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## **ARTICLE I - PREAMBLE**

This Agreement is entered into on July 9, 2023 by and between the Public Health Trust (PHT) and Miami-Dade County, Florida (County), hereinafter referred to as the Employer, and Local 1991, Service Employees International Union, hereinafter referred to as the Union, for the period October 1, 2023 through September 30, 2026, subject to ratification by the Union membership and approval by the Public Health Trust and the Board of County Commissioners of Miami-Dade County, Florida.

All new or amended provisions contained in this Agreement shall be effective the beginning of the first pay period immediately following final ratification and approval by the Board of County Commissioners, unless a different effective date is specifically provided for in the affected article.

## **ARTICLE II - PURPOSE**

It is the purpose of this Agreement to promote and expand harmonious relationships between the Employer and the Employees represented by the Union; to provide, where not inconsistent with the Constitution, Charter, Statute, Ordinance or Personnel Rules, for the salary structure, fringe benefits and employment conditions of the employees covered by this Agreement, where not inconsistent with the Constitution, Charter, Statute, Ordinance or Personnel Rules. Both parties agree that they share the responsibility to provide uninterrupted nursing care to patients and citizens of Miami-Dade County.

In addition to standards of performance adopted by the Public Health Trust, including, but not limited to, appropriate audit methodologies, the Employer recognizes its obligations under the Nurse Practice Act of Florida and the Standards for Nursing Service as developed by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and the New Standards for Performance Improvement. The Employer also agrees to give consideration to the Code for Nurses as adopted by the American Nurses' Association in the development of standards of performance.

Upon ratification and approval, the provisions of this Agreement will supersede Personnel Rules or Administrative Orders and/or other rules and regulations in conflict herewith. The Employer retains the right to establish through Administrative Order or Personnel Rules practices or procedures which do not violate the provisions of this contract.

## **ARTICLE III - RECOGNITION**

### **SECTION 1. RECOGNITION**

The Employer recognizes the Union as the exclusive bargaining representative for all full-time employees, regularly employed part-time

non-casual employees and per diem employees who average twenty (20) or more hours weekly employed by the Employer in the classifications as identified in Appendix A and all other classifications in which the duties can only be performed by a Registered Nurse, as presently exist or as may be from time to time established by the Employer excluding Clinical Nursing Supervisors, Supervisors, Assistant Directors, Directors of Nursing, and all other employees of the Trust.

## **SECTION 2. PROBATIONARY AND PER DIEM EMPLOYEES**

Probationary, non-permanent employees and per diem employees shall continue to be governed in all respects by the Code of Miami-Dade County, Florida. Personnel Rules, Pay Plan, and all other regulations in effect prior to the execution of this Agreement, and there shall be no change in any of the wages, benefits, hours or terms and conditions of employment of such employees except as a result of this Agreement.

Within the meaning of the above paragraph, the following provisions only shall not apply to probationary employees: Article IX, Section 1, 2(D), 3, 4 and 5 and Article XV, Section 6(E). Only the following provisions apply to per diem employees: Articles I; II; III; IV, Sections 1, 2, 3, 4, 5, 6, 7, and 8; V; VI; XI, Sections 1, 2, 3A, 5, 6, 9 and 10; XIII, Section 6, 7, and 8; XV, Section 2, 5, 6 (A,B,C,D,H), 10, 11, 12, 13, 15, 16, 17, 18 and 19; XVII, Section 1 (A and B) and 2 (A); XIX; XXII; XXIII, Section 1, 2, 3, 4, 5 and 6; XXIV; XXV; XXVI; XXVII; XXVIII; XXIX; XXX and XXI. Articles VII and VIII shall only apply to alleged contract violations.

## **ARTICLE IV - UNION-MANAGEMENT COOPERATIONS**

### **SECTION 1. UNION-MANAGEMENT COOPERATION**

It is recognized that regular meetings between the Employer and the Union are desirable in order to deal with matters of mutual concern as they arise and to improve employee management cooperation.

### **SECTION 2. EMPLOYEE-MANAGEMENT CONFERENCE COMMITTEE**

- A. The Employer’s management, jointly with the elected representatives of the Union, shall establish a Conference Committee to assist in solving mutual personnel and other employee-management problems not involving grievances or matters within jurisdiction of any other Labor Management Committees.
- B. The purpose of the Committee is to foster improved relations between the Employer and the Union.
- C. The Committee shall be on a permanent basis and shall consist of four (4) representatives of management and four (4) representatives

of the Union. Persons serving on this committee should be at a level to represent the parties' interests.

- D. The Committee will meet monthly. Each party will submit an agenda of topics to be discussed at least five (5) calendar days prior to the scheduled meeting. Only subjects appearing on the agenda will be discussed unless business of an emergency nature is added by mutual consent.
- E. Within the authority of the representatives, both parties will make every effort to implement any agreement or place which results from these meetings. If unable to implement, the representatives will make appropriate recommendations.
- F. It is the objective of the Employer to pay salaries that are competitive in the local area. To this end, salaries will be discussed by this Committee whenever requested by either party.

### **SECTION 3. MEMBERSHIP**

- A. Each pay period, the Employer will provide the Union with a printout and/or an electronic copy of the job title, department, Lawson ID, badge number, position, name, job code, pay rate, annual pay rate, FTE, pay grade, pay step, shift, work schedule, union code, union name, union membership status, job status, status description, hire date, adjusted hire date, anniversary date, exempt or hourly, supervisor name, union dues by individual, COPE contributions by individual, process level, work phone, work email, and termination date for all employees in the bargaining unit. With written authorization from the employee, the Employer shall provide addresses and phone numbers.
- B. Quarterly, JHS will provide a list of all newly created Company 300 positions to the Union by job classification and job description.
- C. The Union will have 2000 copies of this agreement printed and the Employer will reimburse the Union for 50% of mutually agreed upon costs. The Union will provide the Employer with five hundred (500) copies. The Union will distribute copies of this Agreement to all employees in the bargaining units. In support of the climate summit initiatives sponsored by the Union and the Trust, the contract will be accessible to all employees in electronic format.

### **SECTION 4. DUES DEDUCTION**

- A. Upon receipt of a properly executed written authorization from an employee, the Employer agrees to deduct the regular Union dues of such employees from their biweekly pay and remit the same to the Union within fourteen (14) calendar days from the date of the deduction.

The Union will notify the Employer, in writing, thirty (30) days prior to any change in the regular Union dues deduction as provided by law. Any employee may revoke the Union dues deduction as provided by law.

- B. Upon receipt of a properly executed written authorization from an employee, the Employer agrees to deduct COPE contributions from an employee's biweekly pay in the amount designated by the employee and remit the same to the Union within fourteen (14) calendar days from the date of deduction. The Union will notify the Employer, in writing, thirty (30) days prior to any change in the regular COPE dues deduction as provided by law. Any employee may revoke the COPE dues deduction upon written authorization.
- C. The Union agrees to indemnify and hold the Employer harmless against any and all claims, suits, orders or judgments brought or issued against the Employer as a result of any action taken or not taken by the Employer as a result of any action taken or not taken by the Employer under the provisions of this section.
- D. If during the life of this contract there is any changes to the law which in any way affects dues deduction, JHS will work collaboratively with the Union to implement alternative dues deduction methods.

## **SECTION 5. NON-DISCRIMINATION**

There shall be no discrimination against any employee by the Employer or the Union because of race, color, sex, creed, national origin, age, marital status, disability, sexual orientation, gender identity, gender expression, religion, political affiliation or Union membership or activity covered or described under this Agreement. There shall be no discrimination shown between equally qualified employees in work assignments, training, transfers, evaluations, promotion, layoff and recall, education and tuition assistance.

All employees covered by this Agreement shall be protected in the exercise of the right to join and assist the Union, or to refrain from such activity; to designate representatives for the purpose of collective bargaining or for the purpose of implementing any other rights provided under the Public Employees Relations Act or other pertinent laws, or the provisions of this Agreement.

## **SECTION 6. BULLETIN BOARDS**

The Employer agrees to provide a suitable number of bulletin boards or bulletin board space for exclusive Union use. There will be at least one (1) board per patient care unit and/or work site/area and additional others to be mutually determined.

## **SECTION 7. COPIES OF DOCUMENTS**

The Employer will provide the Union with a copy of all manuals, job descriptions, personnel policies and administrative rules and regulations that are applicable to the bargaining unit.

## **SECTION 8. NEW EMPLOYEE ORIENTATION**

The Union and the Employer shall work cooperatively to ensure that the Union representatives shall have an opportunity to address/contact new employees about the Union and to provide them with a copy of the Collective Bargaining Agreement and a list of Union officers and representatives.

## **ARTICLE VI - NOTFICATION, CONSULTATIONS AND NEGOTIATIONS**

### **SECTION 1. PREVAILING BENEFITS CLAUSE**

Any benefits recognized by the Employer and heretofore enjoyed by the employee, which are not specifically provided for or abridged by this Agreement, shall continue under conditions upon which they have previously been granted.

### **SECTION 2. NOTIFICATION, CONSULTATIONS AND NEGOTIATIONS**

The Employer shall notify the Union in writing of any proposed changes in personnel policies or practices, which affect the conditions under which nurses work. Whenever possible, such written notification shall be provided the Union at least four (4) weeks in advance of the proposed implementation of the changes. If requested by the Union within ten (10) days of its receipt of such notification, the Employer will meet with the Union to discuss the proposed changes and to negotiate in good faith over the impact of such changes on unit employees.

Examples of changes which entitle the Union to such notification include but are not limited to the following: the PHT or the County merging with or acquiring other hospitals or agencies; changes in job descriptions, specifications, qualifications or evaluation system; new or changed job classifications; changes in the Employer's policies and procedures, work or disciplinary rules; changes in shift starting and quitting times; plans for opening or acquiring new units or reassignment of nursing personnel; and such committee recommendations as the Employer wishes to implement even where the Union was represented on the committee making the initial recommendations.

Nothing in this article shall diminish the right of the Employer to take action described under Article xxv, Management Rights and Scope of this Agreement.

## **ARTICLE V - UNION REPRESENTATION**

### **SECTION 1. UNION REPRESENTATIVES**

The Union has the right to select its representatives to carry out the activities permitted by this Agreement, and will furnish the Employer with a list of elected officials and unit representatives for designated purposes within thirty (30) days after the execution of this Agreement. The Union will keep such lists current.

### **SECTION 2. GRIEVANCE REPRESENTATION**

The Employer recognizes the right of the Union to appoint not more than thirty-nine (39) representatives at JMH and satellite facilities for the purpose of assisting employees in the adjustment of grievances under the terms of this Agreement. In the event of an expansion of the bargaining unit above the number of employees in the unit at the execution of this Agreement, the Employer agrees that the Union shall be allowed to appoint one (1) additional representative for each sixty (60) additional bargaining unit employees.

### **SECTION 3. RELEASE TIME**

- A. With prior approval from the employee's supervisor, time off with pay shall be allowed to the Union representatives assigned to regular shifts to allow for participation in activities described in Articles IV, V, VI, VII, VIII, IX, XXII, XXIII and XXIV of this Agreement. Approval will not be unreasonably withheld.
- B. No nurse shall be paid for such time unless regularly scheduled to work at a time when such activities are going on; nor shall schedules be changed to allow paid time for such activities. In unusual circumstances, request for schedule changes may be submitted by Unit representatives for approval by their supervisor or schedule changes may be made by the Employer. However, in order to encourage participation of night-shift nurses in the activities detailed in Section A, night-shift nurses who spend two (2) hours or more in any day attending such activities shall be given a maximum of two (2) hours off their regular shift with pay.
- C. Up to twenty (20) bargaining unit members will be allowed time off with pay for contract negotiations. Up to an additional seven (7) bargaining unit members will be allowed time off without pay for contract negotiations. Approval will not be unreasonably withheld. The Union will make every effort to elect employees from various hospital centers.

### **SECTION 4. ADJUSTMENT OF GRIEVANCE**

It is agreed and understood by both parties that unit representatives designated by the Union may, without loss of pay, process grievances during

working hours. An employee representative, before leaving the work area to transact appropriate Union-Employer business during working hours, shall first obtain permission from the appropriate supervisor. When it is necessary to contact a nurse in another area, the representative will contact the appropriate supervisor to arrange an appointment with the concerned nurse(s). Permission will be granted by either supervisor as a matter of discretion but shall not be unreasonably withheld. The parties recognize that time spent in such activities shall not interfere with patient needs and, if necessary, shall be conducted on the employees' own time.

Every effort will be made by the Employer to allow unit representative to investigate grievances as rapidly as possible, preferably on the same date as the grievance becomes known, and when possible at least within twenty-four (24) hours.

## **ARTICLE VII - GRIEVANCE PROCEDURE**

### **SECTION 1. RESOLUTION OF GRIEVANCES**

In a mutual effort to provide harmonious working relationships between the parties to this Agreement, it is agreed to and understood by both parties that the following shall be the sole procedure for the resolution of grievances arising between the parties as to the interpretation or application of the provisions of this Agreement.

It is agreed that every effort will be made by the Union and the Employer to resolve disagreements or disputes informally and promptly prior to the initiation of the formal grievance procedure. An employee may be assisted or represented by a representative of the Union during the grievance procedure. Unless the employee requests Union representation, nothing in this section shall prevent the Employer from discussing any incident or circumstance related to any employee without the presence of a Union representative. However, the Employer agrees not to deny representation if it is requested.

### **SECTION 2. DEFINITION**

A grievance shall be defined as any dispute arising from the interpretation or application of this Agreement, or rising from conditions of employment. A class grievance shall be defined as any dispute which concerns two (2) or more employees within the bargaining unit. Class grievances should name all employees and/or classifications covered in the grievance. Each written grievance, when filed, shall contain a brief statement of the facts of the violation claimed, together with the article of the contract violated and the remedy sought. All grievances shall be processed in accordance with the grievance procedure as set for in this article.

### **SECTION 3. PROCEDURE**

The employee or Union shall file a grievance, in writing, with the Director Employee/ Labor Relations and Workforce Compliance Department, or

designee, within ten (10) calendar days of the occurrence or knowledge giving rise to the grievance. This person, or designee, shall meet with the grievant and the Union Representative within ten (10) calendar days after receipt of the written grievance and shall reply in writing within ten (10) calendar days after the grievance hearing.

Whenever possible, appropriate and unique to one division, the Union will attempt to discuss Union grievances, except those concerning disciplinary action, health and safety or Union rights, with the Division Director or designee before submitting the grievance directly to the Director of Employee/Labor Relations and Workforce Compliance Department.

#### **SECTION 4. CLASS GRIEVANCES**

In order to minimize the disruption to patient care in the case of class grievances, no more than two (2) employee per shift, per unit, plus a Union representative, shall be released from work for grievance meetings.

#### **SECTION 5. TIME LIMITS**

Failure to observe the time limits for submission of any grievance at any step will automatically result in the grievance being considered abandoned. Failure to meet or respond to a grievance within the prescribed time limit will automatically move the grievance to the arbitral step.

Extensions of time limits shall only be by mutual agreement in writing between the parties to this Agreement, except that either party shall be permitted one (1) extension of time per grievance as a matter of right not to exceed fifteen (15) days, providing that the other party is notified in writing of the extension prior to the expiration of the original period.

#### **SECTION 6. EMPLOYEE OBLIGATION**

The parties acknowledge that as a principle of interpretation, employees are obligated to work as directed while grievances are pending, except as set forth in Article XXIII, Safety and Health, of this Agreement.

#### **SECTION 7. EMPLOYER RESPONSES**

All responses required, above, shall be directed to the aggrieved employee with a copy furnished to the Union, or to the Union. In class grievances, copies will be directed to the Union only. A rejection of a grievance must contain a statement of the reasons for the rejection.

#### **SECTION 8. EXCLUSIONS**

Any subjects excluded from the arbitration procedure (Article VIII) shall also be excluded from the grievance procedure with the sole exception of written

reprimands, which shall be grievable but nor arbitrable as provided under Article IX, Disciplinary Action, Section 3, Written Reprimands and Records of Counseling. A Record of Counseling is non-disciplinary and therefore not grievable or arbitrable.

## **ARTICLE VIII - ARBITRATION**

If the Union is not satisfied with the reply of the grievance, the Union shall have ten (10) calendar days after receipt thereof to notify the Employer of intent to submit the grievance to arbitration. Within thirty (30) days following notification to the Employer, the Union must file a request for arbitration. The Union must simultaneously provide the Employee/Labor Relations Department with a copy of the request for arbitration and the applicable grievance. If the parties cannot agree upon an impartial arbitrator within five (5) days, the parties shall request a list of seven (7) arbitrators from FMCS or AAA. The parties shall each strike from said list, alternately, three (3) names, after determining the first strike by lot, and the remaining name shall be the arbitrator. The arbitrator shall promptly conduct the hearing on the grievance at which both parties shall be permitted to present their evidence and arguments. The decision of the arbitrator shall be rendered in writing no later than thirty (30) days after the conclusion of the hearing, and such decision shall be final and binding.

Each party will pay its own expenses and shall share equally in expenses incurred mutually in arbitration including the cost of the transcript, if mutually requested. Employees required to testify will be made available without loss of pay; however, whenever possible they shall be placed on call to minimize time lost from work and, unless directly required to assist the principal Union Representative in the presentation of the case, they shall return to work upon completion of their testimony. The intent of the parties is to minimize time lost from work and disruption of patient care.

The arbitrator shall limit his/her opinion to the interpretation or application of this Agreement and shall have no power to amend, modify, nullify, ignore or add to the provisions of this Agreement.

