the Home for a specified shift.
- (c) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
- (d) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Fred Douglas Lodge Society

C.1 Occupational classifications are as follows:

- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence.

- (c) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
- (d) **NURSE V** -- A nurse who is responsible for the nursing activities and staff of more than one (1) nursing unit on a permanent basis.
- (e) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
- (f) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Golden Links Lodge

- C.1 Occupational classifications are as follows:
- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
 - (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence.
 - (c) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
 - (d) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.

Applicable @ Holy Family Home

- C.1 Occupational classifications are as follows:
- (a) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.

- (b) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (c) **Nurse III – Team Leader** – A registered nurse who is permanently assigned responsibility for a group of staff and the resident care activities on a unit.
- (d) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ LHC Personal Care Home

C.1 Occupational classifications are as follows:

- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (b) **NURSE IV** – a Registered Nurse employed as an Infection Control Nurse.
- (c) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurses Act of Manitoba.

Applicable @ Luther Home

C.1 Occupational classifications are as follows:

- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence.
- (c) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
- (d) **NURSE V** -- A nurse who is responsible for the nursing activities and staff of more than one (1) nursing unit on a permanent basis.
- (e) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.

- (f) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Meadowood Manor

C.1 Occupational classifications are as follows:

- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward.
- (c) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
- (d) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
- (e) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Misericordia Health Centre

C.1 Occupational classifications are as follows:

- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (b) **NURSE III** -- A Registered Nurse or Registered Psychiatric Nurse who is permanently assigned responsibility for the nursing activities of the nursing staff on the unit and who is under the direction of an out-of-scope nursing manager; Psychiatric Liaison Nurse.
- (c) **NURSE IV** -- Education Facilitator is a Registered Nurse who is responsible for classroom or clinical instruction of nursing and other Centre personnel under the direction of the Director, Education Services.

- (d) **L.P.N.** -- A Licensed Practical Nurse assists Registered Nurses as well as undertakes the care of residents/patients under the direction of a Registered Nurse.
- (e) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Pembina Place Mennonite Personal Care Home

C.1 Occupational classifications are as follows:

- (a) NURSE II -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (b) NURSE III -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence.
- (c) NURSE IV -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
- (d) NURSE V -- A nurse who is responsible for the nursing activities and staff of more than one (1) nursing unit on a permanent basis.
- (e) L.P.N. -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
- (f) NURSE PRACTITIONER -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Riverview Health Centre

Nurse II: A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent who has at least one (1) year's experience relevant to a Hospital within the past four (4) years.

Nurse III: A Nurse who is permanently assigned the responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may assume substantially all the duties of Nurse IV in their absence.

Nurse IV: A Nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a 24-hour basis and who reports to a supervisor; or

A Nurse who is responsible for coordinating and/or teaching of in service education programs for the employees of the Centre.

Nurse IV(a): A Nurse who is an assistant to a supervisor, an evening supervisor, a night supervisor, supervisor central supply room, or the Staff Health and Infection Control Nurse/Nurse Epidemiologist.

L.P.N.: A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.

Clinical Nurse Specialist: A Clinical Nurse Specialist is a B.N. with academic preparation at the Masters level in a relevant clinical specialty. The individual has acquired expanded expertise in the clinical specialty and advances the practice of nursing through a role which integrates the components of practice, research, education, consultation, and community service.

Nurse Practitioner: A Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ The Salvation Army Golden West Centennial Lodge

C.1 Occupational classifications are as follows:

- (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
- (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence.
- (c) **NURSE IV** -- A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
- (d) **NURSE V** -- A nurse who is responsible for the nursing activities and staff of more than one (1) nursing unit on a permanent basis.

- (e) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
- (f) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ The Simkin Centre

- C.1 Occupational classifications are as follows:
- (a) **STAFF NURSE** -- A Registered Nurse employed in a general duty position and responsible to the Unit Nurse.
 - (b) **UNIT NURSE** -- a Registered Nurse who is responsible to the Charge Nurse for nursing activities and nursing staff on one or more units of the Home.
 - (c) **CHARGE NURSE** -- A Registered Nurse who is responsible to the Director of Nursing for the nursing activities and nursing staff of the Home for a specified shift.
 - (d) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.
 - (e) **INSERVICE CO-ORDINATOR** -- A Registered Nurse responsible to the Director of Nursing for orientation and inservice programs.
 - (f) **NURSE PRACTITIONER** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Seven Oaks General Hospital

- C.1 Occupational classifications are as follows:
- (a) **Nurse II** – A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
 - (b) **Nurse III** - A Registered Nurse in the Emergency Department who is permanently assigned responsibility for the nursing activities of the nursing staff and who deputizes for the Patient Care Team Management/Program Director in their absence. A Registered Nurse or Registered Psychiatric Nurse employed as a Community Mental Health Nurse – Psychiatry or Day Treatment Nurse – Psychiatry; Slate

Resource Nurse; Community Liaison Worker and Cardiac Rehabilitation Nurse, Clinical Resource Nurse, Geriatric Day Hospital Nurse.

- (c) **Nurse IV** – A Registered Nurse responsible for inservice programs and instruction (Educational Co-ordinator); a Registered Nurse responsible for the operation of the staff health program (Occupational Safety & Health Nurse); a Registered Nurse responsible for the administration of infection control processes within the Hospital (Infection Control Nurse); a Registered Nurse involved in the intake, treatment and disposition processes of clients/patients referred to the psychogeriatrics program (Community Liaison Co-ordinator); Community Transition Nurse, Wound and Skin Consultant, Utilization Facilitator.
- (d) **L.P.N.** – A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurses' Act of Manitoba.
- (e) **Nurse Practitioner** -- is a Registered Nurse who is on the Extended Practice roster of the College of Registered Nurses of Manitoba who is employed in a position that is designated by the Employer as a Nurse Practitioner.

Applicable @ Southeast Personal Care Home

- C.1 Occupational classifications are as follows:
 - (a) **NURSE II** -- A Registered Nurse or Registered Psychiatric Nurse employed in a general duty position or its equivalent.
 - (b) **NURSE III** -- A nurse who is permanently assigned responsibility for the nursing activities of a small group of nursing staff on a unit or ward and who may replace a Nurse IV in their absence.
 - (c) **NURSE IV** – A nurse who is permanently assigned responsibility for the nursing activities and staff on a unit or ward on a twenty-four (24) hour basis; a nurse responsible for supervision of the clinical experience of student nurses (Clinical Instructor); or a nurse responsible for inservice education instruction (Inservice Education Instructor).
 - (d) **L.P.N.** -- A Licensed Practical Nurse is a person entitled to practice under the Licensed Practical Nurse's Act of Manitoba.

APPENDIX "D" -- SITE LIST

Bargaining Unit	
Interlake Eastern Health Region Employers Organization	
Employer List	Site List
Interlake Eastern Regional Health Authority (IERHA) (Direct Operations)	Arborg and District Health Centre
	Beausejour Health Centre
	Berens River Renal Health Centre
	E.M. Crowe Health Centre (<i>Eriksdale</i>)
	East Gate Lodge (<i>Beausejour</i>)
	Fisher Branch Personal Care Home
	Hodgson Renal Health Centre
	Johnson Memorial Hospital (<i>Gimli</i>)
	Kin Place Health Complex (<i>Oakbank</i>)
	Lakeshore District Health Centre (<i>Ashern</i>)
	Lundar Personal Care Home
	Pine Falls Health Complex
	Selkirk Regional Health Centre (includes Quick Care)
	Stonewall and District Health Centre (includes Rosewood Lodge)
	Teulon Hunter Memorial Health Centre
	Whitemouth Health District Centre
	Lac du Bonnet Personal Care Home
	Pinawa Hospital
	Home Care Program
	Mental Health Program (CSU, RAAM, Mental Health Liason Nurse)
Primary Care Program	
Public Health Program	
Betel Home Foundation *	Gimli Site
	Selkirk Site

* Identifies non-transferred sites

Bargaining Unit Southern Health Region Employers Organization	
Employer List	Site List
Southern Health Santé-Sud Regional Health Authority (SH-SS RHA) (Direct Operations)	Altona Community Memorial Health Centre
	Bethesda Regional Health Centre/Bethesda Place (<i>Steinbach</i>)
	Boundary Trails Health Centre (<i>Winkler</i>)
	Boyne Lodge Personal Care Home (<i>Carman</i>)
	Carman Memorial Hospital
	Centre de Santé Notre Dame Health Centre
	Centre de Santé St. Claude Health Centre
	Centre Medico-social DeSalaberry District Health Centre (<i>St. Pierre-Jolys</i>)
	Clinique Notre Dame Clinic
	Douglas Campbell Lodge (<i>Portage la Prairie</i>)
	Eastview Place (<i>Altona</i>)
	Emerson Health Centre
	Foyer Notre Dame Inc.
	Gladstone Health Centre (<i>Gladstone</i>)
	Hôpital Ste. Anne Hospital
	Lions Prairie Manor (<i>Portage la Prairie</i>)
	Lorne Memorial Hospital (<i>Swan Lake</i>)
	MacGregor Health Centre
	Morris General Hospital
	Pembina-Manitou Health Centre
Portage District General Hospital	
Red River Valley Lodge (<i>Morris</i>)	
Repos Jolys (<i>St. Pierre-Jolys</i>)	
Third Crossing Manor (<i>Gladstone</i>)	

	Vita & District Health Centre (Vita & District Health Centre and Vita & District Personal Care Home)
	Home Care Program
	Mental Health Program
	Primary Health Program
	Public Health Program
Villa Youville *	Villa Youville (<i>Ste. Anne-des-Chênes</i>)
Rock Lake Health District *	Rock Lake Health District Hospital (<i>Crystal City</i>), Rock Lake District Personal Care Home (<i>Pilot Mound</i>) & Prairie View Lodge (<i>Pilot Mound</i>)
Menno Home for the Aged *	Menno Home for the Aged (<i>Grunthal</i>)

* Identifies non-transferred sites

Bargaining Unit Winnipeg-Churchill Health Region Employers Organization	
Employer List	Site List
Winnipeg-Churchill Regional Health Authority (WRHA) (Direct Operations)	Churchill Health Centre
	Deer Lodge
	Grace Hospital
	Middlechurch Home of Winnipeg
	Pan Am Clinic
	River Park Gardens
	Victoria Hospital
	WRHA - Clinical Nurse Specialists ***
	WRHA - Home Care Program ***
	WRHA – Mental Health and Addictions Program ***
	WRHA - Nurse Practitioners ***
	WRHA - Primary Care Program ***
	WRHA - Public Health Program ***
WRHA - Regional Programs *** <i>Cardiac Sciences</i> <i>Continuing Care (Long Term Care)</i>	

	<i>Critical Care</i> <i>Emergency</i> <i>Geriatrics – Rehab</i> <i>Heart Cath Lab</i> <i>Hip and Knee</i> <i>IP&C</i> <i>OESH</i> <i>Sleep Lab</i> *** (applicable to only WRHA Corporate/Regional Community Health Services)
Actionmarguerite (Saint-Boniface) *	Actionmarguerite (Saint-Boniface)
Actionmarguerite (St. Joseph) *	Actionmarguerite (St. Joseph)
Actionmarguerite (Saint-Vital) *	Actionmarguerite (Saint-Vital)
Bethania Mennonite Personal Care Home *	Bethania Mennonite Personal Care Home
Centre de santé Saint-Boniface *	Centre de santé Saint-Boniface
Concordia Hospital *	Concordia Hospital
The Convalescent Home of Winnipeg *	The Convalescent Home of Winnipeg
Donwood Manor *	Donwood Manor
Fred Douglas Lodge Society *	Fred Douglas Lodge Society
Golden Links Lodge *	Golden Links Lodge
Holy Family Home *	Holy Family Home
Klinic Community Health *	Klinic Community Health
LHC Personal Care Home *	LHC Personal Care Home
Luther Home *	Luther Home
Manitoba Baptist Home Society (Meadowood Manor)*	Manitoba Baptist Home Society (Meadowood Manor)
Misericordia Health Centre *	Misericordia Health Centre
Mount Carmel Clinic *	Mount Carmel Clinic
Nine Circles Community Health Centre *	Nine Circles Community Health Centre
Nor'West Co-op Community Health Centre *	Nor'West Co-op Community Health Centre
Pembina Place Mennonite Personal Care Home *	Pembina Place Mennonite Personal Care Home
Riverview Health Centre *	Riverview Health Centre
St. Boniface Hospital *	St. Boniface Hospital

The Salvation Army Golden West Centennial Lodge *	The Salvation Army Golden West Centennial Lodge
The Saul and Claribel Simkin Centre Personal Care Home (The Simkin Centre)*	The Saul and Claribel Simkin Centre Personal Care Home (The Simkin Centre)
Seven Oaks General Hospital *	Seven Oaks General Hospital
Southeast Personal Care Home *	Southeast Personal Care Home
Women's Health Clinic *	Women's Health Clinic

* Identifies non-transferred sites

Bargaining Unit Shared Health Employers Organization	
Employer List	Site List
Shared Health (SH) (Direct Operations)	Breast Health Centre
	Crisis Response Services
	Diagnostic Services
	Emergency Response Services
	Endoscopy - Central Intake
	Health Sciences Centre
	Manitoba Adolescent Treatment Centre
	Medical Assistance In Dying (MAiD)
	Mental Health and Addictions Program
	MB Home Nutrition
	MB Home Ostomy
	MB Renal Program
	Tick Borne Disease Collaborative Care
	Selkirk Mental Health Centre
Shared Health Float Pool	

CancerCare Manitoba *	CancerCare Manitoba
Eden Mental Health Centre *	Eden Mental Health Centre (<i>Winkler</i>)
Rehabilitation Centre for Children *	Rehabilitation Centre for Children

* Identifies non-transferred sites

<u>Bargaining Unit</u>	
Prairie Mountain Health Region Employers Organization	
<u>Employer List</u>	<u>Site List</u>
Prairie Mountain Regional Health Authority (PMRHA) (Direct Operations)	Baldur Health Centre
	Birtle Health Centre
	Boissevain Health Centre
	Brandon Regional Health Centre
	Bren-del-win Lodge (<i>Deloraine</i>)
	Carberry Health Centre
	Child & Adolescent Treatment Centre (<i>Brandon</i>)
	Community Based Mental Health Program
	Country Meadows Personal Care Home (<i>Neepawa</i>)
	Dauphin Regional Health Centre
	Davidson Memorial Health Centre (<i>Cartwright</i>)
	Deloraine Health Centre
	Elkhorn Personal Care Home
	Erickson Health Centre
	Fairview Home (<i>Brandon</i>)
	Gilbert Plains Health Centre
	Glenboro Health Centre
Grandview Hospital	
Grandview Personal Care Home	

	Hamiota Health Centre
	Hartney Health Centre
	McCreary Alonsa Health Centre
	Melita Health Centre
	Mental Health Crisis Services Program (includes Mobile Crisis Services, CSU, RAAM)
	Minnedosa Hospital
	Minnedosa Personal Care Home
	Neepawa Health Centre
	Primary Health Care Program
	Residential Care Centre (McTavish Manor Brandon)
	Reston Health Centre
	Rideau Park (<i>Brandon</i>)
	Rivers Health Centre
	Roblin District Health Centre
	Rosburn Health Centre
	Russell Hospital
	Russell Personal Care Home
	Sandy Lake Personal Care Home
	Sherwood Personal Care Home (<i>Virden</i>)
	Shoal Lake – Strathclair Health Centre
	Souris Health Centre
	St. Paul's Home (<i>Dauphin</i>)
	Swan River Valley Personal Care Home
	Swan Valley Health Centre (including Swan Valley Lodge, Benito Health Centre)
	Tiger Hills Health Centre (<i>Treherne</i>)
	Tri-Lake Health Centre (<i>Killarney</i>)

	Virден Health Centre
	Wawanesa Health Centre
	West-Man Nursing Home (<i>Virден</i>)
	Westview Lodge (<i>Boissevain</i>)
	Home Care Program
	Public Health Program
	Regional Programs <i>Addiction Services</i> <i>Chemotherapy</i> <i>Infection Prevention and Control</i> <i>Nurse Practitioners</i> <i>Palliative Care</i> <i>Regional Clinical Education</i> <i>Wound Ostomy</i>
Dinsdale Personal Care Home *	Dinsdale Personal Care Home (<i>Brandon</i>)
Ste. Rose Health Centre Inc. *	Dr. Gendreau Personal Care Home (<i>Ste. Rose</i>)
	Ste. Rose Hospital
Winnipegosis Health Centre *	Winnipegosis Health Centre

* *Identifies non-transferred sites*

Bargaining Unit Northern Health Region Employers Organization	
<u>Employer List</u>	<u>Site List</u>
Northern Regional Health Authority (NRHA) (Direct Operations)	Flin Flon General Hospital (including Flin Flon Clinic, Flin Flon Personal Care Home, Northern Lights Manor)
	Gillam Hospital
	Leaf Rapids Health Centre
	Lynn Lake Hospital
	Snow Lake Health Centre
	The Pas Health Complex (including St. Anthony's General Hospital, St. Paul's Residence, The Pas Clinic)

	Thompson General Hospital (including Northern Consultation Clinic, Northern Spirit Manor, Thompson Clinic, Hope North Recovery Centre for Youth)
	Addictions
	Home Care Program
	Public Health Program

APPENDIX "E" -- MEALS AND MISCELLANEOUS EXPENSES

MEALS – ELIGIBILITY FOR CLAIMS

101 Breakfast – A nurse is expected to have had breakfast before the start of the day's work, even though some travel may be necessary before the recognized starting time. Exceptions occur to this pattern and cost of breakfast may be claimed when:

- (a) the nurse is in travel status; or
- (b) the nurse has been travelling for more than one (1) hour on Employer business before the recognized time for the start of the nurse's day's work.

102 Luncheon – A nurse is expected to make arrangements to provide or purchase luncheon, or the mid-day or mid-shift meal. For many nurses, either because of lack of facilities in the area of work or for general convenience or economy, luncheon is carried to work rather than purchased. Exceptions to this pattern, when cost of luncheon may be claimed, occur when:

- (a) the nurse is in travel status; or
- (b) the nurse is away from the nurse's normal place of work and outside the site/worksites area which would cause the nurse to disrupt the nurse's normal mid-day or mid-shift meal arrangements.

The inability of the nurse to return to the nurse's home or residence does not constitute grounds for claim for the cost of a purchased meal.

103 Dinner – A nurse may only claim for the cost of a dinner meal when:

- (a) the nurse is in travel status; or
- (b) the nurse has been travelling on Employer business and not expected to arrive back to the nurse's residence before 7:30 p.m. when a meal break not taken.

Any extension of working hours at the normal place of work is covered under Article 3 – Meal Allowances During Overtime Work. No other meal claims except as provided in this Article shall be paid.

MEAL EXPENSES – TRAVEL WITHIN THE PROVINCE

201 A nurse who is eligible may claim the actual cost of purchased meals up to the following maximum amounts:

		Individual Meals		
		<u>Breakfast</u>	<u>Lunch</u>	<u>Dinner</u>
(a) In areas covered by Remoteness Allowance				
	Effective April 1, 2013	\$8.35	\$10.35	\$17.90
(b) In all other areas				
	Effective April 1, 2013	\$7.85	\$9.85	\$16.70

When the "Province of Manitoba Meals & Miscellaneous Expenses" rates are adjusted and exceed the above rates, the Employer will adjust the rates retroactive to the date the Provincial rates take effect. All future rate adjustments will parallel the Provincial adjustments.

- 202** For each full day in travel status an eligible nurse may claim a Per Diem Allowance in lieu of individual meal claims to cover the cost of purchased meals as follows:

Per Diem Allowance

(a) In areas covered by Remoteness Allowance	
Effective April 1, 2013	\$36.60
(b) In all other areas	
Effective April 1, 2013	\$34.40

When the "Province of Manitoba Meals & Miscellaneous Expenses" rates are adjusted and exceed the above rates, the Employer will adjust the rates retroactive to the date the Provincial rates take effect. All future rate adjustments will parallel the Provincial adjustments.

- 203** Where no overnight accommodation is involved only the appropriate individual expenses under Section 01 may be claimed.
- 204** Where a single price or flat rate is charged for meals by the supplier and no other reasonable alternative in the location is available (which may occur in some remote or isolated communities), actual meal expenses exceeding the above maximum may be claimed if supported by a receipt.

MEAL ALLOWANCES DURING OVERTIME WORK

301 Extension of working day where a nurse's working day has been extended beyond the standard working day or shift at the normal place of work by EITHER:

- (a) at least two (2) hours, exclusive of a dinner or supper break, a meal allowance shall be paid at the following rate:

Effective April 1, 2013 - \$5.80 per day

- (b) at least three and one-half (3½) hours, exclusive of a dinner or supper break, an allowance equivalent to that payable for "luncheon" in the appropriate area as shown in Article 2 – Meal Expenses – Travel Within the Province, shall be paid.

When the "Province of Manitoba Meals & Miscellaneous Expenses" rates are adjusted and exceed the above rates, the Employer will adjust the rates retroactive to the date the Provincial rates take effect. All future rate adjustments will parallel the Provincial adjustments.

302 A nurse in travel status is not entitled to the above allowances.

303 Special emergencies where special circumstances arise, (e.g. flood control, fire duties, etc.) and a nurse is required to work extended hours in connection with that emergency, with the authority of the Employer, the nurse may claim the cost of purchased meals appropriate to the period worked, as provided for under Article 2 – Meals Expenses – Travel Within the Province.

INCIDENTALS ALLOWANCE

401 A nurse who is in travel status may claim an incidentals allowance for each night of:

- (a) commercial accommodation
Effective April 1, 2007 - \$4.60

- (b) non-commercial accommodation
Effective April 1, 2007 - \$3.20

When the "Province of Manitoba Meals & Miscellaneous Expenses" rates are adjusted and exceed the above rates, the Employer will adjust the rates retroactive to the date the Provincial rates take effect. All future rate adjustments will parallel the Provincial adjustments.

402 The incidentals allowance covers reimbursement for all incidental expenses except as provided in Article 5 – Miscellaneous Expenses During Travel.

MISCELLANEOUS EXPENSES DURING TRAVEL

501 Gratuities

No gratuities may be claimed. Allowance is made for these in either the individual meal allowances, the per diem allowances, or as part of the claim for meals during travel outside the province.

502 Laundry

- (a) Laundry charges must be supported by receipts and may only be claimed where the nurse is travelling on Employer business and overnight away-from-home accommodation is involved for a period in excess of four (4) consecutive nights.
- (b) No claim may be made where special reimbursement arrangements have been made, such as a weekly or monthly allowance for living costs.

503 Parking

- (a) A nurse may claim parking expenses as follows:
 - (i) short-term parking, when the nurse is away from the workplace; and
 - (ii) overnight parking where it is not provided with accommodation.
- (b) parking at an airport or other transportation terminal will only be allowed where the parking cost and the transportation costs to and from the terminal are less than the normal allowable transportation costs i.e. limousine, taxi or bus, as available.

504 Telephone and Facsimiles

- (a) Charges for telephone calls and facsimiles necessary for business purposes may only be claimed when they are supported by a listing of the person telephoned or faxed and the city or town involved.
- (b) A nurse is entitled to claim the cost of long distance telephone calls up to a maximum of four dollars and seventy-eight cents (\$4.78) for each period of three (3) consecutive nights away from the nurse's residence on Employer business and overnight accommodation is involved.

TRAVEL STATUS – RETURN HOME OVER A WEEKEND

- 601 Provided that work schedules permit, a nurse in travel status may return home over a weekend and shall be reimbursed travel expenses in an amount not exceeding the cost of maintaining the nurse in travel status over the weekend.

- 602** If travel is by Employer vehicle, this cost should be evaluated at the per kilometer rate applicable for personal distance travelled for that class of vehicle.

ACCOMMODATIONS

- 701** Nurses travelling on Employer business are entitled to standard hotel room accommodation with a bath when available.
- 702** The type, standard and cost of accommodation, and the period for which such costs may be allowed shall, in the opinion of the Employer, be reasonable considering all relevant circumstances.
- 703** No accommodation expenses are claimable when the Employer provides a trailer or other suitable accommodation.

DEFINITIONS

- 801** "Travel Status" means absence of the nurse from the nurse's permanent work location on Employer-approved business involving travel and accommodation.

APPENDIX “F” -- BI-WEEKLY REMOTENESS ALLOWANCES

Remoteness Allowances shall be paid to nurses subject to the following eligibility criteria and conditions:

A. Single or Dependent Allowance

Single status will be assumed for all nurses eligible for Remoteness Allowances, and claims for dependent rate will be subject to the following criteria and conditions:

1. The nurse shall be supporting one or more dependents where a dependent includes:
 - spouse or common-law, including same sex partner, living with and dependent on the nurse for main and continuing support; this is presumed to be the spouse or common-law spouse whether or not gainfully employed, unless satisfactory evidence is produced to the contrary;
 - unmarried dependent children under 18 years of age;
 - unmarried dependent children over 18 but under 21 years if in full time attendance at a school or university or similar educational institution;
 - unmarried children of any age with a mental or physical disability
2. There is a presumption of marriage evidenced by co-habitation. If a marriage contract is not in existence, a common-law arrangement must have been in existence for at least one (1) year prior to the application.
3. A claim, with appropriate attestation, notarized where considered necessary, for payment of depending supporting status allowances, will be submitted to the Employer when first requesting the allowance, and at the request of the Employer. However, the nurse is responsible to provide appropriate attestation to the Employer when any change occurs in the eligibility of a dependent.
4. Where both spouses or common-law partners are employees of the Employer to which these criteria eligibility apply, the dependent rate will be paid to one spouse or common-law partner only and the other one will not receive either the dependent or single rate of Remoteness Allowance, or the employees can receive one-half of the dependent rate each.

B. Calculation of and Eligibility for Daily rates:

Remoteness Allowances are to be determined separately from hourly wage rates. Remoteness Allowances are to be considered on a daily basis, i.e. 1/10th of the bi-weekly rate, up to the maximum amount for the bi-weekly period.

1. The nurse shall receive 1/10th of the bi-weekly rate for every day the nurse is at work irrespective of the number of hours worked, so long as a minimum of one hour is worked that day.
2. Where a nurse regularly works a shift above the normal daily hours (7.75), the allowance will be provided on a prorated basis.
3. For each day that the nurse is recognized as being on “stand-by”.

C. Locations and Residence:

The Remoteness Allowance applicable to the location at which the nurse has established their residence and maintains a family home is normally that which prevails, since the residence would be within normal daily travel distance to the nurses' work site. In any case where the nurse does not have a residence established on a continuing basis in relation to their work site, the location of the nurse's work site, as established by the Employer, shall be considered the location for Remoteness Allowance.

D. Limitations:

The Remoteness Allowances for the various sites for nurses who are single or supporting dependent(s) as indicated, represent a maximum hourly taxable allowance relative to paid employment. They are payable during recognized holidays and vacations taken during continued employment, while receiving income protection benefits. They are not payable during periods of absence without pay, nor payable at overtime rates or other premium pay scales, nor included as part of regular bi-weekly earnings in calculation of vacation wages on termination of employment.

E. Geographic Eligibility:

No location will be included for Remoteness Allowance that is two hundred and fifty (250) kilometers or less from the centre of the metropolitan area of the City of Winnipeg or the City of Brandon, unless that location is a distance of sixty-five (65) kilometers or more by the most direct road to a provincial trunk highway or paved provincial road, and the aggregate distance to the highway or paved road and then to Winnipeg or Brandon totals two hundred (200) or

more kilometers. No location having road access and situated south of the fifty-third (53rd) parallel of latitude will be included unless the criterion concerning off-highway access was met.

- F. A full-time nurse eligible for Remoteness Allowance as provided in this schedule shall be eligible, in each fiscal year (April 1 to March 31), to receive up to a maximum of two (2) days travel time without loss of regular pay.
- G. The bi-weekly remoteness allowances relative to each location at single and dependant rates are as follows:

	Effective April 1, 2017		Effective March 31, 2018		Effective September 29, 2018	
	Dependent	Single	Dependent	Single	Dependent	Single
Berens River	\$287.82	\$165.01	\$290.70	\$166.66	\$293.61	\$168.33
Churchill	\$277.95	\$168.64	\$280.73	\$170.33	\$283.54	\$172.03
Cormorant	\$162.28	\$103.48	\$163.90	\$104.51	\$165.54	\$105.56
Cranberry Portage	\$139.05	\$87.61	\$140.44	\$88.49	\$141.84	\$89.37
Cross Lake	\$309.48	\$178.90	\$312.57	\$180.69	\$315.70	\$182.50
Flin Flon	\$120.32	\$74.85	\$121.52	\$75.60	\$122.74	\$76.36
Gillam	\$247.25	\$149.59	\$249.72	\$151.09	\$252.22	\$152.60
Ilford	\$369.40	\$211.44	\$373.09	\$213.55	\$376.82	\$215.69
Leaf Rapids	\$190.85	\$118.47	\$192.76	\$119.65	\$194.69	\$120.85
Lynn Lake	\$197.10	\$119.32	\$199.07	\$120.51	\$201.06	\$121.72
Nelson House	\$210.72	\$128.67	\$212.83	\$129.96	\$214.96	\$131.26
Norway House	\$275.27	\$157.41	\$278.02	\$158.98	\$280.80	\$160.57
Oxford House	\$334.51	\$191.37	\$337.86	\$193.28	\$341.24	\$195.21
Pikwitonie	\$269.87	\$161.65	\$272.57	\$163.27	\$275.30	\$164.90
Sherridon	\$219.77	\$134.80	\$221.97	\$136.15	\$224.19	\$137.51
Snow Lake	\$165.10	\$102.63	\$166.75	\$103.66	\$168.42	\$104.70
The Pas	\$112.91	\$69.01	\$114.04	\$69.70	\$115.18	\$70.40
Thicket Portage	\$269.29	\$161.23	\$271.98	\$162.84	\$274.70	\$164.47
Thompson	\$179.76	\$126.31	\$181.56	\$127.57	\$183.38	\$128.85
Wabowden	\$230.72	\$157.45	\$233.03	\$159.02	\$235.36	\$160.61
Waterhen	\$142.55	\$89.16	\$143.98	\$90.05	\$145.42	\$90.95

Effective March 30, 2019:

	Effective	Effective	Effective	Effective
	March 30, 2019	March 28, 2020	March 27, 2021	March 26, 2022
Berens River				
Dependent	297.72	299.21	304.15	310.23
Single	170.69	171.54	174.37	177.86
Bissett				
Dependent	197.52	198.51	201.79	205.83
Single	116.77	117.35	119.29	121.68
Bloodvein River				
Dependent	302.17	303.68	308.69	314.86
Single	173.57	174.44	177.32	180.87

Brochet				
Dependent	355.63	357.41	363.31	370.58
Single	204.79	205.81	209.21	213.39
Churchill				
Dependent	287.51	288.95	293.72	299.59
Single	174.44	175.31	178.20	181.76
Cormorant				
Dependent	167.86	168.70	171.48	174.91
Single	107.04	107.58	109.36	111.55
Cranberry Portage				
Dependent	143.83	144.55	146.94	149.88
Single	90.62	91.07	92.57	94.42
Crane River				
Dependent	177.18	178.07	181.01	184.63
Single	128.74	129.38	131.51	134.14
Cross Lake				
Dependent	320.12	321.72	327.03	333.57
Single	185.06	185.99	189.06	192.84
Dauphin River (Anama Bay)				
Dependent	198.58	199.57	202.86	206.92
Single	140.92	141.62	143.96	146.84
Easterville				
Dependent	146.84	147.57	150.00	153.00
Single	92.71	93.17	94.71	96.60
Flin Flon				
Dependent	124.46	125.08	127.14	129.68
Single	77.43	77.82	79.10	80.68
Gillam				
Dependent	255.75	257.03	261.27	266.50
Single	154.74	155.51	158.08	161.24
God's Lake Narrows				
Dependent	352.75	354.51	360.36	367.57
Single	202.79	203.80	207.16	211.30
God's River				
Dependent	357.33	359.12	365.05	372.35
Single	205.91	206.94	210.35	214.56
Grand Rapids				
Dependent	142.76	143.47	145.84	148.76
Single	88.26	88.70	90.16	91.96

Ilford				
Dependent	382.10	384.01	390.35	398.16
Single	218.71	219.80	223.43	227.90
Island Lake/Garden Hill				
Dependent	328.64	330.28	335.73	342.44
Single	187.72	188.66	191.77	195.61
Jen Peg				
Dependent	233.40	234.57	238.44	243.21
Single	139.51	140.21	142.52	145.37
Lac Brochet				
Dependent	387.56	389.50	395.93	403.85
Single	222.34	223.45	227.14	231.68
Leaf Rapids				
Dependent	197.42	198.41	201.68	205.71
Single	122.54	123.15	125.18	127.68
Little Grand Rapids				
Dependent	316.73	318.31	323.56	330.03
Single	179.61	180.51	183.49	187.16
Lynn Lake				
Dependent	203.87	204.89	208.27	212.44
Single	123.42	124.04	126.09	128.61
Manigotagan				
Dependent	197.52	198.51	201.79	205.83
Single	116.77	117.35	119.29	121.68
Matheson Island				
Dependent	201.36	202.37	205.71	209.82
Single	142.78	143.49	145.86	148.78
Moose Lake				
Dependent	213.18	214.25	217.79	222.15
Single	131.81	132.47	134.66	137.35
Negginan/Poplar Point				
Dependent	302.71	304.22	309.24	315.42
Single	174.08	174.95	177.84	181.40
Nelson House				
Dependent	217.97	219.06	222.67	227.12
Single	133.10	133.77	135.98	138.70
Norway House				
Dependent	284.73	286.15	290.87	296.69
Single	162.82	163.63	166.33	169.66

Oxford House				
Dependent	346.02	347.75	353.49	360.56
Single	197.94	198.93	202.21	206.25
Pikwitonie				
Dependent	279.15	280.55	285.18	290.88
Single	167.21	168.05	170.82	174.24
Pukatawagan				
Dependent	230.04	231.19	235.00	239.70
Single	141.30	142.01	144.35	147.24
Red Sucker Lake				
Dependent	350.90	352.65	358.47	365.64
Single	201.29	202.30	205.64	209.75
St. Therese Point				
Dependent	328.64	330.28	335.73	342.44
Single	187.72	188.66	191.77	195.61
Shamattawa				
Dependent	375.55	377.43	383.66	391.33
Single	218.06	219.15	222.77	227.23
Sherridon				
Dependent	227.33	228.47	232.24	236.88
Single	139.44	140.14	142.45	145.30
Snow Lake				
Dependent	170.78	171.63	174.46	177.95
Single	106.17	106.70	108.46	110.63
Southern Indian Lake				
Dependent	361.74	363.55	369.55	376.94
Single	208.65	209.69	213.15	217.41
Split Lake				
Dependent	376.34	378.22	384.46	392.15
Single	214.82	215.89	219.45	223.84
Tadoule Lake				
Dependent	393.49	395.46	401.99	410.03
Single	226.50	227.63	231.39	236.02
The Pas				
Dependent	116.79	117.37	119.31	121.70
Single	71.39	71.75	72.93	74.39
Thicket Portage				
Dependent	278.55	279.94	284.56	290.25
Single	166.77	167.60	170.37	173.78

Thompson				
Dependent	185.95	186.88	189.96	193.76
Single	130.65	131.30	133.47	136.14
Wabowden				
Dependent	238.66	239.85	243.81	248.69
Single	162.86	163.67	166.37	169.70
Waterhen				
Dependent	147.46	148.20	150.65	153.66
Single	92.22	92.68	94.21	96.09
York Landing				
Dependent	379.61	381.51	387.80	395.56
Single	221.10	222.21	225.88	230.40

The Employer and the Union further agree that any improvement to this policy which is made by the Provincial Government will equally affect all nurses who come under the scope of this Agreement.