Grievances, as defined, may be submitted regarding the matters contained in the Agreement or arising from conditions of employment.

Reprimands and determinations under Article XV (Employment Practices), Section 4 (Classification Appeal), and Section 15, B, C, D (Job Specification Language) are not arbitrable.

## **ARTICLE IX - CORRECTIVE ACTION**

### **SECTION 1. JUST CAUSE**

An Employee shall not be discharged, disciplined or demoted except for just cause. The Employer will follow progressive disciplinary procedures,

whenever appropriate, and in all instances will have the burden of proving just cause for disciplinary action taken.

## **SECTION 2. PROCEDURE**

- A. The corrective action process will begin when the Employer gives the Employee and the Union a Corrective Action Report (CAR) or Record of Counseling (ROC). The Union copy of the CAR/ROC will be sent electronically to the Union President/designee and the Union Membership Data Coordinator, and shall include the name and contact information of the affected employee and management person designate to hear the rebuttal.
- B. The CAR/ROC shall specify the charges against the Employee, and include the law, rule, regulation, and/or policy allegedly violated. In addition to the CAR or ROC, all supporting documentation (statements, records, etc.) will be attached. The Employer agrees to inform the Employee of his/her right to representation in the corrective action process. Upon request, the employee shall have the right to representation in discussion concerning actual or pending corrective action.
- C. Final Decisions and Rebuttals: Final corrective action determinations will not be rendered until the completion of the rebuttal meetings where the Employer and the Employee, together with the Representative, through use of evidence, documents and witnesses, have the opportunity to present their respective cases. Within ten (10) calendar days after receipt of the CAR/ROC, the Union representative assigned to the matter shall contact the management person designated in connection with the CAR/ROC to notify them of the Union's and Employee's readiness to schedule the rebuttal hearing. The employer will then send the Union three (3) possible dates for the rebuttal hearing that correspond to the Employee's schedule over the ensuing ten (10) calendar days. Rebuttal meetings must be heard within ten (10) calendar days of the Union notifying the Employer of their readiness, unless mutually agreed between the parties. A decision will be rendered without a rebuttal hearing if the Employee fails to schedule the rebuttal within the ten (10) day period, or if the Employee waives the right to a rebuttal. The Employer shall have ten (10) calendar days to render a decision following the rebuttal presentation unless time is extended by mutual agreement. The Union and employee shall receive a copy of the rebuttal response.
- D. The Employer agrees that corrective actions (dismissals, suspensions, demotions) except written reprimands and records of counseling, will be appealable by the employee to a hearing examiner as provided in the Miami- Dade County Code and the Personnel Rules of the PHT or, at the option of the Union and the employee, to the Grievance and

Arbitration procedures in Articles VII and VIII of this Agreement. The employees shall be notified in writing of both appeal procedures by name and contract article.

- E. CARs and ROCs shall be given on a timely basis and insofar as practicable within twenty-one (21) days after the Employer discovers the facts or concludes the investigation requiring the presentation, except where good cause for delay is shown. Good cause shall include, but not be limited to, the pendency of outside criminal, administrative or other proceedings, or if the Employee, manager, supervisor, or the director rendering a decision is on leave. There will be no notification to the employee prior to the initiation of the corrective action process (e.g., 48-hour notification).
- F. Any disciplinary action currently in an employee's file which is overturned shall be stamped invalid.
- G. Any employee will be offered the option of using accrued personal leave during a suspension.

### **SECTION 3. WRITTEN REPRIMANDS AND RECORDS OF COUNSELING**

Written Reprimands shall be appealable by the employee to the grievance procedure, but shall not be further appealable to either an Arbitrator or to a County Hearing Examiner Officer. Within thirty (30) days of the receipt of the Employer's reply to such a grievance at any step of the grievance procedure, the employee and/or the Union shall have the right to file a written response to the Written Reprimand and have said response inserted in the employee's personnel folder.

Written Reprimands and Records of Counseling, together with any reference to such reprimands or Records of Counseling excluding performance evaluation, shall cease to be of any force or effect after a two (2) year period from the receipt of the Record of Counseling or Written Reprimand in which the employee has received no further disciplinary actions or Records of Counseling. At the employee's specific written request, these shall be promptly stamped in the employee's personnel file as no longer in effect.

### **SECTION 4. HEARING PURSUANT TO THE HEARING EXAMINER STEP**

- A. The employee subjected to the corrective action process shall be informed in writing of the charges. The employee or the employee's representative shall have the right to confront and question all witnesses under oath. The right of discovery and procedural rights in accordance with the Florida Rules of Civil Procedure shall be provided to the employee.

- B. All corrective actions including demotions, suspensions, and dismissals of permanent employees, but excluding written reprimands and records of counseling, shall be appealable to a hearing examiner, in accordance with the applicable section(s) of the Miami-Dade County Code (Section 2-47). This section shall not apply to the termination of a nonpermanent or probationary employee or to the demotion of permanent employees who fail to complete the promotional probationary period to the satisfaction of the department for other than disciplinary reasons.
- C. The decision of a hearing examiner shall include a finding of facts, conclusions to sustain the decision and may include recommendations, a copy of which shall be immediately provided to the employee and to the Union.
- D. The above referenced Code provisions providing for a disciplinary appeal process are to be read to include the following procedural guarantees:
  - 1. The Employer shall continue to abide by the previously agreed to and published Hearing Examiner Procedure Manual.
  - 2. The PHT Labor Relations Manager shall be responsible for initiating the selection of the hearing examiner on each appeal and setting the date, time and place for the hearing upon consultation with the parties involved. There shall be no ex parte communication between the participants of the hearing and the examiner.
  - 3. The parties to the hearing shall not initiate ex parte communications with the President of the PHT for the purposes of influencing the final appeal decision. This decision shall be based solely on the hearing record.

## **SECTION 5. GRIEVANCE PROCEDURE**

- A. The Union will have the option on behalf of a permanent status bargaining unit employee, to appeal disciplinary actions resulting in dismissals, suspensions or demotions of permanent employees through the grievance and arbitration procedure contained in Article VII and VIII of this Agreement. The union shall notify the Office of Labor Relations in writing no later than ten (10) calendar days from the employee's receipt of the final corrective action determination of its decision on whether to exercise the option of appealing through the grievance and arbitration procedure or request an appeal in accordance with Section 2-47 of the Code of Miami-Dade County. The Union's choice between the grievance and arbitration procedure or the Code provision under Section 2-47, once made, shall not be subject to change.

- B. In the case where the Union chooses not to select the grievance and arbitration procedure for disciplinary actions resulting in dismissals, suspensions or demotions of permanent employees then the disciplinary appeal provisions under Section 2-47 of the Code of Miami-Dade County shall prevail and be utilized if a timely appeal is requested. In the event the Union selects the option to appeal disciplinary actions resulting in dismissals, suspensions or demotions of permanent employees under the grievance and arbitration procedure then the provisions of Section 2-47 of the Code will not be applicable.

## **SECTION 6. JUST CULTURE**

Just Culture: The PHT and the Union jointly embrace Just Culture. The parties recognize that Just Culture functions to ensure safe quality care and provides both the employer and the employees the opportunity to explore and investigate processes, procedures and systems that advance safe quality care. In the event an issue or incident occurs with a bargaining unit member related to patient safety or in clinical areas that deal with patient safety and quality, the PHT will make every effort to examine the core fundamental cause utilizing the practices and algorithms of Just Culture per the PHT's Just Culture Policy. It is the mutual intent of both parties to ensure safe quality patient care through ensuring best practices and share learnings.

As both parties embrace Just Culture, and whereas the Union recognizes the PHT's intent to implement and utilize it throughout the System, the parties agree to create a Just Culture Committee. The purpose of the Committee is for management and the Union to meet and collaborate on the effective implementation and utilization of the Just Culture Policy for the members of the bargaining unit.

The parties agree that the Employer and the Union shall be responsible for establishing the Just Culture committee and determining its structure and scope.

## **SECTION 7. ABSENTEEISM/TARDINESS**

- A. Absenteeism

Absenteeism is defined as failure to report to work as scheduled, or working less than one-half the scheduled shift. Employees who violate this policy with patterned and/or excessive absenteeism shall be subject to corrective action.

An absence occasion is defined as one (1) to a maximum of seven (7) consecutive calendar days(s) with unplanned absences, excluding approved FMLA leave. For an illness extending beyond seven (7) calendar days, the employee must present the appropriate manager

with a doctor's note for the illness to be treated as a single occasion. Hence, if an employee has eight (8) or more consecutive calendar days of unplanned absences, then the eighth (8) consecutive calendar day will be considered an additional "absence occasion."

"Patterned" absences constitute a violation of this section. With the exception of absences on holidays which require longer time periods in which to investigate a possible pattern, examples of patterned absences include, but are not limited to, three (3) or more instances of the following in a three (3) month period:

- absence on scheduled weekends or holidays
- absence the day before or after a scheduled holiday, vacation, or personal day
- absence the scheduled workday after payday
- coincidence of absence with desirable days off
- coincidence of absence with days of heavy or light work load
- repeated or patterned absence on a specific day of the week

"Excessive absenteeism" is defined as at least four (4) or more absence occasions during any six (6) month period. In addition, two (2) or more absence occasions within any two (2) month period following receipt of a corrective action for absenteeism constitute excessive absenteeism.

Repeated periods of extended absence due to illness or injury may be considered excessive absenteeism since they interfere with the delivery of patient care and departmental productivity, and may constitute a violation of this policy unless these absences are covered under the provision of Family & Medical Leave Act (FMLA).

B. Tardiness

1. Tardiness is defined as arriving at the workstation after the scheduled starting time.
  2. Excessive tardiness is defined as reporting late for duty at least twice in a pay period. Tardiness that follows a set pattern also may constitute excessive tardiness.
- C. A joint management and union committee will be established to monitor the declinations of PL time and the reduction of call outs.

## **ARTICLE X - HOURS OF WORK AND OVERTIME**

### **SECTION 1. WORK HOURS**

The standard work week shall consist of forty (40) hours.

Employees who are assigned to work eight and one half (8 ½) or ten and one half (10 ½) shall be entitled to one (1) unpaid meal break of one half (½)

hour which will be part of each shift. Every effort will be made to provide two fifteen (15) minute paid rest periods within each scheduled shift. The unpaid meal break may be combined with the fifteen (15) minute paid breaks with prior supervisory approval, which shall not be unreasonably withheld.

Employees who are assigned to work twelve and one half (12 ½) hour shifts shall be entitled to two (2) unpaid meal breaks of one half (½) hour which will be part of each shift. Every effort will be made to provide three fifteen (15) minute paid rest periods within each scheduled shift. The unpaid meal breaks may be combined with the fifteen (15) minute paid breaks with prior supervisory approval, which shall not be unreasonably withheld. No individual working twelve and one half (12 ½) hour shifts will normally be scheduled for more than three (3) consecutive days on duty or more than seven (7) days on duty within a period of fourteen (14) consecutive days.

In addition to the current full-time status of 40 hours for nurses who work 12 and half hour (12 ½) shifts (3 days one week, 4 another week), RNs who mutually agree with the employer to work three (3) 12 and one half hour (12 ½) shifts per week shall also be considered full time employees with all full time benefits. Those who work these three (3) 12 and one half hour (12 ½) shifts shall be paid for 72 hours per pay period plus any overtime. For the purposes of weekly overtime, the normal work week shall be considered 40 hours.

An employee who is currently on, or in the future is placed on, a schedule of working

12 ½ hours shifts, three (3) days one week and four (4) days another week (3-4) shall be entitled to continue on a (3-4) schedule, including in the event of a transfer or reassignment, whether voluntary or involuntary.

Effective September 30, 2014, full-time or part-time employees shall have the opportunity to convert to a schedule of working 12 ½ hour shifts, three (3) days one week and four (4) days another week (3-4), whenever any full-time or part-time vacancy is declared in the employees' unit, to a maximum of 50% of employees on a (3-4) schedule per unit. Whenever there is availability in a unit for the conversion of an employee to a (3-4) schedule, employees shall be offered the (3-4) schedule by unit seniority. Nothing in this section shall prevent JHS, in its discretion, from exceeding the 50% per unit cap, or from offering (3-4) schedules to employees by unit seniority without declaration of a vacancy.

Effective upon ratification, any per diem or part-time employee who works a 3-3 schedule (72 hours) per pay period for six (6) consecutive months will be offered a full-time with benefits position in the same classification he/she has been working, subject to a six (6) month probationary period. Any per diem employee who averages twenty (20) hours per week or more for six (6) consecutive months will be offered a part-time position. Nothing

in this Article shall be construed to prevent an employee from requesting conversion from per-diem or part-time to full-time status, or from per diem to part-time status.

Every six (6) months, the Employer will send the Union a list of per diem and part-time employees and include their average hours worked per pay period for the last six (6) consecutive months.

## **SECTION 2. OVERTIME**

- A. It shall not be the general policy of the Employer to have its employees work frequent or consistent overtime. However, when non-job basis employees are required to work approved overtime, in addition to their regular hours, they shall be compensated.
- B. Effective March 1, 2012, work authorized to be performed in excess of forty (40) hours per week shall be paid at the rate of time and one-half of the normal rate of pay.
- C. For purposes of interpretation, all hours in pay status shall be considered hours worked except for unplanned personal leave days. However, employees covered by the bargaining unit may receive overtime payment for hours worked in excess of any forty (40) hour work week which includes the equivalent hours of one (1) planned personal leave day taken within any week (the exception being Thanksgiving week when the equivalent hours of two (2) personal leave days may be taken). These hours shall include use of "voluntary early out" personal leave when an employee agrees to leave early at the request of Management and/or usage of partial planned personal leave days up to the equivalent of an employee's regular scheduled shift.
- D. An employee shall not have the regular work schedule changed solely to avoid payment of overtime. This Article is intended to be construed only on the basis of overtime and shall not be construed as a guarantee of work per day or per week.
- E. In any situation requiring overtime, volunteers will be sought before the overtime is assigned. In the event that sufficient volunteers are not obtained, overtime will be assigned on a rotational basis.
- F. Except when demonstrated to be more expensive, overtime will be offered before any agency or TR nurses are utilized.

## **SECTION 3. WORK WEEK**

The work week shall begin on a Sunday and end on a Saturday.

## **SECTION 4. TIME SCHEDULES**

Every effort shall be made to post time schedules four (4) weeks immediately preceding their effective date. Established schedules may be amended at any time by mutual agreement of the nurses involved with the consent of the appropriate supervisor.

## **SECTION 5. HOURS OF WORK AND OVERTIME**

- A. Nurses working five (5) days per week schedule will not be scheduled for more than six (6) consecutive days without prior consent of the nurse. Nurses working compressed schedules will not be scheduled for more than three (3) consecutive days without prior consent of the nurse.
- B. The Employer will make every possible effort to provide nurses every other or two weekends off per time sheet schedule. Weekends are defined as Saturdays and Sundays for day and evening shift and as Friday and Saturday nights for night shift employees. To meet this provision and to cover weekends normally worked during vacations, periods of illness, and other unavoidable absences, the Employer will make every effort to utilize flexible alternatives, such as: seek volunteers for overtime, utilize combination shifts (e.g. 2-8's, 2-12's), part-time, per diem and pool employees. If staffing standards cannot be met through the use of volunteers, the Employer may assign extra weekend work on a rotating basis. If any nurse does not desire every other weekend off or desires set days each week, the nurse should make this request in writing the person responsible for the time schedule. While every possible effort will be made to adhere to paragraphs A and B, it is understood and agreed that patient care needs will be the paramount consideration in work scheduling.
- C. No employee shall be denied vacation because such time begins, ends or includes a weekend(s) on which he/she is scheduled to work.

No employee shall be required to make up a weekend which occurred during an approved vacation, leave, or illness. It is understood, however, that additional weekends may be scheduled under the following conditions:

- 1. When a pattern of unplanned leave abuse is demonstrated, or
- 2. To ensure that weekend work is distributed equitably over the period of a year.

## **SECTION 6. ALTERNATIVE SCHEDULES**

Nursing units will have flexibility to adopt different work schedules according to their needs and demands with the approval of the Director of Patient Care

Services or Administrator in consultation with Employee/Labor Relations and notification to the Union as provided under Article V, Section 2.

Any nurse who has researched different systems of scheduling should present the system to the Clinical Nursing Practice Committee and the Quality Nursing and Career Development Committee.

If an alternate scheduling system has been in effect on a unit in excess of twelve (12) months, the Employer will notify the Union of any pending change as provided under Article V, Section 2.

No change will be instituted to the alternate schedule for at least six (6) weeks unless an emergency situation exists.

### **SECTION 7. ROTATING SHIFTS**

Where rotating shifts are required, those responsible for making work schedules will assign shift rotation on an equitable basis. Individual requests for evening and night shift assignment may continue to be approved.

- A. The Employer will make every effort to avoid asking nurses regularly assigned to 3-11 or night shift to rotate to another shift.
- B. Every effort will be made to refrain from rotating nurses to evening or night shift immediately preceding their weekend off.

### **SECTION 8. CONSECUTIVE SHIFTS**

No nurse will be scheduled for more than two (2) different shifts in any one (1) work week unless the nurse gives consent.

Nurses will not be required to work consecutive shifts except in emergency conditions. There will normally be at least a minimum of an eleven and one-half (11 ½) hour break between work shifts except in emergency circumstances. For purposes of this section only, staffing deficiencies which cannot be reasonably anticipated by the Employer shall be considered as emergency circumstances.

### **SECTION 9. FLEXIBLE HOURS FOR HIGHER DEGREE EDUCATION**

The Employer will make every effort to schedule employees working toward a higher degree in accordance with requests made in order for the employee to attend classes. Requests for leave will be granted based on the date of request.

### **SECTION 10. PUBLIC HOLIDAYS**

Nurses assigned to facilities or units that are closed on public holidays shall have the option either to take the day of the holiday off, or to work in other

areas of the bargaining unit if such work is available. Nurses who opt to work the day in question shall not have a Personal Leave day deducted from their paid leave account.

The national holiday referred to as Juneteenth, which takes place on June 19th, is recognized as a holiday by the Trust. Employees who are granted time off for this holiday will have a Personal Leave day deducted from their paid leave account. In any given year, in the event June 19th falls on a Saturday, it will be observed on the Friday before; and if it falls on a Sunday it will be observed on the next Monday.

## **SECTION 11. DAYLIGHT SAVINGS TIME**

Employees who work during the change to Daylight Savings Time will be compensated for their normal shift.

# **ARTICLE XI - SALARIES**

## **SECTION 1. PAY DAY**

The Employer shall make a good faith effort to include relevant data such as accrued leave time and itemized deduction on each pay statement.

- A. Pay day shall be every other Friday. Paychecks may be picked up in division offices as soon as available. Every effort will be made to make such checks available to those nurses on the 3:00 p.m.-11:30 p.m. and 11:00 p.m.-7:30 a.m. shifts after 9:30 p.m. on Thursday and prior to the end of their shift.
- B. If a holiday is on Friday, pay shall be given on Thursday.
- C. The Employer will provide for direct deposit of pay checks in any banks and credit unions upon proper application from individual nurses who wish it. Nurses shall be informed as to the procedures for proper application.

## **SECTION 2. PAYCHECK ERRORS**

In the event of an error in the pay check in the amount of one hundred dollars (\$100.00) or greater, a voucher in the corrected amount shall be made available to the employee within three (3) business days after pay day from the date the error is reported to the Payroll Department or from discovery of the error by management. For paycheck errors of less than one hundred dollars (\$100.00), the amount will be made available to the employee in the pay period following the report/discovery of the error.

## **SECTION 3. SALARY INCREASES**

- A. First Year 2023-2024

Effective upon ratification, or on October 1, 2023, whichever comes first, all full-time and part-time status bargaining unit employees shall

receive an eight (8) percent wage adjustment, inclusive of a Cost of Living Adjustment (COLA).

B. Second Year 2024-2025

The parties agree to resume bargaining no later than June 1, 2024 for the sole purpose of negotiating a Cost of Living Adjustment (COLA), Clinical Nursing Ladder, and Medical – Surgical Staffing ratios at Jackson Memorial Hospital.

C. Third Year 2025-2026

The parties agree to resume bargaining no later than June 1, 2025 for the sole purpose of negotiating a Cost of Living Adjustment (COLA).

D. Eligible nurses, upon signing a two (2) year commitment agreement to the Neonatal Pediatric Transport Team, will receive a one-step increase. This step shall be removed if the nurse leaves the Neonatal Pediatric Transport Team.

E. ARNPs and other employees designated as lead workers by management shall receive a one-step pay increase until the lead worker designation is removed.

F. Nurses performing the duties of the Neonatal Pediatric Transport Coordinator and the Pediatric Cardio Thoracic Liaison Case Manager will receive a one-step increase for 24-hour, 7-day per week responsibilities providing the nurse is not already receiving it. The step will be removed if the nurse is no longer performing the duty.

G. The Associate Nurse Manager, Advanced Registered Nurse Practitioner and Nurse Manager will be paid a one-step increase for working in Corrections Health Services, providing the nurse is not already receiving it. The step will be removed if the nurse is no longer working in Corrections.

H. All full-time and part-time bargaining unit members will be paid a one-step increase for working at the Behavioral Health hospital and/or Behavioral Health inpatient unit at Jackson South, providing the employee is not already receiving it. The step will be removed if the employee is no longer working at, or floats out of the Behavioral Health hospital or the Behavioral Health inpatient unit at Jackson South.

I. The Nurse Anesthetist (job code: 1158) step schedule will be revised where Step 2 of the step schedule shall become Step 1. The pay plan will remain the same number of steps. Full-time and Part-time Employees shall remain on their current numerical step at the new hourly rate assigned to that step.

- J. Time served is defined as taking the number of years an employee has been on their current step, and advancing them through the new step schedule as if it were in existence from the time the employee first went into their current step number. Bargaining unit members will be credited with time served in their current step toward advancement on the amended step schedules.

The Employer agrees that there shall be no selective wage adjustments for any classifications covered by this Agreement, other than those specified, unless it shall first meet and negotiate with the Union concerning the amount of such adjustments and the reasons therefore.

- K. Effective upon ratification, or on October 1, 2023, whichever comes first, all full-time and part-time status bargaining unit employees in the following classifications shall receive a one (1%) percent market adjustment; all CSNs, Associate Nurse Managers, Nurse Educators, Vascular Access Specialists, and Nurse Managers.
- L. Effective October 1, 2023, the step schedules for all CSNs, Associate Nurse Managers, Nurse Educators, Vascular Access Specialists, and nurse Managers shall be revised where Step 2 shall become the new Step 1. The pay plans will remain the same number of steps. Employees shall remain on their current numerical step at the new hourly rate assigned to that step. All steps shall be a minimum of 4.2% between all steps.

#### **SECTION 4. STEP PROGRESSION**

Effective upon ratification or on October 1, 2023, whichever is earlier, progression through steps shall be modified as described in this Section. In implementing these provisions, employees, shall be credited toward advancement on the current step schedules based on the progress as indicated. Employees who have met the new progression schedule at ratification will receive a new anniversary date following the new step movement.

- A. The progression through steps and Longevity steps is listed in Appendix C of the “Step Progression Chart”, with the exception of those classifications listed in Section 4(D). The last two steps on all salary ranges are Longevity steps, progression through which will take thirty-six (36) months.

When there are eight (8) or fewer steps, progression up to the last two (2) Longevity steps will be every twelve (12) months.

When there are more than eight (8) steps but fewer than seventeen (17) steps, progression through steps 1 through 6 will be every twelve (12) months, thereafter progression up to the last two (2) Longevity steps will be every twenty-four (24) months.

An employee will advance through the new pay scale on their anniversary date provided they are step eligible. An employee is step eligible if they have satisfactory performance evaluations (i.e. met standards) and worked the requisite number of months/hours toward the next step as outlined in Appendix C.

- B. There are seventeen (17) steps in the Clinical Staff Nurse, Clinical Staff Nurse – Float Pool, Clinical Staff Nurse CHS, Clinical Staff Nurse CVTX, Clinical Staff Nurse Neuro, Clinical Staff Nurse Cath Lab/ Interventional Radiology, Clinical Staff Nurse OR & L&D, and Vascular Access Specialist classifications. Advancement in these steps is as follows:

Step 1 to step 2.....	12 months
Step 2 to step 3.....	12 months
Step 3 to step 4.....	12 months
Step 4 to step 5.....	12 months
Step 5 to step 6.....	12 months
Step 6 to step 7.....	12 months
Step 7 to step 8.....	12 months
Step 8 to step 9.....	12 months
Step 9 to step 10.....	12 months
Step 10 to step 11.....	24 months
Step 11 to step 12.....	24 months
Step 12 to step 13.....	24 months
Step 13 to step 14.....	24 months
Step 14 to step 15.....	24 months
Step 15 to step 16.....	36 months
Step 16 to step 17.....	36 months

There will be a minimum of 4.2% between all steps.

- D. Employees in this Unit are also eligible for the “Special Recognition Increase” program under the provisions established by the Employer for such a program.
- E. Part-time nurses are eligible for step increases based on 2080 hours worked and satisfactory performance evaluations (that is, evaluations which meet standards).
- F. A change in classification status does not alter a nurse’s anniversary date for purpose of accrual of leave benefits. A nurse who is promoted will have his/her anniversary date changed to the date of promotion for

purposes of receiving annual step increases in the new classification, except that a nurse who is promoted within thirty (30) days of his/her step increase anniversary date will receive both his/her step increase and then promotional increase.

## **SECTION 5. SHIFT DIFFERENTIAL AND WEEKEND DEFERENTIAL**

The Employer agrees to pay a shift differential on the night shift (11:00 p.m. - 7:30 a.m.) and on the evening shift (3:00 p.m. - 11:30 p.m.). Employees on regular assigned shifts which qualify for differentials under this section who are temporarily assigned by the Employer to the day shift for education or work assignment, shall continue to receive the differential they normally receive. Employees who work the evening or night shift who request to work the day shift temporarily will not receive shift differential.

Shift differentials shall be paid in accordance with the following guidelines:

- A. The shift differential rates shall be

Evening \$4.00/hour  
Night \$6.00/hour

- B. For employees hired before October 1, 1994, the shift differential shall be frozen at the dollar amount the employee would have received as a shift differential during the pay period immediately preceding October 1, 1994, or the above shift differential, whichever is higher. Shift differential will be paid for all hours worked after 3:00 p.m. The Employer will pay the appropriate differential for all hours worked on an evening or night shift. Registered Nurses working the twelve and a half-hour night shift will receive the night shift differential for the entire shift.

Shift differential will not be paid for hours worked on a day shift and which end prior to 5:00 p.m.

- C. Nurses who work weekends will be paid two dollars and seventy-five cents (\$2.75) and hour for hours worked between 7:00 p.m. Friday and 7:30 a.m. Monday providing the nurse's shift begins at 7:00 p.m. or later on Friday.
- D. This weekend shift differential will be paid only for actual hours worked in addition to the shift differential. It does not apply to payment for leave of any type.

## **SECTION 6. MAIN CAMPUS IN-PATIENT DIFFERENTIAL**

An additional one dollar and twenty-five cents (\$1.25) an hour will be paid for all selected nurses working in an in-patient unit at Jackson Memorial

Hospital. This includes the Emergency Care Center, Holtz Women's and Children's and Mental Health Hospital Center. This differential will be paid to Clinical Staff Nurses, Nurse Educators, Associate Nurse Managers, Nurse Managers, Certified Nurse Midwives, Advances Registered Nurse Practitioners and Certified Registered Nurse Anesthetists, and Registered Nurse First Assist or any other classification where the nurse is working in an in-patient unit at Jackson Memorial Hospital. (See attached lists of units excluded from this differential in Appendix B).

## **SECTION 7. ON-CALL PAY**

- A. The Employer will continue to pay on-call to those employees receiving such pay as of the date of this Agreement. The per hour pay rate shall be five dollars and fifty cents (\$5.50) on weekdays and six dollars and fifty cents (\$6.50) per hour on Saturdays, Sundays and holidays.
- B. Employees who are called in from on-call status, after having left the Employer's facility at the conclusion of a work day, shall receive a minimum of four (4) hours pay at the applicable rate.
- C. The parties agree to meet to discuss guidelines and policies regarding on-call provisions, if either party requests it. Hourly employees who are designated as on call and are not required to come into the hospital, but are required to resolve issues by telephone or computer, by their respective management or designee, shall be paid the appropriate hourly rate in 15 minute intervals and provide evidence for payroll as required by the employer. The proper form must be submitted to payroll timely for the respective payroll period. In the event that the employee is called back to work and receives call back pay, in no event will he/she receive pay for time spent on the telephone or computer.
- D. Salaried Employees On-call/Standby pay: Salaried employees who are designated as on-call and are not required to come into the hospital by their respective manager or designee, but are required to resolve issues by telephone or computer, shall be paid the appropriate hourly rate in fifteen (15) minute intervals, and shall provide evidence submitted to payroll timely for the respective payroll period. However, no Employee performing on-call/standby duties will earn less than he/she is currently receiving.
- E. Any employee who is required to travel and/or float from one facility to another while on the clock will be reimbursed for their mileage at the federal reimbursement rate for the travel from one facility to the other.

## **SECTION 8. CALL-IN PAY**

Employees who are not on-call but are called back to work after having left the Employer's facility at the conclusion of a work day, or who are called

back to work on a day on which they are not scheduled to work, shall receive a minimum of four (4) hours pay at the applicable rate. Mandatory work-related activities, such as meetings, court appearances and depositions, shall be counted as “work” under this section. Call-in Pay does not apply however, if employees are called to report early for their regular shift, or are on on-call status.

## **SECTION 9. UNIFORM ALLOWANCE**

All nurses in the bargaining unit shall receive a uniform allowance of \$125.00 per year.

A uniform allowance will be paid once per year in the month of January to all bargaining unit employees on the payroll at time of payment.

## **SECTION 10. PER DIEM NURSE RATES**

The Per Diem Clinical Staff Nurse Rates are as follows:

Thirty (30) months or less:	\$37.00/hour
More than thirty (30) months	\$40.00/hours

Per Diem Clinic Staff Nurses who commit to seven (7) twelve (12) hour shifts per month, or its equivalent, which include one (1) holiday shift other than New Year’s Eve or Christmas and two (2) weekend shifts, shall receive \$1.00/hour more added to their rate.

All other Per Diem Nurses will be required to work a minimum of three (3) shifts per month.

The per diem rates for the following classifications will be increased to the following hourly rate.

- APRN (all titles) \$60.00/hour
- Case Manager, RN \$45.00/hour
- Nurse Midwife \$60.00/hour
- Vascular Access Specialist \$40.00/hour

Current or former JHS employees with greater than seven (7) years of service will be offered a “meet or beat” Per Diem rate: either their base rate of pay upon separation from JHS or the tier corresponding to their years of experience referenced above (whichever is greater).

Per Diem Nurses may elect to participate in the on-call rotation on any unit where s/he is competent.

The Per Diem Nurse will be responsible for the maintenance of all requirements, credentials and competencies necessary for continued

employment in her/his area of specialty. All Per Diem Nurses will have access to Jackson’s classes.

Per Diem Nurses who work weekends will be paid two dollars and seventy-five cents (\$2.75) an hour for hours worked between 7:00 p.m. Friday and 7:30 a.m. Monday providing the nurse’s shift begins at 7:00 p.m. or later on Friday.

Per Diem Nurses shall be paid time and a half (1½) for all hours worked on a holiday.

Job Basis Nurses, excluding Nurse Managers who work additional shifts as Clinical Staff Nurses shall be compensated according to the Per Diem rates referenced above based on experience or their base rate whichever is greater.

Upon mutual agreement, the parties may re-open negotiations on these wages at any time.

### SECTION 11. TOTAL REWARDS BENEFIT OPTION PLAN

All full-time bargaining unit members will have the option to participate in the Total Rewards Benefit Option Plan that allows employees to forgo certain benefits in exchange for a pay supplement. The following are the eligible benefits and dollar amounts of the annual pay supplements for each eligible benefit in the Total rewards Benefit Option.

**Total Rewards Benefit Option Plan**

Benefit Options	Dollar Amount of Annual Pay Supplement
<b>Health Insurance</b> Jackson First Jackson Select Jackson POS	\$5,850.00
<b>Dental Insurance</b> Delta PPO Delta HMO	\$400
Paid Time Off (includes PL & Extended Illness) 12 PTO days to be used as needed	8% of the employee’s annual base salary
<b>Life Insurance</b> Basic Survivor Benefits	\$550

1. Pay supplements will be paid out in equal portions per applicable elections over 26 pay periods commencing on the first pay period of the calendar year, For employees who elect their benefits outside of the open enrollment period event, the pay supplement will be prorated

and paid out in equal portions based on the date of commencement of their benefit period. The maximum pay supplement value is up to 20% of base salary,

2. Bargaining unit members who elect to forgo their Paid Time Off for the calendar year will receive twelve (12) days of Paid Time Off to be used for personal leave, for that calendar year. Unused days cannot be rolled over or cashed out after the corresponding calendar year.
3. Bargaining unit members who select to forgo their Paid Time Off for the calendar year who have Personal Leave hours in their Personal Leave bank that they accrued in previous years may take up to eight (80) hours of Personal Leave time during the elected calendar year, if approved by their manager.
4. Bargaining unit members who select to forego their Paid Time Off for the calendar year are eligible to elect to cash out their Personal Leave as per the language in the collective bargaining unit.
5. In order to be eligible for a pay supplement, bargaining unit members who are electing to forgo their health insurance must attest and show proof of insurance elsewhere, during the period that they will not be covered by one of the Jackson Health System insurance plans.
6. In order to participate in the Total Rewards Benefit Option plan, employees must complete the required enrollment documentation and timely renew their elections during each enrollment period.
7. This program will be effective January 1, 2024, and will sunset at the end of this Agreement, unless both parties mutually agree to continue the program.

## **ARTICLE XII - PAID EDUCATIONAL LEAVE**

### **SECTION 1. ELIGIBILITY CRITERIA**

Every effort will be made to provide a reasonable amount of leave with pay each year to attend courses, institutes, workshops or other educational activities in accordance with the following criteria:

- A. Educational leave days will be used at the employee's discretion after receiving proper approval. Leave under this article is exclusive of mandatory education requirements.
- B. The nurse applies in advance in writing specifying the course, institute, workshop or class the nurse wishes to attend.
- C. The nurse obtains permission from the Director of Nursing or designee to attend.