**MEMORANDA OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS
ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

1. Re: Ratification of Collective Agreement

The ratification date of the current Collective Agreement occurred on October 14, 2021.

2. Re: Manitoba Health Premiums (n/a @ WRHA - Public Health Program and WRHA - Clinical Nurse Specialists)

It is agreed that if Manitoba Health premiums are introduced during the life of this Agreement, the parties will meet to discuss and decide on an equitable sharing of the cost of these premiums.

3. Re: Amnesty From Provincial Wage/Hours Of Work Reduction Legislation

The Employer will not exercise any right it may receive through legislation which enables the Employer to unilaterally reduce the wages specified in the Collective Agreement or the hours of work specified in the Collective Agreement during the life of this Collective Agreement.

4. Re: Shifts of Less than 7.75 Hours -- (n/a @ WRHA - Public Health Program, WRHA - Home Care Program, and WRHA - Clinical Nurse Specialists)

The Employer and the Union mutually agree that the following conditions shall apply to shifts of less than seven and three-quarter (7.75) hours. It is agreed that there shall be no scheduled shifts of less than four (4.0) hours.

1. The terms and conditions of the Collective Agreement shall apply to part-time nurses working shifts of less than seven and three-quarter (7.75) hours except as otherwise stated hereinafter.

2. The Employer shall notify the Union in writing of its intent to introduce a shift of less than seven and three-quarter (7.75) hours. This notice shall include reasons for the introduction of this shift. The Employer and the Union shall meet within fourteen (14) days to discuss the introduction of the shift and the feasibility of available alternatives to same. If there are no mutually acceptable alternatives, then the following shall apply.
3. The Employer shall post all vacant, term or new positions which will include scheduled shifts of less than seven and three-quarter (7.75) hours. Such posting(s) shall specify the shift length(s) for the particular position.
4. Shifts of four (4.0) to five (5.0) paid hours shall include one (1) fifteen (15) minute rest period. Shifts of greater than five (5.0) paid hours but less than seven (7.0) paid hours shall include one (1) fifteen (15) minute rest period and exclude one (1) thirty (30) minute unpaid meal period. For shifts of seven (7.0) paid hours to seven and three-quarter (7.75) paid hours - rest and meal periods to be the same as per current agreements Article 14 for the "normal" seven and three-quarter (7.75) hour shift.
5. In the event that a nurse working such a shift agrees to remain at work beyond the end of their scheduled shift, the nurse shall be paid for all hours worked beyond the shift at their basic salary up to seven and three-quarter (7.75) hours. Overtime rates of pay shall be applicable to time worked in excess of seven and three-quarter (7.75) hours, such time to have been authorized in such manner and by such person as may be directed by the Employer.
6. If a part-time nurse agrees to work an additional available shift, as referenced in Article 3402, the nurse shall be paid for those hours at their basic salary unless the part-time nurse has already worked in that day, in which case overtime rates of pay shall apply.
7. No nurse shall be scheduled to work more than one (1) shift of less than seven and three-quarter (7.75) hours in any one (1) day.

5. Re: Agency Nurses

The Employer commits to making best efforts to minimize to the greatest degree possible the use of nurses employed by outside agencies ("agency nurses") to fill occasional available shifts.

The Employer affirms its commitment that such shifts, including those which result from not filling term or permanent positions for a period of time, will be offered first to facility/site nurses in accordance with the provisions of the Collective Agreement. Only when nurses

at the facility/site are not available, will the facility/site resort to seeking assistance from outside agencies.

The Employer further agrees to meet with the Union on a quarterly basis through the NAC meeting process, to review trends and data (number of agency nurses used, reasons for use and process management used to attempt to obtain facility/site nurses) and explore alternatives to minimize the use of agency nurses to the greatest degree possible. Included in the data provided will be hours of agency nurses used by classification, and separated by Region and site. Such report will be provided to MNU Central on a quarterly basis to facilitate discussion. It is understood that the information provided may only be discussed at the NAC meetings, and shall not be disclosed or relied upon in any other forum other than the grievance/arbitration procedure.

Should there be questions arising from the report, such inquiries should be directed to the appropriate Region for resolution.

6. Re: Group Benefit Plans

The Employer (on behalf of those nurses newly employed, or nurses previously participating in the former MHO benefit plans, or any other nurses who may subsequently join the plans through the Collective Bargaining process) and the Union agree to participate in the Jointly Trusteed Benefit Plans in accordance with the Benefit Trust document established between the parties in 1998. This agreement shall be in accordance with the Collective Agreement, and in accordance with the Trust agreement and the plan texts established by the Board of Trustees of the Healthcare Employees Benefits board (HEPB). This shall include the Group Dental Plan, the Group Life Plan, Group Extended Health Plan, D & R Plan and Employee Assistance Plan. The newly Jointly Trusteed Plans shall be successor to the former MHO plans.

The parties agree that the plans' assets, liabilities and surplus will be transferred to the new Trust. The contribution rates schedule are indicated in the Collective Agreement of plan text and may only be amended by a process outlined in the Trust or through collective bargaining.

Applicable for Riverview Health Centre site only:

The Employer and the Union agree to participate in the Jointly Trusteed Health Benefit Plans (HEBP) which shall include the Group Dental Plan, Group Extended Health Plan, and Employee Assistance Plan.

7. Re: Pensions [Participation in Jointly Trusteed Pension Plan (HEPP)] (n/a @ Riverview Health Centre)

- (i) The parties agree to participate in the Health Care Employees' Pension Plan – Manitoba (HEPP) in accordance with its terms and conditions including an

established contributions rate as set out in the HEPP Trust Agreement, HEPP Pension Plan text and other applicable written policies and guidelines.

- (ii) Any disputes with respect to the level of pension entitlement shall not be subject to the grievance and arbitration procedure under this agreement but shall be subject to adjudication in accordance with the terms of HEPP.
- (iii) In the event that the contributions required by the HEPP Plan text are not sufficient to fund the necessary pension benefits, the parties to this agreement shall meet forthwith to determine an appropriate funding mechanism. The contribution rate may only be amended by the process outlined in the Pension Plan text or through collective bargaining.
- (iv) Employer and employee contribution rates for the HealthCare Employees' Pension Plan – Manitoba (HEPP) to be increased as follows:
 - April 1, 2013 –
 - Employer contribution rate to increase by 0.1% resulting in an overall contribution rate increase of 1.1%
 - Employee contribution rate to increase by 0.3% resulting in an overall contribution rate increase of 1.1%.
 - (resulting in the new rates of 7.9% up to YMPE and 9.5% for earnings in excess of YMPE)

8. Re: Group Registered Retirement Savings Plan

The Employers and the Union mutually agree to work towards creation of a Group Registered Retirement Savings Plan (GRRSP) by January 1, 2003. Such plan shall provide for payroll deduction, and each nurse shall be responsible for determining their own available RRSP contribution under federal law.

9. Re: Joint Nursing Council

1. There shall be a Council which shall be known as "The Joint Nursing Council" and shall consist of six (6) members of whom:
 - (a) One shall be the Minister of Health or designate;
 - (b) One shall be appointed by the Executive Council of the Government of Manitoba;
 - (c) One shall be appointed by the Health Senior Leadership Council;
 - (d) Three shall be appointed by the Manitoba Nurses' Union
2. The Joint Nursing Council shall be chaired by the Minister of Health or designate.

3. The Joint Nursing Council shall meet at such times as it may determine, and at such other times as may be determined by the Chairperson, in consultation with the members, at minimum, once annually.
4. The Joint Nursing Council shall consult on any suggestions or requests made by members of the Council concerning:
 - (a) Working conditions and work-life issues;
 - (b) Recruitment and retention of nurses;
 - (c) Any other issue considered to improve patient care and contribute to the efficient management of the health care system.
5. The Joint Nursing Council shall endeavour to promote and maintain good will between Employers and the Manitoba Nurses' Union, and encourage free and frank discussion of all problems, with a view to reaching mutually acceptable resolutions.

10. Re: Buyback of Healthcare Employees' Pension Plan (HEPP) Pension (*n/a @ Riverview Health Centre*)

Pre-retirement pay may be utilized to directly fund the buyback of pension service in accordance with Revenue Canada limits and restrictions. Contributions for this purpose must also conform to the Healthcare Employees Pension Plan (HEPP) Trust Agreement, HEPP Plan Text, and other applicable written HEPP policies and guidelines.

11. Re: Participation in PHCLA/Redeployment

All facilities except St. Amant Centre will agree to participate in the Provincial Health Care Labour Adjustment/Redeployment Program. Letter of Agreement for new participants to be appended to the Collective Agreement.

LETTER OF UNDERSTANDING

ON REDEPLOYMENT PRINCIPLES

1. PURPOSE:

- 1.01 The parties agree to work to develop employment security strategies to reduce the negative impact on employees affected by the restructuring of the health services system. The parties agree to strive towards consistency and timeliness in implementing this Letter of Understanding.
- 1.02 It is agreed by the parties that this Letter of Understanding shall work in concert with the provisions of the applicable Collective Agreements of the unions involved and shall be supplementary to same.

- 1.03 All terms and conditions of Collective Agreements and personnel policies and procedures of the receiving facility shall apply to the incoming employee except those terms and conditions of the Collective Agreement that have been abridged by this Letter of Understanding.
- 1.04 This Letter of Understanding governs the movement of laid-off employees and/or the movement of positions between bargaining units of the above-mentioned unions and employers.
- 1.05 For the purposes of this Letter of Understanding "receiving agreement(s)" shall mean the Collective Agreement applicable to the certified bargaining unit which is the recipient of transferred positions/employees. Conversely, the "sending agreement(s)" shall mean the Collective Agreement applicable to the certified bargaining unit where the position/employee originated.
- 1.06 All particulars of job opportunities at receiving facilities will be made available to the unions as they become known to the above-mentioned employers.
- 1.07 "Central Redeployment List" means a list of employees who have been laid-off from a participating employer. Those on this list may apply for and receive preferential consideration for new and vacant in-scope positions at another participating employer, as set out in 4.02 herein.
- Manitoba Council of Health Care Unions (MCHCU) will be provided with a copy of the Central Redeployment List, with an updated list provided on a continuing basis.
- 1.08 "Provincial Health Care Labour Adjustment Committee" (hereinafter referred to as the "Committee") refers to the committee established by an agreement commencing January 20, 1993 between The Government of Canada, The Government of Manitoba, Provincial Health Labour Relations Services (PHLRS), and Manitoba Council of Health Care Unions.

2. SENIORITY:

- 2.01 Employees shall accumulate seniority according to the terms of the applicable Collective Agreement.
- 2.02 Employees without a Collective Agreement shall not have seniority rights.
- 2.03 Transfer of Seniority - The affected employer(s) and affected union(s) shall meet to determine any provisions for a transfer of seniority between bargaining units.

3. TRIAL PERIOD:

- 3.01 Employees who move to a new bargaining unit/employer may be required to serve a trial period in accordance with the Collective Agreement in the receiving facility. If unsuccessful in the trial period, the employee shall return to the Central Redeployment List and to the recall list of the sending employer.

4. NEW AND VACANT POSITIONS:

- 4.01 All new and vacant in-scope positions shall be filled in accordance with the terms of the Collective Agreement and that bargaining unit, unless otherwise mutually agreed between affected employers and affected bargaining units/unions.
- 4.02 When a new or vacant in-scope position is not filled by an internal employee as specified in 4.01, the receiving facility within a region, as defined in Appendix VII, shall give preferential consideration to qualified applicants from the same region who are on the Central Redeployment List.

If there are no applicants/no qualified applicants from the same region, the receiving facility shall provide preferential consideration to qualified applicants from other regions who are on the Central Redeployment List.

The following provisions shall apply in filling the vacancy:

- (a) Employees on the Central Redeployment List shall be listed in order of seniority [as per "sending" Collective Agreement(s)];
- (b) subject to 4.01, selection shall be made from applicants on the Central Redeployment List as described above. Copies of the above-mentioned new or vacant in-scope position postings will be sent as they occur to the MCHCU and participating employers (process to be established);
- (c) seniority shall be applicable to the selection in accordance with the receiving Collective Agreement;
- (d) in assessing an employee's history only formally documented material contained in the employee's personnel file will be considered;
- (e) receiving facilities job description applies vis-a-vis qualification requirements;

- (f) Once the nurse has been permanently redeployed and has completed the trial period with a receiving employer, they shall relinquish any recall rights to their former employer unless the nurse is laid off from the receiving employer. Should the nurse be laid off from the receiving employer, they will be placed back on the recall list with the sending employer for the balance of time they would have been on the recall list. The nurse will also have recall rights in accordance with the Collective Agreement of the receiving employer and be placed back on the Central Redeployment List. For the purposes of the Central Redeployment List, an employee's seniority shall be the cumulative seniority from the original sending employer and the original receiving employer.

5. TRANSFER OF SERVICE/MERGER/AMALGAMATION:

- 5.01 In the event of a transfer(s) of service/merger/amalgamation, the affected employer(s) and unions shall meet to determine whether employees should have the opportunity to move with the service or department to the receiving facility, to the extent that such positions are available.

6. PORTABILITY OF BENEFITS:

The following benefits are portable:

- 6.01 Accumulated income protection benefits/sick leave credits.
- 6.02 Length of employment applicable to rate at which vacation is earned.
- 6.03 Length of employment applicable to pre-retirement leave. NOTE: Deer Lodge Centre limits payment of pre-retirement leave to service acquired since April 1, 1983. Incoming employees would retain original service date for this purpose.
- 6.04 Length of employment for the purpose of qualifying to join benefit plans, e.g., two (2) year pension requirement.
- 6.05 Benefits - An incoming employee is subject to the terms and conditions of the receiving facilities benefit plans, however, normal waiting periods would be waived, subject to the applicable benefit plans' terms and conditions.
- 6.06 Salary Treatments -
- (a) If range is identical, then placed step-on-step;
- (b) If the range is not identical, then placement will be at a step on the range which is closest (higher or lower) to the employee's salary at the time of layoff.

NOTE: No red-circling provision except for Deer Lodge Centre employees who were guaranteed provisions as contained in the "Transfer Agreements" for the 1983 and 1987 transfer from federal to provincial jurisdiction and for whom the red circling provisions were in place prior to the inception of this Letter of Understanding.

6.07 Upon hire of an employee from the Central Redeployment List, the receiving employer agrees to confirm in writing to the employee all benefits, including seniority where applicable, which were transferred from the sending employer under this Letter of Understanding.

7. OTHER CONDITIONS:

7.01 Hours of service since last increment is not portable for purposes of calculating next increment, if applicable.

7.02 Salary and vacation earned to date to be paid out by sending employer.

7.03 Banked time including overtime bank, stat bank, to be paid out by sending employer.

8. TRAINING:

8.01 The parties agree that provisions for training will be dealt with by the Committee.

9. ADMISSION OF NEW MEMBERS:

9.01 The parties hereby authorize the Committee to admit new signatories as participating employers or participating unions in such manner and upon such terms as the Committee in its discretion deems appropriate without the necessary consultation or agreement with existing signatories. Upon admission to this agreement such new signatories will have the same rights and obligations as existing participating unions and participating employers, effective the date of such admission.

10. ACCEPTANCE OF LETTER OF UNDERSTANDING:

10.01 Signatories to this Letter of Understanding agree to accept this letter without amendment. Any subsequent amendment to the Letter of Understanding shall only be implemented if approved pursuant to Article 12.

11. DURATION:

- 11.01 This Letter of Understanding shall be in full force and effect for an indefinite period commencing in 1993. In the event that any one of the parties signatory to this Letter of Understanding wishes to terminate its participation in this Letter of Understanding it shall give sixty (60) days written notice to the Committee and to the appropriate bargaining agent or Employer in respect of its Collective Agreement. Such termination shall not invalidate this Letter of Understanding as affects the other signatories except for the specific Employer or bargaining agent that is party to the relevant and affected Collective Agreement.

12. AMENDMENTS:

- 12.01 Amendments to this Letter of Understanding shall be effective if passed by the Committee after consultation with the signatories to the Letter of Understanding as outlined herein. All signatories shall receive a copy of the proposed amendment(s). Each signatory shall have thirty (30) calendar days during which to express its concerns (if any) about the proposed amendment(s). Any unresolved concerns must be reconciled by the respective employer/labour caucus prior to a Committee vote being conducted. If there are no concerns raised by signatories to the proposed amendments the Committee shall be empowered to implement the amendment(s).

13. APPEAL PANEL:

- 13.01 Should a dispute(s) arise between a participating union(s) and a participating employer(s) regarding the application, interpretation or alleged violation of this Letter of Understanding, the parties concerned shall meet and attempt to resolve the dispute(s) through discussion.

Should the dispute remain unresolved, any party to the dispute may refer the matter(s) to an Appeal Panel composed of:

- Two (2) persons from Participating Employers who are not directly involved in the dispute.
- Two (2) persons from the Participating Unions who are not directly involved in the dispute.

The Appeal Panel shall set its own procedures for hearing the dispute and may accept any evidence that it deems appropriate.

Only lay advocate(s) shall be utilized by each party to the dispute in the presentation of its case.

The Appeal Panel shall make every effort to mediate the dispute to resolution.

Should efforts to mediate fail, the Appeal Panel shall submit its written recommendation(s) for settlement to the parties concerned, within fourteen (14) calendar days.

Any dispute under the Letter of Understanding shall not be resolved by grievance or arbitration pursuant to the Collective Agreement. The Appeal Panel is intended to be the only vehicle for resolution of such disputes.

This Letter of Agreement confirms that the above-named parties have ratified the Letter of Understanding on Redeployment Principles which is appended to and forms part of this Letter of Agreement.

12. Re: Provisions for Part-time Nurses Occupying More Than One Position Within Sites Comprising the Employer

Whereas the parties are in agreement to allow a nurse to hold more than one position within the Employer;

Therefore the parties are mutually agreed:

1. The definition of "position" shall be agreed as being: Occupational Classification, EFT, Unit(s), and rotation (i.e. day/evening, day/night, evening, night, day).
2. A part-time nurse shall be eligible to apply for and occupy more than one (1) part-time position within the Employer. A part-time nurse wishing to apply for an additional part-time position shall be required to indicate same on the application.
3. Approval to occupy more than one position shall be based on considerations related to the compatibility of work schedules of the positions and operational requirements and, if not conflicting, the application will be considered as per the MNU Collective Agreement.
4. The terms and conditions of employment shall be as provided in the MNU Collective Agreement, except that Articles 1504(f) and 3404 shall have separate application for each position held.
5. *Overtime shall be authorized time worked at a site which exceeds the normal daily shift as defined in Article 14 or the normal full-time hours in two (2) consecutive bi-weekly pay periods.

6. The sum total of the equivalent of one (1) EFT for positions occupied will not be exceeded. Should the sum of the positions occupied equal 1.0 EFT, the employment status will continue to be part-time unless a nurse holds more than one part-time position on the same unit and it is possible to amalgamate the positions to increase the employment status of the nurse, to full-time.
7. Where applications to occupy more than one position, are awarded, the terms and conditions shall be clearly outlined in the offer of position letter and shall include the following:
 - Master rotation and scheduling: In order that the Employer not incur overtime costs, the nurse is not able to be scheduled more than one (1) shift in any one day.
 - Requests for scheduling of vacation, paid/unpaid LOA's etc. must be submitted to each manager or designate and will be considered independently.
 - All salary based benefits (e.g. group life, pension, D & R) and accrued benefits including seniority (vacation, income protection etc.), as applicable, will be combined and calculated on the basis of the total of all active positions occupied.
 - Should the ability to continue to work in more than one (1) position be later found to be unworkable because of changes to the master rotation or restructuring, the nurse will be required to relinquish one (1) of the occupied part-time positions, upon four (4) weeks' notice to the nurse by the Employer.
 - Should the nurse determine they no longer wish to work in more than one (1) part-time position, they shall provide notice of termination of one (1) of the positions, in accordance with the Collective Agreement.
 - Overtime rates shall apply once the combined hours of work in two (2) consecutive biweekly pay periods reach full time hours.
 - The nurse shall work with the managers involved to ensure the accuracy and compliance of the scheduling, benefits etc.

Where an application to occupy more than one (1) position cannot be considered, the nurse shall have the option of having their application considered and if awarded, relinquish their current position.

*This article would be subject to MOU re: Article 1601

13. Re: Nurse Practitioner Positions

The terms of the Collective Agreement shall be applicable to Nurse Practitioner positions except as modified hereinafter.

The following shall apply to all Nurse Practitioner positions.

1. APPENDIX "B" shall apply effective April 1, 2021.
2. Article 2103(a) - A nurse occupying a Nurse Practitioner position shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

<u>Length of Employment</u>	<u>Rates at Which Vacation Earned</u>
In the first ten (10) years	Twenty (20) days/four (4) weeks (155 hours) per year
In the eleventh (11 th) to twentieth (20 th) year inclusive	Twenty-five (25) days/five (5) weeks (193.75 hours) per year
In the twenty-first (21 st) and subsequent years	Thirty (30) days/six (6) weeks (232.50 hours) per year

Applicable for Churchill Health Centre site only:

<u>Length of Employment</u>	<u>Rates at Which Vacation Earned</u>
In the first ten (10) years	Twenty-five (25) days/five (5) weeks (193.75 hours) per year
In the eleventh (11 th) to twentieth (20 th) year inclusive	Thirty (30) days/six (6) weeks (232.50 hours) per year
In the twenty-first (21 st) and subsequent years	Thirty-five (35) days/seven (7) weeks (271.25 hours) per year

3. Article 2103 (b) – shall include those nurses occupying a Nurse Practitioner position.
4. Article 2103 (c) shall apply to nurses occupying a Nurse Practitioner position.

Applicable @ Churchill Health Centre site only:

In addition to the above, Article 2103 (d) shall apply to nurses occupying a Nurse Practitioner position.

The following shall only apply to Nurse Practitioners working in Community Health/Public Health:

5. Effective April 1, 2022:

Seventy-seven and one half (77.50) hours shall constitute a bi-weekly pay period of work (2015 hours per annum). The Nurse Practitioner may vary hours worked in order to effectively carry out the accountabilities and responsibilities of the position provided the Nurse Practitioner first obtains the pre-approval, in writing, from their immediate supervisor or designate.

6. For the Nurse Practitioner (Community Health) Articles 16, 17 and 18 shall apply effective April 1, 2022.
7. Community nursing position(s) are subject to the provisions in the Collective Agreement applicable to community nurses. The position shall have a base of operations as identified by the Employer. A Nurse Practitioner may be required to provide services in other regional locations on a temporary or assigned basis. The nurse shall be entitled to reimbursement for travel expenses as set out in the Collective Agreement.

The following shall only apply to Nurse Practitioners working in Acute Care/Long Term Care:

8. Seventy-seven and one half (77.50) hours shall constitute a bi-weekly pay period of work (2015 hours per annum). The Nurse Practitioner may vary hours worked in order to effectively carry out the accountabilities and responsibilities of the position Articles 16, 17 and 18 shall apply.
9. The salary scale for the Nurse Practitioner shall be as set out in APPENDIX "A" – SALARIES.

13A. Re: Provisions for Nurse Practitioners Prior to April 1, 2022

The following shall be in effect for Nurse Practitioners up until March 31, 2022:

Applicable @ Community Health/Public Health

1. The salary scale for the Nurse Practitioner (Community Health) shall be as set out in APPENDIX "A" – SALARIES. Articles 16, 17 and 18 shall not apply.
2. Seventy-two and one half (72.50) hours shall constitute a bi-weekly pay period of work (1885 hours per annum). The Nurse Practitioner may vary hours worked in order to effectively carry out the accountabilities and responsibilities of the position provided the Nurse Practitioner first obtains the pre-approval, in writing, from their immediate supervisor or designate.

For clarity a Nurse Practitioner while occupying a position where Articles 16, 17 and 18 do not currently apply, is not entitled to receive the entitlements in accordance with those Articles until April 1, 2022.

14. Re: Mentorship

The Employer and the Union acknowledge that Mentorship is every nurse's professional responsibility. In the case of new Graduate Nurses, a more intensive approach to mentorship may be warranted.

The Employer and the Union believe that Mentorship of new Graduate Nurses is necessary and important and will facilitate transition from the student role to the practicing professional role and build a culture of support that will foster the retention of new Graduate Nurses. Further, the Employer and the Union recognize that this may be accomplished in a variety of ways dependant on the unique circumstances and demographics of each workplace. Mentoring may represent an opportunity for late career nurses who are interested in imparting their experience and knowledge.

For the purposes of this Memorandum of Understanding, a "Mentor" is defined as an experienced Registered Nurse, Registered Psychiatric Nurse or Licensed Practical Nurse engaged in a formal relationship of a determined length with a new graduate nurse(s) in order to assist the graduate nurse(s) in successfully adjusting to the working environment and performing their new role as a professional nurse.

Prior to the commencement of a mentorship relationship, the Employer and the nurse will discuss work assignment adjustments required in order for successful mentorship completion.

The Employer will identify attributes required for a mentorship role based on leadership skills, clinical expertise, professionalism, interpersonal skills and advocacy of the nursing profession.

A Registered Nurse or Registered Psychiatric Nurse or Licensed Practical Nurse shall receive an additional \$0.70 per hour for each hour assigned by the Employer as a mentor.

15. Re: Nurse Weekend Worker (Hereinafter referred to as Weekend Worker)

Where the Employer chooses to implement a Weekend Worker position(s) the Employer and the Union mutually agree that the following shall apply:

- (a) All provisions of the Collective Agreement shall apply except as noted herein.
- (b) Occupied positions will not be deleted in order to create a Weekend Worker position(s).
- (c) A nurse working a weekend schedule will be scheduled to work on every weekend. This may include working one or all days on the weekend as well as shifts during the week. Articles 1504(d) and 3404 shall not apply to Weekend Workers.

- (d) Weekend Workers positions shall be posted in accordance with the provisions of the Collective Agreement.
- (e) A nurse replacing a Weekend Worker shall not be entitled to the rate of pay applicable to the Weekend Worker. However, the Weekend Worker who interchanges a shift with a non Weekend Worker shall be paid at their Weekend Worker rate of pay for the interchanged shift.
- (f) A Weekend Worker who picks up additional available shifts shall not receive the Weekend Worker rate of pay for such shifts.
- (g) The establishment and/or existence of a Weekend Worker shall not form the basis for reclassification and/or pay adjustments of any classification under the Collective Agreement.
- (h) The Employer maintains the right to discontinue a Weekend Worker schedule with a minimum of six (6) weeks notice, at which time the schedule may be converted to normal scheduling requirements pursuant to the Collective Agreement and the rate of pay shall revert to the prevailing rate of pay for that occupational classification. Deletion of Weekend Worker incumbents is not required for schedule conversions where there are no other changes in the position except the conversion from a Weekend Worker rotation to a regular rotation.
- (i) Appendix "A" – Salaries for Weekend Worker positions shall be fifteen percent (15%) higher than the prevailing rate for that occupational classification.

16. Re: Increase of EFT

Notwithstanding Article 30, the EFT of a part-time nurse may be increased in accordance with the following process:

The parties agree that it may be of mutual benefit to the nurses and the Employer to allow part-time nurses, who request to do so, to increase their EFT.

- (a) The process will commence at a date determined by the parties at the Site/Local Nursing Advisory Committee. The Employer shall inform the Site/Local Nursing Advisory Committee of the total EFT and shift patterns available per nursing unit.
- (b) The Employer shall communicate to all part time nurses on a nursing unit the pre-determined EFT and shift pattern(s) available for the increase of EFT process. Requests to permanently increase EFTs shall be made in writing by part-time nurses. The nurses shall indicate the maximum EFT to which they wish to increase. A nurse may increase their EFT up to a 1.0 EFT.

- (c) In considering requests, the Employer shall consider such factors as current EFTs, shift assignments, shift schedules, the unit(s) needs and the requirements of Article 15. If the request by nurses within a unit exceed the availability within that unit as determined by the Employer, the Employer shall offer in order of seniority.
- (d) A part-time nurse shall not be permitted to increase their EFT while other nurses are on layoff from that unit unless such laid off nurses have been recalled or have declined recall.
- (e) Where any request to change EFT has been approved, the Employer shall issue a letter to the nurse confirming the nurse's new EFT in accordance with this Collective Agreement along with an effective date.
- (f) Copies of all requests and responses to requests to adjust EFT shall be provided to the Union.
- (g) Any changes to a master rotation as a result of changing EFTs shall be done in accordance with the provisions of Article 1504.
- (h) The Employer is not prevented from exercising any of its normal management rights as a result of this Memorandum of Understanding including, without limitation, the right to post vacant positions.
- (i) The Site/Local Nursing Advisory Committee shall be advised of the outcome in the Increase of EFT Process of each nursing unit.

This Memorandum of Understanding shall remain in effect for the duration of this Collective Agreement.

17. Re: Secondment of a Nurse Elected to Serve as President of the Manitoba Nurses' Union

The Employer and the Union agree each with the other as follows:

1. A nurse employed by the Employer who is elected to the full-time position of President of the Manitoba Nurses' Union, shall be considered as continuing in the employ of the Employer during the nurse's term of office as President of the Manitoba Nurses' Union and shall be considered to be seconded to the Manitoba Nurses' Union during the term of office.
2. For the purposes of administering the period of secondment, the Accounting and Information Technology Coordinator of the Manitoba Nurses' Union shall function as the official contact person in any dealings with the Employer. In addition the Accounting and Information Technology Coordinator of the Manitoba Nurses' Union shall be accountable for:

- (i) notifying the Employer, in writing, of the official commencement and termination date of the President's term of office;
- (ii) determining the bi-weekly payroll record of the President and notifying the Employer of same.

The Union shall save the Employer harmless from any claim from the President arising from alleged error(s) in the payroll record.

3. Reimbursement of Employer Costs

The Manitoba Nurses' Union shall assume the responsibility for reimbursing the Employer for total recovery of payroll and related costs associated with the President's term of office, as follows:

- (i) gross salary, including paid vacation, income protection and any other paid leave of absence authorized by the Accounting and Information Technology Coordinator
- (ii) Employer portion of C.P.P.;
- (iii) Employer portion of E.I.;
- (iv) Workers Compensation premiums;
- (v) Payroll tax;
- (vi) Employer portion of Benefit Plan premiums (pension plan, group life insurance plan, dental plan);
- (vii) Pre-retirement leave.

The Employer shall provide the Accounting and Information Technology Coordinator with a monthly statement of the above-referenced payroll expenses incurred during the nurse's period of secondment to President of the Manitoba Nurses' Union.

4. Income Protection

- (i) The Union President will accumulate income protection credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Manitoba Nurses' Union President is absent during the secondment period due to accident or illness and the income protection credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Manitoba Nurses' Union President from income protection credits accumulated prior to the secondment period and bill the costs to the Manitoba Nurses' Union, subject to paragraphs (ii) and (iii) below.

- (ii) Upon the nurse's return to work following the period of secondment the amount of income protection accumulated during the period of secondment will be reconciled against the amount of income protection utilized during this same period. In the event the difference is positive i.e. the amount accumulated is greater than the amount utilized, the nurse will be eligible to utilize the difference (unutilized income protection credits) at a future date. It is understood that utilization of these income protection credits may only occur once the nurse exhausts all income protection credits accumulated during their normal course of employment with the Employer.
- (iii) It is further understood that these income protection credits shall not be stored in the nurse's income protection bank within the computerized payroll system. Following the period of secondment, a record of these credits will be provided to the nurse along with a copy in the personnel file of the nurse. In the event and at the point that the nurse wishes to utilize these income protection credits, they will advise the Human Resources Department. The Employer will pay said income protection and bill the Manitoba Nurses' Union for the cost.

5. Disability & Rehabilitation Plan (D & R)

The President will have coverage under the HEBP Disability & Rehabilitation (D & R) Plan. During the D & R elimination period, if income protection credits earned during the period of secondment are insufficient to cover full payment, the Employer will pay the Manitoba Nurses' Union President from income protection credits accumulated prior to the secondment period and bill the costs to the Manitoba Nurses' Union, subject to paragraphs 4.(ii) and 4.(iii) above.