- D. Such leave does not interfere with staffing.
- E. Requests for leave will be granted based on date of request.
- F. Employees working eight (8) hour shifts will get twenty-four (24) hours; those working twelve (12) hour shifts, thirty-six (36) hours; those working ten (10) hour shifts, thirty (30) hours yearly; and weekend schedule employees (Article XIV) will get thirty-six (36) hours of leave yearly under this provision. In the case of ARNP's, Nurse Midwives and CRNA's, employees working eight (8) hour shifts will get thirty-two (32) hours yearly; those working twelve (12) hour shifts, forty-eight (48) hours yearly; those working ten (10) hour shifts, forty (40) hours yearly.
- G. Hours spent in reeducation programs which qualify for contact hours conducted by the Employer shall count toward the number of hours of leave available under this article. If an employee who enters a reeducation program has already used his/her educational leave for the year, the appropriate number of days of leave will be deducted from the leave the employee would otherwise have been entitled to receive in the following year.

## **SECTION 2. CLINICAL CERTIFICATION**

The cost of one National clinical certification exam related to the employee's area of practice will be reimbursed following successful completion.

## **SECTION 3. FINANCIAL AID**

Nurses may continue to apply for financial aid to cover tuition, registration and travel to such seminars. Applications shall receive a timely reply.

## **SECTION 4. STAFF DEVELOPMENT PROGRAMS**

It is understood that courses offered by the Employer in special areas of practice will be continued for nurses working in, or scheduled to work in, a specialty area as part of Staff Development Programs. These educational programs will be posted on the bulletin boards and any nurse may apply. These requests will be granted as patient care permits.

## **SECTION 5. IN-SERVICE AND CAREER DEVELOPMENT PROGRAM**

Employees shall be compensated for all time spent in required in-service training programs. Every reasonable effort will be made so bargaining unit employees will be given sufficient time to complete all mandatory education requirements during work hours, in their work areas, and free of a patient assignment.

## ARTICLE XIII - VACATION AND LEAVE

The Employer provides a certain number of paid hours per year to be used for rest, relaxation, vacation, sickness, bereavement, and other personal needs. Nurses in the bargaining unit employed by the PHT will receive personal leave hours in lieu of annual leave hours, sick leave hours, and holidays.

### SECTION 1. PERSONAL LEAVE DAY PROGRAM

Paid personal leave hours are provided under the Personal Leave Plan to cover time off from work that is planned and/or unplanned. All paid personal leave must be approved by the employee's department head, supervisor, or other designee.

- A. A planned absence from work is defined as time off, requested and approved at least twenty-four (24) hours in advance by the employee's department head, supervisor, or other person designated to approve time off.
  - 1) Except as provided in Section 3, paragraph 1 of this Article, requests for planned personal leave of more than three (3) days shall be submitted at least forty (40) days in advance unless extenuating circumstances give rise to the need to submit requests within a shorter time frame.
  - 2) Requests for planned personal leave shall be approved based upon staffing needs and to insure proper and adequate patient care. Except as provided in Section 3 herein, requests for leave will be granted based on date of request.
- B. An unplanned absence is defined as time taken off by the employee which is unscheduled and not approved in advance by the department head, supervisor, or other designee. In order to receive pay for hours not worked due to an unplanned absence, employees must provide timely notification prior to the start of the scheduled shift of work and a valid reason given to their supervisor or authorized designee as outlined in the Personnel Administrative Policy #358. Written documentation of illness will not be required unless a pattern of unplanned leave utilization exists. Personal leave hours accrue from date of hire.
- C. Full-time employees are eligible for paid personal leave hours after the completion of six (6) months of continuous service or, in the case of part-time employees, after six (6) months equivalent of service (1040 hours).

New full-time employees may take up to a maximum of forty (40) hours of paid planned personal leave during the first six (6) months

of employment. However, the number of hours taken will be deducted from the total amount of hours accrued after the employee completes six (6) months of continuous service or its equivalent. Should the employee resign or be terminated prior to the end of the first six (6) months, the dollar equivalent of the number of hours taken will be deducted from the employee's final paycheck.

D. Full-time employees shall earn paid personal leave hours as follows:

- 1) During the first five (5) years of employment, 0.1115 hours shall be earned for each hour in pay status per pay period up to a maximum of 8.920 hours (80 hours or more in pay status). This approximates twenty-nine (29) days per year. However, a full-time employee shall not be eligible to receive payment for personal leave days until after the first six (6) months of employment, except as outlined in Section 2.

The yearly accrual of twenty-nine (29) personal leave days includes ten (10) vacation days, thirteen (13) holidays, and six(6) sick days, all of which are accrued incrementally over the course of the year as indicated above. Accordingly, employees who work a paid holiday receive pay for actual hours worked plus personal leave accrual for the holiday.

- 2) In order to recognize longevity of service, employees with more than five (5) years of continuous service shall earn personal leave hours as follows:

3)

Year of Employment	Per Hr in Pay Status	Max. Hours Earned per pay period	Equivalent Day* Earned Per Year
6th	.1154	9.232	30
7th	.1192	9.536	31
8th	.1231	9.848	32
9th	.1269	10.152	33
10th – 15th	.1308	10.464	34
16th	.1346	10.768	35
17th	.1385	11.080	36
18th	.1423	11.384	37
19th	.1462	11.696	38
20th on	.1500	12.000	39

\*Calculations are based on 8-hour shifts.

- A. Part-time employees shall earn personal leave hours based on actual hours worked:

- 1) During the first 1 400 hours (first five (5) full-year equivalents, FTE), 0.115 hours shall be earned for every hour worked, up to a maximum accrual rate of 8.920 hours. However, part-time employees shall not be eligible to receive payment for personal leave until they have worked at least 1040 hours (six (6) month equivalent).
- 2) Employees who have worked more than five (5) full-year equivalents shall earn paid personal leave hours as follows:

10, 401-12480.....	1154
12, 48 -114, 560 .....	1192
14, 561-16,640 .....	1231
16, 641 – 18, 720 .....	1269
18,721 – 31, 200 .....	1308
31, 201 – 33, 280 .....	1346
33, 281 – 35, 360 .....	1385
35, 361 - 37,440.....	1423
37,441 – 39, 520 .....	1462
39,521 on .....	1500

B. Personal Leave hours shall be paid at the employee’s regular shift rate of pay. Personal leave hours may be accumulated up to a maximum of five-hundred (500) hours.

C. Personal leave hours shall be used during the first three (3) consecutive scheduled workdays (to maximum of twenty-four (24) hours) of any spell of illness. After 3 years, 16 hours of personal leave are used for illness and after 10 years, 8 hours of personal leave are used; these personal leave hours shall be defined as unplanned absences. If sufficient personal leave hours are not available to cover a spell of illness, any uncovered portion shall be without pay, until the benefits of the extended illness leave plan are in effect.

D. Personal Leave/Vacation Accrual

- 1) Employees who have at least 80 hours of unused Personal Leave/Vacation as of the election date (from December 1 through December 21) of any calendar year (the “Election Year”) may voluntarily elect to receive cash instead of 20 to 80 hours (for employees with less than 10 years of continuous service) or up to 120 hours (for

employees with 10 years or more of continuous service) total for the year, but for no more hours than they may accrue in the next calendar year (the “Accrual Year”). The election must be made in increments of one hour. Based on the employee’s request, cash-out payments will be distributed in the last paycheck in June and/or December of the Accrual Year.

- 2) An election to cash-out Personal Leave/Vacation hours that may accrue in the Accrual Year must be made before the beginning of the Accrual Year from December 1 through December 21 of the Election Year.
- 3) The employee must take the election to cash-out Personal Leave/vacation hours that he or she will accrue in the Accrual year in writing, on a cash-out election form provided by Jackson Health. The election must state the number of Personal Leave/Vacation hours to be cashed out.
- 4) All elections are irrevocable once made. Employees cannot increase or decrease the number of Personal Leave/Vacation hours they will cash out in the Accrual Year after December 21 of the Election Year.
- 5) Payment of cash-out hours will be made in the last pay period of the June and/or December of the Accrual Year at the rate of pay at the time of payment. Upon employment separation for any reason before the end of the Accrual year, all accrued personal leave hours, including hours designated as cash out, shall be paid out in accordance with Section I., below.
- 6) During the accrual year, accrued time shall be allocated on a pro rata basis between cash out and Personal Leave/Vacation time on the same percentage basis as the cash out amount is to the potential maximum accrual. (Example: If an employee elects to cash out 80 hours and is entitled to accrue a maximum of 240 hours in the accrual year, personal leave accruals shall be allocated 33.33% toward cash out and 66.67% toward the leave balance).

- 7) Elections to cash out leave must be made on a tax (calendar) year basis.
- 8) Employees are solely responsible for assuring appropriate leave balances for their personal needs. An employee will be without pay (out of pay status) if appropriate leave balances or other sources of payment or leave are not applicable.

E. Upon separation of employment, the employee shall be eligible for payment of accrued personal leave account hours.

- 1) To qualify for a 100% terminal benefit from the personal leave account, a minimum of six (6) months of continuous employment (or its equivalent for part-time employees) must be completed. Further, for job basis employees a minimum of four weeks advance notice of voluntary resignation must be given and two weeks for hourly paid employees, unless extenuating circumstances warrant a shorter time frame.
- 2) An employee who has been discharged after a minimum of six (6) months of continuous employment shall be paid 100% of terminal benefits.
- 3) Terminal leave benefit for accrued personal leave account shall be paid at the employee's base rate.

#### F. Christmas & New Year Holiday Requests

Upon separation of employment, the employee shall be eligible for payment of accrued personal leave account hours.

If staffing requires, each employee will be expected to work one or the other of the two holidays in all units that are open during these holidays.

These holiday requests are unique. Requests for time off during the two pay periods around Christmas will be granted fairly and rotationally regardless of seniority or timing of request. No one person will be eligible to receive more than one week off at the expense of other employees not receiving time off, thus allowing everyone to get a week off if requested. Time off greater than one week not prohibited if logistically Christmas & New Year Holiday Requests possible. Departmental supervisors will begin this request process each fall by posting notice to their employees that requests are due. Adequate notice should be allotted to allow all employees time to submit requests per "Clairvia". Seniority will be used as a tie breaker if necessary.

Thanksgiving time off is also done fairly & rotationally.

## SECTION 2. EXTENDED ILLNESS LEAVE PROGRAM

In recognition of the employee's need for income protection against extended illness, an extended illness leave plan is established for each permanent employee. The number of hours earned and used by the employee shall be accounted for through the employee's extended illness leave account.

- A. To be eligible for payment of extended illness leave, the employee must fulfill the following requirements:
  - 1) A full-time employee shall have completed six (6) months of full-time employment.
  - 2) A part-time employee shall have accumulated 1040 hours worked.
  - 3) An employee shall give timely notice to the appropriate department head, supervisor, or other designee of the inability to report to work due to illness. The department head, supervisor, or other designee shall be kept informed on a daily basis (unless otherwise instructed by the supervisor) of the employee's physical condition and the expected date of return.
  - 4) A physician's certificate describing the disability and the inability to work may be required before approval will be given for payment of extended illness leave hours.
- B. A full-time employee shall accrue 0.024 hours extended illness leave for each hour in pay status per pay period up to a maximum of 1.850 hours per pay period, not to exceed forty-eight (48) hours per year.
- C. A part-time employee shall accrue 0.024 hours extended illness leave for every hour worked, up to a maximum of 1.850 hours per pay period, not to exceed forty-eight (48) hours per year.
- D. An unlimited number of days may be accumulated in the extended illness leave account.
- E. Extended illness leave shall be paid at the employee's regular shift rate of pay.
- F. Payment for extended illness leave for employees with less than three (3) years of service shall begin on the fourth (4) consecutive working day of a spell of illness. The first three (3) consecutive working days to a maximum of twenty-four (24) hours of illness shall be paid out of the personal leave account, if available. The three (3) working days, twenty-four (24) hour deductible will be waived for immediate family critical illness and an employee's illness requiring hospitalization.

After three (3) full years of employment, payment for extended illness shall begin on the third (3) consecutive working day or after sixteen (16) hours of a spell of illness. After ten (10) full years of employment, payment for extended illness shall begin on the second (2) consecutive working day or after eight (8) hours of a spell of illness.

Extended illness payment shall begin on the first scheduled working day of the illness under the following conditions:

- 1) Any illness requiring hospitalization, or
- 2) Employee is seen in out-patient care center for out-patient surgery, or
- 3) Occupational diseases or injuries sustained prior to receiving Workers Compensation, or
- 4) Continuing illness when employee attempts to return to work too soon. G. For critical illness in the immediate family, an employee is entitled to five (5) days paid extended illness leave per leave year.

Effective upon ratification, employees hired prior to October 1, 2017, Employees with less than thirty (30) years full-time PHT/ County employment who retire or resign from the PHT will be eligible to receive payment for up to a maximum of 1,000 hours of accrued extended illness leave at the employee's current rate of pay at time of separation, excluding any shift differential, prorated in accordance with the following schedule:

Less than 10 years .....	No Payment
10 yrs. but less than 11 yrs. ....	25%
11 yrs. but less than 12 yrs. ....	30%
12 yrs. but less than 13 yrs. ....	35%
13 yrs. but less than 14 yrs. ....	40%
14 yrs. but less than 15 yrs. ....	45%
15 yrs. but less than 16 yrs. ....	50%
16 yrs. but less than 17 yrs. ....	55%
17 yrs. but less than 18 yrs. ....	60%
18 yrs. but less than 19 yrs. ....	65%
19 yrs. but less than 20 yrs. ....	70%
20 yrs. but less than 21 yrs. ....	75%
21 yrs. but less than 22 yrs. ....	77.5%
22 yrs. but less than 23 yrs. ....	80%
23 yrs. but less than 24 yrs. ....	82.5%
24 yrs. but less than 25 yrs. ....	85%
25 yrs. but less than 26 yrs. ....	87.5%
26 yrs. but less than 27 yrs. ....	90%

27 yrs. but less than 28 yrs. ....	92.5%
28 yrs. but less than 29 yrs. ....	95%
29 yrs. but less than 30 yrs. ....	97.5%

Effective upon ratification, employees hired prior to October 1, 2017, who retire after 30 years of full-time PHT/County employment, will be eligible to receive 100% payment of their full balance of accrued extended illness leave. Such payment will be made at the employee’s current rate of pay at the time of retirement, excluding any shift differential and will not be subject to any maximum number of hours.

Effective upon ratification, employees hired after September 30, 2017, will accrue extended illness hours in accordance with this Section, but shall not be eligible to receive payment for any accrued extended illness hours upon separation.

**SECTION 3. VACATION REQUESTS**

**A. Annual Vacation Scheduling Procedure**

The annual vacation leave period will be January through December. The vacation scheduling procedure shall be as follows:

- 1) Leave request forms will be distributed with a sample copy of the upcoming year’s vacation calendar by October 1st.
- 2) Leave request forms shall be returned by employees by November 1st.
- 3) Annual vacation calendars will be published and posted by December 1st.
- 4) Employees may request any two vacation periods, designating them as “first plan” and “second plan.” Although eighty (80) hour blocks of vacation are preferable for scheduling convenience, intermittent vacation (in periods of 8 hours or more each) may be scheduled.
- 5) Employees will be granted one hundred and sixty (160) hours of vacation yearly based on this vacation scheduling procedure. Every possible effort will be made to accommodate a longer period of time if requested by the employee.
- 6) Vacation periods will be scheduled by unit seniority for the first one hundred and sixty (160) hours of each employee’s vacation schedule for the year. Remaining vacation will be scheduled on a “first come, first served” basis, based on patient care needs. All employees (except those who have not completed their

probationary period as of January 1st of the upcoming year), will be encouraged to schedule and take at least eighty (80) hours of vacation each calendar year.

- 7) Employees whose forms are not returned by November 1st will have vacation scheduled for the upcoming year on the “first come, first served” basis mentioned above.

#### B. Other Vacation Requests

At all other times during the vacation year, requests will be scheduled on a “first come first served” basis. Vacation requests should be submitted in advance of schedules being prepared and posted (typically 4-6 weeks prior to the requested day(s) off): however, vacation requests shall not be unreasonably denied. Response to vacation requests under this paragraph will be in writing, and will be provided to the employee no later than fourteen (14) calendar days after the date of submission. If the vacation request is not responded to within fourteen (14) days, the employee may escalate the request to the next level Supervisor. The next level Supervisor will make a final determination within seven (7) calendar days.

### **SECTION 4. LEAVE WITHOUT PAY**

- A. Permanent employees, with the approval of their department head, may be granted a leave of absence without pay for a period not to exceed one (1) year for sickness or disability, to engage in a course of study or other good and sufficient reason which is considered in the best interest of County service.
- B. Employees may be granted leave under this section to serve as full-time representatives of the Union or to enable them to take appointments in the exempt service.
- C. A leave of absence without pay for religious holidays may be granted by the department head.
- D. All requests for extensions of leaves without pay beyond one (1) year must be approved or disapproved by the department head and the director of Human Resources.
- E. Employees will be allowed to maintain forty (40) hours in their personal leave bank while on approved leave without pay.

### **SECTION 5. BEREAVEMENT LEAVE**

Full-time employees who have completed nine (9) pay periods of County/PHT service will be granted three (3) days of emergency bereavement leave

with pay in the event of a death in the immediate family. Immediate family is defined as the employee's spouse, and employee's or spouse's children, mother, father, sister, brother, grandfather or grandmother, son-in-law, daughter-in-law, or upon proof of any person in the general family whose ties would be normally considered immediate and living within the same household. For the purposes of this section "spouse" shall be understood to include a significant other living within the same household. Bereavement leave shall have no relationship to travel time or qualified use of any other leave time that may be due or useable by the employee.

## **SECTION 6. MILITARY LEAVE**

The Employer is governed by Federal and State law concerning military leave and all employees represented by this contract shall receive the benefits of such laws.

## **SECTION 7. VOTING**

The Employer agrees to allow each employee who meets the conditions set forth below reasonable time off with pay, not to exceed one (1) hour, to vote in each local and general election. Voting time will be scheduled in such a fashion as to not interfere with normal work production, however, the Employer shall attempt to schedule this time off at either the beginning or end of an employee's work shift. The location of the employee's precinct and the employee's work schedule shall be considered in scheduling time off. Whenever possible, scheduling of such voting time will be posted as early as ten (10) working days prior to the date of the election.

## **CONDITIONS**

- A. The employee must be a registered voter; and
- B. Must be scheduled for a shift of at least eight (8) hours duration on election day; and
- C. More than one-half (½) of the hours of the scheduled shift must be between 7:00 A.M. and 7:00 P.M. on election-day.

## **SECTION 8. JURY DUTY**

Employees who are called to serve on jury duty or to testify as witnesses under subpoena will be excused from work and will be paid their regular salary for the duration of this service. To be excused, employees should present official notice of jury duty or subpoena to their immediate supervisor.

An employee who is subpoenaed by a private party to a suit and testifies while being excused from duty with pay may accept a witness fee, but must turn it over to the hospital properly endorsed. However, jury fees shall be retained by the employee.

## **SECTION 9. ADMINISTRATIVE LEAVE**

The present policy regarding the granting of administrative leave for job basis nurses will be continued. This policy provides for the granting of four(4) personal administrative days (PAD) off with pay to job basis employees(not hour for hour) who have worked in excess of their normal work schedule. These four (4) PAD days are available October 1 of each fiscal year and must be used by September 30 of the same fiscal year.

Beginning October 1, 2017, the annual holiday administrative day will be discontinued.

## **SECTION 10. LEAVES FOR UNION BUSINESS**

- A. Leaves of absence without pay for periods not to exceed one (1) year shall be granted to the equivalent hours of up to nine (9) bargaining unit employees in order to accept positions with the Union. The Union shall make written application for such leaves thirty (30) days in advance, may not make application for more than one (1) FTE from any one (1) unit during the same period, and no more than one employee from the unit may be released at any given time. Employees granted such leaves shall continue to accrue bargaining unit seniority during the term of their leave. Employees returning before or at three (3) months shall return to their former unit and position. After three (3) but within twelve (12) months, employees shall return to a comparable position.
- B. Leaves of absence without pay for periods not to exceed one (1) week shall be granted to bargaining unit members to attend Union functions. The total number of person-weeks allowable under this paragraph shall not exceed ten (10) weeks per year. The Union shall make written application for such leaves sixty (60) days in advance. Employees granted such leaves shall continue to accrue bargaining unit seniority and, upon return, shall assume their former unit and position.
- C. Duly selected Union unit representatives and Officers shall be allowed leave with pay in order to attend Union training conferences. The total amount of leave with pay granted to employees under this paragraph shall not exceed fifty-five (55) working days in any calendar year. The Employer shall be given thirty (30) days' notice of any such training conferences together with a list of those attending. Employees granted such leaves shall continue to accrue bargaining unit seniority and, upon return, shall assume their former unit and position. Leaves granted under this paragraph (C) shall be counted as time worked for the purpose of calculating overtime pay.
- D. Leaves of absence/release time with pay shall be granted to Union representatives to perform Union roles and responsibilities. The total amount of this leave shall not exceed 300 days per calendar year.

Employees granted such leave shall continue to accrue bargaining unit seniority and, upon return, shall return to their former unit and position, if available. If the former position is eliminated, the employee will be returned to a comparable position within the PHT. The Union will provide the Employer with thirty (30) days' notice and will specify the length of release time.

- E. No more than one person from the same unit shall be released for more than thirty (30) days simultaneously, without mutual agreement.
- F. The Union President will be granted full time release from duty with full pay and benefits, including all benefits and compensation due under the SEIU/PHT contract and PHT policies and procedures.

#### **ARTICLE XIV - FULL-TIME WEEKEND SHIFTS**

The Employer may offer employees full-time weekend positions with such employees working twelve and one-half (12 1/2) hour shifts every Friday, Saturday, and Sunday, or Saturday, Sunday, and Monday, at the rate appropriate for their shift position and experience. These employees will be paid for forty (40) hours and will accrue and receive all benefits, and rights as full-time employees. Employees who work the weekend schedule are expected to do so for at least six (6) continuous months and on at least twenty-four (24) weekends. It is understood and agreed that applications for all full-time weekend positions shall initially be limited to RNs currently employed, and newly-hired RNs should not be oriented into these positions as long as there are qualified nurses who have applied for them.

The parties have agreed on the following guidelines for the full-time weekend shift:

- A. If an RN wishes to work the Modified Weekend Plan, the employee's request should be made in writing to the unit Nurse Manager.
- B. Request to work the Modified Weekend Plan will be approved based on the date the request is received by the Nurse Manager with seniority prevailing where date of application is equal.
- C. The availability of weekend shifts will be determined based on staffing and retention needs. Nurse requests to implement the full time weekend shift will not be unreasonably denied. Available positions will be offered and filled based on unit seniority.
- D. Both day and night shifts will be available. The numbers of RN's permitted to work the plan will be determined by the Director of Patient Care Services based on staffing needs.
- E. The plan has been advertised to recruit RN's. The RN will start working the plan upon final approval by the Director of Patient Care Services. The Nurse Manager and RN will note the start date on the time sheet.

- F. Any RN, who is currently working three 12-hour shifts on the same weekend shifts specified in the plan, will automatically be placed on the weekend plan as a full-time employee.
- G. The RNs will not be required to sign a contract. The Collective Bargaining Agreement language defines the time frame in which the RN is expected to work the Modified Weekend Plan.
- H. Trades not involving overtime may be allowed with approval of the Nurse Manager and indicated appropriately on the time card.
- I. Overtime will start after 36 hours. (The work week of the weekend plan employee).
- J. Educational hours may be taken at the RN's discretion upon approval by the appropriate supervisor.
- K. Nurse Educators will make arrangements for unit in-services. Staff meetings may be held on the weekend as determined by the supervisor.
- L. Nurses working the Modified Weekend Plan will only receive the weekend shift differential for hours worked between 7:00 a.m. on Saturday and 7:00 a.m. on Monday.
- M. If both holidays (Christmas and New Year's) fall on a weekend, the employee will receive one holiday off, upon request, providing staffing permits. If the holiday falls on the employee's day off, the employee will have the choice of taking the day off or volunteering to work.
- N. Employees will be subject to all applicable contract provisions, policies, procedures, practices, administrative orders and personnel rules unless specifically excluded.
- O. For purposes of payment and use of all leave time, the actual weekend shifts will be 13.3 hours for each of the weekend days/nights and 13.3 for the 3rd weekday or night shift.

## **ARTICLE XV - EMPLOYMENT PRACTICES**

### **SECTION 1. PROBATIONARY PERIODS**

The first six (6) months of full-time continuous employment shall be the probationary period. After successful completion of the probationary period, the nurse shall be considered a permanent employee unless specifically advised by the Employer. The Employer retains the right to terminate probationary nurses without notice or pay in lieu of notice. Probationary nurses are not required to give notice of intention to terminate. Probationary nurses are, however, requested to give two (2) weeks' notice. The probationary

period may be extended at the option of the Employer provided that the total probationary period may not exceed one (1) year, and the employee has agreed to the extension. The employee's agreement shall be in writing.

## **SECTION 2. LOUNGE AREAS**

Present lounge space will be maintained and the Employer agrees to provide adequate lounge space, or equivalent lounge space in all new facilities.

## **SECTION 3. WORK IN HIGHER CLASSIFICATION**

Any bargaining unit member temporarily assuming the duties of a higher position such as Charge Nurse or Associate Nurse Manager will receive three dollars (\$3) increase per hour above his/her regular hourly rate for a minimum of four (4) or more continuous hours worked in the higher position. Any bargaining unit member temporarily assuming the duties of a Preceptor will receive a two dollars and fifty cents (\$2.50) increase per hour for a minimum of four (4) or more continuous hours worked in this position.

Any nurse, except an Associate Nurse Manager, temporarily promoted to the "Acting Nurse Manager" status will receive a two (2) step pay increase above his/ her regular rate of pay for the entire period that he/she works in that status. The Associate Nurse Manager will be entitled to receive the two (2) step pay increase only when the assignment is for more than two (2) consecutive pay periods. If the assignment exceeds two pay periods, a PAM approved by the Division Director/Vice President must be submitted to Human Resources. The Acting Nurse Manager will be a job basis employee and will not be entitled to overtime pay. Any nurse temporarily promoted to an Acting Nurse Manager will not lose his/her shift differential.

## **SECTION 4. CLASSIFICATION APPEAL**

- A. Whenever an employee feels there is just cause to appeal a classification, the employee may apply for a review of the classification in writing to the immediate supervisor.
- B. Such a request, including a job description prepared by the employee shall be forwarded to their Chief Nursing Officer by the employee's supervisor.
- C. Within fifteen (15) working days of receipt of request, a meeting will be convened between the Chief Nursing Officer or designee and the Employee and the employee's representative.
- D. Within thirty (30) working days of such receipt for request of reclassification, the Senior Vice President/Chief Nursing Executive or designee shall render a decision.

- E. If the employee is not satisfied with the decision, the employee may within ten (10) working days request a hearing by the director of Human Resources. At the hearing, the employee may be accompanied by a representative of the employee's choosing and may produce any documents and evidence to support the claim for reclassification. The director of Human Resources will explain the basis for the decision in the event the request is denied. The director of Human Resources shall hold such hearing within thirty (30) days of request.
- F. The director of Human Resources' decision shall be rendered within thirty (30) days and shall be final subject to review by the President of the Public Health Trust. In the event the request for reclassification is upheld, the employee shall receive appropriate compensation beginning with the pay period that the original request was initiated in writing. For purposes of this Article, employees relieving for vacation, short-term illness and emergency leaves of absence will not be eligible to apply for reclassification.

## **SECTION 5. EMPLOYEE'S FILE**

No performance evaluation, Record of Counseling, or corrective action notification, or any record of formal or informal counseling, shall be considered to be part of an employee's official record unless the employee has been offered or given a copy and has been afforded the opportunity to sign the document or to add the employee's written disagreement to it.

Upon prior request, employees shall have access to their personnel files. Nothing will be placed in an employee's file without knowledge of the employee. Employees shall have the right to attach written comments to items in their file and these comments shall become part of the official record. Employees may obtain one (1) copy of any item(s) in their file.

Employees who request in writing to be notified by the Personnel Administrator when anyone other than a County or PHT employee has received access to their file shall be so informed.

## **SECTION 6. EVALUATION OF WORK PERFORMANCE**

- A. Each nurse will receive an evaluation of her work performance at the end of the first six (6) months of probationary employment. Thereafter, nurses will receive an annual performance evaluation with recurrent touchpoints to discuss progress and attainment of goals. Regular part-time and per diem nurses will also receive a similar yearly performance evaluation.
- B. The evaluators are ones who make frequent observations of the nurse's performance and share responsibility for the nurse's professional growth and development.

- C. The evaluator, oriented to the purpose and method of evaluation, will be the immediate supervisor of the nurse being evaluated. For ARNPs, the evaluation will be in conjunction with both the Nursing Supervisor and the Medical Director and the appropriate administrator. For nurses' whose immediate supervisor is not a Registered Nurse, a Director of Patient Care Services or designee will be assigned as the reviewer.
- D. The evaluator discusses the evaluation in conference with the nurse who has the right to make written comments on the form. A copy of the completed evaluation, signed and dated by both parties, is given to the nurse after it has been reviewed by the reviewer.
- E. If the evaluation is less than satisfactory, the employee shall be offered advice and counsel on how to improve performance and may be reevaluated within ninety (90) days.
- F. A permanent employee who receives a performance rating which is below standards may appeal the evaluation, in accordance with the grievance and arbitration procedure provided under Articles VII and VIII of the Agreement.
- G. When an employee is eligible for a step increase, it shall not be delayed beyond the employee's anniversary date if a supervisor does not complete the evaluation in a timely manner.
- H. If an employee's supervisor is a non-RN, the Chief Nursing Officer will designate a nurse to serve as the reviewer of the evaluation. The appointed reviewer shall discuss the evaluation with the nurse being evaluated before signing off.

## **SECTION 7. PROMOTIONS AND DEMOTIONS**

- A. It is the policy of the Employer to encourage and give priority to promotions from within, thereby providing all employees with the opportunity to aspire to higher level positions within the PHT's operations.
- B. "Promotion" shall be defined as the movement of an employee from a job classification to another job classification where the difference between the Step 1 hourly rate of the new position and the Step 1 hourly rate of the previously held position is at least 4.2%.

All promotions will involve a minimum increase of one (1) step except promotions to Associate Nurse Manager which will involve a minimum increase of two (2) steps, and to Nurse Manager which will involve a minimum of three (3) steps. For purposes of clarification, a one (1) Step increase cannot be less than 4.2%.

All promotions will involve a six (6) month trial period. Permanent status employees who are promoted and serving a trial period shall continue to retain their rights under this agreement.

Permanent status employees who are promoted and fail to successfully complete their (6) six month trial period due to performance issues will be offered a vacant position in the previously held permanent status classification, if available, or may bump a probationary/trial employee in that classification.

- C. "Demotion" shall be defined as the movement of an employee from a job classification to another job classification where the difference between the Step 1 hourly rate of the new position is a reduction of 4.2% or greater from the Step 1 hourly rate of the previously held position.

All demotions will involve a minimum decrease of one (1) Step except demotions from Associate Nurse Manager positions which will involve a minimum decrease of two (2) steps, and from Nurse Manager positions which will involve a minimum decrease of three (3) steps. For purposes of clarification, a one (1) Step decrease must be at least 4.2%.

Whenever an employee who has been promoted is thereafter demoted to his/her previously held classification, whether voluntarily or involuntarily, his/her wages shall (a) be reduced by the same number of steps that it was increased when the promotion was awarded, or (b) the employee shall be placed in the same position he/she would have been in had the promotion never occurred with his/her previous anniversary date, whichever is more beneficial to the employee.

- D. "Lateral" shall be defined as the movement of an employee from one position to another where there is an identical pay scale or the difference between Step 1 rates is less than 4.2%. Employees will be transitioned to the new position at the next highest step, so long as it is less than a 4.2% increase.
- E. For layoffs or reassignments that are considered demotions, the employee will transition to the same or next lowest step of the new pay scale.
- F. An employee who has been demoted as a result of a layoff or reassignment, and subsequently promoted to the previous or similar position, will have their salary history taken into consideration when determining the new rate.
- G. Any deviation from the rules referenced above will be noticed to the Union.

## SECTION 8. LONGEVITY BONUS

Annual longevity bonus payments will be made in accordance with the following schedule:

- Upon completion of 15 years of full-time continuous County Service, 2.5% bonus payment of base salary.
- Upon completion of 16 years of full-time continuous County Service, 2.6% bonus payment of base salary.
- Upon completion of 17 years of full-time continuous County Service, 2.7% bonus payment of base salary.
- Upon completion of 18 years of full-time continuous County Service, 2.8% bonus payment of base salary.
- Upon completion of 19 years of full-time continuous County Service, 2.9% bonus payment of base salary.
- Upon completion of 20 years of full-time continuous County Service, 3.0% bonus payment of base salary.
- Upon completion of 21 years of full-time continuous County Service, 3.1% bonus payment of base salary.
- Upon completion of 22 years of full-time continuous County Service, 3.2% bonus payment of base salary.
- Upon completion of 23 years of full-time continuous County Service, 3.3% bonus payment of base salary.
- Upon completion of 24 years of full-time continuous County Service, 3.4% bonus payment of base salary.
- Upon completion of 25 years of full-time continuous County Service, 3.5% bonus payment of base salary.
- Upon completion of 26 years of full-time continuous County Service, 3.6% bonus payment of base salary.
- Upon completion of 27 years of full-time continuous County Service, 3.7% bonus payment of base salary.
- Upon completion of 28 years of full-time continuous County Service, 3.8% bonus payment of base salary.
- Upon completion of 29 years of full-time continuous County Service, 3.9% bonus payment of base salary.
- Upon completion of 30 years or more of full-time continuous County Service, 4.0% bonus payment of base salary.

The minimum amount of payment will be \$350.00.

Full-time employees who accept a part-time position and thereafter accept a full-time position will have their years of service in the full-time position recognized for purposes of receiving their longevity bonus as long as their service is continuous. Years of service in a part-time position will not count toward the longevity bonus.

## **SECTION 9. EDUCATIONAL BONUS**

All full-time unit employees upon certification and/or recertification in their area of practice shall receive a one-time payment of \$250.00 upon receipt of the certification. All full-time unit employees with a Baccalaureate degree in nursing will receive a one-time payment of \$520.00 upon receipt of their degree providing the employee has not already received this bonus.

All full-time permanent employees as of June 3, 1997 who complete a Master's degree in a nursing program by September 30, 1999 will receive a \$1,040.00 bonus annually following receipt of the degree. All full-time employees with a Master's degree in nursing hired after June 3, 1997 and all full-time unit employees who earn their Master's degree in nursing after September 30, 1999 shall receive a one-time \$1,040.00 bonus upon receipt of their degree providing the employee has not already received this bonus.

These bonuses are not compounded in any one year. Eligible employees will receive only the higher bonus to which they are entitled.

All bonuses and payments for certifications are payable upon completion of the initial probationary period.