6. Accumulation of Paid Vacation

The President will accumulate vacation credits at the rate of six (6) weeks per year.

For the purposes of reconciliation, the Employer is financially responsible for the vacation earned by the nurse while they are engaged in their normal course of employment with the Employer and the Manitoba Nurses' Union is financially responsible for the vacation earned by the nurse during the period of secondment.

7. Seniority/Service

- (i) Seniority shall continue to accrue during the period of secondment.
- (ii) Following the expiry of the period of secondment, the Manitoba Nurses' Union President's normal increment date will be delayed for a period of time equivalent to the period of secondment. The time worked between the date of the last increment to the date that the nurse assumed the office of Manitoba Nurses' Union President shall count toward the granting of the next increment.

8. This Memorandum of Understanding shall remain in force until revised by mutual agreement between the parties or until terminated by either party.

18. Re: Letter of Understanding – HEPP COLA Fund (*not applicable @ Riverview Health Centre*)

The Parties have reached agreement concerning the establishment of a HEPP COLA Fund in accordance with the following:

1. COLA Fund - A “COLA” Fund(s) will be established effective April 1, 2014.
2. Dedicated COLA Monies - The monies contributed to the “COLA” Fund(s) will be “dedicated” monies for the specific purpose of providing ad hoc COLA adjustments to HEPP Retirees.
3. Equal Contributions - The “COLA” Fund(s) will be funded by equal contributions from Employers and Employees.
4. Funding: - Effective the following dates – COLA contributions, in the amounts per year, listed following from each of the Employer(s) and Employee(s) shall apply.

Employer:

- April 1, 2014 = 0.80% of regular pensionable earnings - to increase effective
- April 1, 2015 = 1.00% of regular pensionable earnings.

Employee:

- April 1, 2014 = 0.80% of regular pensionable earnings - to increase effective
- April 1, 2015 = 1.00% of regular pensionable earnings.

- All contributions to the Fund(s) shall be allocated using a method that is in compliance with applicable legislation, the HEPP Plan Text and HEPP Trust Agreement.
 - It is understood and agreed that these contributions shall continue at the specified rates notwithstanding the realization of any surplus funds in any HEPP account unless otherwise agreed by the Plan Settlers
5. Cola Funds - The COLA monies shall be reserved solely for the creation of two, distinct and dedicated COLA Funds with specific allocation as follows:
- HEPP COLA Fund # 1 - effective April 1, 2014 - for Employees who retire on or after October 1, 2009 shall have an allocation of 0.80% and, effective April 1, 2015, shall have an allocation of 0.90% of regular pensionable earnings from each active Employee and each participating Employer, (hereinafter referred to as the "Active Employees Fund").

- HEPP COLA Fund # 2 - effective April 1, 2015 - for Employees who retired on or before September 30, 2009 shall have an allocation of 0.10% of regular pensionable earnings from each active Employee and each participating Employer, (hereinafter referred to as the "Past Retirees Fund").
6. Segregated Fund(s) - it is the intent of the Parties to establish segregated COLA Fund(s), accordingly:
 - It is understood that statutory exemption may be required to establish the COLA Funds as intended and the Plan Settlers agree to make joint application to the Province of Manitoba to seek changes and or exemptions as may be required.
 - The Plan Settlers also agree to make all reasonable efforts to address and resolve any additional statutory or regulatory issues that may pose a barrier to establishing the COLA Fund(s) as intended - including whether the Plan's status as a Specified Multi-Employer Pension Plan (SMEPP) is affected and in need of any changes as a result of additional contributions to the COLA Fund(s).
 7. There shall not be any transfer or allocation of monies from the Active Employees Fund to the Past Retirees Fund without the express agreement of the Plan Settlers.
 8. Surplus monies from the Past Retirees Fund may be transferred to the Active Employees Fund at the discretion of the Plan Trustees.
 9. Contributions to the Past Retirees Fund shall continue as long as required to pay benefits to eligible pensioners. Thereafter, the contributions dedicated to the Past Retirees Fund shall be allocated to the Active Employees Fund.
 10. COLA Payment
 - Earliest Start Date - April 1, 2018.
 - Maximum = 2/3 CPI (Canada) per year.
 - Ad hoc - as Fund will allow.

19. Re: Former Civil Service Nurses Who Have Maintained Their Pension with the Civil Service Superannuation Plan

1. Nurses who have maintained their pension with the Civil Service Superannuation Plan, may elect to accrue vacation benefits for retirement purposes.
2. For purposes of retirement, a nurse may request to carry over up to a maximum of one (1) year of vacation entitlement to be cashed out upon retirement. A maximum of up to fifty (50) vacation days may be counted as pensionable service in accordance with the terms and conditions of the Civil Service Superannuation Act.
3. Nurses electing to carry over vacation entitlement for retirement purposes shall:
 - 3.1 Provide a written letter of retirement intent with a specified retirement day within the next four (4) fiscal years.

Example:

- Nurse submits retirement notice on March 1, 2015
- 4 fiscal years = the fiscal year of 2019/2020
- Nurse must retire prior to March 31,2020

- 3.2 Indicate the intended number of vacation days per year to be reserved prior to retirement (during the last four (4) fiscal years).
 - 3.3 Indicate the total number of vacation days to be cashed out upon retirement.
 - 3.4 Receive approval from their Manager for vacation carry over for retirement purposes.
4. Nurses may request to extend their retirement date and provide an alternate date provided that they give the Employer ninety (90) days notice of their intention to do so. Such requests shall be subject to the reasonable discretion of the Employer. Should the request to extend the retirement date be approved by the Employer, the nurse may be required to utilize a portion of the accrued vacation referenced in 2. in accordance with Province of Manitoba rules.

If requested a nurse may retire earlier than the retirement date indicated and as approved by their Manager.

20. Re: Grievance Investigation Process

The process is intended to create a harmonious relationship in order to promptly resolve grievances in an economical fashion.

On this basis, the parties are committed to the utilization of the following process where it is mutually agreed to be appropriate.

In the event that either party states that it is inappropriate to utilize the process and prior to a failure to utilize the process, the Director of Labour Relations of the MNU and the Director of the PHLRS shall review the matter and exchange the positions of the parties.

The parties hereto agree that the following conditions shall apply to the implementation and operation of the Grievance Investigation Process:

Part 1 GENERAL

1. It is understood that this process and the appointment of the Grievance Investigator is to continue concurrent with the Collective Agreement. The Collective Agreement is for the period April 1, 2017 to the date of ratification of a new Collective Agreement, and subject to the Term of the Collective Agreement.

2. The Grievance Investigator shall be an individual jointly approved by the MNU and representatives of the Employers Organizations [Provincial Health Labour Relations Services (PHLRS)]. The terms of appointment of the Grievance Investigator shall be set out in a separate document between the MNU, PHLRS and the Grievance Investigator.
3. It is recognized that Grievance Investigation is a voluntary process and either party may request that any grievance be submitted to grievance Investigation; however, both parties must agree on each case to be so submitted. Where such mutual agreement cannot be reached then the provisions of the Collective Agreement regarding Arbitration shall apply.
4. It is understood that the opinion of the Grievance Investigator is advisory in nature and is non-binding on either party. Where one or both of the parties does not accept the opinion of the Investigator then the option shall remain to utilize the Arbitration procedure contained in the Collective Agreement.
5.
 - a) It is understood that where the parties agree to abide by the opinion of the Investigator, it is done so on a without precedent or prejudice basis.
 - b) An opinion expressed by the Grievance Investigator regarding any issue shall not be submitted to any future Grievance Investigation nor to any Arbitrator.
6. The Grievance Investigator shall conduct an investigation into each grievance jointly submitted to them. It is expected that a hearing will be required in the normal course of the investigation. Within seven (7) days of a grievance being submitted to them, the Grievance Investigator shall schedule a hearing to be held within the thirty (30) day period following submission to them. The Grievance Investigator is empowered to fulfil their role in any manner deemed by them to be most effective given the individual circumstances of each case. The Grievance Investigator's general role is to:
 - a) investigate each grievance jointly submitted
 - b) define the issue(s) in dispute
 - c) provide an opinion as to an appropriate resolution of the dispute.
 - d) otherwise assist the parties in reaching a resolution.
7. The Grievance Investigator is expected to give a verbal opinion at the conclusion of a hearing, and to submit a brief written opinion to each of the parties within seven (7) calendar days following a hearing. Where no hearing is held, it is expected that the Grievance Investigator will provide their written opinion within seven (7) calendar days following completion of their investigation.

8. Where either or both parties choose not to accept the opinion of the Grievance Investigator, they shall, within seven (7) calendar days following receipt of the Investigator's written opinion, submit it in writing to both the Investigator and the other party, their reasons for non-acceptance. Such reasons shall not be admissible at any future Arbitration hearing or Grievance Investigation proceeding.
9. The parties shall jointly prepare guidelines to assist the Grievance Investigator in meeting the expectations of the parties. These guidelines may be amended from time to time during the Collective Agreement as circumstances warrant and as mutually agreed. The parties shall meet on a province wide basis through staff representatives of the MNU and the PHLRS at the request of either of these two bodies, but not less frequently than every six (6) months to review the operation and utilization of the Grievance Investigation Process.
10. Nothing shall preclude the parties from resolving any grievance in any mutually agreed manner either before, during, or after its referral to the Grievance Investigation Process.
11. It is expressly understood that the Grievance Investigation Process is intended to provide a cost-effective, informal, and timely alternative to conventional Arbitration.

Part 2 SUBMISSION OF GRIEVANCE

1. In all cases the grievance procedure contained in the Collective Agreement will continue to apply; however, where the grievance procedure has been exhausted and a party has certain time limits to refer the matter to Arbitration, that party might instead within this time limit, advise the other party in writing of its desire to refer the matter to the Grievance Investigation Process. Where such a request is made, the time limits referenced in the Grievance/Arbitration procedure shall be temporarily suspended until:
 - a) the other party advises the party who has made such a request that it does not agree to refer the matter to the Grievance Investigation Process, or
 - b) fourteen (14) calendar days have elapsed from the date the request was made and the other party has failed to respond, or
 - c) fourteen (14) calendar days have elapsed from the date upon which the Grievance Investigator issued their written opinion.

When any one of the events referred to in a), b), or c) above occur, the time limits for referring the matter to Arbitration shall commence as if the grievance procedure had been exhausted on that date.

Part 3 HEARINGS

1. Hearings will normally be held on the premises of the facility where the grievance originated from; however, the Investigator may, with the consent of both parties, choose a more appropriate location in such instances as where several grievances originating from different locations can be heard at the same hearing.
2. The parties agree not to be represented at any Grievance Investigation hearing by legal counsel. Attendance at hearings shall be limited to a maximum of four (4) employees from the bargaining unit and/or the Union, and four (4) Employer and/or PHLRS representatives. This stipulation shall not prevent the Grievance Investigator from requesting the attendance of any other person who can assist in clarifying the issue in dispute.
3. The parties agree to provide the Investigator with a jointly prepared statement of facts in an effort to narrow the scope of any dispute and to minimize the need to present evidence through witnesses. The Grievance Investigator may through the course of their investigation determine additional facts relevant to the resolution of the matter and shall advise the parties accordingly.
4. Hearings shall be held in an informal manner; however, the Investigator shall conduct any hearing in a manner deemed by them to be effective. Witnesses will not give evidence under oath but the Investigator may act as a participant in attempting to resolve areas of conflicting evidence.
5. Each party shall pay for their own costs associated with any witnesses (wages, payroll costs, and expenses) that are used to provide information as part of their evidence.

The Employer will be responsible for paying the grievor for the time of attendance at the GIP hearing at straight time rates.

Part 4 GUIDELINES FOR GRIEVANCE INVESTIGATOR

1. The Grievance Investigator shall be expected to accept the role for the life of the Collective Agreement.
2. While appointed, the Grievance Investigator may not act on behalf of one of the parties either as counsel or nominee at conventional Arbitration. They may serve as sole Arbitrator or Chairperson of an Arbitration Board hearing a dispute involving one or both of the parties except in the case of a dispute which has previously been referred to them in their capacity as Grievance Investigator.

3. While it is not expected to be as detailed as an Arbitrator's award, the parties do expect the written opinion to be a concise statement of the reasoning followed in reaching their conclusions. A detailed review of the positions of the parties or arbitral jurisprudence is not expected nor is any recounting of non-germane fact or argument. The opinion should contain sufficient information to assist the parties in preventing similar future disputes.
4. The parties shall each pay for their own costs associated with referring and processing a grievance through the Grievance Investigation Process except that the parties shall jointly and equally share the fees and expenses of the Grievance Investigator.
5. The Grievance Investigator is empowered to consider any grievable matter put to them by the parties including a question of whether or not an issue is grievable.
6. The opinion of the Grievance Investigator is expected to be an informed estimate of the likelihood of the grievance being sustained or denied in the event of it being referred to Arbitration.
7. The Grievance Investigator will be provided with any documentation which might provide assistance to them carrying out their role.

21. Re: Transfer – Job Selection (not applicable @ St Boniface Hospital)

1. The Employer and the Union mutually agree that the following understandings apply to Article 30 Vacancies, Term Positions, and New Positions with respect to nurses transferring to posted vacancies, term positions, and new positions for the duration of the Collective Agreement. The following criteria will be utilized to determine if the nurse(s) are eligible for transfer;
 - i. meet the qualifications of the posted position including the relevant experience required for that specific position;
 - ii. Nurse III, IV and V positions in Acute Care/Long Term Care and all Clinical Nurse Specialists and Nurse Practitioners are excluded
2. If more than one candidate meets the transfer criteria, the most senior nurse will be awarded the position.
3. If no candidates meet the transfer criteria, the successful candidate will be determined through a competitive process as per Article 2502.
4. The continuation of this MOU beyond the term of the Collective Agreement will only be on the mutual agreement of the parties.

22. Re: 12 Hour Shift Schedule Pattern

The Employer and the Union mutually agree that the following conditions and understandings are applicable to the 11.63 ("12") hour shift schedule pattern.

1. The procedure to be followed for the trial and implementation of the 11.63 ("12") hour shift schedule pattern shall be as follows:

- (a) A meeting of all nurses in the unit/worksites/program and senior nursing management will be held to discuss a tentative "12 Hour" shift schedule pattern and a proposed date for the commencement of the trial period. Following the meeting, a date will be determined for a secret ballot vote to establish that a majority of the nurses are in favor of the shift change.
- (b) A majority of sixty percent (60%) of the nurses affected must vote in favour of the shift change before a trial of the "12 Hour" shift can proceed. Nurses terminating employment in the unit/worksites/program prior to the commencement of the trial period will not be entitled to vote. A letter will be forwarded to the Regional and Local/Worksite President informing them that the unit/worksites/program is examining a "12 Hour" rotation.
- (c) Once it is determined that the majority of nurses are in favour of a shift change, a Master Rotation will be developed in meaningful consultation with the nurses as defined in Article 1504.
- (d) The length of the trial period will be six (6) months in length or for a shorter period as mutually agreed between the Union and the Employer.
- (e) Six (6) weeks prior to the completion of the trial period, a unit/worksites/program meeting will be held to review/evaluate the "12 Hour" shift and to implement or discontinue the "12 Hour" rotation.
- (f) The 11.63 ("12") hour shifts may be discontinued [subject to a sixty percent (60%) vote in favor of discontinuing the shift by nurses on the unit/worksites/program] or by the Employer with written notification of ninety (90) working days. The Union will be notified of the discontinuance of the "12 Hour" shift. The Employer and the Union shall meet to determine a date to return to the seven and three-quarter (7.75) hour shift.
- (g) Nurses who are unwilling to work the "12 Hour" shift schedule pattern will be transferred to a unit/worksites/program on a seven and three-quarter (7.75) hour shift schedule pattern if reasonably possible. The Employer will make every reasonable effort to place the nurse in accordance with their preference re: unit/worksites/program and rotation. This transfer will occur prior to the date of implementation of the "12 Hour" rotation.

2. Hours of Work and Shift Schedules:

Full-time hours of work shall provide:

- (a) An average of six (6) shifts of 11.63 hours duration, and one (1) shift of seven and three-quarter (7.75) hours duration in each bi-weekly period; or
- (b) Twenty (20) shifts of 11.63 hours duration in each three (3) consecutive bi-weekly period; or
- (c) A combination of shifts of 11.63 (“12”) hours duration and 7.75 hours duration that equal an average of seventy-seven and one-half (77.50) hours bi-weekly averaged over the three (3) consecutive bi-weekly periods in the shift schedule pattern; or
- (d) Four (4) scheduled “12” hour shifts followed by four (4) days off and once every six (6) months the nurse shall receive an additional four (4) days off. Where this rotation pattern is utilized, the provisions of 1504 (d) (weekends) shall not apply. The additional four (4) days off may be scheduled together, or separately in each six (6) month period, and the decision on how these will be scheduled will be in consultation with the nurses and included in the master rotation.

Shift schedules shall be based on Master Rotation patterns planned in consultation with the nurses concerned, and provide for a minimum of eleven and a half (11.5) hours off between assigned shifts, a minimum of forty-seven (47) hours off duty at one time, unless otherwise mutually agreed and a minimum of alternate weekends off duty.

It is understood that whenever 11.63 (12) hours is mentioned, its equivalent eleven (11) hours and thirty-seven and one-half (37.50) minutes (11:375) may be used.

The official shift length is 11.625 hours, however the parties have agreed that due to exigencies of the payroll system that 11.63 hours shall apply until such time as the payroll system is able to accommodate three (3) decimal points.

3. Shift Schedules, Rest and Meal Periods

(a) “Twelve (12) Hour” shifts may be scheduled as:

- Twelve (12) hours and twenty-five (25) minutes; or
- Twelve (12) hours and fifteen (15) minutes.

(b) Two (2) rest periods of fifteen (15) minutes each will be allocated by the Employer during a “12 Hour” shift.

- (c) In each shift of twelve (12) hours twenty-five (25) minutes there shall be two (2) meal periods of forty (40) minutes and thirty-seven and one-half (37.50) minutes respectively as allocated by the Employer.

The total meal period time of seventy-seven and one-half (77.50) minutes includes forty-seven (47.50) minutes of unpaid time and thirty (30) minutes of paid time.

- (d) In each twelve (12) hour and fifteen (15) minute shift there shall be two (2) meal periods of thirty (30) minutes and thirty-seven and one-half (37.50) minutes respectively as allocated by the Employer. The total meal period of sixty-seven and one-half (67.50) minutes includes thirty-seven and one-half (37.50) minutes of unpaid time and thirty (30) minutes of paid time.

4. A weekend shall mean the period from 2345 hours on Friday until 2330 hours on the immediately following Sunday

5. Overtime:

Overtime for full-time nurses shall be authorized time worked in excess of a scheduled ("12") hour or 7.75 hour shift or hours in excess of the normal full-time hours in the rotation pattern in effect on each nursing unit/worksite/program.

Overtime for part-time nurses shall be authorized time worked in excess of a scheduled 11.63 ("12") hour or 7.75 hour shift or hours in excess of the normal full-time hours in two (2) consecutive bi-weekly periods, in accordance with Article 16.

Applicable for Churchill Health Centre site only:

Overtime for full-time and part-time nurses shall be authorized time worked in excess of a scheduled 11.63 ("12") hour or 7.75 hour shift or hours in excess of the normal full-time hours in the rotation pattern in effect on each nursing unit/worksite/program

6. Shift Premium, Weekend Premium and Responsibility Pay shall be paid in accordance with the provisions of the Collective Agreement.

7. Recognized Holidays:

A nurse required to work on a Recognized Holiday shall be paid in accordance with the Collective Agreement for all hours worked. Full-time nurses shall receive an alternate seven and three-quarter (7.75) hour shift off at their basic rate of pay in accordance with Article 2203.

A nurse may accumulate three (3) days (23.25 hours) off given in lieu of Recognized Holidays in order to take two (2) consecutive 11.63 hour shifts off with pay. Such shifts shall be added to a weekend off or to scheduled days off or used to complete a partial week of vacation in accordance with Article 2206.

Applicable for Churchill Health Centre site only:

A full-time nurse required to work on a Recognized Holiday shall be paid in accordance with the Collective Agreement and, in addition, shall receive 11.63 hours off at their basic rate of pay.

Whenever a Recognized Holiday falls on their scheduled days off, the nurse shall receive an additional 11.63 hours off with pay in lieu thereof.

8. Income Protection:

Income protection is accrued at the rate of 9.69 hours per month. It is utilized in accordance with Article 23.

- absence through illness for one (1) twelve (12) hour shift utilizes 11.63 hours of accumulated income protection credits.
- absence through illness for two (2) twelve (12) hour shifts utilizes 23.25 hours of accumulated income protection credits.
- absence through illness for one (1) twelve (12) hour shift plus one (1) 7.75 hour shift utilizes 19.375 hours of accumulated income protection credits.

9. Bereavement Leave:

Pay for bereavement leave will be calculated in accordance with Article 2411, e.g:

- four (4) scheduled 11.63 ("12") hour shifts = 46.5 hours;
- two (2) scheduled 11.63 ("12") hour shifts = 23.25 hours.
- one (1) scheduled twelve (12) hour day off plus one (1) scheduled eight (8) hour shifts = 19.375 hours

10. Vacation:

The paid vacation entitlement that a nurse receives under the twelve ("12") hour shift schedule pattern shall be equivalent in hours to the paid vacation entitlement on a seven and three-quarter (7.75) hour shift schedule pattern, calculated in accordance with Article 21. Vacation shall be scheduled in accordance with Article 2101.

11. Standby:

The provisions of Article 18 shall apply to the 12 hour shift memo.

12. Additional available shifts shall be offered equitably to all nurses working on the unit/worksite/program regardless of their regular shift length.
13. The terms of Article 1504 (g) shall be applicable.
14. Individual shifts of 11.63 ("12") hours shall not be interchanged, as referenced in Article 15, with individual shifts of seven and three-quarter (7.75) hours, however nurses can interchange three (3) days (23.25 hours) with two (2) 11.63 hour shifts.
15. Where payroll limitations exist such that only two decimal points can be entered in regard to shift length, the shift length shall be rounded up to two decimal points.
16. Notwithstanding definition of "position", where there is mutual agreement between the Union and the Employer to allow nurses to revert from "12" hour shift patterns to "8" hour shift patterns it is understood that nurses occupying "12" hour positions will not be deleted in order to revert to a "8" hour positions. It is understood that nurses will select their "8" hour shift patterns on the new rotation in order of seniority.

This process is only applicable when there are no changes in each nurse's EFT.

23. Re: 10 Hour Shift Schedule Pattern

The Employer and the Union mutually agree that the following conditions and understandings are applicable to the 9.69 ("10") hour shift schedule pattern.

1. The procedure to be followed for the trial and implementation of the 9.69 ("10") hour shift schedule pattern shall be as follows:
 - (a) A meeting of all nurses in the unit/worksite/program and senior nursing management will be held to discuss a tentative "10 Hour" shift schedule pattern and a proposed date for the commencement of the trial period. Following the meeting, a date will be determined for a secret ballot vote to establish that a majority of the nurses are in favor of the shift change.
 - (b) A majority of sixty percent (60%) of the nurses affected must vote in favour of the shift change before a trial of the "10 Hour" shift can proceed. Nurses terminating employment in the unit/worksite/program prior to the commencement of the trial period will not be entitled to vote. A letter will be forwarded to the Regional and Local/Worksite President informing them that the unit/worksite/program is examining a "10 Hour" rotation.

- (c) Once it is determined that the majority of nurses are in favour of a shift change, a Master Rotation will be developed in meaningful consultation with the nurses as defined in Article 1504.
- (d) The length of the trial period will be six (6) months in length or for a shorter period as mutually agreed between the Union and the Employer.
- (e) Six (6) weeks prior to the completion of the trial period, a unit/worksite/program meeting will be held to review/evaluate the "10 Hour" shift and to implement or discontinue the "10 Hour" rotation.
- (f) The 9.69 ("10") hour shifts may be discontinued [subject to a sixty percent (60%) vote in favor of discontinuing the shift by nurses on the unit/worksite/program] or by the Employer with written notification of ninety (90) working days. The Union will be notified of the discontinuance of the "10 Hour" shift. The Employer and the Union shall meet to determine a date to return to the seven and three-quarter (7.75) hour shift.

2. Hours of Work and Shift Schedules:

Full-time hours of work shall provide:

- (a) eight (8) shifts of 9.69 ("10") hours duration in each bi-weekly period; or
- (b) a combination of 7.75 hour shifts and 9.69 hour shifts that equal 77.5 hours in a biweekly period

The official shift length is 9.687 hours, however the parties have agreed that due to exigencies of the payroll system that 9.69 hours shall apply until such time as the payroll system is able to accommodate three (3) decimal points.

3. Shift Schedules, Rest and Meal Periods

- (a) Each shift of 9.69 ("10") hours duration is to be inclusive of two (2) fifteen (15) minute rest periods and exclusive of one (1) meal period of at least thirty (30) minutes.
- (b) Each Shift of 7.75 hours duration is to be inclusive of two (2) fifteen (15) minute rest periods and exclusive of one (1) meal period of at least thirty (30) minutes.

- 4. A weekend shall mean the period from 2345 hours on Friday until 2330 hours on the immediately following Sunday

5. Overtime:

Overtime for full-time nurses shall be authorized time worked in excess of a scheduled 9.69 ("10") hour or 7.75 hour shift or hours in excess of the normal full-time hours in the rotation pattern in effect on each nursing unit/worksite/program.

Overtime for part-time nurses shall be authorized time worked in excess of a scheduled 9.69 ("10") hour or 7.75 hour shift or hours in excess of the normal full-time hours in two (2) consecutive bi-weekly periods, in accordance with Article 16.

Applicable for Churchill Health Centre site only:

Overtime for full-time and part-time nurses shall be authorized time worked in excess of a scheduled 9.69 ("10") hour or 7.75 hour shift or hours in excess of the normal full-time hours in the rotation pattern in effect on each nursing unit/worksite/program.

6. Shift Premium, Weekend Premium and Responsibility Pay shall be paid in accordance with the provisions of the Collective Agreement.

7. Recognized Holidays:

A nurse required to work on a Recognized Holiday shall be paid in accordance with the Collective Agreement for all hours worked. Full-time nurses shall receive an alternate seven and three-quarter (7.75) hour shift off at their basic rate of pay in accordance with Article 2203.

A nurse may accumulate four (4) days (31.00 hours) off given in lieu of Recognized Holidays in order to take three (3) consecutive 9.69 hour shifts off with pay. Such shifts shall be added to a weekend off or to scheduled days off or used to complete a partial week of vacation in accordance with Article 2206.

8. Income Protection:

Income protection is accrued at the rate of 9.69 hours per month. It is utilized in accordance with Article 23.

- absence through illness for one (1) 9.69 ("10") hour shift utilizes 9.69 hours of accumulated income protection credits.
- absence through illness for two (2) 9.69 ("10") hour shifts utilizes 19.38 hours of accumulated income protection credits.
- absence through illness for one (1) 7.75 hour shift utilizes 7.75 hours of accumulated income protection credits.

9. Bereavement Leave:

Pay for bereavement leave will be calculated in accordance with Article 2411, e.g:

- one (1) scheduled 9.69 ("10") hour shift = 9.69 hours;
- two (2) scheduled 9.69 ("10") hour shifts = 19.38 hours.
- one (1) scheduled 7.75 hour shift = 7.75 hours

10. Vacation:

The paid vacation entitlement that a nurse receives under the ten ("10") hour shift schedule pattern shall be equivalent in hours to the paid vacation entitlement on a seven and three-quarter (7.75) hour shift schedule pattern, calculated in accordance with Article 21. Vacation shall be scheduled in accordance with Article 2101.

11. Standby:

The provisions of Article 18 shall apply to the 12 hour shift memo.

12. Additional available shifts shall be offered equitably to all nurses working on the unit/worksites/program regardless of their regular shift length.
13. The terms of Article 1504 (g) shall be applicable.
14. Individual shifts of 9.69 ("10") hours shall not be interchanged, as referenced in Article 15, with individual shifts of seven and three-quarter (7.75) hours, however nurses can interchange four (4) 9.69 ("10") hour shifts with five (5) 7.75 hour shifts.
15. Where payroll limitations exist such that only two decimal points can be entered in regard to shift length, the shift length shall be rounded up to two decimal points.
16. Notwithstanding definition of "position", where there is mutual agreement between the Union and the Employer to allow nurses to revert from "12" hour shift patterns to "8" hour shift patterns it is understood that nurses occupying "12" hour positions will not be deleted in order to revert to a "8" hour positions. It is understood that nurses will select their "8" hour shift patterns on the new rotation in order of seniority.

This process is only applicable when there are no changes in each nurse's EFT.

24. Re: 7.75/11.63 Hour Shift

The Employer and the Union mutually agree that the following conditions and understandings are applicable to the 7.75/11.63 hour shift schedule pattern.

1. The procedure to be followed for the trial and implementation of the 7.75/11.63 hour shift schedule pattern shall be as follows:
 - (a) A meeting of all nurses in the unit/worksite/program and senior nursing management will be held to discuss a tentative 7.75/11.63 hour shift schedule pattern and a proposed date for the commencement of the trial period. Following the meeting, a date will be determined for a secret ballot vote to establish that a majority of the nurses are in favor of the shift change.
 - (b) A majority of sixty percent (60%) of the nurses affected must vote in favour of the shift change before a trial of the 7.75/11.63 hour shift can proceed. Nurses terminating employment in the unit/worksite/program prior to the commencement of the trial period will not be entitled to vote. A letter will be forwarded to the Regional and Local/Worksite President informing them that the unit/worksite/program is examining a 7.75/11.63 hour rotation.
 - (c) Following this meeting:
 - each nurse shall indicate their choice of either 7.75 hour shifts or 11.63 hour shifts;
 - rotation(s) that do not result in deletions will be developed based on the nurse(s) choice of shift length.
 - (d) Once nurses have indicated their preference for either 7.75 shift lengths or 11.63 hour shift lengths, they shall not be required to work the other shift length unless mutually agreed between the nurse and the Employer.
 - (e) It is understood that nurses who choose the 11.63 hour shift will work a Day shift and a Night shift and the nurses who choose the 7.75 hour shift will maintain their current shift description i.e. Days/Evenings, Days/Nights, permanent Days, permanent Evenings and permanent Nights.
 - (f) It is also understood that no nurse shall change their current EFT in order to accommodate the introduction of the 7.75/11.63 shift.
 - (g) Once it is determined that the majority of nurses are in favour of a shift change, a Master Rotation will be developed in meaningful consultation with the nurses as defined in Article 1504.

- (h) The length of the trial period will be six (6) months in length or for a shorter period as mutually agreed between the Union and the Employer.
- (i) Six (6) weeks prior to the completion of the trial period, a unit/worksite/program meeting will be held to review/evaluate the 7.75/11.63 hour shift and to implement or discontinue the 7.75/11.63 hour rotation.
- (j) The 7.75/11.63 hour shifts may be discontinued [subject to a sixty percent (60%) vote in favor of discontinuing the shift by nurses on the unit/worksite/program] or by the Employer with written notification of ninety (90) working days. The Union will be notified of the discontinuance of the 7.75/11.63 hour shift. The Employer and the Union shall meet to determine a date to return to the seven and three-quarter (7.75) hour shift.

2. Hours of Work and Shift Schedules:

Full-time hours of work shall provide:

- (a) An average of six (6) shifts of 11.63 hours duration, and one (1) shift of seven and three-quarter (7.75) hours duration in each bi-weekly period; or
- (b) Twenty (20) shifts of 11.63 hours duration in each three (3) consecutive bi-weekly period; or
- (c) Thirty (30) shifts of seven and three-quarter (7.75) hours duration in each three (3) consecutive bi-weekly period: or
- (d) A combination of shifts of 11.63 (“12”) hours duration and 7.75 hours duration that equal an average of seventy-seven and one-half (77.50) hours bi-weekly averaged over the three (3) consecutive bi-weekly periods in the shift schedule pattern; or
- (e) Four (4) scheduled “12” hour shifts followed by four (4) days off and once every six (6) months the nurse shall receive an additional four (4) days off. Where this rotation pattern is utilized, the provisions of 1504 (f) (weekends) shall not apply. The additional four (4) days off may be scheduled together, or separately in each 6 month period, and the decision on how these will be scheduled will be in consultation with the nurses and included in the master rotation.

Shift schedules shall be based on Master Rotation patterns planned in consultation with the nurses concerned, and provide for a minimum of eleven and a half (11.5) hours off between assigned shifts, a minimum of forty-seven (47) hours off duty at one time, unless otherwise mutually agreed and a minimum of alternate weekends off duty.

It is understood that whenever 11.63 (12) hours is mentioned, its equivalent eleven (11) hours and thirty-seven and one-half (37.50) minutes (11:37.5) may be used.

The official shift length is 11.625 hours, however the parties have agreed that due to exigencies of the payroll system that 11.63 hours shall apply until such time as the payroll system is able to accommodate three (3) decimal points.

3. Shift Schedules, Rest and Meal Periods

(a) "Twelve (12) Hour" shifts may be scheduled as:

- Twelve (12) hours and twenty-five (25) minutes; or
- Twelve (12) hours and fifteen (15) minutes.

(b) Two (2) rest periods of fifteen (15) minutes each will be allocated by the Employer during a "12 Hour" shift.

(c) In each shift of twelve (12) hours twenty-five (25) minutes there shall be two (2) meal periods of forty (40) minutes and thirty-seven and one-half (37.50) minutes respectively as allocated by the Employer.

The total meal period time of seventy-seven and one-half (77.50) minutes includes forty-seven (47.50) minutes of unpaid time and thirty (30) minutes of paid time.

(d) In each twelve (12) hour and fifteen (15) minute shift there shall be two (2) meal periods of thirty (30) minutes and thirty-seven and one-half (37.50) minutes respectively as allocated by the Employer. The total meal period of sixty-seven and one-half (67.50) minutes includes thirty-seven and one-half (37.50) minutes of unpaid time and thirty (30) minutes of paid time.