## **SECTION 10. REFERENCE BOOKS AND PERIODICALS**

- A. To assure a high quality of patient care, each division and/or each agency where employees perform duties, will have a designated area for reference books and current periodicals, relating to patient care given in the area or agency.

Employees should submit their requests for certain books and publications for their use. Each agency or division will have a minimum of two (2) professional periodicals. These will be available to employees on all tours of duty.

Employees shall have access to the University of Miami Calder Library for reference books and periodicals. With prior approval from the employee's supervisor, the Employer agrees to pay for Medline and copying service charges incurred by the employee.

## **SECTION 11. PARKING FACILITIES**

The Employer will make every effort to provide adequate security in all parking facilities owned by the PHT especially during change of shifts.

The Employer will continue its practice of providing one (1) month free parking for all employees whose cars are vandalized or stolen.

Employees are encouraged to contact the Security Department for after-hours escort to and from parking facilities.

Employees who pay a parking night shift rate who are coming on the PHT Main campus because they are on call or for another work assignment will be reimbursed any fees for parking in any of the PHT parking facilities between the hours of 9:00 a.m. to 5:00 p.m.

## **SECTION 12. NEW EQUIPMENT AND PROCEDURES**

In-service training regarding new equipment or procedures and training required by a licensing agency will be provided in all areas on all tours of duty.

## **SECTION 13. DRUG DISCOUNT**

Employees may purchase drugs at the pharmacy at a rate of cost plus 10%. A surcharge of one dollar (\$1.00) will be added for each visit to the pharmacy for prescriptions for one (1) person.

## **SECTION 14. TUITION/CONFERENCE REIMBURSEMENT**

All eligible full time bargaining unit employees employed by the Employer will receive one hundred per cent (100%) tuition reimbursement in accordance with the established policies and procedures maintained by the Employer. This reimbursement may be used for continuing education, seminars, conferences and/or certification modules, providing it is approved in advance by the Department of Education and Development.

All eligible regular part-time bargaining unit employees will receive 50% tuition reimbursement in accordance with the established policies and procedures maintained by the Employer.

## **SECTION 15. JOB SPECIFICATION LANGUAGE**

- A. No employee covered by this agreement shall be required to do work outside the employee's classification, except under emergency conditions as declared by the President of the PHT, County Manager or their authorized representatives.
- B. The Union shall have a representative on the Performance Standards Committee. Whenever there is a proposed change in the job specification or title of a class within this Bargaining Unit from this Committee, the Employer shall notify the Union of the proposed changes in job duties. The Union shall receive a copy of the current

job specification and the proposed job specification.

- C. Upon notification, the Union may request to meet and negotiate over the impact of such changes on unit employees as provided in Article V, Section 2.
- D. Proposed changes shall be publicized among employees.

It is understood by the parties that the duties enumerated in job specifications are not always specifically described and are to be construed liberally.

It is understood by the parties that the duties to be added in the proposed change in the job specification shall bear a reasonable relationship to the duties and responsibilities currently contained therein. Changes proposed by the Employer other than the addition of new duties, shall be reasonable under the circumstances. The Union may make proposals to the Director of Human Resources. The decision of the Director of Human Resources shall be final, subject to review by the President of the PHT.

## **SECTION 16. RUBELLA AND HEPATITIS-B VACCINE**

Rubella and Hepatitis-B vaccine will be offered to all nurses as part of pre-employment physical as well as to those nurses currently employed. Appropriate titers will be drawn as necessary.

## **SECTION 17. INJURIES, REHABILITATION AND REORIENTATION**

- A. Consistent with PHT and County policies, if a nurse is injured while on duty, the Employer will make every effort to assist the employee in making application for worker's compensation. In the event the injury is of a nature which will inhibit the employee's ability to perform the employee's duties, the Employer will make every effort to rehabilitate and reorient the employee to perform duties of a different nature.
- B. Eligible bargaining unit employees shall be entitled to eighty percent (80%) short-term disability leave benefits in accordance with coverage provided under the Miami-Dade County Code (Section 2-56.27.1).

## **SECTION 18. SCOPE OF NURSING PRACTICE**

It is agreed that, except in emergency situations employees will not be expected to routinely perform duties outside the general scope of nursing practice. Consistent short staffing, whether of RNs or support personnel shall not be considered as emergency situations. The employer agrees to make a good faith effort to minimize non-nursing duties and to identify and reduce such duties.

## SECTION 19. REFERRAL AND RECRUITMENT INCENTIVE PROGRAM

- 1) In an effort to attract and retain qualified, experienced nurses for difficult to fill positions for the organization, the PHT may implement a recruitment incentive program for the purpose of providing cash incentives to recruit and retain newly hired, experienced staff for difficult to fill positions system- wide, excluding nursing homes, clinics, and CHS. "Difficult to fill position" is defined as a vacancy that has been posted for forty-five (45) days or greater. JHS will supply the Union with bi-weekly vacancy lists during the term of this agreement. The QNCD Partnership Committee will be responsible for monitoring implementation of this article.
- 2) To be eligible for recruitment incentives, new hires must have a minimum of three (3) years of direct experience in the specialty area identified; must meet all PHT employment screening requirement for the position applied for; and must accept a full-time position with the PHT. At the time of hire, new hires eligible for participation in the program will be required to execute and comply with all of the terms of the PHT's Recruitment Incentive Agreement. All current Jackson Health System employees are not eligible for the recruitment bonus.
- 3) Recruitment incentive pay will be in the amount of up to ten thousand dollars (\$10,000) and will be subject to distribution based upon the new hire meeting eligibility requirement as set forth generally, above, passing tenure-based milestones with the PHT, and experience in a related specialty as follows:
  - a. Prospective nurses with three to five years' experience in a related specialty will be eligible to receive five thousand (\$5,000) dollars in recruitment incentive pay;
  - b. Prospective nurses with greater than five to ten years' experience in a related specialty will be eligible to receive seven thousand five hundred (\$7,500) dollars in recruitment incentive pay;
  - c. Prospective nurses with more than ten years' experience in a related specialty will be eligible to receive ten thousand (\$10,000) dollars in recruitment incentive pay.
- 4) Specifically, recruitment incentive pay will be disbursed to the eligible employee in four equal parts over a thirty-six (36) month period.
  - a. The first incentive payment will be disbursed immediately after satisfactory completion of six (6) months of continuous employment with the PHT.

- b. The second incentive payment will be disbursed after the satisfactory completion of twelve (12) months of continuous employment with the PHT.
  - c. The third incentive payment will be disbursed after the satisfactory completion of twenty-four (24) months of continuous employment with the PHT.
  - d. The final incentive payment will be disbursed immediately after satisfactory completion of thirty-six (36) months of continuous employment with the PHT.
- 5) PHT Talent Acquisition personnel will be responsible for monitoring the new hires/participant's employment throughout the distribution period for compliance with the incentive program's requirements.
- 6) Any current employee of the Jackson Health System (exception: Executives, Directors, Managers, Supervisors, Public Relations, and Human Resources staff) who refer a clinical staff nurse who is hired into a full-time position in specialty areas identified in this agreement will be eligible to receive a \$1,000 referral bonus. In order for the referring employee to receive the referral bonus, the new employee must have three years of experience in the specialty area and successfully complete an orientation period. The \$1000 payment will be made at the time the new employee completes orientation. Both the referring employee and new employee must be employed at the time of payout. If two or more employees refer the same candidate, the first referral form received and date stamped by Talent Acquisition will be eligible for the program, unless both parties agree to share the bonus. The referred employee cannot currently be in the recruitment database. If an employee refers multiple new candidates who are hired into full-time clinical staff nurse positions in specialty units identified in this agreement, the referring employee will be eligible for the referral bonus for each new employee referred who meets the criteria outlined in this agreement.
- 7) The PHT may stop the implementation of this referral and recruitment program at any time with thirty (30) days written notice to the union.

## **SECTION 20. CELLULAR PHONE PROGRAM**

Bargaining unit employees who have been required to carry a cellular phone to conduct PHT business because of the business needs of the PHT, including but limited to Nurse Managers, Clinical Transplant Coordinators, and Case Managers, shall receive a monthly stipend of \$40.00 to be paid on an eligible employee's paycheck on a post-tax basis, subject to all required deductions. Bargaining unit employees who have been required to carry a cellular to conduct PHT business shall abide by PHT Policy and Procedure 232A.

## **ARTICLE XVI - VACANCIES, TRANSFERS, REASSIGNMENTS, UNIT MERGERS AND FILLING VACANCIES**

### **SECTION 1. SHIFT TRANSFERS, POSTING AND FILLING OF VACANCIES AND REASSIGNMENTS**

- A. Shift Transfers: Recognizing that access to preferred shifts by nurses can make an important contribution to nurse morale and retention, the parties agree that all available shifts shall first be posted in the unit for a period of 7 days and made available to nurses within the unit by unit seniority.
- B. Posting of Vacancies: All unit available vacancies shall be posted in the unit and concurrently throughout all PHT facilities. If employees under paragraph A do not express interest in the vacancy within the first fourteen (14) days of posting, the vacancy shall continue to be posted on bulletin boards located throughout PHT facilities until a job offer is made by Recruitment Services. With written notice to the Union, the Employer may offer employment to an employee prior to the end of the fourteen (14) day posting period, provided that:

- 1) More than one (1) vacancy exists in the unit.
- 2) Priority for shift selection under A above is maintained.

Recruitment Services is responsible for posting all vacancies for which a personnel requisition has been submitted.

- C. Filling of Vacancies: During this posting period, current employees with the necessary qualifications will be given preference over outside applicants. When skill, competency and ability are considered substantially equal in the judgment of the Employer, seniority shall be the deciding consideration in filling vacancies. All employees who apply for a posted vacancy shall be advised of the vacancy status as soon as practical. An employee's current salary will not be a determining factor when considering employees for transfer.
- D. There will be no less than two (2) nor more than three (3) weeks' notice to the department from which an employee is transferred. In the event that the position being vacated is critical to the operation of the unit, the employee may be retained until such time as the employee is replaced, but for no more than sixty (60) days. However, for pay purposes, transfers will be effective at the beginning of the pay period following acceptance.
- E. An employee returning to a previous permanent status classification within one (1) month will be transferred to the employee's previous position and department unless the position has been abolished or

has been filled by another employee with permanent status in the classification for that position. In the event the former position is not available, the returning employee will be offered a vacant position in that classification or will replace a probationary/trial employee in that classification.

- F. If it becomes necessary to reduce FTE's in a unit, the hospital will first seek volunteers in a unit. If there is an insufficient number of volunteers, affected employees will be reassigned in inverse order of hospital-wide seniority in the classification consistent with the reassignment procedure in Article XVIII, Section 1.

## **SECTION 2. UNIT MERGERS**

When one or more units are merged, the following procedure will be utilized:

- A. The unit seniority of all affected employees shall be maintained and merged into one new unit seniority list. Any shift selections or vacation scheduling in accordance with the Collective Bargaining Agreement will be based upon this merged seniority.
- B. In the event that a unit merger necessitates the elimination of any positions, the reassignment procedure will be followed and, unless there are volunteers, the employee with the least hospital-wide seniority in the affected classification of the new merged unit will be reassigned and/or offered the opportunity to voluntarily demote.

## **ARTICLE XVII - ORIENTATION, FLOATING, CROSS-TRAINING, CENTRAL STAFFING FLOAT POOL NURSES**

### **SECTION 1. ORIENTATION TYPES**

- A. Orientation is the introductory instruction concerning how to practice in a new clinical situation. Orientation is provided by the employer across all stages and continuums of employment and clinical practice. A nurse shall not be expected to take an assignment independently in any area of practice to which the employee does not have the competency to care for the patient(s).

Types of orientation include:

- 1) New employee orientation (for new hires at JHS) will include a generalized JHS, divisional, and unit specific orientation. Time frames may vary based on individual experience and the specialty area. A preceptor program whereby preceptors receive training will be used to guide orientation. Program standards of preceptorship include, but are not limited to: preceptor will not assume charge role when precepting,

unless it is to train an orientee to that role; patient assignments will be considerate to meet the goals/standards for the orientee.

- 2) Incumbent employee orientation is for JHS employees who transfer to a new unit and will include divisional and unit specific orientation based on experience.
  - 3) Cross training orientation is for those JHS employees who “float” to another unit on a temporary basis.
- B. All three types of orientation include principles that assure the employee is prepared, competent and safe to practice according to the standards and skill competencies of the specific unit. All orientations for new employees or for employees who have never floated to specific units previously will include:
- 1) Clear goals and expectations specific to each unit. Mutually signed competency and checklist, the signing of which will not be unreasonably withheld or hinder patient care. Competencies and checklists are specific to the standards and skills required for the patient population;
  - 2) Patient assignments congruent with attained competencies are not precluded by partially completed checklists;
  - 3) A preceptor/mentor will be assigned to the nurse. Consistent preceptors is recommended;
  - 4) Competencies must be considered when covering assignments.

## **SECTION 2. CROSS-TRAINING**

Cross-training is the systematic process of providing training in different tasks or skills.

Cross-training will ensure that all necessary personnel successfully complete the unit- specific competencies to prepare the employee to care for specific patient populations.

The Employer shall continue to have the authority to schedule an employee’s cross- training consistent with the Division/Unit’s staffing requirement. Volunteers will be cross-trained first. Checklists and competencies will be reviewed annually. In general, cross-training will happen in another unit and will not exceed twenty-four hours.

The QNCD Labor/Management Committee will develop a standardize format of all unit specific competencies/checklists in the JHS for all clinical areas (e.g., Holtz Children’s Policy No. 06).

### **SECTION 3. FLOAT PAY**

Floating is the practice of temporarily reassigning nurses from their assigned areas and placing them elsewhere.

Standards for floating to a unit include:

- A. The employee is welcomed and introduced to the staff.
- B. The assignment is clear and reviewed with an assigned resource nurse.
- C. There are frequent check-ins with the resource nurse to assess the float nurses' progress and comfort.
- D. Near the end of the shift the float nurse will complete an evaluation of the experience which will be shared with both units for the purpose of improving the process.
- E. Floating will happen fairly and rotationally for employees who have been cross- trained according to the cross-training standards above.
- F. Assignments will be congruent with the employee's skills and experience and nurses will ideally be assigned a less acute patient assignment.
- G. Registered Nurses with less than 12 months experience in nursing will not be eligible to float out of their home base unit unless mutually agreed on.
- H. Float nurses will be given an assignment based on their level of skill, expertise and meeting the competency requirements for the patient assignment.
- I. Divisional/Unit specific competencies and skill checklist will dictate a nurses' ability to float.
- J. Agency/Travel and per diem nurses will be first to float.

### **SECTION 4. CENTRAL STAFFING FLOAT POOL NURSES**

Central Staffing Float Pool Nurses are nurses who have been cross-trained to meet the staffing needs of Specific Units.

Terms and Conditions

- Jackson Health System (JHS) will determine the number of FTE's and shifts that are needed in the Float Pool. JHS may hire full time, part

time, and per diem employees in the Float Pool.

- Applicants must have a minimum of one (1) year current experience and the requisite skills and ability to float to any unit(s) assigned.

## **SECTION 5. PAY PREMIUM**

- A. A \$2.00 per hour premium will be paid when nurses are floated out of their home campus to another campus or a facility outside of their home campus. When necessary to float a float pool nurse away from their home campus, the nurse will be chosen from a pre-established volunteer list. If there are no volunteers, assignments will be done based upon inverse seniority. The premium will only be paid for hours worked away from the home campus (including time spent traveling away from the home campus if floated during the course of a shift). Further, all nurses in the float pool cost code will receive \$2.00 per hour premium for all hours worked.
- B. Non-Float Pool Nurses who float from their home base unit shall receive the \$2.00 per hour premium for hours spent floating when they float at least 50% of their shifts worked in a pay period.

Jackson Health System reserves the right to adjust float pool pay premium as determined to be necessary to recruit, retain and remain competitive in the health care market. These rates will not be affected by any cost of living increase. The two dollar (\$2.00) premium shall not be decreased during the term of this agreement.

Jackson Health System has the sole right to determine the use of the Float Pool at any facilities within Jackson Health System.

## **SECTION 6. EXTRA SHIFT BONUS PROGRAM**

Employees may be paid an extra shift bonus to work an unscheduled extra shift in any workweek in designated areas of the system when management determines that there is a critical need in those areas based on staffing. Opportunities for extra shift bonus dollars will be posted in each nursing unit. JHS agrees to provide the Union with a minimum of 24 hours' notice of its intention to start and/or stop this program. When activated, bonuses will be awarded as follows:

- Eight-hour shift: \$80
- Ten-hour shift: \$100
- Twelve-hour shift: \$120

A partial shift of less than eight (8) hours but at least four (4) hours may be approved at a pro-rated rate.

Exclusions:

- Per Diem employees are not eligible for participation in the program.
- On-call and callback shift work is not applicable for the bonus.
- Part-time 24 status employees will earn their extra shift bonus beginning on their fourth (4th) shift each week.
- Usage of any non-productive time during the applicable pay period will disqualify any extra shift bonus payments.
- Differentials shall be paid on all hours worked, as applicable, including but not limited to work performed on regular, overtime or extra shifts.

## **ARTICLE XVIII - REASSIGNMENT, LAYOFFS, RECALL AND EMPLOYMENT RIGHTS**

Definitions:

Reassignment procedure is applicable when there is a reduction in FTE(s) in a unit and there are vacancies in the affected classification(s) on the same list.

Layoff procedure is applicable when there are no vacancies in the affected classification(s) on the same list.