4. A weekend shall mean the period from 2345 hours on Friday until 2330 hours on the immediately following Sunday

5. Overtime:

Overtime for full-time nurses shall be authorized time worked in excess of a scheduled ("12") hour or 7.75 hour shift or hours in excess of the normal full-time hours in the rotation pattern in effect on each nursing unit/worksites/program.

Overtime for part-time nurses shall be authorized time worked in excess of a scheduled 11.63 ("12") hour or 7.75 hour shift or hours in excess of the normal full-time hours in two (2) consecutive bi-weekly periods, in accordance with Article 16.

Applicable for Churchill Health Centre site only:

Overtime for full-time and part-time nurses shall be authorized time worked in excess of a scheduled 11.63 ("12") hour or 7.75 hour shift or hours in excess of the normal full-time hours in the rotation pattern in effect on each nursing unit/worksites/program

6. Shift Premium, Weekend Premium and Responsibility Pay shall be paid in accordance with the provisions of the Collective Agreement.

7. Recognized Holidays:

A nurse required to work on a Recognized Holiday shall be paid in accordance with the Collective Agreement for all hours worked. Full-time nurses shall receive an alternate seven and three-quarter (7.75) hour shift off at their basic rate of pay in accordance with Article 2203.

A nurse may accumulate three (3) days (23.25 hours) off given in lieu of Recognized Holidays in order to take two (2) consecutive 11.63 hour shifts off with pay. Such shifts shall be added to a weekend off or to scheduled days off or used to complete a partial week of vacation in accordance with Article 2206.

8. Income Protection:

Income protection is accrued at the rate of 9.69 hours per month. It is utilized in accordance with Article 23.

- absence through illness for one (1) twelve (12) hour shift utilizes 11.63 hours of accumulated income protection credits.
- absence through illness for two (2) twelve (12) hour shifts utilizes 23.25 hours of accumulated income protection credits.
- absence through illness for one (1) twelve (12) hour shift plus one (1) 7.75 hour shift utilizes 19.375 hours of accumulated income protection credits.

9. Bereavement Leave:

Pay for bereavement leave will be calculated in accordance with Article 2411, e.g:

- four (4) scheduled 11.63 ("12") hour shifts = 46.5 hours;
- two (2) scheduled 11.63 ("12") hour shifts = 23.25 hours.
- one (1) scheduled twelve (12) hour day off plus one (1) scheduled eight (8) hour shifts = 19.375 hours

10. Vacation:

The paid vacation entitlement that a nurse receives under the 7.75/11.63 hour shift schedule pattern shall be equivalent in hours to the paid vacation entitlement on a seven and three-quarter (7.75) hour shift schedule pattern, calculated in accordance with Article 21. Vacation shall be scheduled in accordance with Article 2101.

11. Standby:

The provisions of Article 18 shall apply to the 12 hour shift memo.

12. Additional available shifts shall be offered equitably to all nurses working on the unit/worksites/program regardless of their regular shift length.

13. The terms of Article 1504 (g) shall be applicable.

14. Individual shifts of 11.63 ("12") hours shall not be interchanged, as referenced in Article 15, with individual shifts of seven and three-quarter (7.75) hours, however nurses can interchange three (3) days (23.25 hours) with two (2) 11.63 hour shifts.

15. Where payroll limitations exist such that only two decimal points can be entered in regard to shift length, the shift length shall be rounded up to two decimal points.

16. Notwithstanding definition of "position", where there is mutual agreement between the Union and the Employer to allow nurses to revert from "12" hour shift patterns to "8" hour shift patterns it is understood that nurses occupying "12" hour positions will not be deleted in order to revert to a "8" hour positions. It is understood that nurses will select their "8" hour shift patterns on the new rotation in order of seniority.

This process is only applicable when there are no changes in each nurse's EFT.

17. The shift lengths of vacant positions will not be altered without mutual agreement between the Union and the Employer.

18. Any current 7.75 hour positions held by a nurse will not be deleted solely for the purpose of creating an 11.63 hour shift.

25. Re: Transfer of Program as per Article 4204 (A)

In the event a Transfer of Program as per Article 4204 (A), the parties agree that where affected nurses hold accrued seniority and service at multiple Employers/facilities/programs/sites, the parties will review the effect of the restructuring on such nurses to ensure fairness and equity in the recognition of seniority and service.

26. Re: Relocation Assistance as per Article 4204 (A) - Program Transfers

The parties acknowledge and agree that the following provisions will be applicable in the event a nurse is relocated as per the conditions outlined in Article 4204 (A) – Program Transfers.

1. Relocation Expense is defined as those funds that are required to provide for the following:
 - expenses in packing, moving and unpacking specified household goods and personal effects;
 - if required, the cost of meals and lodging for the entire family while occupying temporary quarters for a period normally up to five (5) days after the start date of employment.
2. The relocation costs will be paid up to a maximum of \$5,000.00.
3. It is a condition of reimbursement of relocation expenses to provide a minimum service requirement of one (1) year. Should this service commitment not be met, it will be stated in the written offer of employment that the nurse agrees to repay a pro-rated portion of the relocation funding provided.
4. The nurse will be required to obtain three (3) separate estimates of the relocation of their household effects, if a professional moving company is employed. Copies of each estimate must be sent to the appropriate Designate for information and review. Alternatively nurses may be offered the option of coordinating the move through a Relocation Assistance Company defined by Shared Health.
5. Relocation costs may include such relocation expenses incurred as follows:
 - expenses in packing, moving and unpacking specified household goods and personal effects;
 - after obtaining employment; travel, meals and lodging expenses for moving the nurse from their former residence to the new residence;
 - if required, the costs of meals and lodging for the entire family while occupying temporary quarters for a period of time subsequent to the start date of employment;
 - replacement Value Insurance Protection except for items of extraordinary value; and, reasonable storage expenses in new location.
6. Relocation costs not normally included are:
 - boats, trailers and other large recreational vehicles;
 - more than two cars;
 - flammable items;
 - third party servicing charges – e.g. washers, dryers, refrigerators, freezers, dishwashers, water purifiers, electronic air cleaners, stereo equipment, T.V. and RAD antennae, and/or towers, water beds, pool tables, etc;
 - housecleaning – at the old or new residence;
 - plants;
 - frozen foods, preserves, etc;

- perishables;
 - firewood, outdoor swimming pools, building supplies and other bulky items;
 - extra pickup or unloading at a second location;
 - removal of broom, draperies, fixtures, etc;
 - large volumes of heavy items such as books, shop equipment, tools that may be transported cheaper by some means such as railway freight; and,
 - insurance for items of extraordinary value.
7. The reference to relocation assistance and pre- payment service requirement will be included in the letter of offer to the affected nurse.
 8. The nurse will be required to sign their Letter of Offer including the minimum service requirement prior to any funds being released to the nurse for relocation costs. Any requests for consideration of funding in advance of relocation by the nurse must be submitted to the Senior Management Team member or designate for approval.
 9. Following the Senior Management Team member's review of the submitted estimates, and with the agreement of the nurse, the lowest acceptable estimate shall be accepted.
 10. The nurse will submit a claim for all eligible expenses incurred providing receipts for all expenses or services which have been paid directly. The claim must be submitted within three (3) months from the nurse's start date. Any requests for an extension by the nurse must be submitted to the Senior Management Team member for approval.

27. Re: Seniority Recognition

In the interest of recognizing the seniority and benefits of new bargaining unit members as a result of The Health Sector Bargaining Unit Review Act (HSBURA), the Employer and the Union mutually agree to the following:

- All seniority hours accrued up to October 14, 2021 will be recognized as MNU bargaining unit seniority hours.
- All accumulated benefits and compensatory time, such as vacation, income protection, and banked overtime, will be maintained.
- Upon and going forward from October 14, 2021, the entitlements and accrual rates will be aligned with the applicable MNU Collective Agreement.

NOTE: *Entitlements and accruals are subject to MOU #32 Re: Preservation of Accruals and MOU # 34 Re: Article 3408 (Increments)*

28. Re: Return of Service Agreements

WHEREAS the parties recognize the importance of enhancing nursing skills for specialized areas including, but not limited to, Critical Care, Dialysis, Advanced Emergency, Chemotherapy; and/or initiatives related to the recruitment of nurses including, but not limited to, relocation expense allowances;

AND WHEREAS such education/training and recruitment initiatives are a significant investment by the health care system;

NOW THEREFORE the parties agree that the Employer may enter into a Return of Service Agreement with an individual nurse as follows:

1. A Return of Service Agreement must be agreed to and signed by the Union, the nurse and the Employer. A copy of the agreement will be provided to the Union and the nurse.
2. All terms and conditions agreed to in an executed Return of Service Agreement shall be fulfilled by the individual nurse and the Employer.
3. Notwithstanding the above, should the nurse not fulfill the terms of an executed Return of Service Agreement, the nurse shall be indebted to the Employer for the amount of debt owing for any unfulfilled portion of the terms and conditions. Recovery of any debt owing to the Employer shall be considered an authorized deduction in accordance with Article 40 but shall not be considered an overpayment. If, for any reason, the debt owing cannot be recovered through a payroll deduction, the Employer may pursue other means of recovery including, but not limited to, initiating a civil action in a Manitoba Court.
4. Return of Service Agreements shall not conflict with any other terms of the applicable Collective Agreement
5. The terms of the Return of Service Agreement shall include, but not be limited to:
 - (a) The monetary value of the Return of Service Agreement.
 - (b) The calendar time and hours worked required to fulfill the agreement.
 - (c) In the case of nursing skills enhancement, the expected date of completion of the program.
 - (d) The unit and/or program and/or location where the hours must be worked in order to count towards fulfillment of the agreement, which can be amended by mutual consent of the nurse and Employer.
 - (e) The amount of monetary repayment shall be assessed and hours worked toward fulfillment of the nurse's obligation shall be taken into account. Any such amounts shall be prorated based on the total hours of work required for the original term of fulfillment of the agreement.

- (f) In the event that an Employer is no longer able to provide a nurse with the opportunity to fulfill the terms of the agreement, the nurse shall not be obligated for repayment and the agreement shall become null and void.
- (g) In the event of an approved leave of absence, during the repayment period, the Employer and the individual nurse shall meet to revise the calendar time and hours worked required to fulfill the agreement. The nurse can elect to include the Union in such meeting.
- (h) Should the nurse fail to return to work as required under the Return of Service Agreement, the nurse is indebted to the Employer as per paragraph 3 above.
- (i) In the event of the death of a nurse prior to completion of any of the requirements of a Return of Service Agreement, the nurse's estate shall not be obligated to the Employer for any repayment and the agreement shall become null and void.

29. Re: Critical Incident Stress Management (CISM)

Whereas certain Employers have implemented and maintained a Critical Incident Stress Management Team to provide support to nurses affected by a Critical Incident, an incident or circumstances that are deemed by the nurse to be outside the normal experience of their duties/workplace, or who may experience additional and significant stress related to their duties, the parties agree as follows:

Where such CISM teams exist, the respective Employer shall make all reasonable efforts to maintain such for the life of this Collective Agreement. The Employer will communicate to members the option to activate CISM as well as provide information as to the nature of the support provided by the CISM teams. Such information shall include

- (a) under what circumstances and situations where CISM will be activated
 - (b) the nature of the support provided by CISM – i.e. debriefing, peer support
 - (c) the necessary contact information to activate CISM.
1. Where maintenance of CISM teams is no longer reasonably possible the Employer shall provide the Union as much notice as possible and the parties shall meet to discuss what options are to be implemented to continue provision of similar support to nurses.
 2. Where the Employer, does not currently maintain a CISM team, they shall provide the Union with the specifics of how nurses are provided support similar to that provided by CISM teams, and through what programs and/or services.
 3. The Employer may agree to add additional teams as the need arises.

30. Re: Provincial Float Pool (the “Pool”)

WHEREAS there is a need to meet health care service delivery requirements throughout the Province of Manitoba;

AND WHEREAS the parties recognize the need for a stable, reliable and skilled nursing workforce to effectively address the ongoing demands of various patient care needs, with less reliance upon external contracted resources;

AND WHEREAS the Employer wishes to establish the Pool to help address those requirements;

AND WHEREAS the parties wish to encourage and incentivize nurses to help meet these requirements through participation in the Pool;

AND WHEREAS this MOU is intended to provide for the establishment of terms and conditions of employment related to the Pool to address these goals;

NOW THEREFORE the parties agree as follows:

1. Shared Health (direct operations) (the “Employer”) shall establish the Pool and will employ nurses in positions in the Pool. Pool nurses will be covered by the terms of the Shared Health Employers Organization Collective Agreement (the “Shared Health Collective Agreement”), on the terms and conditions set out herein. Where the terms and conditions of this Memorandum of Understanding conflict with other provisions of the Shared Health Collective Agreement, this MOU shall govern.
2. Pool nurses shall be entitled to work in any Employers Organization in the Province and shall be governed by the Shared Health Collective Agreement only.
3. The purpose of Pool assignments for full-time, part-time, and casual nurses is to address staffing shortages caused by gaps in coverage such as for sick leave; vacation; leaves of absence; educational leaves; skills maintenance; surges in workload; unanticipated absences; unfilled vacancies; and such other causes as are experienced from time to time. For purposes of clarity available shifts will be offered to existing site nurses as provided in paragraph 12 herein.

4. The Employer and the Union shall consult from time to time regarding the processes to be followed in the creation, development, and evolution of the Pool and Pool positions. Pool processes will consider the requirements of patient care, recognition of the importance of a healthy workplace and value overall wellbeing of nurses, as well as input from the Employer and the Union regarding that:
 - assignments will be based on service delivery requirements;
 - travel will be required to designated locations for designated periods of time, and accommodation, where necessary, will be provided by the Employer;
 - shift schedules may be variable and flexible (e.g. Days, Evenings, Nights, Weekends, or a combination thereof, as set out in the posting);
 - type of positions may be variable and flexible (e.g. Casual, Term, Permanent); and
 - other considerations may arise in achieving the goals of the Pool.
5. The Employer will create Pool positions, which shall be posted and include the following information:
 - EFT (if applicable), anticipated shift schedule, and type of position (Permanent, Term or Casual);
 - area(s) of the Province to which the position applies with a minimum commitment of 50% away from home base, including site(s) or assignment(s) or a general description of the anticipated location(s) of work;
 - premium rate;
 - accommodation arrangements, if applicable;
 - travel requirements and rates, and home base for purposes of determining same, if applicable;
 - nursing specialty, qualifications, and skills, as applicable; and
 - such other information as the Employer determines necessary.
6. The nurse's home base will be determined at time of job award and will be included in the offer letter, for purposes of determining travel and accommodation entitlements.
7. Schedules shall be determined by the Employer, within the scope of the posting, and on reasonable notice to the nurse.
8. Each site to which a nurse is assigned will provide an orientation period to the nurse. The orientation shall be of sufficient duration to assist the nurse in becoming familiarized with essential information such as policies, procedures, routines, location of supplies and equipment, and fire and disaster plans.

9. Operational direction of the nurse will be the responsibility of the site to which a nurse is assigned. The Employer shall ensure the nurse is advised of who will provide operational direction at the site.
10. Any mileage, travel time, parking, per diem, accommodation, and other travel expenses incurred shall be compensated in accordance with Appendix "A" to this MOU.
11. Assignment to sites within the expectations of the position posted shall be at the reasonable discretion of the Employer, with as much advance notice as is reasonably practicable.
12. Assignment of shifts to a Pool position shall occur after consideration of patient/resident/client care requirements and the provisions of the applicable site Collective Agreement governing the assignment of available shifts to nurses employed at the site. In the North, and other difficult to staff sites, where it is reasonable to conclude that staffing through the applicable site Collective Agreement will not be effective, Pool assignments can be made without reference to the applicable site Collective Agreement.
13. The premium rate for these Pool positions shall be \$3.00/hour or 7.5% (whichever is greater) for all hours worked, based on a 50/50 split of home base/away assignments. The rate will be subject to upward adjustment up to \$6.00/hour or 15% (whichever is greater) for 0/100% home base/away assignments.
14. The Pool shall be considered to be a site within the Employer for purposes of Appendix "D" – Site List. As a result, hours worked in a Pool position shall not be considered as hours worked for purposes of determining overtime for any other positions occupied by the nurse within the Employer.
15. Vacation and vacation pay, where applicable, will be provided in accordance with the Collective Agreement. Where possible, reasonable consideration will be given to aligning Pool vacation requests with the vacation requests of nurses who hold another position(s).
16. Nurses participating in the Pool are not eligible to receive the payments outlined in Appendix F – Bi-Weekly Remoteness Allowance, nor the Isolation/Remoteness Retention Allowance.
17. If the Employer at the site to which a nurse is assigned has concerns about the nurse's performance, these may be addressed informally by that Employer, but formal performance management shall be provided by the Employer only.
18. Seniority shall accrue with the Employer as provided in the Shared Health Collective Agreement.

19. The terms and conditions of this memorandum shall be modified as necessary upon mutual written agreement of the Employer and the Union.

Appendix "A"

Travel Expense Reimbursement

Nurses whose assignment is more than 50 km from their home base shall be entitled to reimbursement of the following expenses incurred in accordance with the Shared Health Collective Agreement and Employer policies, unless noted otherwise:

- (i) Mileage and parking expenses.
- (ii) Return airfare where required.
- (iii) Where required, accommodations will be provided if available. Where accommodations cannot be provided, the nurse will be reimbursed for reasonable accommodations made.

Per Diem

A per diem shall be paid for each day of work and travel, provided the nurse is assigned more than 50 km from their home base:

- (i) \$45 per day; or
- (ii) \$60 per day for travel to the North.

Travel Time

- (i) Travel time in excess of 50 km from the nurse's home base shall be paid at the nurse's regular rate of pay, up to a maximum of four (4) hours each way.
- (ii) A nurse travelling on a regular scheduled day of work will not suffer any loss in basic salary as a result of missing any portion of a scheduled workday due to travel.

31. Re: Referral to Patient Care Optimization Committee

Effective October 14, 2021, the parties agree to create a fund equal to 1% of payroll per fiscal year for the life of this Collective Agreement of approximately \$12 million/year (years 2021/22, 2022/23, 2023/24 – pro-rata in current year based on the period post-ratification).

Such funds will be allocated to the Patient Care Optimization Committee as a separate allocation, and will be divided amongst the following incentives/allowances as per EO proposals summarized below based on the following approximate allocations, with the intention that these incentives/allowances will be paid in the applicable fiscal year.

1. *One Time ICU Recruitment and Retention Incentive Grant (up to \$3,000 – Approx. \$1.6 M)*
 - Grant of up to a maximum of \$3,000 depending on EFT (starting at 0.6 EFT) after completion of one year of service within an identified time period (until June 1, 2023).
2. *Incentive for Full Time Employment (based on \$2,000/yr - Approx. \$7.9M)*
 - Annual lump sum payment (qualifying period commencing April 2021, payment after April 2022) of up to \$2,000 for full-time nurses (LPN, RN2, or RN3), based on the number of full months the nurse is employed full-time up to March 31st of the qualifying year.

In the event the fund is not fully spent as of March 31st in a given fiscal year, the remaining balance shall remain a part of the Patient Care Optimization Allocation, to be distributed by the Patient Care Optimization Committee in accordance with the procedure agreed to between the parties for the distribution of the general Patient Care Optimization Allocation.

The funds for the one-time ICU incentive are intended for the 2022/23 fiscal year only and in the event there are funds remaining, those monies will be added to the PCOA for that fiscal year only. Thereafter, the allocation will be reduced by the amount paid out in 2022/23 for the ICU Incentive.

The parties agree to review the results of these incentives at the PCOC for discussion on a regular basis to assess the effectiveness of these incentives related to recruitment and retention. In contemplation of renewal of this agreement, the parties will review the overall effectiveness of the Full Time Incentive to inform their discussion regarding renewal of this MOU.

One Time ICU Recruitment and Retention Incentive Grant

1. A one-time grant of up to \$3,000 will be paid to nurses working in an ICU, including existing staff and new recruits, who meet the criteria as set out below.
2. The amount paid by the grant is based on the EFT held by the nurse during the one-year qualifying period as described below. It will not be adjusted based on hours worked in excess of the nurse's EFT. It will be adjusted if the nurse accepts a new EFT position during the qualifying year, provided the nurse's combined EFT remains a .6 EFT or higher.
3. A nurse must have 12 months of active service working in an ICU at a minimum of a.6 EFT. The grant will be pro-rated for eligible nurses and will receive a one-time payment as per the examples below.
 - A nurse works 1.0 EFT for 12 months = \$3,000
 - A nurse works a .8 EFT for 12 months = \$2,400
 - A nurse works a .6 EFT for 12 months = \$1,800

- A nurse works a combination of EFT during the 12-month period with a minimum of .6 EFT, for example .6 EFT for 6 months and 1.0 EFT for 6 months \$2,400
4. The grant will be payable to an eligible nurse after completion of 12 months of active service in an ICU, with the start of the 12 months commencing after May 1, 2021 and no later than June 1, 2022 and completed no later than June 1, 2023. For clarity, eligibility depends on working a full 12 months of active service in the above time period.
 5. In order to be eligible, the nurse must have completed the CCNOP prior to June 1, 2022, be working in an ICU, and maintained a .6 EFT or higher or increased their EFT in an ICU over the 12-month period.
 6. This grant is payable through the Patient Care Optimization Fund as outlined in Article 1107 in the MNU Collective Agreement, and is administered by the Patient Care Optimization Committee.
 7. The grant payable under this MOU shall be paid as income and shall not attract any accruals or benefits.
 8. The parties agree that upon acceptance during collective bargaining the details of the grant will be communicated to affected nurses.

Incentive for Full Time Employment

1. The parties agree that a Full Time Employment Incentive shall be payable in a lump sum annually to a nurse (LPN, RN2 or RN3) employed in a full-time (1.0 EFT) position during the following periods:
 - April 1, 2021 – March 31, 2022
 - April 1, 2022 – March 31, 2023
 - April 1, 2023 – March 31, 2024
2. Upon confirmation of the nurse's employment in a full-time position for the above periods, the nurse shall be paid \$2,000, on the first off-cycle pay period in May following each qualifying period. For clarity, eligibility depends on being employed in an eligible full-time position on March 31st in each year.
3. Nurses going on an approved leave of absence during the year, shall receive the pro-rated amount based on the number of full months the nurse is working full-time during the periods identified above.
4. In the event a nurse secures a full-time position after April 1st in any of the above periods, the incentive payment will be prorated based on the number of full months the nurse is employed full-time up to March 31st of the qualifying year.

This incentive payable under this MOU shall be paid as income and shall not attract any accruals or benefits.

32. Re: Preservation of Seniority, etc. For Different Annual Work Hours

WHEREAS the Health Sector Bargaining Unit Review Act (HSBURA) required a realignment of bargaining unit representation;

AND WHEREAS employees/nurses (“nurses”) formerly represented by the other bargaining agents were, subsequent to the issuance of Interim Labour Certificates, then represented by the Manitoba Nurses Union (MNU);

AND WHEREAS the MNU as bargaining agent conducted subsequent Collective Agreement negotiations on behalf of all nurses now represented by MNU, at “central table” negotiations;

AND WHEREAS certain nurses had previously accrued seniority and service at a rate that may be different than that specified in the MNU Collective Agreement(s) negotiated at “central table”, and occupied positions which were subject to former Collective Agreement provisions that specified qualifying full time annual hours which varied from those in the MNU Collective Agreement(s);

AND WHEREAS certain other nurses represented by MNU prior to the realignment of HSBURA, occupied positions which were subject to previous MNU Collective Agreement provisions that specified a variety of qualifying full time annual hours other than two thousand fifteen (2015);

AND WHEREAS the parties have agreed, through collective bargaining, that effective April 1, 2022, all annual hours of full-time work shall be standardized to be two thousand and fifteen (2015) for all nurses in all MNU bargaining units represented at “central table”;

NOW THEREFORE the parties agree as follows:

1. Where, for any period prior to April 1, 2022, a nurse occupies(d) any position for which the annual hours which qualify for “full time” are other than two thousand and fifteen (2015), all calculations of years of service, or portions thereof, for any such period prior to April 1, 2022, shall be conducted based on the number of hours then associated with the position.

2. For greater certainty, any years or portions thereof, prior to April 1, 2022, shall be recognized using the qualifying amounts of annual hours for that position at the relevant time, for the purposes of determining seniority as per Article 2501, and all other relevant accruals, including but not limited to: vacation accrual, and pre- retirement leave.

Example 1: Nurse A commenced a full-time position effective April 1, 2016. The annual hours for the position were 1885 up until the date of standardization, i.e., April 1, 2022. Nurse A worked 1885 hours per year up until April 1, 2022, and further five (5) years thereafter at 2015 hours per annum, retiring on March 31, 2027 at age 57. Nurse A would have eleven (11) years of service, resulting in 44 days of pre-retirement entitlement in accordance with Article 2413(a). For the purposes of vacation entitlement and paid vacation, Nurse A would qualify for paid vacation of twenty five (25) days/five (5) weeks, effective April 1, 2026 as per Article 2103 (i.e., in the eleventh year of service).

Example 2: Nurse B was hired for and worked a 0.5 EFT (and no additional available shifts beyond the 0.5 EFT), beginning on April 1, 2016 and retiring on March 31, 2027. The annual hours for the position were 1885 up until the date of standardization, i.e., April 1, 2022. Nurse B would receive 22 days pre-retirement leave, upon retirement.

3. For the purposes of increment advancement, please refer to the MOU #34 re: Article 3408 (Increments).

33. Re: Complexity of Negotiations Subject to HSBURA

WHEREAS the parties have been engaged in collective bargaining for the April 1, 2017 to March 31, 2024 Collective Agreements, subsequent to the enactment of the Health Sector Bargaining Unit Review Act (HSBURA),

AND WHEREAS the negotiations were unique and complex with respect to the consolidation of numerous separate Collective Agreements into one (1) Collective Agreement for each of the six (6) Employers Organizations,

AND WHEREAS the parties recognize the possibility may exist that both parties may have inadvertently overlooked bargaining a provision(s) of a previous Agreement into the 2017-2024 Collective Agreement(s) in the circumstances,

AND WHEREAS the parties wish to agree upon a process to consider further amendments to a Collective Agreement(s) should a provision(s) have been overlooked in the bargaining process,

AND WHEREAS it is not the intention of this memorandum to allow either party to seek to amend Collective Agreement provisions that were the subject of collective bargaining,

NOW therefore the parties agree as follows as it applies to the 2017-2024 Collective Agreements;

1. Should either party discover a Collective Agreement provision(s) that was inadvertently overlooked in the collective bargaining process for the 2017-2024 Collective Agreement(s), they shall provide notice to the other of the provision(s) which was overlooked and reasons it should be added to the 2017-2024 Collective Agreement(s) as a mid-term amendment.

2. It is agreed that notice under paragraph 1 is not notice to bargain any specific provision(s) under s. 61(3) of the Labour Relations Act.
3. Unless the parties agree to a mid-term amendment at the outset, the issue will be referred to the Standardization Committee, who will promptly meet to consider whether to recommend an amendment to the 2017-2024 Collective Agreement(s). Both parties agree that they shall take all reasonable efforts required to permit the issue to be discussed and understood promptly at the Standardization Committee level.

Any recommendation from the Standardization Committee to amend the Collective Agreement(s) mid-term in good faith—shall be referred to the Director, Provincial Health Labour Relations Services (PHLRS), and the Director of Labour Relations, Manitoba Nurses Union (MNU).

34. Re: Article 3408 (Increments) (Not applicable for WRHA - Public Health Program)

For part-time nurses whose annual hour base prior to April 1, 2022 is different than 2015, the parties agree that the nurse's former Collective Agreement provisions, as they relate to receiving the next increment on the salary scale, shall continue to apply up until such time as the nurse has received their next increment. Thereafter, Article 3408 of the MNU Collective Agreement shall apply.

For clarity this MOU applies only to the timing of the receipt of the subsequent increment. The salary scales themselves, with respect to the amount corresponding to each step, are understood to be as per the new Collective Agreement.

35. Re: Hours of Work

The existing provisions governing hours of work (Collective Agreement MOUs MOAs) in place at each site shall be maintained as per existing practice (as outlined in the former applicable Collective Agreements MOUs MOAs) until 2400 hours, March 31st, 2022. Existing provisions shall include, but are not limited to: rest periods, meal periods, shift duration, days of rest, flex time, and any other consideration with respect to the administration of hours of work.

It is understood between the parties that for the purposes of interpreting Article 302 (b) – (Part Time Nurse Definition), and Article 14 for the sites and Employers comprising the Employers Organization, the paragraph above will apply until March 31st, 2022.

Effective 0001 hours, April 1st, 2022 the provisions of Article 302 (b) and Article 14 of this Collective Agreement shall then apply to all sites unless otherwise agreed by the parties.

36. Re: Undergraduate Nursing Employee (UNE)

WHEREAS the Employers Organizations are responsible for the provision of health care services for Manitobans, and as such desire to attract, retain and develop nurses to work as part of the delivery of those services;

AND WHEREAS the parties agree that nursing students who have completed an appropriate amount of the curriculum and clinical experience are a valuable resource to support the existing collaborative health care team to provide patient centered care within the health care system;

AND WHEREAS by creating a new classification for these undergraduate nurses, it may increase the likelihood of retaining these undergraduate nurses to work as Registered Nurses and Registered Psychiatric Nurses upon graduation in the Province of Manitoba;

AND WHEREAS by inclusion of these undergraduate nurses in the bargaining unit, they will have the opportunity to utilize rights in the Collective Agreement to apply for nursing positions as an internal candidate;

AND WHEREAS the intention of this Memorandum is to support recruitment and retention efforts within the Province of Manitoba, not to affect the hours or positions of nurses in other classifications;

NOW THEREFORE the parties agree to create a new classification of a casual Undergraduate Nursing Employee (UNE), as follows:

1. The new “casual” classification of UNE will be created.
2. The UNE will be a nursing student enrolled in an Employer-approved nursing education program leading to initial entry to practice as a Registered Nurse (RN) or Registered Psychiatric Nurse (RPN).
3. The UNE position provides an opportunity for the nursing student to consolidate the knowledge and skill acquired in their nursing education program towards competency in the range and complexity of RN or RPN practice. The UNE is an unregulated member of the collaborative health care team who provides patient centered care under the supervision of the RN or RPN.

4. As a casual employee, the UNE will be subject to the provisions of Article 35 – Special Understanding re Casual Nurses, with the exception of:
 - a. Article 3501
 - b. Article 3504
 - i. the allowance as outlined in Article 18;
 - ii. Responsibility Pay premium outlined in Article 19;
 - iii. the Employer Sponsored Education Development allowance in Article 2407.
 - c. Article 3510 (a), (b), and (c) re: orientation payback
 - d. Article 3505 – UNE's will be paid 5% Recognized Holiday pay
5. The UNE will be compensated at Start Rate of the LPN scale.
6. It is understood that in order to enact this Memorandum of Understanding:
 - a. The Bargaining Certificate will need to be amended to include this classification in compliance with HSBURA, and;
 - b. Regulatory authority must be obtained to permit UNE's to carry out certain nursing functions under supervision that are currently reserved acts in the Province of Manitoba under regulations to The Regulated Health Professions Act;

Representatives of the Employers and the Union will work together to achieve the necessary approvals.

Utilization and employment of UNEs shall not result in elimination or reduction of positions for all other classification of nurses, nor result in the reduction of the availability of additional available shifts, or a reduction in the hours that would otherwise be available for any other classification of nurses. The parties will agree to meet upon confirmation of the required issues in #6 above to discuss implementation of the UNE classification. Subsequently, the parties shall discuss the ongoing role of the UNE at the applicable Nursing Advisory Committee (NAC) meeting and address issues raised by the parties to ensure the successful implementation of this classification. In the event that there is a permanent increase or decrease to the nursing complement or there is a change to the master rotation on a unit where the UNE is utilized, the Employer will advise the Union of such change.

This Memorandum of Understanding is made on a without prejudice and precedent basis and may only be referred to in relation to the enforcement hereof.

37. Re: Involuntary Reassignments in Event of Foreseen Staffing Shortages

Where no nurse has accepted the reassignment on a voluntary basis as per 2804 B., in addition to previously indicated conditions/compensation for voluntary reassignment, in 2804 B., C., D., and E. (E. not applicable to single site Employers) the following conditions will also apply:

1. Before compulsory reassignment of nurses, the Employer shall first seek volunteers to work the necessary shift(s) on the basis of voluntary eligible overtime amongst nurses who have documented their availability per the site process to work in the receiving unit for the shift(s).

Where the Employer contemplates compulsory reassignment from a separate sending site, the Employer shall first offer overtime to nurses (of the same qualifications as potentially reassigned nurses), before compelling reassignment from the same sending site. (Not applicable to single site Employers).

No nurse shall be compelled to accept reassignment where nurses volunteer to work those shifts on the basis of overtime compensation.

2. The assignment will enhance the well-being of other nurses working on the unit and will not adversely impact the well-being of the nurse who is reassigned.
3. No nurse will be compelled to accept a reassignment greater than 50 kms from their regular facility/program/site/unit. (Not applicable to single site Employers).
4. Where a nurse is involuntarily reassigned to an alternate facility/program/site/unit, and the nurse's travel time is greater than the distance to their regularly assigned facility/program/site/unit, the additional travel time will be considered time worked and eligible for overtime compensation as per the conditions of the Collective Agreement. (Not applicable to single site Employers).
5. Where a nurse is involuntarily reassigned for more than three (3) shifts or twenty-three point two five (23.25) hours (whichever is less), in a four (4) week period (commencing the date of the first reassignment), all subsequent involuntarily reassigned regular (non-overtime rate) hours shall be paid at double (2x) the reassignment compensation, as provided in paragraph B.1. (e) of Article 2804 (\$6/hour or $15\% \times 2 = \$12/\text{hour}$ or 30%, whichever is greater).