### **SECTION 1. REASSIGNMENT PROCEDURE**

If it becomes necessary to reduce FTEs in a unit, the hospital will first seek volunteers in the unit. If there is an insufficient number of volunteers, affected nurses will be reassigned in inverse order of hospital-wide seniority in the classification, consistent with the following reassignment procedure.

- A. Meeting dates will be scheduled with the Sr. Vice President, Chief Nursing Executive, the Director of Patient Care Services, Labor Relations and the Union to discuss the reassignment.
- B. Appropriate available positions on the affected list will be frozen.
- C. The Employer will notify the Union, in writing, of the affected unit(s) the affected nurses by name, hospital-wide seniority date by classification; the appropriate available positions in the affected classification and the effective date of reassignment.
- D. The number of volunteers in the affected classification(s) accepted from each affected unit(s) will not exceed the number of FTEs being reassigned from that unit. Volunteers from the affected unit(s) will be accepted on hospital-wide seniority basis in the classification(s).

- E. The volunteer reassignment process will generally be completed within two (2) weeks of notification to the employee(s). Notification of involuntary reassignments will be completed within seventy-two (72) hours of completion of the voluntary process.
- F. Hospital-wide seniority in the classification(s) will prevail in the selection of the appropriate available positions.
- G. The unit seniority of the affected nurses shall be maintained and merged into one unit seniority list. Any shift selections or vacation scheduling in accordance with the Collective Bargaining Agreement will be based upon the merged seniority.
- H. This procedure will not be used in the layoff procedure of the collective bargaining agreement.

## **SECTION 2. LAYOFF PROCEDURE**

- A. Layoff, defined, is the separation of an employee for lack of work or funds as determined by the Employer; or due to the reductions in or the contracting out of services, without fault or delinquency on the employees' part.
- B. The procedure will apply to full and regular part-time bargaining unit employees in the statuses of permanent, substitute, and probationary. Seniority points will be calculated for each affected employee. In calculating seniority points one (1) point will be assigned for each month of full-time service, one-half (0.5) point will be assigned for each month of part-time service. Points for months of service are simply totaled with the final number being the retention score.

All time spent on military leave of absence will be included in calculating seniority points. Seniority credit will be given to an employee who has volunteered for military service during peacetime (not eligible for military leave of absence) provided the employee is re-employed within ninety days of release from military service. Seniority credit will be given for the service time prior to and during the military service.

Qualified veterans will receive veterans' preference points equal to 5% of the highest seniority score. These points are added to the veteran's seniority score.

- C. The Employer will make every effort to give sixty (60) days' notice of any decision to layoff unit members. No less than twenty-one (21) days written notice will be given to bargaining unit members who were laid-off or demoted. A copy of such notice will be simultaneously sent to the Union.

- D. In connection with the parties' commitment to the Reeducation and Skills Enhancement Program, for purposes of layoffs the parties have agreed to use two (2) lists, which are identified in Section 4.
- E. In the event of a layoff the Employer shall identify the unit(s) where FTE are being reduced. These procedures include all affected nurses in the classifications represented by this CBA. Layoffs will be done in inverse order of seniority by classification, within the affected list(s). Employees in the statuses of temporary relief and per diem, on the affected list(s), will be terminated prior to any full-time or regular part-time employee in the bargaining unit being impacted by lay-off.

When a nurse(s) is/are laid off on a list, the employee(s) will first bump within their specialty area on the list. Only the least senior employee will leave their specialty area and bump into another specialty area within the affected list.

When a Nurse Manager, Associate Nurse Manager, or unit-based Nurse Educator classification is eliminated within a unit the affected employee may voluntarily opt to demote to another classification to remain in their unit.

When FTE(s) are eliminated and layoff procedure is implemented within the classification of Clinical Care Coordinator, Patient Placement, Nurse Educators, Wound Care, Infection Control, or Case Management, where the nurse is not unit-based, the affected employees will bump into the specialty area where they last held permanent status in another classification. Other examples may be identified and, if mutually agreed by the parties in writing, may be given the same consideration regarding bumping.

- F. Full time and regular part time employees on one list are not eligible to displace employees on the other list, unless they have held permanent status in a full time or part time job classification on the other list. Regular part time is defined as a minimum of twenty hours per pay period. Employees will automatically bump into any classification on the affected list(s), in which they previously held permanent status.
- G. During the twenty-one (21) day notice period, nurses who have been bumped shall be given five (5) calendar days to select, by hospital-wide seniority, a reassignment to a vacant position. It exists, on the affected list(s). The union will be responsible for facilitating this process.
- H. Full time and part-time employees on the affected list(s) can only bump within the bargaining unit. It is understood that in a layoff, part-time employees may be required to move to full time status in order to exercise bumping rights. Reasonable efforts will be made to ensure that part-time employees may continue in part-time status. Full-time employees shall not be required to accept part-time positions.

I. All time served in the higher classification will be credited as time served in lower classifications within the bargaining unit. Bargaining unit employees who previously held permanent status in classifications outside of this bargaining unit will be subject to the applicable layoff procedures of the classification to which they are displaced.

J. For purposes of the layoff only:

Time served in these classifications in per diem status will not be considered. Time served as a Nurse 1 or Nurse 2 will count as time toward a Clinical Staff Nurse.

1. Time served in these classifications in per diem status will not be considered. Time served as a Nurse 1 or Nurse 2 will count as time toward a Clinical Staff Nurse.

2. Time served as a Corrections Health Nurse I will count toward a Clinical Staff Nurse/Corrections Health Services classification. The time served as a Corrections Health Nurse II will count toward time in an equivalent Corrections Health Services classification, (e.g. Nurse Educator/ Corrections Health Services). Time served as an Administrative Nurse I will count toward an equivalent nurse classification. Time served as a Nurse III will count toward Clinical Care Coordinator, Enterostomal Therapist, and Nurse Educator classifications. Time served as a Nurse IV will count toward Clinical Nurse Specialist, Clinical Research Coordinator, Clinical Service Coordinator, Enterostomal Therapist Coordinator, Quality Management Education Coordinator and Trauma Coordinator classifications. Time served as an Associate Nurse Manager will count toward Clinical Resource Nurse, Officer of the Day- Emergency Services, and Patient Placement Coordinator classifications.

3. Those nurses enrolled in Critical Care Internships or other specialty programs internships will be considered to be members of the Division/ Department sponsoring the program, rather than members of their previously assigned unit.

4. No bargaining unit employee on the affected list(s) shall be laid-off in lieu of maintaining a full-time equivalent traveler, agency, per diem, or TR nurse on the affected list(s). Following a layoff, per diem, TR and agency RNs may be used during the necessary transition time specifically to cover for orientation and cross-training that may be required as a result of layoff.

K. Employees who have been displaced will be given priority consideration for other opportunities in PHT training programs and on-call/pool vacancies.

- L. The County and PHT agree that County employees cannot bump bargaining unit employees working for the PHT nor can PHT Bargaining Unit employees bump County Bargaining Unit employees.
- M. For purposes of layoff and reassignment, employees in the classifications of Clinical Staff Nurse CVTX and Clinical Staff Nurse Nuero will be treated as Clinical Staff Nurses. These classifications were created for pay incentive purposes only.

**SECTION 3. RECALL PROCEDURE**

- A. Employees will be recalled in inverse order of layoff. Employees that have been laid-off will have recall rights to all full-time and part-time vacancies in their previously held position for a period of two (2) years from the date of layoff. If an employee is recalled and accepts a part-time position, he/she shall continue to have recall rights to a full-time position if one becomes available during the recall period.
- B. Once recalled, employees will have their previous seniority and extended ill bank restored. If employees received a payout of their extended ill upon layoff, once recalled they can purchase back their time.
- C. The Union will be notified of all employees on recall lists and vacancies, as offered and accepted.

**SECTION 4. LAYOFFS, RECALL AND REEMPLOYMENT RIGHTS LIST**

A	B
<b>ADULT CRITICAL CARE:</b>	<b>ADULT MED/SURG/TELE:</b>
<b>Jackson Memorial Hospital:</b> Trauma, ICU, Medical ICU, Neuro-Surgical ICU, Surgical, ICUB, Surgical ICU C, Critical Care Admin (Rapid Response), Coronary Care Unit, JHS Nurse Staff (ICU), Central 6, Central 7, South Wing 8, Trauma 3A	Jackson Memorial Hospital: South Wing 5, South Wing 6, South Wing 7, West Wing 5, West Wing 6, West Wing 7, West Wing 9, West Wing 10, West Wing 11, West Wing 12, West Wing 14, West Wing 15, North Wing 3 Trauma 3B, Trauma 4A, Trauma 4B, JHS Nurse Staff (Med/Surg/Tele)
<b>Jackson South Medical Center:</b> ICU Tower, CCS (ICU)	<b>Jackson South Medical Center:</b> 2 Tower, 3 Tower, 4 Tower, 2 South, 2 North, 2 West, JSCH Pool Staff (Med/Surg/Tele)
<b>Jackson North Medical Center:</b> ICU Separate, JNMC Central Staffing Office (ICU)	<b>Jackson North Medical Center:</b> Acute Care Unit, Med Surg Unit, Observation Wing, Ortho Neuro Surgical, Telemetry Unit, JNMC Central Staffing (Med/Surg/Tele)

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**Jackson West Medical Center:** JW-Critical Care

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**Jackson West Medical Center:** JW-4th Floor, JW-6th Floor Medical, JW-6th Floor Maternity

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**PEDIATRIC CRITICAL CARE:**

Holtz & Women's: Pediatric ICU, Newborn ICU, Newborn IMCU, Women & Children's Float Pool (ICU), Pedi Transport Team

Holtz & Women's: Women & Children's Float Pool (Med/Surg/Tele), East Tower 3 Mother Baby, East Tower 7B

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**PEDIATRIC MED/SURG/TELE:**

**Jackson North Medical Center:** Neonatal ICU

**Holtz & Women's:** East Tower 5 B, East Tower 6A, Pediatric Dialysis, Pediatric Urology, Palliative Care- Holtz

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**EMERGENCY SERVICES:**

**Jackson Memorial Hospital:** Emergency Services Admin, Emergency Care Center, Trauma Resuscitation

**REHABILITATION:**

**Jackson Rehabilitation Hospital:** Cardiac Rehab Center, PM&R Clinic, Rehab 6, Rehab 7, Pediatric Rehab, Trauma 8  
**Jackson North Medical Center:** Rehab Gen

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**Jackson South Medical Center:** JS Emergency Room, JS Trauma ER

**Jackson North Medical Center:** JN Emergency Room

**Holtz & Women's:** Pedi ER

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**CORRECTIONS HEALTH SERVICES:** All Units/Facilities

**LONG TERM CARE:** Long Term Care Center (All Units), Perdue Medical Center (All Units)

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**Jackson West Medical Center:** JW-Emergency Admin, JW-Emergency Room

**PERIOPERATIVE SERVICES:**

**BEHAVIORAL HEALTH:**

**Jackson Behavioral Health Hospital:** Adult behavioral Care, Behavioral Treatment, Behavioral Treatment 3, BH Crisis Unit, Child & Adolescent Psychiatry, Community mental health Services, Crisis Stabilization Unit, Geri Med Psych, Health & Recovery, MDFAC, Outpatient Medical

**Jackson Memorial Hospital:** Periop Admin, Main Operating Room, Main Recovery Room GI Station, Anesthesia

**Jackson South Medical Center:** Adult Psych

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**Jackson North Medical Center:** Surgery Separate, Delivery Room, Recovery Separate, Obstetrics, Special Nursing Svc

**Holtz & Women's:** L&D OR, East Tower 4, Labor & Delivery, Antepartum Testing Unit

**Jackson West Medical Center:** JW-Operating Room, JW-Pre/Post OR, JW-Anesthesia

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**PERIOPERATIVE SERVICES:**

**Jackson Memorial Hospital:** Adult Dialysis (Apheresis), Echocardiography, Cardiovascular Svcs Admin, Critical Care Admin (wound Care), Radiation Therapy

**PROCEDURAL SERVICES:**

**Jackson Memorial Hospital:** Adult Cath Lab, Pedi Cath Lab, Interventional Radiology Admin, Radiology Nursing Services, Hyperbaric Medicine, EPZ Clinic

**Holtz & Women's:** Pedi Cardiology, Pediatric Dialysis

**Jackson South Medical:** Cardiac, Endoscopy

**Jackson South Medical Center:** Wound Care

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**Jackson North Medical Center:**

Cardiovascular Cath Lab, JN Endoscopy, Interventional Radiology

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**Jackson North Medical Center:** Wound Care Center

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**CLINICS:**

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**Holtz & Women's:** Pediatric Bone Marrow Unit, Pedi Special Procedures Room, East Tower 6B

ACC Infusion Center, ACC Med Peds, ACC Primary Care Practice, AIDS Grants, Dental Clinic, Dermatology Clinic, ENT Clinic, HEMA/ONC, Jefferson Reaves Sr. Health Center, Medical Clinic, North Dade Health Center, Obstetrics Gynecology Clinic, Pediatric Clinic, Penalver Clinic, PET Center, Rehab Orthopedic Clinic, Rosie Lee Wesley Health Center, SID, Surgical Clinic, Urology Center, Breast Health Center, J. South Bariatric, J. South Orthopedics, Jackson West Multispecialty, JMain Multispecialty Clinic, Miami Dade County Physical, Miami Hope Center, South Dade Homeless Assistance, Trauma Clinic, Transplant Clinic, Jackson Pediatric Center, Health Office

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**Jackson West Medical Center:** JW-GI Station, JW-Hybrid Room

**URGENT CARE CENTERS:** All Units/  
Facilities

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Based on mutual agreement and patient populations, exceptions may be made to these lists on a case-by-case basis (ex A chemo certified RN may be exempt from the bumping process based on highly trained skill set). Pediatric ICU's and Pediatric employees may first bump within the Pediatric specialty areas and then the least senior employee will bump onto the correct list, A or B.

The units identified herein are based upon the current geographic configuration of the PHT. The parties agree that the placement of a unit on a list is based on the unit's function, not its name or location. The parties further agree that nothing herein shall prevent the Employer from relocating units within its facilities so long as the essential functions of the units remain the same. Units that are merely relocated or renamed will remain on the same list. In the event a new unit is created or two or more existing units are merged, the new or merged unit will be placed on the list that contains units with the most similar functions. For classifications and/or locations not listed here, the parties will meet to appropriately place these nurses on a case by case basis.

## **SECTION 5. ARNP REASSIGNMENT, LAYOFF, AND RECALL PROCEDURES**

Due to legal certification restrictions, the layoff, recall, and reemployment rights list in Section 4 does not apply for ARNPs. ARNPs will be reassigned, laid off and/or recalled using the list below, based on the individual ARNP certification and experience.

1. Adult --> Adult\*
2. Acute --> Acute care areas (must have specialty certification as of 2007)

3. Family --> Family/Adult/Pediatrics
4. Neonatal --> Neonatal (Specialty area based on certification)
5. Pediatrics --> Pediatrics/Family\*\*
6. Psych --> Psych (Specialty area based on certification)

\* Adult can bump family for an adult position that does not include pediatrics

\*\* Pediatric can bump family for a pediatric position

A joint Labor/Management advisory group shall be consulted in the event of any case where there is a dispute involving the placement of a bargaining unit employee in the bumping process or for those who are not board certified.

## **SECTION 6. FURLOUGHS**

In the event it is financially necessary, system-wide furloughs may be implemented. The Employer will make every effort to give sixty (60) days written notice to the Union of any decision to furlough unit members. No less than twenty-one (21) days written notice will be given to bargaining unit members who are to be furloughed.

## **ARTICLE XIX - CONTRACTING OUT**

If the PHT solicits bids or proposals from the public to contract out services currently being performed by members of the bargaining unit, the PHT will notify the union. Notice of the solicitation will be provided as soon as practicable but in no event later than members of the general public are notified. If the County Commission solicits bids or proposals from the public to contract out services currently being performed by members of the bargaining unit, the PHT will provide the Union with notice as soon as it receives notice of the County Commission's solicitation.

Jackson Health System shall not contract out Jackson Main, Jackson West, or Jackson South ER services, including but not limited to the Rape Treatment Center, at its Main Campus. In the event that the PHT solicits bids or proposals from the public to contract out services currently being performed by members of the bargaining units in the Pediatric ER, or in the Adult ER at Jackson North Medical Center, all of the provisions and rights contained in this Article shall apply, and if these services are contracted out, the PHT will require as a condition of its agreement/contract with any

entities or Provider(s) that any full-time or part-time attending physicians, physician assistants, or ARNPs employed by the PHT shall remain employed in those units as PHT employees.

Upon request by the Union, the PHT shall make available for inspection any and all documents publicly available relating to the services contemplated for contracting out, prior to action being taken by the Employer to accomplish the contracting out. The Union may, within thirty (30) days or less if possible, propose an alternative plan by which the work may be done economically and efficiently by appropriate members of the bargaining unit. If the PHT receives such a proposal from the Union it will give such proposal reasonable consideration.

## **ARTICLE XX - REEDUCATION AND SKILLS ENHANCEMENT**

### **PROGRAM**

In the interest of minimizing the need for layoffs of bargaining unit members and to prepare RN's to follow the workflow needs of the hospital, the parties agree to institute, monitor and support the Reeducation and Skills Enhancement Programs identified below and to devote time in the Quality Nursing and Career Development (QNCD) Committee to explore outside funding sources for these programs.