6. Where involuntary reassignment is necessitated on a constant and recurring basis due to an unfilled vacancy, the Employer and Union shall meet to determine measures to address the vacancy. Such measures may include consideration of additional incentives to attract applicants to the position. Where the parties are unable to agree on the terms to fill the vacancy the matter may be referred to a Troubleshooter for a final determination on appropriate measures/incentives to fill the vacancy.
7. Involuntary reassignment of nurses, regardless of classification, shall be assigned equitably, on a quarterly basis.

Involuntary reassignments for foreseen staffing shortages cease as of the date of expiry of this Collective Agreement, unless renewed in writing by mutual agreement of the parties. The parties shall meet sixty (60) days prior to the expiry date of this provision to discuss renewal.

Where the Employer seeks a temporary extension of these provisions, pending renewal of the Collective Agreement, it must sufficiently demonstrate it has conducted best efforts to recruit nurses/fill vacancies to address the shortages for which involuntary reassignments have been required. In such case the Union shall not unreasonably withhold its agreement. In the event of a dispute over extension of these provisions, the Troubleshooter will be requested to assist the parties and will be mandated to resolve the issue (as per the conditions indicated herein) pending the conclusion of bargaining for a renewal agreement.

38. Re: Vacancy Information Provided to Patient Care Optimization Committee

The parties acknowledge and agree that the sharing of relevant information in a timely fashion is important to the achievement of the objectives of the Patient Care Optimization Committee (“the Committee”).

In order to support the work of the Committee as it relates to issues of recruitment and retention, and to identify where staffing priorities and needs may exist across Manitoba, it is agreed that each Employers Organization will provide to the Committee a quarterly vacancy report containing monthly nursing vacancies categorized by facility/site/program, as appropriate.

It is understood and agreed that detailed vacancy information exchanged between the parties pursuant to this memorandum will not be shared publicly. This does not prevent either party from commenting on significant shortages due to unfilled vacancies or generalized vacancy trends publicly.

39. Re: Reference to Standardization Committee During Term of Agreement

WHEREAS in negotiating the terms of the six (6) Collective Agreements between the Manitoba Nurses Union and the Employers Organizations to which this Memorandum of Understanding is attached, the parties have sought to standardize Collective Agreement terms across all agreements, but recognize that additional consultation is necessary before attempts can be made to standardize the terms governing issues identified by Employers and worksites; Employers Organizations and Bargaining Units;

AND WHEREAS the complexity of attempting to standardize terms related to these issues is such that it was not practicable to attempt to do so in the negotiation of the current Collective Agreements;

AND WHEREAS the parties wish to make a “best effort” attempt to reach agreement on standardization of Collective Agreement terms related to these issues during the term of these Collective Agreements;

NOW THEREFORE THE PARTIES AGREE AS FOLLOWS:

The Employers and the Manitoba Nurses Union agree to strike a committee or committees, with equal representation of three (3) to five (5) members each, to engage in a consultative process to seek agreement regarding standardization of Collective Agreement provisions related to the issues.

The Employers Organization shall provide disclosure of relevant data as determined by the committee(s) to permit full consideration by the committee(s).

The committee(s) shall commence consultation at a time agreed by the parties but in any case no later than three (3) months after date of ratification (October 14,2021), and shall meet when determined by the committee, with a view to completing consultation within six (6) months of commencement of the committee(s), or such extended period as the parties agree.

Either party’s representatives on a committee may introduce any Collective Agreement issue for consideration of standardization.

If a committee is able to reach an agreement on a proposed amendment to the Collective Agreements in respect of any one or more of the issues under consideration, they may recommend such amendments to their respective parties (MNU/PHLRS) for consideration. The parties may agree to proceed with such amendments, subject to necessary ratification, if required, or may table the issue(s) to be addressed in the Collective Agreement negotiations which occur for renewal of the Collective Agreements.

40. Re: French Language

The Employers have an obligation to ensure compliance with respect to a variety of statutory authorities by requiring bilingualism (French and English) as a bona-fide qualification for designated bilingual position(s) within a site/program. In the event the Employer elects to designate an additional bilingual position(s), the Employer and the Union shall meet to discuss the bilingualism requirements attached to the position(s).

The Employers Organizations recognize that the rights of all nurses must be respected under the Collective Agreement. For operational purposes, bilingual position(s) as designated by the Employer may be awarded to a unilingual candidate subject to the requirement to attain linguistic competency in either French or English within a reasonable time period. In the event that there is no qualified bilingual nurse applicant for the designated bilingual position(s), the Employer may fill positions as necessary to meet patient care needs.

The following Memorandum of Understanding particular to the French Language in the Collective Agreements in force and effect when The Health Sector Bargaining Review Act was proclaimed, remain in force and effect for the duration of the Collective Agreement:

In the event of a conflict between this MOU and an existing MOU, the existing MOU shall govern.

Employer	Union	Employer Organization	Number
Actionmarguerite (Saint Boniface) Inc.	Tache Nurses Local 49 of the Manitoba Nurses' Union	Winnipeg Employer Organization	FL #1
Actionmarguerite (Saint – Vital) Inc.	Foyer Valade Nurses Local 146 of the Manitoba Nurses' Union	Winnipeg Employer Organization	FL #2
St. Boniface General Hospital –	St. Boniface Nurses Local 5 of the Manitoba Nurses' Union	Winnipeg Employer Organization	FL #3
Southern Health – Sante Sud a) Foyer Notre Dame b) Centre Sante Notre Dame Worksites	Manitoba Nurses Union	Southern Employer Organization	FL #4

41. Re: Article 2101 & 2109

It is agreed between the parties that the current vacation scheduling process in place at each site governed by this Agreement shall be maintained as per existing practice (as outlined in the former applicable Collective Agreements) until such time as the completion of the 2021/2022 vacation year. Vacation scheduling practices shall include, but are not limited to: dates posted for vacation entitlement, dates for vacation request submission, dates for posting of approved vacation, honouring vacation already scheduled and approved, and any other consideration with respect to the administration of the manner in which vacation is applied.

Effective for the 2022/23 vacation year, this memorandum shall cease to be in effect and vacation shall be administered as per the language of the Collective Agreement as outlined in Article 21, unless otherwise agreed by the parties.

Should vacation years be subsequently adjusted by virtue of agreement as per the Standardization Committee, vacation entitlement shall be adjusted accordingly to ensure accrual rates are properly maintained.

42. Re: Article 30A

The Employer and the Union mutually agree that because St. Amant Centre no longer participates at the Central Table negotiations due to the restructuring as a result of the HSBURA legislation, the provisions of Article 30A shall also apply to nurse-initiated mobility to/from St. Amant Centre, with the exception of transferability of accrued vacation.

43. Re: Nurse-Initiated Mobility 30A03

The parties agree as follows:

1. Where the parties have already determined and agreed upon a without prejudice and precedent solution for a nurse governed by this Collective Agreement with respect to the transfer/mobilization/porting of seniority and service, where the sending and/or receiving site(s) was not party to mobility/portability, such resolution shall remain unamended and unaffected by this Memorandum or Article 30A03.
2. Where a nurse in an MNU bargaining unit made an Employer change prior to October 14, 2021, and qualified for, and had mobilization or portability rights, and did not request to mobilize accrued seniority and service from one Employer to the other, they shall be afforded the applicable portability entitlements as specified in the former Collective Agreement.

3. Where a nurse was employed at a site included in an Employers Organization under the HSBURA legislation, and the nurse did not make a request as per #1 above, the nurse shall have their request considered consistent with the terms agreed to for similar requests under 1 above.
4. Notwithstanding 2 and 3 above, where a nurse, currently in the MNU bargaining unit, was disentitled from mobilizing seniority, service, etc. as a result of accepting a casual position with the sending site prior to commencing a term or permanent position at a receiving site, the parties agree that Article 30A03 (g) will be applied retro actively to the effective date of the interim bargaining unit certificate* applicable to the Employers within the Employers Organization for any nurse currently within the bargaining unit who made an Employer change from one Employer or Employers Organization to another. Where a nurse has satisfied the conditions in Article 30A03 (g), they shall be entitled to mobilize their accrued seniority, service, and benefits specified as per current Article 30A03.
5. For 2, 3, 4 above, a nurse must notify Provincial Health Labour Relations Services (PHLRS) at lrs@sharedhealthmb.ca within 90 days of ratification (October 14, 2021) of this Agreement in order to receive mobility/portability rights as specified herein. The PHLRS will consider each request to determine eligibility.

*Date of interim certification – December 8, 2019 (rural EOs), December 13, 2019 (WCHREO & SHEO).

44. Re: Appendix C – Occupational Classifications

The parties acknowledge and agree that most Collective Agreements that are now part of each Employers Organization contain an Appendix C – Occupational Classifications. Each Appendix C is specific to the Employer's or site's previous Collective Agreement.

Specifically, the Appendix C for WCHREO and SHEO in its current form does not reflect the additional classifications that resulted from HSBURA and therefore each Appendix C will need to be updated to reflect such changes, as well as ensure the inclusion of the information from all sites comprising each EO.

In order to work towards a standard Appendix C – Occupational Classifications, the parties agree to maintain the current Appendix C's for each site/Employer, and refer the process of standardization of these Appendices to the Standardization Committee outlined in MOU # 39 Re: Reference to Standardization Committee During Term of Agreement.

Where nurses are employed at a site, program or facility that was previously represented by a bargaining unit other than MNU, the parties agree that non nursing classifications under the various Appendix C's, shall not be included. Only those nursing classifications shall remain in the various Appendices, and they shall be aligned with the appropriate salary scale, based on MNU classifications. Should the parties be unable to reach agreement on which classification should apply to such nurses, within fifteen (15) days of the signing of this Agreement or such timeline as agreed by the parties, the matter shall be referred to an arbitrator to make a binding determination on the nurse's appropriate classification.

45. Re: Standardization of Hours

WHEREAS it is understood that there are currently nurses working multiple annual hour bases in Manitoba, including 1885, 1950, 2015 and 2080, the most common being 2015 annual hours;

AND WHEREAS, it is understood that for consistency and equity, all nurses should work the same annual hour base of 2015 annual hours;

NOW THEREFORE the parties agree as follows:

1. The current hour bases and all current provisions related to such will remain in effect until April 1, 2022 (the "transition date").
2. Upon the transition date, all nurses working an annual hour base which is not 2015 will convert to the annual hour base of 2015, with schedules and hourly rates adjusted accordingly.
3. In order to minimize the impacts, any vacant positions posted after October 14, 2021, shall be posted based on 2015 annual hours, if operationally feasible.
4. Required reviews of existing schedules, including hours of work and applicable meal and rest periods, will be completed prior to the transition date.

46. Re: Regional Float Nurse(s) – Not Applicable for Community Health and Home Care Nurses

The Employer and the Union agree that the following conditions and understandings shall apply to Nursing Services provided by Regional Float Nurse(s).

1. When Regional Float Positions are created by the Employer, the positions will be posted as per Article 3001.
2. Home base for the successful applicant(s) will be determined as follows:

- (i) Home base will be one of the sites in which the Regional Float Nurse(s) will be working.
 - (ii) The home base will be determined by the Employer prior to posting, and identified on the job posting, if a significant majority of the work is determined to be at one particular site, or
 - (iii) It will be identified on the job posting that at the conclusion of the posting process, the home base will be determined between the Employer, the Union and the successful applicant.
3. Transportation reimbursement will be provided to regional float nurse(s) in accordance with the prevailing Province of Manitoba mileage rates in accordance with the following formula:

*distance (in kms) from the nurse's home to the alternate worksite
minus the distance (in kms) from the nurse's home to the nurse's
home base (worksite).*

It is understood that any increases in the mileage rates shall be implemented as quickly as reasonably possible, retroactive to the date the Province of Manitoba mileage rates became effective.
4. Professional practice issues shall be dealt with at the designated home base.
5. The terms and conditions of the Collective Agreement between the Employer and the Manitoba Nurses' Union shall be applicable.

47. Re: Travel Nurse/Locum Assignment Program

It is agreed between the Employer and the Union to utilize nurses employed within an Employer Organization to provide additional staffing for facilities and services located in those parts of Northern Manitoba which require such staffing, and that there are mutual benefits to this internal approach including improved quality and continuity of patient/client/resident care.

The Travel Nurse/Locum Assignment Program is focused on addressing specific needs in Northern Manitoba by creating short term opportunities for nurses to experience nursing in the North and supporting the high staffing needs of the North.

The Travel Nurse/Locum Assignment program will provide nursing coverage for any identified staffing needs, such as, but not limited to vacation relief, short term leave relief, vacancy relief and additional workload requirements.

The parties agree that an advisory committee will be struck within sixty (60) days of ratification of the Collective Agreement with equal representation from the Employer and the Union to work together to advise on the principles governing the program, the program description, a communication plan, recruitment strategies and guidelines to address procedural issues.

Unless amended by agreement of the advisory committee or as provided in this Memorandum of Understanding, the terms and conditions of employment shall be determined by the applicable Collective Agreement.

It is agreed that during any locum assignment, the following will apply:

- 1) An allowance of \$6.00/hour or 15% (whichever is greater) will be paid to the Travel Nurse, and such allowance shall be paid on all hours worked (including overtime) during the locum assignment and shall be paid in addition to the nurse's basic rate of pay. This allowance shall be paid as income and does not attract any accruals or benefits.
- 2) A per diem of \$60.00/per day will be paid for each full day in the locum assignment including those days where the nurse is not scheduled to work and including travel days.
- 3) Accommodations will be provided by the Employer. The manner in which such accommodations are provided is up to the Employer, this may include Employer owned accommodations, rental accommodations, hotels etc.
- 4) Specified travel time, to and from the locum assignment, will be paid at the nurse's regular rate of pay, and will not include the \$6.00/hour allowance.
- 5) Transportation shall be provided for nurses during the locum assignment. Where the nurse provides their own transportation, reimbursement shall be paid in accordance with Article 2003 and any applicable Employer policy.
- 6) Nurses participating in the Travel Nurse/Locum Assignment program are not eligible to receive the payments outlined in Appendix F – Bi-Weekly Remoteness Allowance, nor the Isolation/Remoteness Retention Allowance.

It is understood that should the Employer wish to extend this program beyond Northern Manitoba, the parties shall meet to discuss any applicable requirements and rates.

This Memorandum of Agreement is made on a without prejudice and precedent basis and may only be referred to in relation to the enforcement hereof.

48. Joint Safe Patient Care Committee

In the interest of safe patient care and safe nursing practice, the parties agree to establish a Tripartite Manitoba Nurses Union/Employer/Manitoba Health Committee to review and make recommendations on issues of mutual interest to ensure effective and safe health care service delivery.

Topics will include but are not limited to:

- a) Nursing practice conditions
- b) Safety of patients and nurses
- c) Safe staffing model(s)
- d) Role of Charge Nurse
- e) Patient Care hours
- f) Community nursing

The Committee will be struck and will commence work within ninety (90) days of ratification. The parties shall create terms of reference for the Committee. Such terms of reference shall include a process whereby agreed recommendations may be implemented within the duration of the Collective Agreement.

49. Re: Inter-facility Position(s)

Applicable within and between the Employers and Sites in the SHEO and WCHREO, excluding Churchill Health Center Site, Eden Mental Health Centre site and any sites outside the City of Winnipeg.

Whereas, periodically it may be appropriate to create positions higher than a Nurse II which fall under the scope of this Collective Agreement which are inter-facility in nature; and

Whereas, the creation of inter-facility position(s) must recognize the existence of separate Collective Agreements;

The parties agree as follows:

1. Where an inter-facility position(s) is contemplated, the Employers commit to contacting MNU and the respective Local/Worksite(s). The affected parties shall meet to discuss the specifics of the situation, in keeping with the principles as outlined in the Memorandum.
2. Should there not be mutual agreement between the affected parties, the inter-facility position(s) will not be posted as an inter-facility position(s).

3. In the event there is mutual agreement on a specific inter-facility position(s), such agreement shall be set out in a separate Memorandum of Understanding between the affected parties.
4. The positions contemplated in this memorandum will be either:
 - (i) a position(s) shared between two (2) or more Employers;
 - (ii) a position primarily located at one (1) site but requiring the performance of duties at each of the facilities.
5. The position(s) shall be posted in accordance with the respective Collective Agreement of both parties.
6.
 - (a) For those position(s) outlined in 4 (i) above, all applicants from each of the facilities/sites/programs will be considered and shall be treated as internal candidates. Mobility seniority will be the seniority utilized for the purpose of selection into the shared position(s). An internal applicant awarded the position(s) will remain an employee of their current Employer.
 - (b) Those positions outlined in 4 (ii) above shall be awarded in accordance with the Collective Agreement of the facility where the position is primarily located.
7. The affected parties will determine and commit to writing, in the separate memorandum, which facility will be considered the Employer of record, in the event the successful applicant is external to the facilities.
8. The successful applicant(s) will be required to comply with the policies and procedures of each facility in which they will practice. Resolution of professional practice and/or any other disputes arising under the Collective Agreement shall be the responsibility of the Employer of record.
9. To cover the cost of parking at each facility, one deduction from the nurse's pay cheque will be made by the Employer of record. A reciprocal pass will be provided, if possible. It is understood the nurse(s) shall not incur parking costs exceeding the parking rate as determined by the Employer of record.

50. Re: Nurses in Inter-facility Positions


The Employer and the Union agree they will work together to identify nurses who are currently in inter-facility positions. Memorandum(s) [as referenced in #7 of the Memo Re: Inter-facility Position(s)] will be developed to cover these nurses and the conditions that apply.


**MEMORANDA OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**


1. Re: Ratification of Collective Agreement
2. Re: Manitoba Health Premiums
3. Re: Amnesty From Provincial Wage/Hours Of Work Reduction Legislation
4. Re: Shifts of Less than 7.75 Hours – Not Applicable for Home Care Nurses
5. Re: Agency Nurses
6. Re: Group Benefit Plans
7. Re: Pensions [Participation in Jointly Trusteed Pension Plan (HEPP)]
8. Re: Group Registered Retirement Savings Plan
9. Re: Joint Nursing Council
10. Re: Buyback of Healthcare Employees' Pension Plan (HEPP) Pension
11. Re: Participation in PHCLA/Redeployment
12. Re: Provisions for Part-time Nurses Occupying More Than One Position
Within the Sites Comprising the Employer
13. Re: Nurse Practitioner Positions
- 13A. Re: Provisions for Nurse Practitioners Prior to April 1, 2022
14. Re: Mentorship
15. Re: Nurse Weekend Worker
16. Re: Increase of EFT
17. Re: Secondment of a Nurse Elected to Serve as President of the Manitoba
Nurses' Union
18. Re: Letter of Understanding – HEPP COLA Fund
19. Re: Former Civil Service Nurses Who Have Maintained Their Pension with
the Civil Service Superannuation Plan
20. Re: Grievance Investigation Process
21. Re: Transfer – Job Selection
22. Re: 12 Hour Shift Schedule Pattern
23. Re: 10 Hour Shift Schedule Pattern
24. Re: 7.75/11.63 Hour Shift
25. Re: Transfer of Program as per Article 4204 (A)
26. Re: Relocation Assistance as per Article 4204 (A) – Program
27. Re: Seniority Recognition
28. Re: Return of Service Agreements
29. Re: Critical Incident Stress Management (CISM)
30. Re: Provincial Float Pool (the “Pool”)
31. Re: Referral to Patient Care Optimization Committee
32. Re: Preservation of Seniority, etc. For Different Annual Work Hours
33. Re: Complexity of Negotiations Subject to HSBURA
34. Re: Article 3408 (Increments)

- 35. Re: Hours of Work
- 36. Re: Undergraduate Nursing Employee (UNE)
- 37. Re: Involuntary Reassignments in Event of Foreseen Staffing Shortages
- 38. Re: Vacancy Information Provided to Patient Care Optimization Committee
- 39. Re: Reference to Standardization Committee During Term of Agreement
- 40. Re: French Language
- 41. Re: Article 2101 & 2109
- 42. Re: Article 30A
- 43. Re: Nurse- Initiated Mobility 30A03
- 44. Re: Appendix C – Occupational Classifications
- 45. Re: Standardization of Hours
- 46. Re: Regional Float Nurse(s)
- 47. Re: Travel Nurse/Locum Assignment Program
- 48. Re: Joint Safe Patient Care Committee
- 49. Re: Inter-facility Position(s)
- 50. Re: Nurses in Inter-facility Positions


FOR THE EMPLOYER:




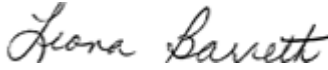




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Job Sharing

(Applicable for Churchill Health Centre, WRHA – Home Care Program, WRHA – Primary Care Program, and WRHA – Nurse Practitioners)

1. When a full-time position is posted, two (2) nurses may apply to equally share that position. Both nurses sharing the position shall be given part-time employment status and shall earn benefits as provided for in the Collective Agreement.
2. The decision to allow two (2) nurses to split a full-time position rests solely with Management who will consider the needs of the area.
3. When one (1) nurse in a job share is authorized to be away from work for any reason, it is expected the other nurse shall cover during their partner's absence providing such coverage will not result in overtime without the authorization of the manager

If due to unforeseen circumstances, a job share nurse cannot cover in their partner's absence, the nurse must notify the nurse manager to arrange alternate coverage. Job share nurses are not required to cover for extended periods of absence, but will be offered an opportunity to do so.

Nothing in this paragraph releases the nurse from their obligation to advise the nurse manager of their absence, notwithstanding the shift(s) is covered by the other job share nurse.

4. In the event that one (1) of the nurses sharing a full-time position resigns, and the management decision is to allow this position to remain a shared position, the position will be posted as full-time with the following wording noted on the job posting:

“This full-time position is currently being filled by two (2) nurses working permanent part-time. The remaining nurse wishes to continue working their half of the rotation and they will be allowed to do so if another nurse is willing to work the other half of the rotation. If you wish to apply for the other half of this rotation, please apply in the normal manner stating same.”

5. Providing there is another nurse willing to share the full-time rotation, the remaining nurse will be maintained in the shared position.

6. If the management decision is to no longer allow this position to remain as a shared position, or if no nurse is willing to share the rotation with the remaining nurse, the posted position will be offered to the remaining nurse as full-time and will be granted to them if they wish to change from part-time to full-time.
7. If the remaining nurse refuses to accept the position on a full-time basis, the position may be offered as full-time to the most suitable applicant for the full-time job posting.
8. The remaining nurse will then be offered any part-time position that is currently vacant, and if none is available they shall be dealt with in accordance with Article 2708.

As of October 14, 2021, the conditions of an existing job share arrangement shall remain intact (as per previous applicable contract language) and will not be subject to the conditions of this MOU. Going forward, any new job share arrangements will be subject to this MOU.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Article 1601

It is understood between the parties that for the purposes of interpreting MOU #12 (Re Provisions for Part Time Nurses Occupying More Than One Position Within the Employer - #5), Article 1601 (Overtime) Article 302 (b) – (Part Time Nurse Definition) and Article 3402 (Part Time Nurses and Additional Available Shifts), for the sites and employers comprising the Winnipeg-Churchill Health Region Employers Organization the following will apply:

Where a nurse has accepted and works multiple positions at multiple sites within the same Employer, the nurse would have to qualify for overtime in each site corresponding with each position held. Overtime will be earned corresponding to the position(s) within each site, not cumulatively amongst all sites worked with the same Employer.

It is also understood that in the event a nurse is reassigned or temporarily transferred to a different site, the hours worked by the nurse at the receiving site will count towards the calculation of overtime at the sending site. For clarity where a nurse holds a single position and is assigned to other position(s) or site(s) with the same Employer in accordance with this Collective Agreement, all hours worked shall count towards the calculation of overtime at the sending site/position.

This memorandum is subject to the memorandum Application of Offering of Overtime and Additional Available Shifts and the terms and conditions therein. Once a new process has been agreed upon and implemented any changes affecting overtime assignment and administration shall be similarly adjusted in this memorandum.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
SHARED HEALTH EMPLOYERS ORGANIZATION
AND
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Re Staff Mobility Within the Following Facilities/Programs of the WRHA System

The parties acknowledge and agree that the language from the previous MOU #26 Re Staff Mobility Within the Following Facilities /Programs of the WRHA System - #6. E. shall remain in effect for those sites/Employers where the language was in the previous collective agreement as per below:

Applicable only to Health Sciences Centre, St. Boniface, Grace, Seven Oaks, Concordia, Victoria, Misericordia, Riverview, CancerCare Manitoba, Deer Lodge, WRHA Public Health, WRHA Home Care, Breast Health Centre, WRHA CNS Pan Am Clinic, Primary Care, Nurse Practitioners and Regional Programs:


E. Any nurse who:


- (i) has utilized a redeployment number in the past to obtain a position but was not permitted to transfer seniority credits at the receiving facility/program/site/Employer,


shall be entitled to an adjustment of seniority which will reflect cumulative seniority earned both at the sending and receiving facilities/programs/sites/Employers.

Processes contingent on seniority implemented prior to October 14, 2021 will not be adjusted retroactively, (e.g. bumping, vacation preference).


FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Quality Monitoring Nurses – St. Boniface Hospital

1. The terms of the Winnipeg-Churchill Health Region Collective Agreement shall be applicable to Quality Monitoring Nurses except as modified hereinafter.
2. This memorandum applies only to the Quality Monitoring Nurses.
3. It is understood that work may be assigned to the incumbents in accordance with established past practice.
4. Work assignments at regular pay may vary from a minimum of two (2) hours to a maximum of seven and three-quarter (7.75) hours in any one (1) day. Hours of work assigned beyond seven and three-quarter (7.75) hours in any one (1) day shall be at overtime rates. Audit tour is a work assignment of two (2) hours and is paid at two (2) hours.
5. Quality Monitoring Nurses are placed on the RN salary scale at the 5th year rate.

FOR THE EMPLOYER:

FOR THE UNION:













Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Manitoba Nurses' Union Process for Unfilled Positions

1. Vacancies will be posted as per the Collective Agreement. The posting will include the following statement:

"If there are no applicants meeting the posted qualifications, the Employer MAY CONSIDER an applicant who does not meet the posted qualifications."
2. Positions remaining unfilled following one (1) posting will be listed on an "Unfilled Position List" (List). The List will be posted on the posting board. Positions on this List will be available on a first come, first served, basis. Any inquiry into a position on the List initiates discussion on that position. No further inquiries/applications on the position will be considered until the original inquiry has been completed. Applications/inquiries will continue to be received until the original application has been finalized. Anyone initiating discussion on a position must have an application for the position filled out and submitted. The Human Resources Services will confirm with the relevant Manager whether any discussions are underway. If an inquiry is under discussion, the nurse making the subsequent inquiry will be informed of this along with the expected decision date, which shall not exceed four (4) weeks, the nurse will have the opportunity to have their inquiry/application considered for other position(s) that remain unfilled.
3. If a position is removed from the Unfilled Position List for any reason, for more than two (2) weeks, it will be reposted as per the Collective Agreement. In order to award a position, it must either be posted as per Article 30 or be on the Unfilled Position List. A position will not be filled in any other manner except where the Union has agreed to waive a posting for the purposes of accommodation or grievance resolution. Positions which have been awarded from the Unfilled Position List and subsequently declined will be reposted pursuant to Article 30.
4. If an applicant is interested in an EFT different than what was posted, and the Employer can accommodate the request (i.e. .5 + .2 reconfigured to a .7) the reconfigured position is a new vacancy and must be posted as per the Collective Agreement. If unfilled, the position will be processed as in #2 above.
5. In the event that the Employer is prepared to award an unfilled position to an applicant who does not meet the posted qualifications, preference shall be given to the internal applicant who applied for the position when it was initially posted. If there were more

than two (2) internal applicants, the selection process will be followed should those nurses continue to be interested in the position.

6. Positions will not be placed on the Unfilled Positions List unless and until they have first been posted in accordance with #1 above.
7. The Unfilled Positions List will be updated weekly and a copy will be provided to the Union.
8. In the event a member of the management team is holding positions e.g. for potential rotation changes/amalgamation of positions; or to create new positions, etc., said information is to be e-mailed to Human Resources Officer responsible for the program area and the Local/Worksite President and assigned MNU Labour Relations Officer.
9. The names of those nurses who are awarded positions from the unfilled List will be forwarded to the Union in accordance with Article 3004.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Secondment of a Nurse to Presidential Duties – St. Boniface Hospital

The Employer and the Union, in the interest of maintaining consistent and harmonious union-management relations, agree to the following terms which shall apply in the secondment of a nurse to Presidential duties.

1. The nurse seconded to the position of Union President shall be considered an ongoing employee of the facility and shall be entitled to the same rights and privileges as other nurses employed by the facility including contractual rights, except as otherwise provided herein.

It is understood that the position vacated by the nurse seconded to the position of Union President, shall be posted and maintained and/or replaced as an indefinite term.

2. Payroll Record - The Union Treasurer (or designate) will act as the liaison person between the Employer and the Union with respect to all payroll issues. The Treasurer will advise the appropriate person in Payroll of the proper coding for vacation time and sick pay for the Union President. The Employer agrees to maintain a separate and identifiable payroll account for the Union President.
3. Payroll Expense Items - The Union will reimburse the Employer for the following payroll expense items during the period of secondment to Presidential duties:
 - (i) gross salary paid to the Union President shall be determined by the Union. The Union President shall be paid in accordance with Appendix "A", Nurse IV top of the scale.
 - (ii) vacation taken
 - (iii) sick pay (subject to paragraph 6 below)
 - (iv) payroll tax
 - (v) Employer's portion of CPP
 - (vi) Employer's portion of EI
 - (vii) Workers Compensation premiums paid
 - (viii) Employers portion of Benefit Plan premiums (see Benefit Plans below)

The Local shall be given a bill outlining payroll expense items on a monthly basis.

Payroll expense items for such time spent as an officer of the Union participating in negotiations in which both the Union and the Employer are represented shall not be billed to the Union.

4. Pay Period - The Union President shall continue to be paid on a bi-weekly basis.
5. Seniority - Seniority shall continue to accrue during the period of secondment.
6. Sick Pay -
 - (i) The Union President will accumulate sick pay credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Union President is absent during the secondment period due to accident or illness and the sick pay credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Union President out of sick leave credits accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.
 - (ii) Special Understanding Re: D & R - The Union President shall have access to the D & R Plan. The Union agrees to reimburse the Employer for a maximum of 85 days of sick pay to cover the elimination period of the D & R plan. If the Union President fails to qualify for an D & R benefit following the elimination period, she shall be entitled to use Employer paid sick pay credits as required for recovery.
 - (iii) Following secondment and the nurse's return to work, she will be eligible to utilize the sick pay credits accumulated during the period of secondment less any sick pay processed during the secondment. The Employer will provide the nurse with a letter (copy to be placed on the nurse's file in Human Resources Department) confirming the sick pay credits that can be paid in the event the nurse utilizes all sick pay credits accumulated as an active employee. In the event the nurse is sick and wishes to utilize these sick pay credits accumulated during secondment, she will advise Human Resources Department. The Employer will process the sick pay and invoice the Union for the cost.

7. Vacation Pay

In the calendar year that the nurse is seconded to Presidential duties, the Employer shall assume responsibility for vacation earned but not used to March 31st of that calendar year. The Employer's cost will be based on the nurse's salary rate as at March 31st.

In the calendar year that the nurse relinquishes Presidential duties, the Employer shall assume responsibility for vacation earned during the month of April of that calendar year. The Union shall assume responsibility for the balance of vacation earned during secondment. The Union's cost will be based on the nurse's salary rate in effect at the time vacation is taken.

8. Recognition of Service –

- (i) For purposes of increments – The increment date of the incumbent following expiry of the period of secondment will be delayed for one (1) month for every full month they are on secondment to Presidential duties, to a maximum delay of twelve (12) months.
- (ii) For purposes of determining vacation accumulation base – the period of secondment to Presidential duties shall be recognized as service to the Employer.
- (iii) For purposes of Pre-retirement Leave – the period of secondment to Presidential duties shall be recognized as service to the Employer. At the time of taking pre-retirement leave, the Union agrees to reimburse the Employer for the cost of paid pre-retirement leave which was accrued by the Union President during the period of secondment, i.e.

1 year of secondment = four (4) days paid pre-retirement leave

9. Benefit Plans –

- (i) Pension Plan – The Union President shall continue to have payroll premium deductions for the pension plan and the Union agrees to reimburse the Employer for the Employer's contribution. All pensionable service shall accrue during the period of secondment as it would to a full-time nurse.
- (ii) Life Insurance/Extended Health Plan (if applicable)/Dental Plan (if applicable) and D & R Plan – shall be continued with reimbursement by the Union for the Employer's contribution to these plans.

NOTE: The Union President will be eligible to participate in the group benefit plans under the same terms and conditions as any other permanent employee of the facility.

10. Parking Pass – The Union President shall be permitted to retain any current parking pass with the Union reimbursing the Employer for the cost of same.
11. It is understood that the Employer shall reimburse the Union for all travel expenses, i.e. parking, mileage from the facility to the meeting site incurred by the President when attending Regional NAC meetings, other regional joint committee meetings or any other regional meetings which the President is required or requested to attend.
12. This memorandum shall be in effect for the duration of the Collective Agreement. If, during this period, the Union President’s term of office is terminated, the Union shall immediately advise the Employer and indicate the name of the nurse who will assume Presidential duties for the remainder of the term. In such case, the terms of this Memorandum of Understanding shall continue to apply to the new Union President.

FOR THE EMPLOYER:

FOR THE UNION:













Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Secondment of a Nurse Elected to Serve as Vice-President – St. Boniface Hospital

The Employer and the Union, in the interest of maintaining consistent and harmonious union-management relations, agree to the following terms, which shall apply in the secondment of a nurse who is Vice President of the Union, to Vice Presidential duties, as requested by Local 5.

1. The nurse seconded to the position of Union Vice President shall be considered an ongoing employee of the facility and shall be entitled to the same rights and privileges as other nurses employed by the facility including contractual rights, except as otherwise provided herein.

The nurse will be granted a leave of absence, as required by the Union, to maintain their position at St. Boniface General Hospital.

The nurse seconded to the position at Local 5 will, as part of their duties, replace the Local 5 President during their vacation or any other periods of leave or provide support and assistance in the Local 5 office for general operating purposes.

It is understood that the position or portion of position vacated by the nurse seconded to the position of Union Vice President shall be posted and maintained and/or replaced as an indefinite term. This shall not preclude the Employer from utilizing part-time or casual nurses to work available shifts as specified in Articles 34 and 35.

Notification of secondment shall be made in writing to the Employee Relations Department at least four (4) weeks in advance, except in emergency circumstances.

Scheduling of the nurse's remaining position on their unit, if required, will be done by the appropriate Program Team Manager in consultation with the nurse.

2. Payroll Record – The Union Treasurer (or designate) will act as the liaison person between the Employer and the Union with respect to all payroll issues. The Treasurer will advise the appropriate person in Payroll of the proper coding for vacation time and sick pay for the Union Vice President. The Employer agrees to maintain a separate and identifiable payroll account for the Union Vice President.

3. Payroll Expense Items – The Union will reimburse the Employer for the following payroll expense items during the period of secondment to Vice Presidential duties:
 - (i) gross salary paid to the Union Vice President shall be determined in writing by the Union and provided to the Employer
 - (ii) vacation taken
 - (iii) sick pay (subject to paragraph 6 below)
 - (iv) payroll tax
 - (v) Employer's portion of CPP
 - (vi) Employer's portion of EI
 - (vii) Workers Compensation premiums paid
 - (viii) Employer's portion of Benefit Plans premiums (see Benefit Plans below)

The Local shall be given a bill outlining payroll expense items on a monthly basis. Payroll expense items for such time spent as an officer of the Union participating in negotiations in which both the Union and the Employer are represented shall not be billed to the Union.

4. Pay Period – The Union Vice President shall continue to be paid on a bi-weekly basis.
5. Seniority – Seniority shall continue to accrue during the period of secondment.
6. Income Protection
 - (i) The Union Vice President will accumulate income protection credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Union Vice President is absent during the secondment period due to accident or illness and the income protection credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Union Vice President out of income protection credits accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.
 - (ii) Special Understanding re: D & R – The Union Vice President shall have access to the D & R Plan. The Union agrees to reimburse the Employer for a maximum of 85 days of income protection to cover the elimination period of the D & R plan. If the Union Vice President fails to qualify for a D & R benefit following the elimination period, they shall be entitled to use Employer paid income protection credits as required for recovery.
 - (iii) Following secondment and the nurse's return to work, they will be eligible to utilize the income protection credits accumulated during the period of secondment less any income protection processed during the secondment. The Employer will provide the nurse with a letter (copy to be placed on the nurse's file in Human Resources Department) confirming the income

protection credits that can be paid in the event the nurse utilizes all income protection credits accumulated as an active employee. In the event the nurse is sick and wishes to utilize these income protection credits accumulated during the secondment, they will advise Human Resources Department. The Employer will process the income protection and invoice the Union for the cost.

7. Vacation Pay

In the calendar year that the nurse is seconded to Vice Presidential duties, the Employer shall assume responsibility for vacation earned but not used to March 31st of that calendar year. The Employer's cost will be based on the nurse's salary rate as at March 31st.

In the calendar year that the nurse relinquishes Vice Presidential duties, the Employer shall assume responsibility for vacation earned during the month of April of the calendar year. The Union shall assume responsibility for the balance of vacation earned during secondment. The Union's cost will be based on the nurse's salary rate in effect at the time vacation is taken.

8. Recognition of Service

- (i) For purposes of increments – the increment date of the incumbent following expiry of the period of secondment will be delayed for one (1) month for every full month they are on secondment to Vice Presidential duties, to a maximum delay of twelve (12) months.
- (ii) For purposes of determining vacation accumulation base – the period of secondment to Vice Presidential duties shall be recognized as service to the Employer.
- (iii) For purposes of Pre-retirement Leave – the period of secondment to Vice Presidential duties shall be recognized as service to the Employer. At the time of taking pre-retirement leave, the Union agrees to reimburse the Employer for the cost of paid pre-retirement leave which was accrued by the Union Vice President during the period of secondment i.e.:
1 year of secondment = four (4) days paid pre-retirement leave.

9. Benefit Plans –

- (i) Pension Plan – The Union Vice-President shall continue to have payroll premium deductions for the pension plan and the Union agrees to reimburse the Employer for the Employer's contribution. All pensionable service shall accrue during the period of secondment as it would to a full-time nurse.
- (ii) Life Insurance/Extended Health Plans (if applicable)/Dental Plan (if applicable) and D & R Plan – shall be continued with reimbursement by the Union for the Employer's contribution to these plans.


NOTE: The Union Vice President will be eligible to participate in the group benefit plans under the same terms and conditions as any other permanent employee of the facility.

10. Parking Pass – The Union Vice President shall be permitted to retain any current parking pass with the Union reimbursing the Employer for the cost of same.
11. It is understood that the Employer shall reimburse the Union for all travel expenses, i.e. parking, mileage from the facility to the meeting site incurred by the Vice President when attending Regional NAC meetings, other regional joint committee meetings or any other regional meetings which the Vice President is required or requested to attend.
12. If the Union Vice President's term of office is terminated, the Union shall immediately advise the Employer and indicate the name of the nurse who will assume Vice Presidential duties during the remainder of the term. In such case, the terms of this Memorandum of Understanding shall continue to apply to the new Union Vice President.


FOR THE EMPLOYER:




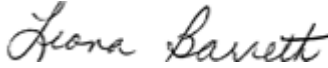




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Part Time Nurse Accrual of Seniority and Increments – St. Boniface Hospital

Article 3407 (a) and Article 3408 (a)

It is agreed between the parties that the applicability of the language in the former MNU Local 5 – Article 3407 (a) and 3408 (a) (embedded below) will apply only to the list of nurses included in this Memorandum, and shall not be applied to nurses who may transfer into the Employer after October 14, 2021

Should any of the nurses listed in this memorandum transfer to another Employer, the entitlements under this provision will cease upon date of termination, all accrued seniority will be maintained, and, if the nurse exercises their rights under the “Nurse Initiated Mobility” provision, such accrued seniority will be transferred to the new Employer, provided they are a party to the “Nurse Initiated Mobility” provisions.

As an example, a nurse from the list below who currently is a .5 EFT and is accruing their seniority at a FT rate, and has 35 years of service, would be entitled to take their full seniority entitlement (ie 70,525 hours of seniority) with them to their new position (.5 EFT) at Grace Hospital. Once at Grace Hospital, the nurse would accrue seniority based on hours paid at the regular rate of pay, as per the collective agreement, and no longer at FT rate as per the SBH language below.

3407

(a) The practice of nurses receiving increments on an annual basis, no matter the nurse's equivalent to full-time status, shall continue to apply for all full-time and part-time nurses in the employ of the Employer and within the scope of the bargaining unit as at December 31, 1992.

3408

(a) The practice of nurses accruing seniority on an annual basis, no matter the nurses' equivalent to full-time status, shall continue to apply for all full-time and part-time nurses in the employ of the Employer and within the scope of the bargaining unit as at December 31, 1990.

Nurses hired prior to Dec 31, 1990 – Article 3408 Applies

Thomson, Lily	Leblanc, Cheryl
Willey, Catherine	Warren, Sandy
Braun, Louise	Gamboa, Georgia
Reimer, Ruth	Woloszyn, Mary
Depape, Yolanda	Darker, Patricia

Gingera, Barbara
 Kress, Jacob
 Boughton, T
 Clarke, Nancy
 Carriere-Baker, Kim
 Keena, Janet
 Gin, Sally
 Cyr, Evelyn
 Enns, Judith
 Grant, Rosalie
 Henry, Geraldine
 Busby, Leslie
 Cochingyan-Trudel, Denise
 Skowron, Louise
 Pchajek, Susanne
 Loewen, Paulette
 Barrett, Marie
 Shepherd, Lisa
 Kent, Heather
 Falk, Karen
 Roy, Alice
 Vickery, Lynne
 Sitter, Lori
 Purcha, Julie Ann
 Woloshyn, Diana
 Chartrand, Sandra
 Nickel, Herta
 Holden, Sheila
 Sadler, Karen
 Banville, David
 Rogers, Valerie
 Sidon, Susan

Higgins, Maria
 Manalang, Elvira
 Dawson, Linda
 Mallick-Schnerch, Tulip
 Blais, Colleen
 Kolybabi-Labossiere, Christine
 Schultz, Diane
 Moltschanow, Gregory
 Lawrence, Gwen
 Beque, Arlene
 Jackson, Linda
 Brown, Katherine
 Wien, Kerri
 Jaipersaud, Dilchand
 Lazar, Karin
 Martin, Jennifer
 Morgan, Karen
 Orteza, Kelly
 Tierney, Jacqueline
 Medeiros, Margaret
 Adair, Sherry
 Ryan, Lara
 Fillion, Lynn
 Caron, Valerie
 Schapf, Tanya
 Allarie, Jo-Anne
 Erzen, Ivanka
 Beaudry, Angela
 Phaneuf, Kim
 Harder, Brenda
 Reimer, Karen
 Bell, Linda

Nurses Hired Prior to Dec 31, 1992 - Article 3407 applies

Thomson, Lily
 Willey, Catherine
 Braun, Louise
 Reimer, Ruth
 Depape, Yolanda
 Leblanc, Cheryl
 Warren, Sandy

Gamboa, Georgia
 Woloszyn, Mary
 Darker, Patricia
 Gingera, Barbara
 Kress, Jacob
 Boughton, T

 Clarke, Nancy

Carriere-Baker, Kim
Keena, Janet
Gin, Sally
Ellis, Eileen
Cyr, Evelyn
Enns, Judith
Grant, Rosalie
Henry, Geraldine
Busby, Leslie
Cochingyan-Trudel, Denise
Skowron, Louise
Pchajek, Susanne
Loewen, Paulette
Barrett, Marie
Shepherd, Lisa
Kent, Heather
Falk, Karen
Roy, Alice
Vickery, Lynne
Sitter, Lori
Purcha, Julie Ann
Woloshyn, Diana
Chartrand, Sandra
Nickel, Herta
Holden, Sheila
Sawyer, Valerie
Sadler, Karen
Banville, David
Rogers, Valerie
Sidon, Susan
Higgins, Maria
Smilski, Christine
Manalang, Elvira
Dawson, Linda
Mallick-Schnerch, Tulip
Blais, Colleen
Kolybabi-Labossiere, Christine
Schultz, Diane
Moltschanow, Gregory
Lawrence, Gwen
Beque, Arlene
Jackson, Linda

Brown, Katherine
Black, Esther
Wien, Kerri
Johnson, Doris
Jaipersaud, Dilchand
Lazar, Karin
Martin, Jennifer
Morgan, Karen
Orteza, Kelly
Tierney, Jacqueline
Medeiros, Margaret
Adair, Sherry
Ryan, Lara
Fillion, Lynn
Jones, Michelle
Caron, Valerie
Hillstrom, Kathleen
Schapf, Tanya
Allarie, Jo-Anne
Thompson, Elizabeth
Erzen, Ivanka
Schwerinski, Deborah
Beaudry, Angela
Contreras, Lilibeth
Phaneuf, Kim
Harder, Brenda
Reimer, Karen
Bell, Linda

FOR THE EMPLOYER:

Conn Newman

R. Barrett

R.K

FOR THE UNION:

D. J. ...

R. Barrett

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Research Nurses – St. Boniface Hospital

WHEREAS the parties hereto have mutually agreed that those persons occupying the position of Research Nurses are employees of the facility and should be included in the existing bargaining unit of the Manitoba Nurses' Union, and should be included in and covered by the provisions of the existing Collective Agreement;

AND WHEREAS the parties agree that it is appropriate to modify and amend certain provisions of the existing Collective Agreement to accommodate the unique terms and conditions of employment of the said Research Nurses;

AND WHEREAS the parties hereto wish to provide greater certainty and clarity to the terms and conditions of employment of the Research Nurses in order to minimize the potential for misunderstanding amongst all persons concerned;

NOW THEREFORE the parties hereto agree and covenant as follows:

1. Research Nurses employed by the St. Boniface General Hospital shall be included in the existing bargaining unit of the Manitoba Nurses' Union.
2. Research Nurses shall be covered by and included in all of the provisions contained in the Collective Agreement, except for any provisions of the Collective Agreement that may be specifically modified or amended by the terms of this Memorandum. In the case of any conflict between the Collective Agreement and this Memorandum, the provisions of this Memorandum shall apply.
3. (a) Research Nurse positions shall be regarded as "term positions", (except as indicated in (b) below) and the provisions of Article 30 of the Collective Agreement, and specifically Article 3006, shall apply to such Research Nurse positions, except as hereinafter amended:

- (i) the posting for term positions may contain an approximate expiry date. Any term position directly resulting from this posting, and any other term positions directly resulting therefrom, will be posted in the same manner;
 - (ii) the Employer will provide the Research Nurse with at least four (4) weeks notice of the expiry of the research position;
 - (iii) any extension to an existing term research position will not have to be re-posted unless there is a significant change in the subject matter or clinical focus of the research project, provided that the existing Research Nurse possesses the required skills to continue with the extended project. The Employer will notify the Union thirty (30) days prior to the proposed extension of an existing research position and will provide details of the nature of the proposed extension.
 - (b) Where operational requirements arise for casual research nurses to be employed for relief work that arises, the Employer may hire said nurses, in compliance with #4 and #5 of this MOU. Casual research nurses will be covered by the terms and conditions of the Collective Agreement, as they apply to other casual nurses. The Employer shall inform the Union on a quarterly basis of casual research nurse usage.
4. The position of Research Nurse shall be considered and treated as a Nurse III or higher position in accordance with the provisions of Article 2501 of the Collective Agreement.
 5. All Research Nurses hired for positions which commence after February 15th, 1993 shall be paid in accordance with the Nurse III salary schedule set out in the Collective Agreement.
 6. The specific conditions of employment of the Research Nurses currently employed by the facility, including expiry date of the current term position, current rate of pay, effective date of Nurse III rate, income protection accumulation, employment date, and status prior to the current term position, will be provided by the Employer in writing to the Union and respective individual nurses. Any extensions or renewals of the present research position shall thereafter be paid at the Nurse III rate unless otherwise agreed between the Employer and the Union.
 7. Research Nurses shall be entitled to all employee benefits granted to other nurses covered in the existing Collective Agreement, and in particular to those benefits set out in Article 39 of said Agreement.

8. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Research Nurse, as mutually agreed, may vary the daily hours worked in order to effectively carry out the duties and responsibilities of the position.
9. Overtime shall be calculated in accordance with the provisions of Article 16 of the Collective Agreement. However, Article 1604 shall be amended to indicate that compensation for overtime worked shall be paid by way of time off calculated at overtime rates. All accumulated overtime must be taken at a mutually convenient time within sixty (60) days of the date that the overtime was earned, and failure to grant such time off within this period, or by the end of a term if earned within sixty (60) days of the termination of the term period, shall result in monetary payment to the nurse for such overtime at the appropriate overtime rates. Overtime must be authorized by the chief researcher.
10. Article 17 (Shift Premium and Weekend Premium) of the Collective Agreement shall not be applicable to Research Nurses.
11. Vacation allowances and entitlements shall be calculated in accordance with Articles 21 and 34 of the Collective Agreement, except where the incumbent Research Nurse is already receiving a more generous or beneficial allowance, which shall then continue in effect until the end of that particular term position.

This provision shall apply to each Nurse IV, Nurse Educators and Nurse V (where applicable) employed by the Employer on date of signing. This article will not apply to nurses who are newly employed as, or reclassified to, Nurse IV (where applicable) or Nurse V (where applicable) after date of signing.

12. The provisions of the existing Collective Agreement and this Memorandum shall be in full force and effect as of the date of signing, except as set out in the Appendix attached hereto. All new Research positions, and all extensions and renewals of existing terms of Research positions which commence after February 15, 1993 shall thereafter comply with the provisions of this Memorandum and the Collective Agreement.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.


**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**


Re: Exercising Seniority Within the Mental Health Program
(Applicable for St. Boniface Hospital)


Notwithstanding the last paragraph of Article 2501 and Article 2708 of the Collective Agreement, the Employer and the Union mutually agree that within the Mental Health Program, the seniority of Registered Nurses and Registered Psychiatric Nurses relates to each other. In the event of a permanent deletion(s) of a position(s) occupied by a Registered Nurse or Registered Psychiatric Nurse within the Mental Health Program, Registered Nurses and Registered Psychiatric Nurses will be entitled to displace each other subject to their ability, performance and qualifications.

A Registered Nurse not employed within the Mental Health Program may only exercise their seniority rights within their own classification to “bump” into the Mental Health Program.


FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Clinical Resource Nurse – Mental Health Program
(Applicable for St. Boniface Hospital)

Notwithstanding the definition of Nurse III in the existing Collective Agreement and Article 2501, the Employer and the Union mutually agree that a Registered Nurse or Registered Psychiatric Nurse may apply for and be employed as a Clinical Resource Nurse (Nurse III) in the Mental Health Program.

FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Dialysis Access Nurse – St. Boniface Hospital and Seven Oaks General Hospital

Pursuant to the Interfacility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Dialysis Access Nurse position at SBGH and SOGH.

- (1) The Dialysis Access Nurse will be an employee of SBGH and will be a member of MNU Local 5;
- (2) The incumbent will perform the duties of the position primarily at SBGH, but is expected to be available and onsite at SOGH to meet the patient care needs at that site.
- (3) The terms of the Winnipeg-Churchill Health Region Employers Organization Collective Agreement shall apply except as modified hereinafter:
 - (a) Dialysis Access Nurse will work a seven and three-quarter hour (7.75) shift length, in accordance with their master rotation and their shift schedules, but may be requested to alter their start and stop times, as mutually agreed, in order to effectively carry out the duties of the position;
 - (b) Dialysis Access Nurse shall be paid at the Nurse III rate as set out in Appendix "A".
- (4) All professional practice issues shall be referred to and are the responsibility of SBGH.
- (5) Any disputes/grievances arising under the Collective Agreement shall be referred to and are the responsibility of SBGH.
- (6) The cost of parking at SOGH will be reimbursed per the Winnipeg-Churchill Health Region Employers Organization Collective Agreement, in the event that the nurse does not have a "reciprocal pass" supplied.
- (7) The Dialysis Access Nurse, when at SOGH site, will be under the direction of the SOGH Patient Care Team Manager for day-to-day and operational activities as they relate to that site.

In the event that it is determined further positions in the program are required, the parties will meet to determine the Employer of the additional positions.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
SHARED HEALTH EMPLOYERS ORGANIZATION
AND
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Therapeutic Aphoresis Program – Health Sciences Centre and St. Boniface Hospital

The parties have mutually agreed that the following will occur regarding the therapeutic aphoresis program position(s) at Health Sciences Centre:

1. The nurses awarded the three (3) positions, equaling 2.0 EFT, will be employees of the Health Sciences Centre and will remain as employees of Health Sciences Centre and as members of the Manitoba Nurses' Union.
2. Due to the nature of the work to be performed, incumbents will perform therapeutic aphoresis at both the Health Sciences Centre and St. Boniface Hospital.
3. All professional practice issues shall be referred to and are the responsibility of the Health Sciences Centre.
4. Any disputes/grievances arising under the Shared Health Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
5. The cost of parking at St. Boniface Hospital will be reimbursed the nurse per the Shared Health Employers Organization Collective Agreement, in the event the nurse does not have a "reciprocal pass" supplied.

In the event that it is determined further positions in the program are required the parties will meet to determine the employer of the additional positions.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent.

FOR THE EMPLOYER:

Conn Newman

R. Barrett

R.K.

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
SHARED HEALTH EMPLOYERS ORGANIZATION
AND
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Renal Transplant Coordinator/Multi Organ Donor Coordinator – Health Sciences Centre and St. Boniface Hospital

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Renal Transplant Coordinators/Multi Organ Donor Coordinators positions at Health Sciences Centre and St. Boniface Hospital.

1. The nurses will be employees of Health Sciences Centre and will be members of MNU Worksite 10.
2. The incumbents will perform their duties primarily at Health Sciences Centre but there will be a requirement to work and provide consultation in both facilities.
3. The terms of the Collective Agreement between the Shared Health Employers Organization and the Manitoba Nurses Union shall be applicable to the Renal Transplant Coordinators/Multi Organ Donor Coordinators except as modified hereinafter;
 - (a) Renal Transplant Coordinator/Multi Organ Donor Coordinator shall be paid at the Nurse IV rate as set out in Appendix A.
4. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
5. Any disputes/grievances arising under the Shared Health Employers Organization Collective Agreement shall be referred to and are the responsibility of the Health Sciences Centre.
6. The cost of parking at St. Boniface Hospital will be reimbursed the nurse per the Shared Health Employers Organization Collective Agreement, in the event the nurse does not have a “reciprocal pass” supplied. It is understood that the nurse will be reimbursed for any additional costs they are charged for a reciprocal pass.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent.

FOR THE EMPLOYER:

Conn Newman

Ry Barrett

R.K

FOR THE UNION:

Jac

Barrett

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
SHARED HEALTH EMPLOYERS ORGANIZATION
AND
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: French Language and Culture (St. Boniface Hospital)

The Hospital and the Union agree that the promotion of French language and culture at the St. Boniface General Hospital is important and the parties further agree to take reasonable steps to support French language and culture while respecting and supporting the rights of nurses. Accordingly, the parties agree as follows:

1. The Union agrees that the Hospital can, as an exercise of its management rights, include the qualification of bilingualism (ability to understand and speak English/French) as a job qualification for nursing positions in the future, and the Union will not grieve this qualification.
2. The Hospital agrees that nurses employed at the Hospital as of the date of this Agreement (September 17, 2008) and continuously employed thereafter will be exempt from the application of the bilingualism qualification in selection processes under Article 30, in matters of deletion, layoff, bumping and recall under Article 27, and as set out in Memorandum 11 (Employment Security), of the Collective Agreement. This exemption will not apply to the pre-existing bilingual position in the Geriatric Day Hospital.
3. The Hospital will test all applicants claiming the bilingual qualification. Those with A- level language proficiency or higher will be considered to meet the qualification.
4. All of the nursing positions posted to date containing the bilingual qualification, including the four (4) positions awarded to date based on the bilingual qualification will not be reversed.
5. For all nurses currently employed at the Hospital, except for those nurses currently employed in the Woman and Child Program, or in the Woman and Child Float Pool, the exemption will not apply in the following circumstances:

In the LDRP unit until 7 bilingual EFT has been achieved
In the IFCC unit until 7 bilingual EFT has been achieved
In the L & D unit until 7 bilingual EFT has been achieved

6. This Agreement will become a Memorandum of Understanding, and, as such, part of the Collective Agreement.

FOR THE EMPLOYER:

Cornel Newman

R. K.

R. K.

FOR THE UNION:

[Signature]

[Signature]

Leona Savett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Psychiatric Liaison Nurses

(Applicable for Seven Oaks General Hospital and Concordia Hospital)

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Psychiatric Liaison Nurse position (PLN) at Seven Oaks General Hospital and Concordia Hospital:

1. The nurse will be an employee of Seven Oaks General Hospital, a member of MNU Local 72.
2. The incumbent's duties are to be shared between Seven Oaks General Hospital and Concordia Hospital.
3. The terms of the Collective Agreement between the Winnipeg-Churchill Health Region Employers Organization and the Manitoba Nurses Union shall be applicable to the Psychiatric Liaison Nurse.
4. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Seven Oaks General Hospital. Input into performance will be provided to Seven Oaks General Hospital by Concordia Hospital.
5. The cost of parking at Concordia will be reimbursed per the Winnipeg-Churchill Health Region Employers Organization Collective Agreement, in the event the nurse does not have a reciprocal pass supplied.
6. Any disputes/grievances arising under the Collective Agreement shall be referred to and are the responsibility of the Seven Oaks General Hospital.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent.

FOR THE EMPLOYER:

Conn Newman

R. Barrett

R.K

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Salary Continuance for Local 2 President – Misericordia Health Centre

It is mutually agreed between the parties as follows:

The Employer agrees, on request, to pay regular salary and applicable benefits to the President of the Local for two (2) days per bi-weekly period for the purpose of conducting Union business. The Misericordia Nurses Local 2 agrees to reimburse the Employer for the full cost of said salary and benefits on demand.

FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Part Time Nurse Accrual of Seniority and Increments – Misericordia Health Centre

Article 3408

It is agreed between the parties that the applicability of the language in the former MNU Local 2 - Article 3408 (embedded below) will apply only to the list of nurses included in this Memorandum, and shall not be applied to nurses who may transfer into the Employer after October 14,2021.

Should any of the nurses listed in this memorandum transfer to another Employer, the entitlements under this provision will cease upon date of termination, all accrued seniority will be maintained, and, if the nurse exercises their rights under the “Nurse Initiated Mobility” provision, such accrued seniority will be transferred to the new Employer, provided they are a party to the “Nurse Initiated Mobility” provisions.

As an example, a nurse from the list below who currently is a .5 EFT and is accruing their seniority at a FT rate, and has 35 years of service, would be entitled to take their full seniority entitlement (ie 70,525 hours of seniority) with them to their new position (.5 EFT) at Grace Hospital. Once at Grace Hospital, the nurse would accrue seniority based on hours paid at the regular rate of pay, as per the Collective Agreement, and no longer at FT rate as per the MHC language below.

Misericordia Health Centre

3408 The practice of nurses receiving increments and accruing seniority on an annual basis, no matter the nurse’s equivalent to full-time status, shall continue to apply for all full-time and part-time nurses in the employ of the Employer and within the scope of the bargaining unit as at December 31, 1990.

Singh, Jane
King, Deborah
Gittins, Linda
Nichiporick, Kimberley
Dudych, Theresa
Derado, Lorie
Leseey, Patricia
Horton, Evelyn
Geddes, Sharon

Watson, Barbara
Descoteau, Kathleen
Johnson, Francisca
Hunter, Shana
Bettencourt, Clara

FOR THE EMPLOYER:

Conny Newman

Ryebart

R.K

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Respiratory Research Nurse(s) – St. Boniface Hospital and Misericordia Health Centre

Pursuant to the Interfacility Memorandum, the parties have mutually agreed that the following will occur regarding the Respiratory Research Nurse(s) position at SBGH and MHC:

1. The Respiratory nurse(s) will be an employee of SBGH and will be a member of MNU Local 5.
2. The incumbent(s) will perform the duties of the position primarily at SBGH, but is expected to be available and onsite at MHC to meet the patient care needs at that site.
3. The terms of the Winnipeg-Churchill Health Region Employers Organization Collective Agreement shall apply except as modified hereinafter:
 - (a) Respiratory Research nurse(s) by mutual consent work a variation in length of shifts and period of time between shifts within a 77.50 hour two (2) week period in order to effectively carry out the duties of the position.
 - (b) Respiratory Research Nurse(s) shall be paid at the Nurse III rate as set out in Appendix A.
4. All performance management issues shall be referred to and are the responsibility of SBGH.
5. SBGH shall assume responsibility for all aspects of the position i.e. scheduling workload assignment, budgeting, etc.
6. Any disputes/grievances arising under the Collective Agreement shall be referred to and are the responsibility of SBGH.
7. The Respiratory Research Nurse(s), when at the MHC site, will be accountable to the MHC Unit Manager for day to day and operational activities as it relates to that site.

8. The Respiratory Research Nurse(s) shall be paid transportation allowance in accordance with Article 20, and any costs of parking at MHC will be reimbursed per the Winnipeg-Churchill Health Region Employers Organization Collective Agreement, in the event that the nurse does not have a “reciprocal pass” supplied.

In the event that it is determined further positions in the program are required, the parties will meet to determine the Employer of the additional positions.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent.

FOR THE EMPLOYER:



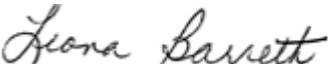




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Secondment of a Nurse to Presidential Duties – Grace Hospital

Whereas: The Employer and the Union are interested in taking measures to maintain consistent and harmonious union-management relations; and

Whereas: Joint discussion is invaluable to the maintenance of the above; and

Whereas: The complexities of issues often require the President to be away from their unit for meetings with the Employer for unknown periods of time; and

Whereas: The Employer and the Union appreciate the importance that patient care not be disrupted as a result of meetings between the Employer and the Union;

Therefore: The Employer and the Union agree to the following terms which shall apply in the secondment of a nurse to become Worksite 41 – President.

1. (a) A nurse employed by the Employer who is elected to the position of part-time President, shall be considered as continuing in the employ of the Employer during the nurse's term as President.

(b) The secondment will be for at a minimum 0.5 EFT. Any changes to the EFT will be made if the Worksite members approve and provide at least a four (4) week notice to the Employer. The nurse will be granted a partial leave of absence, if required, to maintain their position with the Employer. It is understood the partial position vacated by the nurse seconded to be President, shall be posted and maintained and/or replaced as an indefinite term.

(c) Scheduling of the nurse's remaining position on their unit, if required, will be done by the appropriate Manager in consultation with the nurse and will observe the conditions of Article 1504 or the MOU re "12" hour shift if applicable.
2. Payroll Record - The Worksite Treasurer (or designate) will act as the liaison person between the Employer and the Union with respect to all payroll issues. The Treasurer will advise the appropriate person in Payroll of the proper coding for vacation time and income protection for the President. The Employer agrees to maintain a separate and identifiable payroll account for the President.

3. Payroll Expense Items - The Worksite will reimburse the Employer for the following payroll expense items during the period of secondment to President:
 - (i) salary, which shall be in accordance with Appendix "A", at the Site President's current occupational classification and salary in their position from which they are seconded.
 - (ii) vacation taken
 - (iii) income protection (subject to paragraph 6 below)
 - (iv) payroll tax
 - (v) Employer's portion of CPP
 - (vi) Employer's portion of EI
 - (vii) Workers Compensation premiums paid
 - (viii) Employer's portion of Benefit Plan premiums (see Benefit Plans below)

The Worksite 41 shall be given a invoice outlining payroll expense items on a monthly basis. Payroll expense items for such time spent by the President, as an officer of the worksites participating in committee meetings/activities outlined in the Collective Agreement in which both the worksites and the Employer are represented, shall not be billed to Worksite 41, (e.g. NAC, negotiations, formal grievance meetings with Human Resources and a MNU Labour Relations Officer, Union Management). The parties to this agreement shall maintain an agreed "log" of the above time and, on a quarterly basis, a reconciliation shall occur in the next billing to the Worksite 41. Time spent meeting with membership, time spent meeting with administrative nursing personnel exclusive of Human Resource personnel and an MNU Labour Relations Officer on Leave of Absence time, will not be charged to the Employer.

4. Pay Period - The President shall continue to be paid on a bi-weekly basis.
5. Seniority - Seniority shall continue to accrue during the period of secondment.
6. Income Protection -
 - (i) The President will accumulate income protection credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Worksite President is absent during the secondment period due to accident or illness and the income protection credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the President out of income protection credits accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.
 - (ii) Special Understanding Re: D & R - The President shall have access to the D & R Plan. The Worksite 4 agrees to reimburse the Employer for a maximum of eighty-five (85) days of income protection to cover the elimination period of the D & R plan. If the President fails to qualify for a D & R benefit following the elimination period, the nurse shall be entitled to use Employer paid income protection as required for recovery.

- (iii) Following secondment and the nurses return to work, they will be eligible to utilize the income protection credits accumulated during the period of secondment less any income protection processed during the secondment. The Employer will provide the nurse with a letter (copy to be placed on the nurse's file in Human Resources Department) confirming the income protection credits that can be paid in the event the nurse utilizes all income protection credits accumulated as an active employee. In the event the nurse has an illness/accident and wishes to utilize these income protection credits accumulated during secondment, the nurse will advise the Human Resources Department. The Employer will process the income protection and invoice the Union for the cost.

7. Vacation Pay

In the calendar year that the nurse is seconded to Presidential duties, the Employer shall assume responsibility for vacation earned but not used to April 30th of that calendar year. The Employer's cost will be based on the nurse's salary rate as at April 30th. In the calendar year that the nurse relinquishes Presidential duties, the Employer shall assume responsibility for vacation earned during the month of May of that calendar year. The Union shall assume responsibility for the balance of vacation earned during secondment. The Unions cost will be based on the nurse's salary rate in effect at the time vacation is taken

8. Recognition of Services-

- (i) For purposes of increments - The increment date of the incumbent following expiry of the period of secondment will be delayed for one (1) month for every full month the nurse is on secondment to Presidential duties, to a maximum delay of twelve (12) months.
- (ii) For purposes of determining vacation accumulation base - the period of secondment to Presidential duties shall be recognized as service to the Employer.
- (iii) For purposes of Pre-Retirement Leave - the period of secondment to Presidential duties shall be recognized as service to the Employer. At the time of taking pre-retirement leave, the Union agrees to reimburse the Employer for the cost of paid pre-retirement leave which was accrued by the Union President during the period of secondment, i.e. 1 year of secondment = four (4) days paid pre-retirement leave.

9. Benefit Plans -

- (i) Pension Plan - The Union President shall continue to have payroll premium deductions for the pension plan and the Union agrees to reimburse the Employer for the Employer's contribution respecting the EFT of the partial leave. All pensionable service shall accrue during the period of secondment as it would to the total EFT of the nurse's position prior to the secondment.

- (ii) Life Insurance/Extended Health Plan (if applicable)/Dental Plan (if applicable) and D & R Plan - shall be continued with reimbursement by the Worksite 41 for the Employer's contribution to these plans.

NOTE: The President will be eligible to participate in the group benefit plans under the same terms and conditions as any other permanent employee of the facility.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Secondment of a Nurse to Vice-Presidential Duties – Grace Hospital

Whereas: The Employer and the Union are interested in taking measures to maintain consistent and harmonious union-management relations; and

Whereas: Joint discussion is invaluable to the maintenance of the above; and

Whereas: The complexities of issues often require the Vice-President to be away from their unit for meetings with the Employer for unknown periods of time; and

Whereas: The Employer and the Union appreciate the importance that patient care not be disrupted as a result of meetings between the Employer and the Union;

Therefore: The Employer and the Union agree to the following terms which shall apply in the secondment of a nurse to become Worksite 41 – Vice-President.

1. (a) A nurse employed by the Employer who is elected to the position of part-time Vice-President, shall be considered as continuing in the employ of the Employer during the nurse's term as Vice-President.

(b) The secondment will be for at a minimum 0.25 EFT. Any changes to the EFT will be made if the Worksite members approve and provide at least a four (4) week notice to the Employer. The nurse will be granted a partial leave of absence, if required, to maintain their position with the Employer.

(c) Scheduling of the nurse's remaining position on their unit, if required, will be done by the appropriate Manager in consultation with the nurse and will observe the conditions of 1504 or the MOU re "12" hour shift if applicable.
2. Payroll Record - The Worksite Treasurer (or designate) will act as the liaison person between the Employer and the Union with respect to all payroll issues. The Treasurer will advise the appropriate person in Payroll of the proper coding for vacation time and income protection for the Vice-President. The Employer agrees to maintain a separate and identifiable payroll account for the Vice-President.

3. Payroll Expense Items - The Worksite will reimburse the Employer for the following payroll expense items during the period of secondment to Vice-President:
 - (i) salary, which shall be in accordance with Appendix "A", at the Site Vice-President's current occupational classification and salary in their position from which they are seconded.
 - (ii) vacation taken
 - (iii) income protection (subject to paragraph 6 below)
 - (iv) payroll tax
 - (v) Employer's portion of CPP
 - (vi) Employer' portion of EI
 - (vii) Workers Compensation premiums paid
 - (viii) Employer' portion of Benefit Plan premiums (see Benefit Plans below)

The Worksite 41 shall be given a invoice outlining payroll expense items on a monthly basis. Payroll expense items for such time spent by the Vice-President, as an officer of the worksites participating in committee meetings/activities outlined in the Collective Agreement in which both the worksites and the Employer are represented, shall not be billed to Worksite 41, (e.g. NAC, negotiations, formal grievance meetings with Human Resources and a MNU Labour Relations Officer, union –management). The parties to this agreement shall maintain an agreed "log" of the above time and, on a quarterly basis, a reconciliation shall occur in the next billing to the Worksite 41. Time spent meeting with membership, time spent meeting with administrative nursing personnel exclusive of Human Resource personnel and an MNU Labour Relations Officer on Leave of Absence time, will not be charged to the Employer.

4. Pay Period - The Vice-President shall continue to be paid on a bi-weekly basis.
5. Seniority - Seniority shall continue to accrue during the period of secondment
6. Income Protection-
 - (i) The Vice-President will accumulate income protection credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Worksite Vice-President is absent during the secondment period due to accident or illness and the income protection credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Vice-President out of income protection credits accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.

- (ii) Special Understanding Re: D&R - The Vice-President shall have access to the D & R Plan. The Worksite 41 agrees to reimburse the Employer for a maximum of eighty-five (85) days of income protection to cover the elimination period of the D & R plan. If the Vice-President fails to qualify for a D & R benefit following the elimination period, the nurse shall be entitled to use Employer paid income protection as required for recovery.
- (iii) Following secondment and the nurse's return to work, they will be eligible to utilize the income protection credits accumulated during the period of secondment less any income protection processed during the secondment. The Employer will provide the nurse with a letter (copy to be placed on the nurse's file in Human Resources Department) confirming the income protection credits that can be paid in the event the nurse utilizes all income protection credits accumulated as an active employee. In the event the nurse has an illness/accident and wishes to utilize these income protection credits accumulated during secondment, the nurse will advise the Human Resources Department. The Employer will process the income protection and invoice the Union for the cost.

7. Vacation Pay

In the calendar year that the nurse is seconded to Vice-Presidential duties, the Employer shall assume responsibility for vacation earned but not used to April 30th of that calendar year. The Employer's cost will be based on the nurse's salary rate as at April 30th. In the calendar year that the nurse relinquishes Vice-Presidential duties, the Employer shall assume responsibility for vacation earned during the month of May of that calendar year. The Union shall assume responsibility for the balance of vacation earned during secondment. The Union's cost will be based on the nurse's salary rate in effect at the time vacation is taken.

8. Recognition of Service -

- (i) For purposes of increments - The increment date of the incumbent following expiry of the period of secondment will be delayed for one (1) month for every full month the nurse is on secondment to Vice-Presidential duties, to a maximum delay of twelve (12) months.
- (ii) For purposes of determining vacation accumulation base - the period of secondment to Vice-Presidential duties shall be recognized as service to the Employer.
- (iii) For purposes of Pre-Retirement Leave - the period of secondment to Vice-Presidential duties shall be recognized as service to the Employer. At the time of taking pre-retirement leave, the Union agrees to reimburse the Employer for the cost of paid pre-retirement leave which was accrued by the Union Vice-President during the period of secondment, i.e. 1 year of secondment = four (4) days paid pre-retirement leave.


9. Benefit Plans -


- (i) Pension Plan - The Union Vice-President shall continue to have payroll premium deductions for the pension plan and the Union agrees to reimburse the Employer for the Employer's contribution respecting the EFT of the partial leave. All pensionable service shall accrue during the period of secondment as it would to the total EFT of the nurse's position prior to the secondment.


- (ii) Life Insurance/Extended Health Plan (if applicable)/Dental Plan (if applicable) and D & R Plan - shall be continued with reimbursement by the Worksite 41 for the Employer's contribution to these plans.

NOTE: The Vice-President will be eligible to participate in the group benefit plans under the same terms and conditions as any other permanent employee of the facility.


FOR THE EMPLOYER:




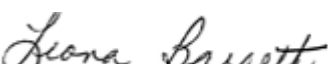




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
SHARED HEALTH EMPLOYERS ORGANIZATION
AND
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Renal Transplant Coordinator/Multi Organ Donor Coordinator – Health Sciences Centre and Grace Hospital

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the Renal Transplant Coordinators/Multi Organ Donor Coordinators positions at Health Sciences Centre and Grace Hospital.

1. The nurses will be employees of Health Sciences Centre and will be members of MNU Worksite 10.
2. The incumbents will perform their duties primarily at Health Sciences Centre but there will be a requirement to work and provide consultation in both facilities.
3. The terms of the Collective Agreement between the Shared Health Employers Organization and the Manitoba Nurses Union shall be applicable to the Renal Transplant Coordinators/Multi Organ Donor Coordinators except as modified hereinafter;
 - (a) Renal Transplant Coordinator/Multi Organ Donor Coordinator shall be paid at the Nurse IV rate as set out in Appendix A.
4. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
5. Any disputes/grievances arising under the collective agreement shall be referred to and are the responsibility of the Health Sciences Centre.
6. The cost of parking at Grace Hospital will be reimbursed the nurse per the Shared Health Employers Organization Collective Agreement, in the event the nurse does not have a “reciprocal pass” supplied. It is understood that the nurse will be reimbursed for any additional costs they are charged for a reciprocal pass.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent.

FOR THE EMPLOYER:

Conny Newman

Ryebart

R.K

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**


Re: Salary Continuance for Local 1a President – Riverview Health Centre

It is mutually agreed between the parties as follows:

The Employer agrees, on request, to pay regular salary and applicable benefits to the President of the Local for two (2) days per bi-weekly period for the purpose of conducting Union business. The Riverview Nurses Local 1a agrees to reimburse the Employer for the full cost of said salary and benefits on demand.

FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
SHARED HEALTH EMPLOYERS ORGANIZATION
AND
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Renal Transplant Coordinator/Multi Organ Donor Coordinator – Health Sciences Centre and Seven Oaks General Hospital

Pursuant to the Inter-Facility Positions Memorandum, the parties have mutually agreed that the following will occur regarding the 1.0 EFT Renal Transplant Coordinators/Multi Organ Donor Coordinators positions at Health Sciences Centre and Seven Oaks General Hospital.

1. The nurses will be employees of Health Sciences Centre and will be members of MNU Worksite 10.
2. The incumbents will perform their duties primarily at Health Sciences Centre but there will be a requirement to work and provide consultation in both facilities.
3. The terms of the Collective Agreement between the Shared Health Employers Organization and the Manitoba Nurses Union shall be applicable to the Renal Transplant Coordinators/Multi Organ Donor Coordinators except as modified hereinafter;
 - (a) Renal Transplant Coordinator/Multi Organ Donor Coordinator shall be paid at the Nurse IV rate as set out in Appendix A.
4. All professional practice issues and performance management issues shall be referred to and are the responsibility of the Health Sciences Centre.
5. Any disputes/grievances arising under the collective agreement shall be referred to and are the responsibility of the Health Sciences Centre.
6. The cost of parking at Seven Oaks Hospital will be reimbursed the nurse per the Shared Health Employers Organization Collective Agreement, in the event the nurse does not have a “reciprocal pass” supplied. It is understood that the nurse will be reimbursed for any additional costs they are charged for a reciprocal pass.

It is agreed between the parties that this Memorandum of Understanding is without prejudice or precedent.

FOR THE EMPLOYER:

Conn Newman

R. K.

R. K.

FOR THE UNION:

[Signature]

[Signature]

Leona Savett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Research Nurses – Victoria Hospital


The parties recognize the uncertain nature of funding for Research Nurse positions.

Accordingly, it is agreed that:

Term Research Nurse position(s) posted in accordance with Article 3006, will not require the reposting of position(s) upon receipt of further grant funding up to a maximum of two (2) years. This agreement will apply to all Research Nurse positions which may be created after the date of ratification of this Letter of Understanding. Any further extensions shall be the subject of discussion and mutual agreement between the Union and the Employer.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Salary Continuance for Worksite 3 President – Victoria Hospital

It is agreed between the above named parties as follows:

The Employer agrees, on request, to pay regular salary and applicable benefits to the President of the Worksite for an average of one (1) day per month for the purpose of conducting Union business. The Manitoba Nurses' Union agrees to reimburse the Employer for the full cost of said salary and benefits on demand.

It is understood that, on occasion, this may result in the President receiving a day's pay over and above full-time pay; and it is agreed that such occasion shall be without effect as regards overtime worked by the President in their regular position.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Article 2101 Actionmarguerite (Saint-Vital) and Foyer Valade Nurses Local 146

All nurses listed below will continue to request and schedule vacation on their assigned shifts in the master rotation in effect on the nursing unit. Notwithstanding Article 2109, all of the nurse's earned vacation must be chosen at the vacation scheduling meeting. All the nurses currently employed as at the ratification date are as shown below. Names will be removed from this list as they retire or terminate their employment with Actionmarguerite (Saint-Vital) [Foyer Valade].

Donna Borgal
Juliana Koleva
Genevieve Ngatcha
Rosemary Otieno
Germaine Ntungbop Mouope
Ma Theresa Soriano
Renee Van Berkel


FOR THE EMPLOYER:




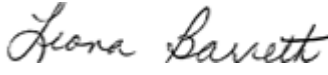




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

**Re: Relief Float Nurses Actionmarquerite (Saint Boniface) and Tache Nurses
Local 49**

The Employer and the Union agree that the following conditions and understandings shall apply to Nursing Services provided by Relief Float Nurses:

1. When Relief Float Positions are created by the Employer, the positions shall be posted as per Article 3001.
2. The rotation shall be a 6 week non-recurring rotation and posted as per Article 1501.
3. The job posting will identify that the rotation schedule may be different on each 6 week posted schedule.
4. Consultation shall occur with the individual nurse prior to the posting of the 6 week schedule.

All terms and conditions of the MNU Collective Agreement between the Employer and the MNU shall be applicable.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

**Re: French Language Issue (Applicable @ Actionmarguerite (Saint Boniface)
Inc./Tache))**

The Employer and the Union agree that the promotion of bilingualism is a legitimate objective and agree to take reasonable steps to achieve this goal while respecting and supporting the rights of nurses. In view of this the parties agree:

- that the ability to speak in both official languages shall be considered a requirement for all vacant nursing positions on units designated as bilingual¹ at the date of settlement of the collective agreement.
- that a unilingual candidate, who is otherwise appropriate in accordance with the selection criteria applicable to displacement rights, promotion, transfer and recall, will be allowed to exercise their rights as above and will be given a reasonable time² to attain conversational ability in either French or English.³ A current employee transferring/bumping into a position on a bilingual unit, who through independent testing is deemed unable to achieve conversational ability will remain in the position and will be awarded the next available equal EFT position on a unilingual unit.

¹ Three (3) units are designated as bilingual as at date of settlement of the collective agreement. It is agreed and understood that by January 1, 1998, four (4) units will be designated bilingual. Three (3) units, young adult and two (2) others to be determined, will be designated unilingual. The language requirement will not be applicable to any positions including the Head Nurse position on these units.

² Subject to classes being available, a three (3) year period will be allowed to obtain the above linguistic competency. There will be proficiency checks by the Instructor of the course at the completion of every level.

³ The document, "Appendix I Head Nurse Linguistic Competence In the Official Language" from the supplementary Simms' award will be utilized.

FOR THE EMPLOYER:

Conn Newman

R. Barrett

R.K.

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**


**Re: Relief Float Nurses Actionmarquerite (St. Joseph) and St. Joseph's Nurses
Local 154**

The Employer and the Union agree that the following conditions and understandings shall apply to Nursing Services provided by Relief Float Nurses:


1. When Relief Float Positions are created by the Employer, the positions shall be posted as per Article 3001.
2. The rotation shall be a 6 week non-recurring rotation and posted as per Article 1501.
3. The job posting will identify that the rotation schedule may be different on each 6 week posted schedule.
4. Consultation shall occur with the individual nurse prior to the posting of the 6 week schedule.

All terms and conditions of the MNU Collective Agreement between the Employer and the MNU shall be applicable.


FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

**Re: Relief Float Nurses Actionmarquerite (Saint-Vital) and Foyer Valade Nurses
Local 146**

The Employer and the Union agree that the following conditions and understandings shall apply to Nursing Services provided by Relief Float Nurses:

1. When Relief Float Positions are created by the Employer, the positions shall be posted as per Article 3001.
2. The rotation shall be a 6 week non-recurring rotation and posted as per Article 1501.
3. The job posting will identify that the rotation schedule may be different on each 6 week posted schedule.
4. Consultation shall occur with the individual nurse prior to the posting of the 6 week schedule.

All terms and conditions of the MNU Collective Agreement between the Employer and the MNU shall be applicable.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

**Re: Linguistic Designation (Applicable @ Actionmarguerite (Saint-Vital)
Inc./Foyer Valade)**

Government of Manitoba's Licensing of Personal Care Home and French Language services policy designated Foyer Valade as a Francophone Personal Care Home.

The Employer and the Union agree that in order to fulfill this designation, that the French language is a requirement for all positions. The parties also agree that the primary language of communication in the workplace is French.

The ability to speak French and English shall be considered a requirement for all nursing positions.

For operational purposes, the Employer may hire a unilingual candidate with the requirement to attain conversational ability either French or English within a reasonable time period.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Article 15 – Shift Schedule
(Applicable for Pan Am Clinic)


This memorandum is applicable to the following nurses [the “nurse(s)”]


Merlyn Ayta


The parties agree that Article 1503 (d) and (f) shall apply as follows to the nurses on staff on October 1, 2003:

- (i) 1504 (d) and (f) shall not apply to the nurse(s) for the period October 1, 2003 to September 30, 2008 unless the nurse(s) applies for and secures another position with the Employer.
- (ii) 1504 (d) and (f) shall apply to the nurse(s) from the date the nurse(s) secures another position with the Employer.


FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Community-Based Direct Service Nurses
(Applicable for WRHA - Public Health Program)

Applicable to Part-time Nurses:

The Employer and the Union mutually agree that all provisions of the Collective Agreement shall be applicable to a part-time nurse occupying a position as a Community-Based Direct Service Nurse except for the provisions regarding hours of work as outlined below.

It is understood that a part-time Community-Based Direct Service Nurse will be permitted to bank the hours from any shifts/hours they work above their EFT and that this banked time shall be used to provide salary and benefits for periods when there is no work available in the school – i.e. Christmas Break, Spring Break, and certain shifts/hours during July and August. It is understood that a shift shall be seven and one-quarter (7.25) [seven and three-quarter (7.75) effective April 1, 2022] consecutive hours of work exclusive of a meal period of forty-five (45) minutes [one-half (.50) of an hour effective April 1, 2022] and inclusive of two (2) fifteen (15) minute rest periods. Any hours worked in excess of a shift in any one day shall be paid in accordance with the provisions of Article 16 and the nurse may request to bank these hours. It is understood that the provisions of Article 1604 re: maximum banked overtime hours and payout of overtime banks at fiscal year end shall not be applicable.

In any situation where a Community-Based Direct Service Nurse has insufficient banked hours to cover any period of time where there is no work available – i.e. Christmas Break, Spring Break, and certain shifts/hours during July and August, it is understood that the nurse shall be granted vacation and/or an unpaid leave of absence in order to maintain their EFT.


Applicable to Full-time Nurses:


The Employer and the Union mutually agree that all provisions of the Collective Agreement shall be applicable to a full-time nurse occupying a position as a Community-Based Direct Service Nurse except for the provisions regarding hours of work as outlined below.


It is understood that a full-time Community-Based Direct Service Nurse will be permitted to bank any overtime hours from any shifts/hours they work-above their EFT and that this banked time shall be used to provide salary and benefits for periods when there is no work available in the school – i.e. Christmas Break, Spring Break, and certain shifts/hours during July and August. It is understood that a shift shall be seven and one-quarter (7.25) [seven and three-quarter (7.75) effective April 1, 2022] consecutive hours of work exclusive of a meal period of forty-five (45) minutes [one-half (.50) of an hour effective April 1, 2022] and inclusive of two (2) fifteen (15) minute rest periods. Any hours worked in excess of a shift in any one day shall be paid in accordance with the provisions of Article 16 and the nurse may request to bank these hours. It is understood that the provisions of Article 1604 re: maximum banked overtime hours and payout of overtime banks at fiscal year end shall not be applicable.

In any situation where a Community-Based Direct Service Nurse has insufficient banked hours to cover any period of time where there is no work available – i.e. Christmas Break, Spring Break, and certain shifts/hours during July and August, it is understood that the nurse shall be granted vacation and/or an unpaid leave of absence in order to maintain their EFT.


FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Secondment of a Home Care Nurse Elected To Serve As President of Home Care Worksite 97

The Employer and the Union mutually agree as follows:

1. A nurse employed by the Employer who is elected to the position of President of the Union, shall be considered as continuing in the employ of the Employer during the nurse's term of office as President of the Union and shall be considered to be seconded to the Union on a part-time basis during the term of office.
2. It is agreed that the part-time secondment will be for no less than 0.4 EFT [Effective May 1, 2022, 0.5 EFT]. This nurse will be granted a partial leave of absence, if required, to maintain their position within Home Care. It is understood that the partial position vacated by the nurse seconded to the Executive position shall be posted and maintained and/or replaced as an indefinite term.
3. Scheduling of the nurse's remaining position in their remaining rotation and EFT, if required, will be done by the appropriate Team Manager in consultation with the nurse and will observe the conditions of 1504 unless otherwise mutually agreed.
4. For the purposes of administering the period of secondment, the Treasurer of the Union shall function as the official contact person in any dealings with the Employer. In addition, the Treasurer of the Union shall be accountable for:
 - (i) notifying the Employer, in writing, of the official commencement and termination date of the President's term of office;
 - (ii) determining the bi-weekly payroll record of the President and notifying the Employer of same.

The Union shall save the Employer harmless from any claim from the President arising from alleged error(s) in the payroll record.

5. **Reimbursement of Employer Costs**

The Union shall assume the responsibility for reimbursing the Employer for total recovery of payroll and related costs associated with the President's term of office, as follows:

- (i) gross salary, including paid vacation, income protection and any other paid leave of absence authorized by the Treasurer;
- (ii) Employer portion of C.P.P.;
- (iii) Employer portion of E.I.;
- (iv) Workers Compensation premiums;
- (v) Payroll tax;
- (vi) Employer portion of Benefit Plan premiums (pension plan, group life insurance plan, dental plan);
- (vii) Pre-retirement leave.

It is understood that the Employer shall reimburse the Union for all travel expenses, i.e. parking, mileage from the facility to the meeting site incurred by the President when attending Regional NAC meetings, other regional joint committee meetings or any other regional meetings.

The Employer shall provide the Union Treasurer with a monthly statement of the above-referenced payroll expenses incurred during the nurse's period of secondment to President of the Union.

6. Income Protection

(i) The Union President will accumulate sick pay credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Union President is absent during the secondment period due to accident or illness and the sick pay credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the Union President out of sick leave credits accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.

(ii) Upon the nurse's return to work following the period of secondment the amount of income protection accumulated during the period of secondment will be reconciled against the amount of income protection utilized during this same period. In the event the difference is positive i.e. the amount accumulated is greater than the amount utilized, the nurse will be eligible to utilize the difference (unutilized income protection credits) at a future date. It is understood that utilization of these income protection credits may only occur once the nurse exhausts all income protection credits accumulated during their normal course of employment with the Employer.

(iii) It is further understood that the income protection credits earned during the period of secondment shall not be stored in the nurse's income protection bank within the computerized payroll system. Following the period of secondment a record of these credits will be provided to the nurse along with a copy in the personnel file of the nurse. In the event and at the point that the nurse wishes to utilize these income protection credits, they will advise the Human Resources Department. The Employer will pay said income protection and bill the Union for the cost.

7. Disability & Rehabilitation Plan (D & R)

The President will have coverage under the HEB Disability & Rehabilitation (D & R) Plan. During the D & R elimination period unutilized income protection credits earned during the period of secondment will be paid for those days that the President would have been at the Worksite 97. The remaining EFT if applicable will be covered as per 3902.

8. Accumulation of Paid Vacation

The President will accumulate vacation credits on the same earning rate as they would have accumulated vacation credits had they not been seconded.

For the purposes of reconciliation, the Employer is financially responsible for the vacation earned by the nurse while they are engaged in their normal course of employment with the Employer; and the Union is financially responsible for the vacation earned by the nurse during the period of secondment.

9. Seniority/Service

(i) Seniority shall continue to accrue during the period of secondment.

(ii) Following the expiry of the period of secondment, the President's normal increment date will be delayed on a pro rata basis for a period of time equivalent to the period of secondment. The time worked between the date of the last increment to the date that the nurse assumed the office of President shall count toward the granting of the next increment.

10. This Letter of Understanding shall remain in force until revised by mutual agreement between the parties or until terminated by either party.

FOR THE EMPLOYER:

Conn Newman

Ryan

R.K

FOR THE UNION:

[Signature]

[Signature]

Arona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Distribution of Functions with Respect to Protected Time
(Applicable to WRHA - Nurse Practitioners)

Whereas the WRHA has adopted the Strong Model of practice for Nurse Practitioners which provides for domains of practice equivalent to approximately 80% dedicated to direct clinical practice and up to approximately 20% dedicated to non-clinical activities that support such clinical practice;

And Whereas the parties agree that, for novice Nurse Practitioners, a greater percentage of time and focus may be required on clinical activities of the Strong Model of practice during the novice period;

And Whereas the parties agree that non-clinical activities may include, but are not limited to educational/professional development, research, publication/professional leadership and system support activities;

And Whereas the parties understand that the performance of these non-clinical activities will require some flexibility on the part of both the Employer and the Nurse Practitioner to enable their achievement while balancing the needs of operational requirements and the professional development of the Nurse Practitioner;

Now therefore, the parties agree as follows:

Establishment of Work Schedule

The Nurse Practitioner and their manager shall work cooperatively on an on-going basis to determine a work schedule that ensures that the Strong Model of practice can be achieved and that also meets operational requirements relating to the provision of clinical care. Such schedules may require modification from time to time and changes shall occur in consultation between the Nurse Practitioner and their manager. Should agreement not be achieved between the parties on an appropriate work schedule, the determination of the direct Supervisor, after consulting with and giving due consideration to the expressed interests of the Nurse Practitioner, shall govern. This determination shall not result in a change in the shift rather it shall be limited to the type of functions performed during that shift.

From time to time, clinical requirements and/or competing priorities may require temporary modification to the schedule. Reasonable efforts shall be made to ensure that any such adjustments to schedules are temporary in nature and that any resulting lost non-clinical time is recaptured over a reasonable period.

Establishment of Priorities

Priorities for non-clinical functions shall be determined jointly through consultation between the Nurse Practitioner and their manager and may be modified over time to reflect changing priorities. Priorities are to be relevant to the specific role of the Nurse Practitioner and consistent with the missions, aims and objectives of the WRHA.

Within the priorities established, the WRHA supports the Nurse Practitioners' right, responsibility and opportunity to carry out research and other scholarly activities. The Nurse Practitioner holds professional discretion in how these priorities will be achieved. No articles, papers, written submissions, etc. are to be submitted for publication without the prior approval of the WRHA Advance Practice Nursing Steering Committee. All such activities are to be completed by the Nurse Practitioner as an employee of the WRHA.


Professional Leadership


The WRHA recognizes that professional leadership under the Strong Model may include, but is not limited to such functions as consultation, community service and professional activities. Professional Leadership functions shall be consistent with the priorities established as per the process contained within this Memorandum and performed by the Nurse Practitioner as an employee of the WRHA.


Future Models of Practice

The parties agree that the inclusion of this Memorandum does not, in any way, restrict the Employer's right to determine appropriate practice models and, specifically, that the Employer is not prevented from adopting a different model other than the Strong Model of practice in the future following consultation with the Nurse Practitioners through the Nursing Advisory Committee.


FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Isolation/Remoteness Retention Allowance
(Applicable for Churchill Health Centre)

The parties agree that an Isolation/Remoteness Retention Allowance shall be payable in a lump sum annually to all nurses (including full-time, part-time and casual) within the Churchill Health Centre as follows:

Effective October 1, 2016	\$13,000 for each full-time nurse
Effective October 1, 2021	\$14,300 for each full-time nurse

The above amounts shall be prorated on the basis of all regular hours worked in the previous twelve (12) month period (October 1st of the previous year to September 30th of the current year) in accordance with past practice in recognition of the unique characteristics of this Employer.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Northern Residents Deductions: Travel In Designated Areas (As Defined By Revenue Canada)

The Employer is aware of the Northern Residents Deductions: Travel in Designated Areas allowance provided by Revenue Canada and agrees to the following:

1. All parties acknowledge the Northern Residents Deductions: Travel in Designated Areas allowance is administered by Revenue Canada and is subject to any changes implemented by Revenue Canada or any ruling which Revenue Canada may imply in respect to the benefits eligible.
2. Should Revenue Canada reduce the Northern Residents Deductions: Travel in Designated Areas allowance or eliminate the Northern Residents Deductions: Travel in Designated Areas allowance, the Employer shall not be responsible for any costs to make up for the lost benefits.
3. The Employer will not incur any additional costs in implementing the Northern Residents Deductions: Travel in Designated Areas allowance.
4. Any changes to the Northern Residents Deductions: Travel in Designated Areas allowance shall be subject to review by Legal Counsel to ensure Revenue Canada tax regulations are adhered to.

FOR THE EMPLOYER:



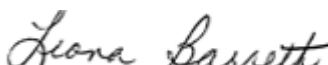




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: MOU re: Utilization of Employee Portions of EI Rebate, Training and Education Fund
(Applicable for Klinik Community Health, Mount Carmel Clinic, Nor'West Co-op Community Health Centre, Women's Health Clinic)

It is agreed between the parties that the MOU named above will cease to be in effect as of October 14, 2021. Where a site is currently receiving the EI Rebate, the rebate will be directed to the nurses at that site effective October 14, 2021.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**


Re: Staff Volunteering – Klinik


Whereas the parties have agreed to the Letter of Understanding between the Manitoba Nurses Union and Klinik Inc. re staff volunteering;


Now therefore the parties agree;

- 1 - That the LOU re Klinik staff volunteering is and will be limited to the Klinik Employer only, and shall be governed by the terms of that LOU.
- 2 - The Employer (all Employers party to this MOU) shall not seek to implement or expand staff volunteering to any other site or Employer without the expressed written consent of the Union.
- 3 - This MOU shall continue in force and effect until such time as it is discontinued by mutual agreement of the parties.


FOR THE EMPLOYER:




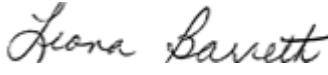




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Staff Fund – Women’s Health Clinic Site

The parties agree that they shall meet to discuss the manner and mechanism of MNU’s continued participation in the staff fund as per the former Appendix “R” from the former CUPE Local 2348 and Women’s Health Clinic collective agreement.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Special Understandings re: Clinical Nurse Specialists (CNS)
(Applicable for St. Boniface Hospital)

The terms of the Collective Agreement shall be applicable to the Clinical Nurse Specialist except as modified herein:

1. Article 2403 - add to paragraph II:

For a leave of absence of one (1) year or less, the CNS shall be assured of being placed in the same position and department upon their return. In the event that a change is required in the CNS's role upon return from leave of absence, Item #3 of this memorandum will apply.
2. The Employer recognizes and supports the independent responsibility of the Clinical Nurse Specialist to plan, organize, control and determine work flow to reach mutually agreed upon goals.
3. There shall be mutual agreement between the Employer and the CNS concerned prior to any change being implemented in the CNS's role (within the department) for which the CNS has been hired.
4. Vacation: To add under 2103

For CNS:

In the first (1st) to tenth (10th) year inclusive	Twenty (20) days/four (4) weeks (155 hours) per year
In the eleventh (11th) to twentieth (20th) year inclusive	Twenty-five (25) days/five (5) weeks (193.75 hours) per year
In the twenty-first (21st) year	Thirty (30) days/six (6) weeks (232.50 hours) per year

To add to (b) - CNS:

This provision shall apply to each Nurse IV, Nurse Educators and CNS (where applicable) employed by the Employer on April 1, 1998. This article will not apply to nurses who are newly employed as, or reclassified to, Nurse IV (where applicable) or CNS (where applicable) after April 1, 1998.

5. Academic Freedom:

The St. Boniface General Hospital supports the Clinical Nurse Specialist's right and opportunity to carry out a reasonable amount of meaningful research, scholarly work and other creative activities. Research, scholarly work and other creative activities conducted by the Clinical Nurse Specialist in the course of their duties shall have as primary objectives the expansion of knowledge in Nursing and advancement of clinical practice, as well as the improvement of the Clinical Nurse Specialist's scholarly competence. The Clinical Nurse Specialist, therefore, has academic freedom in carrying out research and other scholarly activities and in publishing the results thereof. Academic freedom carries with it the responsibility to use that freedom in a manner consistent with the Missions, Aims and Objectives of the St. Boniface General Hospital.

6. Professional Activity:

The Employer recognizes the responsibility and entitlement of the Clinical Nurse Specialist to engage in consultation, community service and professional activities without loss of salary or benefits.

7. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Clinical Nurse Specialist, as mutually agreed, may vary hours worked in order to effectively carry out the duties and responsibilities of the job.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Special Understandings Re: Clinical Nurse Specialists (CNS)
(Applicable for Grace Hospital)

The terms of the Collective Agreement shall be applicable to the Clinical Nurse Specialist except as modified herein:

1. The Employer recognizes and supports the independent responsibility of the Clinical Nurse Specialist to plan, organize, control and determine work flow to reach mutually agreed upon goals.
2. There shall be mutual agreement between the Employer and the CNS concerned prior to any change being implemented in the 'NS's role (within the department) for which the CNS has been hired.
3. Academic Freedom:
The Grace Hospital supports the Clinical Nurse Specialist's right and opportunity to carry out a reasonable amount of meaningful research, scholarly work and other creative activities. Research, scholarly work and other creative activities conducted by the Clinical Nurse Specialist in the course of their duties shall have as primary objectives the expansion of knowledge in Nursing and advancement of clinical practice, as well as the improvement of the Clinical Nurse Specialist's scholarly competence.
4. The Clinical Nurse Specialist, therefore, has academic freedom in carrying out research and other scholarly activities and in publishing the results thereof. Academic freedom carries with it the responsibility to use that freedom in a manner consistent with the Missions, Aims and Objectives of the Grace Hospital.
5. Professional Activity:
The Employer recognizes the responsibility and entitlement of the Clinical Nurse Specialist to engage in consultation, community service and professional activities without loss of salary or benefits.
6. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Clinical Nurse Specialist, as mutually agreed, may vary hours worked in order to effectively carry out the duties and responsibilities of the job.

FOR THE EMPLOYER:

Conn Newman

R. Barrett

R.K

FOR THE UNION:

Jac

Barrett

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

**Re: Special Understandings – Clinical Nurse Specialists (CNS)
(Applicable for Misericordia Health Centre)**

The terms of the Collective Agreement shall be applicable to the Clinical Nurse Specialists except as modified hereinafter. Inclusion of Clinical Nurse Specialists within the scope of the bargaining unit shall have no retroactive effect except as expressly provided for hereinafter.

1. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Clinical Nurse Specialist may vary hours worked in order to effectively carry out the accountabilities of the position.
2. Article 2103(a) – A nurse occupying a CNS position shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

Length of Employment
In the first ten (10) years

Rate at Which Vacation Earned
Twenty (20) days/four (4) weeks
(155 hours) per year

In the eleventh (11th) to twentieth (20th)
year inclusive

Twenty-five (25) days/five (5) weeks
(193.75 hours) per year

In the twenty-first (21st) and
subsequent years

Thirty (30) days/six (6) weeks (232.50
hours) per year

3. Article 2103(b) – To include Clinical Nurse Specialists.
4. Seniority – Seniority within the bargaining unit shall be deemed to commence from the date that each incumbent last commenced continuous employment with the Misericordia Health Centre.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

**Re: Special Understandings – Clinical Nurse Specialists (CNS)
(Applicable for WRHA - Clinical Nurse Specialists)**

The terms of the Collective Agreement shall be applicable to the Clinical Nurse Specialists except as modified hereinafter.

1. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Clinical Nurse Specialist may vary hours worked in order to effectively carry out the accountabilities of the position.
2. Article 2103(a) – A nurse occupying a CNS position shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

Length of Employment
In the first ten (10) years

Rate at Which Vacation Earned
Twenty (20) days/four (4) weeks
(155 hours) per year

In the eleventh (11th) to twentieth (20th)
year inclusive

Twenty-five (25) days/five (5) weeks
(193.75 hours) per year

In the twenty-first (21st) and
subsequent years

Thirty (30) days/six (6) weeks (232.50
hours) per year

3. Article 2103(b) – To include Clinical Nurse Specialists.
4. Seniority – Seniority within the bargaining unit shall be deemed to commence from the date that each incumbent last commenced continuous employment with the Employer.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Special Understandings - Clinical Nurse Specialists (CNS)
(Applicable for Victoria Hospital)

The terms of the Collective Agreement shall be applicable to the Clinical Nurse Specialists except as modified hereinafter. Inclusion of Clinical Nurse Specialists within the scope of the bargaining unit shall have no retroactive effect except as expressly provided for hereinafter.

1. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Clinical Nurse Specialist may vary hours worked in order to effectively carry out the accountabilities of the position.
2. Article 2103(a) - A nurse occupying a CNS position shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

<u>Length of Employment</u>	<u>Rate at Which Vacation Earned</u>
In the first ten (10) years	Twenty (20) days/four (4) weeks (155hours) per year
In the eleventh (11th) to twentieth (20th) year inclusive	Twenty-five (25) days/five (5) weeks (193.75 hours) per year
In the twenty-first (21st) and subsequent years	Thirty (30) days/six (6) weeks (232.50 hours) per year

3. Article 2103(b) - To include Clinical Nurse Specialists.
4. Seniority

Seniority within the bargaining unit shall be deemed to commence from the date that each incumbent last commenced continuous employment with the Victoria General Hospital.

FOR THE EMPLOYER:

Conn Newman

Ry Barrett

R.K

FOR THE UNION:

Jac

Barrett

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Application of Offering of Overtime and Additional Available Shifts

It is the desire of both parties to work together towards a process that enables the ability to offer overtime and additional available shifts across the sites comprising the Employer, however it is acknowledged and understood between the parties that the scheduling systems and departments that would provide for this to be operationalized are not yet in place.

It is agreed that during the life of this Agreement, the parties will meet to review the steps required to enable a process that would allow for offering of Overtime and Additional Available Shifts between the sites comprising the WRHA Direct Operations. The Employer commits to making best efforts to implement the above process within two (2) years.

The current process of offering Overtime and Additional Available Shifts at a site level will be maintained until the parties have confirmed a new process and an agreed upon date of implementation.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Vacation Accrual per MNU Article 2103
(Applicable for Klinik Community Health)

It is agreed between the parties that the applicability of the language in the former CUPE Klinik Inc. Collective Agreement - Article 25.02 (embedded below) will apply only to the list of nurses included in this Memorandum, and shall not be applied to nurses who may transfer into the Employer after October 14,2021.

Should any of the nurses listed below transfer to another Employer, the entitlements under this provision going forward from the date of hire into the new Employer will cease. Vacation entitlement rates with the former Employer will be maintained and if able, transferred to the new Employer, provided they are party to the “mobility/portability” provisions. The nurse will maintain current entitlement rate however will be subject to the accrual rate at the receiving Employer.

25.02 Employees shall earn vacation on the following basis:

- First year of employment – three (3) weeks per year.
- Second, third, fourth and fifth years of employment – four (4) weeks per year.
- Sixth and seventh years of employment – five (5) weeks per year.
- Eighth and subsequent years of employment – six (6) weeks per year.

Bloxom, Caitlin P.
Brett, Molly E.B.
Carbonell, Sherlyn Gail V
Ewasiuk, Jennifer
Froese, Kimberley
Froese, Kristina L.
Gallagher, Clarke E.
Janzen, Kristina M
McIntyre-Brandt, Erin K
Mossman Sims, Rhea J
Nacci, Kara M
Partyka, Chantelle
Ringland, Krista K
Maria Toth
Jen Gourlay-Hennig
Jennifer MacMillian Gomez
Mariam Entz

FOR THE EMPLOYER:

Conny Newman

R. Barrett

R.K.

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Vacation Accrual per MNU Article 2103
(Applicable for Nine Circles Community Health Centre)

It is agreed between the parties that the applicability of the language in the former CUPE Nine Circles Community Health Centre Collective Agreement - Article 25.02 (embedded below) will apply only to the list of nurses included in this Memorandum, and shall not be applied to nurses who may transfer into the Employer after. October 14,2021

Should any of the nurses listed below transfer to another Employer, the entitlements under this provision going forward from the date of hire into the new Employer will cease. Vacation entitlement rates with the former Employer will be maintained and if able, transferred to the new Employer, provided they are party to the "mobility/portability" provisions. The nurse will maintain current entitlement rate however will be subject to the accrual rate at the receiving Employer.

25.02 Employees shall earn vacation on the following basis:

- First year of employment – three (3) weeks per year.
- Second, third, fourth and fifth years of employment – four (4) weeks per year.
- Sixth and seventh years of employment – five (5) weeks per year.
- Eighth and subsequent years of employment – six (6) weeks per year.

Aleasha Hacault
Heather Day
Nadine Tshite
Bridgitte Crawford
Berni Lopko
Consolation Umugwaneza
Leslie Braun
Sarah Hansen
Jocelyn Bevacqua

FOR THE EMPLOYER:

Conny Newman

Ryebart

R.K

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: WRHA - Public Health Program – Article 3408 (Increments)

For part-time nurses whose annual hour base prior to April 1, 2022 is different than 2015, the parties agree to split the difference between the 1343 hours as outlined in Article 3408 of this Agreement and the 1233 hours outlined in the nurse's former Collective Agreement, as it relates to receiving increments, until such time as the nurse has received their next increment on the salary scale. Thereafter, Article 3408 of the MNU Collective Agreement shall apply.

For example, a part-time nurse working 1885 annual hours prior to April 1, 2022 shall receive increments (calculated from the date of their last increment, or their starting date as the case may be) on the basis of one (1) increment for each *1233 hours worked* or one (1) years' service, whichever occurs later. In this case, the increment requirement would be adjusted to reflect that the nurse shall receive their next increment on the basis of 1288 hours worked or one (1) years' service, whichever occurs later.

The above example shall be calculated as follows:

1343 hours - 1233 hours = 110 hours

110 hours = 55 hours

2

1233 hours + 55 hours = 1288 hours

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Local 220

WHEREAS the Health Sector Bargaining Unit Review Act (HSBURA) required a realignment of bargaining unit representation;

AND WHEREAS employees formerly represented by the Manitoba Government and General Employees' Union (MGEU) Local 220 were, subsequent to the representation votes under the HSBURA and the issuance of interim labour certificates, then represented by the Manitoba Nurses Union (MNU);

AND WHEREAS the MNU as bargaining agent conducted negotiations on behalf of the employees formerly represented under MGEU Local 220, at "central table" negotiations;

AND WHEREAS the MGEU Local 220 Collective Agreement expired March 31st 2018, whereas all other Collective Agreements being negotiated at "central table" by MNU expired March 31st 2017;

AND WHEREAS Nurses classified as Community Health Services Specialists (case coordinators, hospital based case coordinators and pediatric case coordinators) under the MGEU Local 220 Collective Agreement received a general wage adjustment for the pay period April 1, 2017-March 31, 2018, but Nurses working in other classifications under the MGEU Local 220 Collective Agreement were to receive a wage adjustment effective April 2017 in accordance with the rates and effective dates established at MNU central table;

AND WHEREAS the Nurse classifications and wage rates under the MGEU Local 220 Collective Agreement are not uniformly aligned with the Nurse classifications under the Union's collective agreement and the interim labour certificate;

NOW THEREFORE the parties agree as follows as it applies to and Nurse who worked under the MGEU Local 220 Collective Agreement:

1. Should the parties be unable to reach agreement on which classification in the MNU central table agreement should apply to nurses who worked under the MGEU Local 220 Collective Agreement within 15 days of the signing of this Agreement or such longer period as the parties agree, the matter shall be referred to an arbitrator to make a binding determination on the nurse's appropriate classification.

2. Any increase in wage rate as a result of paragraph 1 shall be paid retroactively to the date that the Interim Bargaining Unit certificate was issued December 13, 2019. In the event a position is reclassified as a result of determination subject to paragraph 1, that results in a lower classification, with a lesser rate of pay, such will not result in any retroactive clawback, overpayment deduction, or other repayment, but shall only be applied proactively from the date of determination.
3. The general wage increase achieved at central table bargaining is applied retroactively (where indicated) to April 1, 2017, the retroactive increase shall apply to a nurse who worked under the MGEU Local 220 Agreement notwithstanding the March 31, 2018 expiry date of the former MGEU Local 220 Agreement
4. Notwithstanding paragraph 3, a nurse who received a general wage increase between April 1, 2017 and March 31, 2018 shall not receive an additional general wage increase for the same time period under the MNU central table agreement.
5. In no case will a nurse who worked under the MGEU Local 220 Agreement be subject to a "clawback", reduction or deduction in cases where the provisions of the MGEU Local 220 Agreement provided for superior benefit or compensation for the period from April 1st 2017 to March 31st 2018.
6. In all other instances the language of the current MNU collective agreement shall apply as of October 14, 2021, unless specifically indicated otherwise.

FOR THE EMPLOYER:

Conn Newman
R. Barrett
R. K

FOR THE UNION:

[Signature]
[Signature]
Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Article 2201 – Recognition of International Women’s Day (Klinic and Women’s Health Clinic)

WHEREAS March 8th is an occasion marked by women’s groups around the world representing at least nine decades of struggle for equality, justice, peace, and development;

AND WHEREAS this date is commemorated by the United Nations and is designated in many countries as a national holiday “...to reflect on progress made, to call for change and to celebrate acts of courage and determination by ordinary women, who have played an extraordinary role in the history of their countries and communities.” (UN website);

AND WHEREAS Klinic and Women’s Health Clinic are community-based organizations and serve as a voice for equality, social justice, and social change;

AND WHEREAS women continue to struggle for equality, justice, peace, and development worldwide and in the community Klinic and Women’s Health Clinic serve;

NOW THEREFORE the parties agree as follows:

1. International Women’s Day (March 8th) shall be recognized as a holiday, in accordance with Article 22 – Recognized Holidays, for nurses employed at the Klinic and Women’s Health Clinic sites.
2. The following shall apply to part-time nurses employed at the above sites and replace the corresponding provision in Article 34:

Part-time nurses will be paid five point three eight percent (5.38%) effective September 30, 2021 of their basic pay in lieu of time off on Recognized Holidays. Such holiday pay shall be calculated on all paid hours (excluding overtime hours as defined in Article 16) and shall be included in each regular pay cheque.

3. Should a nurse transfer to a site which does not recognize International Women’s Day as a holiday, the entitlement under this provision will cease upon date of termination.

FOR THE EMPLOYER:

Conn Newman

R. Barrett

R.K

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

**Re: Uniforms for Licensed Practical Nurses at Deer Lodge Centre per PSAC
Article 32:01**

It is agreed between the parties that the applicability of the language in the former PSAC Collective Agreement - Article 32:01 (embedded below) will apply only to Licensed Practical Nurses employed at Deer Lodge Centre.

32:01 The Centre shall provide, launder and maintain uniforms for all employees required to wear uniforms.

FOR THE EMPLOYER:



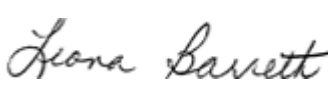




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Article 2411 Bereavement Leave

(Applicable for Klinic Community Health, Mount Carmel Clinic, Nine Circles Community Health Centre, Nor'West Co-op Community Health Centre, Women's Health Clinic, WRHA Community Health Nurses)

It is agreed between the parties that that for the sites listed above, the provisions of 2411 (a) in the collective agreement shall be modified and applied as below. These provisions will only apply to those nurses employed at the sites listed as of October 14,2021 (listed below) and shall not be applied to nurses who may transfer into these sites after October 14,2021. Should any of the nurses listed in this memorandum transfer to another Employer, the entitlements under this provision will cease upon date of termination.

Bereavement Leave:

Bereavement leave of up to five (5) working days without loss of pay shall be granted in the event of death of a spouse, common-law spouse, fiancé, same-sex partner, child, stepchild, parent, step-parent, sibling, mother-in-law, father-in-law, daughter-in-law, son-in-law, brother-in-law, sister-in-law, grandparent, grandparent-in-law, grandchild, former legal guardian, and any other relative who had recently been residing in the same household. Such days may be taken only in the period which extends from the date of death up to and including the day following interment, funeral or initial memorial service or five (5) calendar days following the death, whichever is the greater.

Klinic Community Health

Bloxom, Caitlin P.
Brett, Molly E.B.
Carbonell, Sherlyn Gail V
Ewasiuk, Jennifer
Froese, Kimberley
Froese, Kristina L.
Gallagher, Clarke E.
Janzen, Kristina M

McIntyre-Brandt, Erin K
Mossman Sims, Rhea J
Nacci, Kara M
Partyka, Chantelle
Ringland, Krista K
Maria Cortez-Toro
Jen Gourlay-Hennig

Mount Carmel Clinic

Austin, Debra
Braun, Leanora
Churchill, Allison
Cinch, Martha
Daniels, Ashley

Ducharme, Shaylee
Farrell, Andrea
Flores-Rose, Adoracion
Forsyth, Ashley
Gerlach, Jasmine

Gerbretnsae, Jonathan
 Kien, Mackenzie
 Kiely, Cassandra
 Kuzyk-Bernier, Dimitriana
 Le, Thoa Thi Kim
 Linaker, Alix
 Martin, Katrina

Matthews, Annamarie
 Mcleod, Chelsea
 North, Jenna
 Parkinson, Dania
 Schultz, Brandy
 Surmai, Margarita
 Zibell, Cassandra

Nine Circles Community Health Centre

Aleasha Hacault
 Heather Day
 Nadine Tshite
 Bridgitte Crawford
 Berni Lopko

Consolation Umugwaneza
 Leslie Braun
 Sarah Hansen
 Jocelyn Bevacqua

Nor'West Co-op Community Health Centre

April Bernardin
 Beth Hudson-Keddy
 Cindy Peters
 Heidi Lane Manansala
 Jennifer Gourlay
 Kazel Eborá
 Lyndsay Cooper
 Sandy de Castro
 Evelyn Ward
 Jose Solitana

Mona Calvo
 Val Feilberg
 Janelle Quinto
 Jenny Li
 Marina Pereira
 Marlena Dupuis
 Mary Commandant
 Melissa Forester
 Samantha Classen

Women's Health Clinic

Bencharski, Breanne
 Bergen, Erin
 Carroll, Jennifer
 Hemminger, Amber
 Klassen, Ladine

McLeod, Darlyn
 Nacci, Kara
 Neirinck, Kristen
 Purchase, Deborah
 Tabing, April

WRHA Community Health Nurses

Corrigan, Karen
 Cull, Susan
 Klymkiw, Peggy
 Bolton, Noreen
 Degryse, Shann
 Braun, Marian
 Spikula, Darcy
 Morden, Tara
 Dickin, Donna
 Hansen, Christine
 Morden, Carl

Puro, Pat
 Gambalan, Charito
 Taillon, Connie
 Lake, Karen
 Delbaere, Liza
 Riach, Melanie
 Jaworski, Twyla
 Gillis, Tracey
 Crossman, Laurie
 Barkman, Joanne
 McCormack, Jacqueline

Fiebelkorn, Alison
Hildebrand, Alvina
Elyk, Cheryl
Angus, Marianne
Garbutt, Patricia
Slykerman, Starra
Koga, Susan
Di Biase, Lena
Bouchard, Jacqueline
Wigston, Cheryl
Hillary, Michelle
Lam, Audrey
Neufeld, Trina
Green, Michelle
Buss, Sheri
Krauthaker, Christine
Johnson, Colleen
Stephens, Michelle
Cawson, Richelle
Penner, Lori
Orbeta, Cynthia
Vasallo, Charlene
McMillan, Alesha
Aitkenhead, Jennifer
Juacalla, Irwin
Gee, Amy Lynn
Ward, Jennifer
Ben, Natalia
Legaspi, Maria
Chu, Ivana
Sidhu, Tarnjit
Jaramillo Correa, Ana
Outhwaite, Tamara
Harbottle, Kristine
Hopkins, Katy
Smith, Tamra
Matthes, Gabriela
Di Bernardo, Lora
Lorde, Sarah
Cruse, Robyn
Delmonte, Kristin
Young, Kathryn
Mattson, Erin
Wahl, Tanya
O'Gorman, Oleksandra
Macalua-Ocay, Christy Ann

McDonald, Tim
Mtemeri, Dabbie
Froimoviche, Timor
Robbins, Carlie
Dib, Joshua
Weisz, Christina
Bruan, Kathleen Dawn
Chumola, Karlie
Rona Yuzon, Charmaine
Arseny, Michelle
Klassen, Rosaline
Pagaduan, Stephanie
McMullen, Jill
Graham Okindo, Brenda
Kotz, Jamie Lee
Michie, Krista
Shpak, Pamela
Christmas, Katherine
Durand, Jocelyne
Hickey, Dayna
Hodgson, Elizabeth
Drabik, Cassidi
Mas, Josephine
Yang, Heesun
Braun, Leslie
Hynes, Chelsea
Csupak, Kristen
Kaler, Manpreet
Smith, Kelsey
Priela, Dikie
Freund, Tristen

FOR THE EMPLOYER:

Conn Newman

R. Barrett

R.K.

FOR THE UNION:

[Signature]

[Signature]

Leona Barrett

Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Article 18 Exclusions Waiver

(Applicable @ St. Boniface Hospital Cardiac Operating Room; Misericordia Health Centre Operating Room (Eye Surgery/Ophthalmology); Victoria Hospital Operating Room (Day Surgery) and PACU)

The current protective clauses (max 16 hours, no s/b evening prior) will remain in place for St Boniface Hospital, Misericordia Health Centre, and Victoria Hospital. The following will apply to the above units only.

The parties will appoint an on-call Troubleshooter and alternate. Labour Board Chair will appoint if not agreed.

Employer may seek time-limited, unit specific waivers of the protective clauses, as follows:

If the Employer declares there is an imminent risk to the operation of the unit due to an actual or expected shortage of qualified nurses, including if assigned standby period has not been accepted within 5 days of assignment such that there are insufficient nurses from the unit scheduled to cover required standby periods, it may give the Union notice to waive this provision for a defined period not exceeding 6 weeks. Such notice will be accompanied by the relevant information necessary for the Union to assess the waiver request.

If the Union does not agree to the waiver within 7 days, or conditions cannot be agreed, the Troubleshooter will immediately meet with the parties and attempt to resolve the issue, failing which the Troubleshooter will issue a binding, non-precedential written decision within 48 hours, limited to the specific waiver request, to provide that sufficient nurses are available to cover standby periods to meet unit operation requirements and ensure patient safety.

Notwithstanding the above, if the Employer has less than 24 hours notice of an unfilled standby period, the Employer shall be entitled to assign a nurse from the unit to cover the standby period in order to meet essential patient care requirements, subject to the following conditions:

1 – “Patient care requirements” include the ability of the designated nurse to provide safe care, taking into consideration factors such as adequate rest, fatigue etc.

2 – Child/elder care requirements or medical needs.

3 – Equitable distribution (within the posted schedule) of such mandatory, short notice standby assignments.

4 – Where the Employer requires a nurse to be assigned stand by on short notice, the Employer shall reimburse the nurse for expenses for purchases that cannot be refunded with respect to the date(s) in question, i.e. travel expenses, event tickets etc.

5 – Before assigning a nurse the Employer will first canvass for volunteers amongst the qualified nurses in the unit.

The MOA will expire at the end of the collective agreement unless renewed by the parties.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

MOU #13 A. Re: Provisions for Nurse Practitioners Prior to April 1, 2022
(Applicable for Community Health/Public Health nurses)

The following shall be in effect for Nurse Practitioners up until March 31, 2022:

1. The salary scale for the Nurse Practitioner (Community Health) shall be as set out in APPENDIX "A" – SALARIES.-Articles 16, 17 and 18 shall not apply.
2. Seventy-two and one half (72.50) hours shall constitute a bi-weekly pay period of work (1885 hours per annum). The Nurse Practitioner may vary hours worked in order to effectively carry out the accountabilities and responsibilities of the position provided the Nurse Practitioner first obtains the pre-approval, in writing, from their immediate supervisor or designate.

For clarity a Nurse Practitioner while occupying a position where Articles 16, 17 and 18 do not currently apply, is not entitled to receive the entitlements in accordance with those articles until April 1, 2022.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: MGEU 220 Article 32 and 34

It is agreed between the parties that the applicability of the language in the former MGEU 220 - Article 32 and 34 (embedded below) will apply only to the nurses employed in a position covered under the former MGEU Local 220 Collective Agreement as of the date of ratification -October 14,2021 of the MNU Winnipeg-Churchill Health Region Employers Organization Collective Agreement (listed below in this Memorandum), and shall not be applied to nurses who may transfer into the Employer after October 14,2021.

Should any of the nurses listed in this memorandum transfer to another Employer, the entitlements under this provision will cease upon date of termination.

Applicable Nurses

Connie Taillon
Patricia Garbutt
Starra Slykerman
Cheryl Wigston
Michelle Green

Article 32:01

A regular employee who resigns as a result of the employee's decision to raise a dependent child or children and at the time of resignation notifies the employer of a potential to return to work, who is subsequently re-employed, with the Employer shall be credited with the length of service accumulated up to the time of resignation for the purposes of income protection and long service vacation entitlement benefits as defined in this Agreement and based on service seniority. The following conditions shall apply:

- (a) The employee must have accumulated at least four (4) years of continuous service at the time of resigning;
- (b) The resignation itself must indicate the reason for resigning;
- (c) The break in service shall be for no longer than six (6) years, and during that time the employee must not have been engaged in remunerative employment for more than three (3) months;
- (d) The previous length of service shall not be reinstated until successful completion of the probationary period;
- (e) Upon successful completion of the probationary period, the employee will be credited with the accumulated income protection credits at the time of the resignation up to a maximum of twenty-six (26) days of credits.

Article 34 Benefits


34:01 All Civil Service employees transitioned to the WRHA prior to April 1, 1999, will remain in the Government of Manitoba benefit plans consistent with those in place in the civil service at the time of the employee’s transition to the WRHA. These benefit plans include the Dental Plan, Disability and Rehabilitation (D&R) Plan, Ambulance and Hospital Semi-Private Plan (AHSP), Group Extended Health Plan, Group Life Insurance Plan, Pension Plan, and the Vision Care Plan, and these employees will be “grand parented” to those plans for the duration of their employment. In addition, all Civil Service employees transitioned to the WRHA prior to April 1, 1999, will be provided a Health Spending Account as detailed in Appendix “B”.


34:02 These benefit plans will be adjusted in accordance with the changes as set out in Appendix “B”.

- 34.04**
- (a) Where an employee has been away from work due to illness for four consecutive weeks the employee must complete all required documentation and make application for coverage under the HEB D&R Plan. The Employer and the Union are willing to assist the employee with completion of the documentation/application should the employee request.
 - (b) Subject to compliance with 34:04(d), in the event;
 - (i) An employee does not have sufficient accrued income protection to cover the 119 calendar day elimination period, or
 - (ii) The employee’s D&R application has not been approved by the end of the elimination period, the Employer shall pay the D&R Premium, Health Plan Premium, and Dental Plan Premium in respect of any portion of the elimination period where the employee is not in receipt of paid income protection or in respect of the period of time between the end of the elimination period and the date of final disposition of the employee’s D&R application.


FOR THE EMPLOYER:









FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Special Understandings – Clinical Nurse Specialists (CNS)
(Applicable for Deer Lodge Centre)


The terms of the Collective Agreement shall be applicable to the Clinical Nurse Specialists except as modified hereinafter. Inclusion of Clinical Nurse Specialists within the scope of the bargaining unit shall have no retroactive effect except as expressly provided for hereinafter.


1. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Clinical Nurse Specialist may vary hours worked in order to effectively carry out the accountabilities of the position.
2. Article 2103(a) – A nurse occupying a CNS position shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:


<u>Length of Employment</u>	<u>Rate at Which Vacation Earned</u>
In the first ten (10) years	Twenty (20) days/four (4) weeks (155 hours) per year
In the eleventh (11 th) to twentieth (20 th) year inclusive	Twenty-five (25) days/five (5) weeks (193.75 hours) per year
In the twenty-first (21 st) and subsequent years	Thirty (30) days/six (6) weeks (232.50 hours) per year

3. Article 2103(b) – To include Clinical Nurse Specialists.
4. Seniority – Seniority within the bargaining unit shall be deemed to commence from the date that each incumbent last commenced continuous employment with the Deer Lodge Centre.

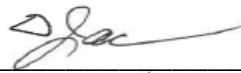
FOR THE EMPLOYER:




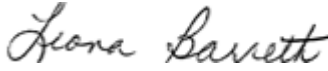




FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Special Understandings – Clinical Nurse Specialists (CNS)
(Applicable for Riverview Health Centre)

The terms of the Collective Agreement shall be applicable to the Clinical Nurse Specialists except as modified hereinafter. Inclusion of Clinical Nurse Specialists within the scope of the bargaining unit shall have no retroactive effect except as expressly provided for hereinafter.

1. Seventy-seven and one-half (77.50) hours shall constitute a bi-weekly period of work. The Clinical Nurse Specialist may vary hours worked in order to effectively carry out the accountabilities of the position.
2. Article 2103(a) – A nurse occupying a CNS position shall be entitled to paid vacation calculated on the basis of vacation earned at the following rates:

Length of Employment
In the first ten (10) years

Rate at Which Vacation Earned
Twenty (20) days/four (4) weeks
(155 hours) per year

In the eleventh (11th) to twentieth (20th)
year inclusive

Twenty-five (25) days/five (5) weeks
(193.75 hours) per year

In the twenty-first (21st) and
subsequent years

Thirty (30) days/six (6) weeks (232.50
hours) per year

3. Article 2103(b) – To include Clinical Nurse Specialists.
4. Seniority – Seniority within the bargaining unit shall be deemed to commence from the date that each incumbent last commenced continuous employment with the Riverview Health Centre.

FOR THE EMPLOYER:







FOR THE UNION:







Signed the 10th day of July, 2023.

**MEMORANDUM OF UNDERSTANDING
SUPPLEMENTARY TO THE COLLECTIVE AGREEMENT
BETWEEN
WINNIPEG-CHURCHILL HEALTH REGION EMPLOYERS ORGANIZATION
AND
THE MANITOBA NURSES' UNION**

Re: Secondment of a Nurse to Presidential Duties – Seven Oaks Hospital

WHEREAS the Employer and the Union are interested in taking measures to maintain consistent and harmonious union-management relations;

AND WHEREAS joint discussion is invaluable to the maintenance of the above;

AND WHEREAS the complexities of issues often require the President to be away from their unit for meetings with the Employer for unknown periods of time;

AND WHEREAS the Employer and the Union appreciate the importance that patient care not be disrupted as a result of meetings between the Employer and the Union;

NOW THEREFORE the Employer and the Union agree to the following terms which shall apply in the secondment of a nurse to become Worksite 72 – President.

2. (a) A nurse employed by the Employer who is elected to the position of part-time President, shall be considered as continuing in the employ of the Employer during the nurse's term as President.

(b) The secondment will be for at a minimum 0.3 EFT. Any changes to the EFT will be made if the Worksite members approve and provide at least a four (4) week notice to the Employer. The nurse will be granted a partial leave of absence, if required, to maintain their position with the Employer. It is understood the partial position vacated by the nurse seconded to be President, shall be posted and maintained and/or replaced as an indefinite term.

It is understood that the minimum 0.3 EFT will be scheduled within the nurse's master rotation on their unit.

(c) Scheduling of the nurse's remaining position on their unit, if required, will be done by the appropriate Manager in consultation with the nurse and will observe the conditions of Article 1504 or the MOU re "12" hour shift if applicable.

(d) (i) The provisions of Articles 1101-Release Time shall be applicable to the President of Worksite 72 and the time spent at the committees referenced in Article 1101 shall be in addition to the 0.3 EFT Union Leave.

(ii) The provisions of Article 2409- Union Leave shall be applicable to

the President of Worksite 72 and Union Leaves reference in Article 2409 shall be in addition to the 0.3 EFT Union Leave.

6. Payroll Record - The Worksite Treasurer (or designate) will act as the liaison person between the Employer and the Union with respect to all payroll issues. The Treasurer will advise the appropriate person in Payroll of the proper coding for vacation time and income protection for the President. The Employer agrees to maintain a separate and identifiable payroll account for the President.
7. Payroll Expense Items - The Worksite will reimburse the Employer for the following payroll expense items during the period of secondment to President:
 - (ix) salary, which shall be in accordance with Appendix "A", at the Site President's current occupational classification and salary in their position from which they are seconded.
 - (x) vacation taken
 - (xi) income protection (subject to paragraph 6 below)
 - (xii) payroll tax
 - (xiii) Employer's portion of CPP
 - (xiv) Employer's portion of EI
 - (xv) Workers Compensation premiums paid
 - (xvi) Employer's portion of Benefit Plan premiums (see Benefit Plans below)

The Worksite 72 shall be given an invoice outlining payroll expense items on a monthly basis. Payroll expense items for such time spent by the President, as an officer of the Worksite participating in committee meetings/activities outlined in the Collective Agreement in which both the worksites and the Employer are represented, shall not be billed to Worksite 72, (e.g. NAC, negotiations, formal grievance meetings with Human Resources and a MNU Labour Relations Officer, Union Management). The parties to this Memorandum shall maintain an agreed "log" of the above time and, on a quarterly basis, a reconciliation shall occur in the next billing to the Worksite 72. Time spent meeting with membership, time spent meeting with administrative nursing personnel exclusive of Human Resource personnel and MNU Labour Relations Officer on Leave of Absence time, will not be charged to the Employer.

8. Pay Period - The President shall continue to be paid on a bi-weekly basis.
9. Seniority - Seniority shall continue to accrue during the period of secondment.
6. Income Protection -
 - (iv) The President will accumulate income protection credits at the rate of one and one-quarter (1.25) days per month during the period of secondment. In the event that the Worksite President is absent during the secondment period due to accident or illness and the income protection credits accumulated during the period of secondment are insufficient to cover full payment of sick leave, the Employer will pay the President out of income protection credits

accumulated prior to the secondment period and bill the costs to the Union, subject to paragraphs (ii) and (iii) below.

- (v) Special Understanding Re: D & R - The President shall have access to the D & R Plan. The Worksite 72 agrees to reimburse the Employer for a maximum of eighty-five (85) days of income protection to cover the elimination period of the D & R plan. If the President fails to qualify for a D & R benefit following the elimination period, the nurse shall be entitled to use Employer paid income protection as required for recovery.
- (vi) Following secondment and the nurse's return to work, they will be eligible to utilize the income protection credits accumulated during the period of secondment less any income protection processed during the secondment. The Employer will provide the nurse with a letter (copy to be placed on the nurse's file in Human Resources Department) confirming the income protection credits that can be paid in the event the nurse utilizes all income protection credits accumulated as an active employee. In the event the nurse has an illness/accident and wishes to utilize these income protection credits accumulated during secondment, the nurse will advise the Human Resources Department. The Employer will process the income protection and invoice the Union for the cost.

8. Vacation Pay

In the calendar year that the nurse is seconded to Presidential duties, the Employer shall assume responsibility for vacation earned but not used to April 30th of that calendar year. The Employer's cost will be based on the nurse's salary rate as at April 30th. In the calendar year that the nurse relinquishes Presidential duties, the Employer shall assume responsibility for vacation earned during the month of May of that calendar year. The Union shall assume responsibility for the balance of vacation earned during secondment. The Union's cost will be based on the nurse's salary rate in effect at the time vacation is taken

8. Recognition of Services-

- (i) For purposes of increments - The increment date of the incumbent following expiry of the period of secondment will be delayed for one (1) month for every full month the nurse is on secondment to Presidential duties, to a maximum delay of twelve (12) months.
- (ii) For purposes of determining vacation accumulation base - the period of secondment to Presidential duties shall be recognized as service to the Employer.
- (iii) For purposes of Pre-Retirement Leave - the period of secondment to Presidential duties shall be recognized as service to the Employer. At the time of taking pre-retirement leave, the Union agrees to reimburse the Employer for the cost of paid pre-retirement leave which was accrued by

the Union President during the period of secondment, i.e. 1 year of secondment= four (4) days paid pre-retirement leave.

9. Benefit Plans -

(iii) Pension Plan - The Union President shall continue to have payroll premium deductions for the pension plan and the Union agrees to reimburse the Employer for the Employer's contribution respecting the EFT of the partial leave. All pensionable service shall accrue during the period of secondment as it would to the total EFT of the nurse's position prior to the secondment.

(iv) Life Insurance/Extended Health Plan (if applicable)/Dental Plan (if applicable) and D & R Plan - shall be continued with reimbursement by the Worksite 72 for the Employer's contribution to these plans.

NOTE: The President will be eligible to participate in the group benefit plans under the same terms and conditions as any other permanent employee of the facility.

10. This memorandum shall remain in force until revised by mutual agreement between the parties or until terminated by either party.

FOR THE EMPLOYER:








FOR THE UNION:







Signed the 10th day of July, 2023.

INDEPENDENT ASSESSMENT COMMITTEE (IAC)

IAC Chairpersons 1104 (a) (i)

Jan Currie

Kim Fraser

Donna McKenzie

Sandi Mowat

Carole Ohryn

Laurie Walus

Melody Muswaggon - Alternate

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