#### **A. General Description of Programs:**

1. Every reasonable effort shall be made to provide ongoing educational programs in Critical Care, Perioperative/OR and other specialty areas for bargaining unit members to meet staffing needs of the hospital.
2. If the PHT determines that a floatpool is necessary to meet the fluctuating census needs of the various units, it may create a full time Medical/Surgical RN floatpool and/or a Critical Care floatpool. Vacancies in floatpools will be offered first to volunteers on the basis of seniority. If sufficient volunteers are not available, the Employer may fill the remaining vacancies using regular hiring practices.
3. The hospital agrees to establish a learning center to facilitate the goals and success of the educational program.

#### **B. Selection and Training Criteria:**

1. Applicants for the programs must meet the selection criteria and basic skills established by the

Employer. The Quality Nursing and Career Development Committee will discuss the selection criteria and may make recommendations to the Senior Vice President of Patient Care Services, who shall continue to have the authority to determine the selection criteria and basic skills necessary for the program.

Applicants meeting the selection criteria and basic skills will be placed on a list for selection in order of hospital- wide seniority. Any qualified persons remaining on the list after a class is filled shall be ranked in order of their seniority and will be selected ahead of all other applicants to fill up to thirty percent (30%) of the openings in the next available class.

2. No RN shall be denied admittance to a program because of short staffing in his/her unit or division.
3. Program preceptors shall be selected for their clinical, educational and interpersonal communication skills. Preceptor courses will be continued and made available to interested nurses. Reasonable efforts will be made to adjust the preceptor's assignment while serving as a preceptor.
4. If a bargaining unit member with permanent status fails to successfully complete the program, he/she will return to his/her previous position and unit, if available, or other comparable position within the division.
5. The probationary period in a new position shall begin at the conclusion of the reeducation and unit orientation program.
6. All employees who successfully complete the Critical Care internship shall identify their ICU areas of interest and shall be interviewed for those available positions. They shall be selected in areas of need through the standard interview and selection process. As long as ICU area vacancies exist, each bargaining unit member shall be placed in such setting.

## **ARTICLE XXI - GROUP HEALTH INSURANCE**

- A. The parties agree that bargaining unit employees will be offered the opportunity to become members of a qualified Health Maintenance Organization and a Point of Service Plan pursuant to law and in accordance with all rules, regulations, and procedures pertaining thereto prescribed by the Employer and the qualified Health Maintenance Organization.
- B. The parties agree that bargaining unit employees will be offered the opportunity to participate pursuant to law and in accordance with all rules, regulations, and procedures pertaining thereto prescribed by the Trust and the Internal Revenue Code.
  1. The Trust's Group Health Insurance will be a Point of Service/ Managed Health Care Group Insurance Plan.

2. Copies of the 2024 plan designs and cost structures for all plans offered to eligible bargaining unit members are attached to this Agreement as an addendum, including employee premium contributions, co-pays, deductibles, RX benefits, etc. In addition to the POS, the PHT will continue to provide the Select Network/Managed Health Care and Jackson First Group Insurance Plans for the 2024 through 2026 plan years.

Beginning January 1, 2024, the employee cost of the biweekly premiums, dependent, and single coverage, for the Select Network/Managed Health Care Group Insurance Plan and the POS will increase to those shown in the Medical Plan section of this Agreement.

Beginning January 1, 2025, the employee cost of the biweekly premiums, dependent, and single coverage, for the Select Network/Managed Health Care Group Insurance Plan and the POS will increase to those shown in the Medical Plan section of this Agreement.

Beginning January 1, 2026, the employee cost of biweekly premiums, dependent, and single coverage, for the Select Network/Managed Health Care Group Insurance Plan and the POS will be increased to those shown in the Medical Plan section of this Agreement.

Beginning January 1, 2024, copays for Emergency Department visits will increase by one-hundred dollars (\$100) (excluding pediatric emergency department visits) on Jackson First and Select plans, and by fifty dollars (\$50) on POS plans.

Beginning on January 1, 2024, insurance coverage for all plans will be limited to the following five (5) pharmacy retail outlets: 1) Jackson Health System; 2) CVS Pharmacy; 3) Target; 4) Publix; and 5) Navarro. Brand and Non-preferred prescription drugs, co-pays for all plans will increase by ten dollars (\$10).

Bargaining unit members who elect not to participate in the annual wellness visit for any reason will have their cost of coverage increase by fifty dollars (\$50.00) per pay period for the following plan year.

3. Part time employees with benefits who consistently work thirty(30) or more hours per week, and part time employees assigned to a 3/2 schedule that average fifty-seven and a half (57 ½) hours bi-weekly, are eligible for participation in the PHT's health plans.
4. Beginning on January 1, 2024, a new Part time "24" status will be created. Employees who consistently work twenty-four (24)

or more hours per pay period and are designated in this status, or that average forty-six (46) hours bi-weekly and are designated in this status, are eligible for participation in the PHT's health plans. Employees under this status will be eligible for health insurance benefits as illustrated in the Medical Plans section of this Agreement. All other benefits for this status will mirror those that apply to current Part-time with limited benefits status.

### C. JACKSON FIRST PLAN

Eligible Jackson Health System employees will continue to be given the option of enrolling in the Jackson First health insurance plan, in addition to the current available options. This Plan is voluntary and available to any benefits-eligible employee and their dependents. There will be no co-pays and/or deductibles for services performed at Jackson facilities (except urgent care, emergency care and Pharmacy Services), or by any physician with admitting privileges at Jackson Health System. For individual employees electing the employee only option there will be no premium contribution for the term of the Agreement.

Jackson First plan participants and Select Plan participants electing to use Jackson services shall also have access to a concierge service as described in the attached addendum which includes a dedicated telephone line for scheduling appointments for Jackson Health System providers. Employees selecting the Jackson First plan shall have access to a primary care physician within forty-eight (48) hours of requesting an appointment, and have access to a routine primary care physician within ten (10) days of requesting an appointment. Enrollees who request an outpatient diagnostic imaging (with valid referral) will be scheduled for the service within five (5) calendar days of the request or sooner if medically necessary at the Jackson facility of the enrollee's choice. This includes diagnostic imaging including MRI, CT, mammography, colonoscopy, laboratory services, etc.

D. The parties will create a Health Care Committee comprised of two (2) members appointed by Management and two (2) members appointed by the Union. This Committee will meet monthly (unless otherwise mutually agreed) and shall be provided any and all information necessary to monitor utilization, cost, and effectiveness of the plans.

### E. Telehealth

The parties agree that there is a need for the PHT to implement Telehealth, a voluntary program which allows employees to contact a physician on a 24/7 basis for convenient low cost medical care. This program will reduce our employees from seeking immediate health care for low intensity health concerns in urgent care centers and

emergency rooms and provide immediate high quality access to care.

In an effort to encourage employees to participate in the Telehealth program, a co-pay of only ten dollars (\$10) will be charged for employees or dependents who use the services provided by telehealth.

Employees can access Telehealth via mobile app, visit the website or call toll free for physician to diagnose, treat, and prescribe with no additional charge.

## **ARTICLE XXII - NURSING REPRESENTATION ON COMMITTEES**

- A. The parties are jointly committed to the principle of nurse participation in all standing and special committees which discuss and recommend action which affects delivery of nursing care or the conditions under which nurses work.
- B. To this end, bargaining unit nurses will be included as full members of all such committees. The number of bargaining unit nurses included on any particular committee, where not separately specified elsewhere in this Agreement, shall be by mutual agreement between the parties.
- C. The selection of the individual nurses to serve on each committee shall in all cases be at the discretion of the Union, which shall inform the Employer in writing of the names selected. Whenever more than one (1) nurse is to be included on a committee and the committee composition is not separately specified elsewhere in this Agreement, the Union will endeavor to select committee nurses who are interested in the work of the Committee from different areas, shifts, etc., of the bargaining unit.
- D. Existing committees covered by this Article include, but are not limited to:
  - 1. Joint Labor-Management Committees
    - a. Employee-Employer Management Conference Committee
    - b. Joint Health and Safety Committee
    - c. Quality Nursing and Career Development Committee d. ARNP Committee
  - 2. Other Hospital/Medical Staff Committees
    - a. Affirmative Action Committee
    - b. Employee Assistance Program Committee

- c. Bio-Ethics Committee
- d. Health & Safety Committee
- e. ICU Committee/Critical Care Committee
- f. Infection Control Committee
- g. Health Information Management Committee
- h. Nursing Policy and Procedure Committee
- i. Pharmacy & Therapeutics Committee
- j. Product Review & Analysis Committee

It is recognized that these committees will not be used for continuing negotiations.

## **ARTICLE XXIII - SAFETY AND HEALTH**

### **SECTION 1. GENERAL RECOGNITION**

It is the responsibility of the Employer to provide safe and healthy working conditions in all present and future installations and to enforce safe working practices.

Nothing in this Agreement shall imply that the Union has undertaken or assumed any legal liability to provide a safe workplace.

### **SECTION 2. JOINT HEALTH AND SAFETY COMMITTEE**

#### **A. Purpose**

The purpose of the committee is to identify and investigate health and safety hazards and make recommendations on preventive measures. Additionally, the committee will assist in monitoring all ongoing health and safety programs to assure their effectiveness in preventing hazardous working conditions. Investigation and monitoring may include work site inspections as requested by the Union.

The committee shall have the authority to make recommendations to correct health and safety hazards. The committee may research and make recommendations for safer substitutes or modifications to the new equipment, medical treatments and/or processes to the Product Review Analysis Committee.

The Employer shall provide the Committee on a quarterly basis with data containing the vital information on all work-related injuries and

illnesses, including but not limited to injury-on-duty quarterly reports which will include needle-stick and sharps injuries.

**B. Establishment**

The Employer will continue to comply with applicable federal, state, and county laws and regulations pertaining to occupational safety and health. To this end, any unsafe conditions reported by employees will receive priority corrective action by Management. If an employee believes a task or area is hazardous or unsafe the employee will inform his/her immediate supervisor. If the employee and supervisor do not agree on the matter, the employee will have direct access to the Management personnel on that shift who has been designated by the Employer to resolve possible imminent danger hazards. The decision of this designated Management personnel shall be final. Every reasonable effort will be made to remedy such conditions as soon as possible.

**C. Make-up of Committee**

The committee shall be composed of eighteen (18) members. Nine (9) members may be designated by the Employer. Nine (9) members may be designated by the Union with no more than one (1) per patient care unit. The Committee will be co-chaired by Union and Management.

**D. Meetings and Agenda**

The Committee shall meet at least monthly and at other times when either side feels that there is a health and safety issue that requires immediate attention from the Committee. Each party will submit to the Chair for that meeting an agenda of topics to be discussed at least five (5) days prior to the regularly scheduled meetings. Either side may place any safety and health issue on the agenda.

**SECTION 3. NEW PRACTICES AND PROCEDURES**

The Employer will inform the Union as soon as possible of the planned implementation of any new equipment, medical treatment and/or processes. Employees who are affected by any new equipment, medical treatment and/or processes shall be provided, prior to implementation, with the strongest feasible protection from hazards including but not limited to engineering controls, personal protective equipment, safer substitutes, and proper education and training.

**SECTION 4. PROTECTION FROM RESPIRATORY HAZARDS AND INFECTIOUS DISEASES**

**A. Infectious Diseases**

The Employer shall provide the strongest feasible protection to employees from occupational transmission of bloodborne and airborne

infectious diseases, including but not limited to Tuberculosis and HIV/AIDS, through the use of engineering controls, work practice controls, personal protective equipment, training and education and the development of a comprehensive bloodborne and airborne infectious disease program.

## B. Asbestos

The Employer shall inform all employees about all known materials that contain asbestos in their work areas. The Employer shall notify all employees of asbestos removal in work areas where asbestos removal is scheduled to take place; supply copies of asbestos air monitoring for that area; and ensure the strongest feasible protection is provided to employees in the area where removal procedures are being performed.

The Employer shall provide a contact person and phone number for questions regarding asbestos-containing materials and to report any damage to asbestos-containing materials. The Employer must post the name and number of the contact person throughout the hospital.

## **SECTION 5. ON THE JOB ASSAULT**

The Employer has a responsibility to take all reasonably practical steps to protect employees from physical assault on the job. No employee shall be disciplined for using reasonable measures to protect himself/herself from assault.

The Health and Safety Committee shall make recommendations on policies to prevent on the job physical assault, manage violent situations and provide support to workers who have experienced or face on the job assault.

## **SECTION 6. SECURITY**

The Employer will provide secure, limited access to all PHT facilities to protect bargaining unit employees and patients. Ongoing issues of security shall be addressed in the Health and Safety Committee.

## **SECTION 7. SAFE PATIENT HANDLING AND MINIMAL LIFT TEAM**

Consistent with the hospital's commitment to provide a safe and healthy workplace for employees and to ensure the highest quality care, the parties agree to maintain the safe patient handling and minimal lift plan.

The parties agree to maintain the multi-disciplinary team and to maintain the plan. The team shall consist of equal members of direct care providers and Employer representatives and others as necessary to develop an effective plan.

## **ARTICLE XXIV - QUALITY NURSING AND CAREER DEVELOPMENT COMMITTEE**

### **SECTION 1. ESTABLISHMENT**

To further their common goal - the delivery of quality healthcare to patients by nursing staff who are personally and professionally challenged, the Quality Nursing and Career Development (QNCD) Committee will be formed and will have nurse representation from throughout the bargaining unit.

### **SECTION 2. PURPOSE**

The purpose of the QNCD Committee is to establish a mechanism for constructive discussion of matters related to the quality of patient care and professional nursing practice and to ensure ongoing professional nurse development. Types of issues that should be brought to this committee include but are not limited to changes in staffing levels, alternate work schedules, job descriptions, non-nursing duties, educational and recognition programs, mentorship activities and recruitment and retention activities. Except as provided herein, the committee shall not be limited in the matters it may discuss pertaining to patient care or nursing practice.

### **SECTION 3. MATTERS ELIMINATED FROM DISCUSSION**

- A. Pending grievances or items properly handled under the grievance procedure.
- B. Individual disciplinary actions and individual performance evaluations.
- C. Matters or processes for which there are established joint committees or procedures. It is recognized that the QNCD Committee will not be used for continuing negotiations.

### **SECTION 4. MAKE-UP OF THE COMMITTEE**

The Committee shall be composed of no more than one representative per one hundred (100) bargaining unit RNs selected by the Union, however, no more than one (1) per patient care unit.

The Senior Vice President of Patient Care Services may designate up to eight (8) management representatives to the QNCD Committee. The parties agree to each designate a committee representative to serve as co-chairs.

### **SECTION 5. MEETINGS AND AGENDA**

The Committee will meet at least monthly. Committee members will be granted necessary paid time off for meetings, as provided under Article VI of this Agreement. Each party will submit its agenda of topics to be discussed at

least five (5) calendar days prior to the scheduled meeting. When an agenda item submitted by a Committee representative indicates the involvement of a Hospital Center or area of the Hospital not represented on the Committee, the Employer agrees that a representative of said Hospital Center or area will attend the QNCD Committee meeting.

The parties agree that the Agenda will include, but is not limited to patient satisfaction, hospital acquired skin breakdown and hospital acquired infection rates.

## **SECTION 6. RECOMMENDATIONS**

The Committee shall make reasonable and good faith efforts to develop broad consensus on the issues before it and to make recommendations as expeditiously as possible. Majority recommendations shall be forwarded in written form to the Senior Vice President of Patient Care Services.

### **ARTICLE XXV - MANAGEMENT RIGHTS AND SCOPE OF THIS AGREEMENT**

- A. It is understood and agreed that the Employer possesses the sole right, duty and responsibility for operation of Employer facilities, and that all management rights repose in it, but that such rights must be exercised consistently with the other provisions of this Agreement.
- B. These rights include, but are not limited to the following:
  - 1. Determine the missions and objectives of the Employer;
  - 2. Determine the methods, means and number of personnel needed to carry out Employer responsibilities;
  - 3. Take such actions as may be necessary to carry out services during emergencies declared by the Employer;
  - 4. Direct the work of the employees, determine the amount of work needed, and in accordance with such determination relieve employees from duty or reduce their hours of work. In addition, relieve employees from duty or reduce their hours of work for lack of work or funds or other legitimate reasons;
  - 5. Discipline or discharge employees for just cause in accordance with applicable sections of the Miami-Dade County Code and the personnel rules of the Employer including the right to make reasonable rules and regulations for the purpose of efficiency, safe practices and discipline. The Employer will inform the Union of any changes in the existing rules and regulations before such changes are made effective;

6. Schedule operations and shifts;
7. Introduce new or improved methods, operations or facilities;
8. Hire, promote, transfer or assign employees;
9. Schedule overtime work as required;
10. Contract out for goods and services;
11. Establish health care policy and determine relationships between the Employer and governmental, educational and community agencies.

The parties acknowledge that during the negotiations which preceded this Agreement each had the unlimited right and opportunity to make demands and proposals with respect to the subject or matter and that the understandings and agreements arrived at by the parties after the exercise of that right and opportunity are set forth in this Agreement. This Agreement, including its supplements and exhibits attached hereto, concludes all collective bargaining between the parties during the term hereto, and constitutes the sole, entire and existing Agreement between the parties hereto, and supersedes all prior Agreements and undertakings oral and written, express or implied, or practices, between the Employer and the Union or its employees, and expresses all obligations and restrictions imposed on each of the respective parties during its term.

## **ARTICLE XXVI – TOXICOLOGY AND ALCOHOL TESTING**

The Employer and the Union recognize that employee substance and alcohol abuse can have an adverse impact on Miami-Dade County government, the PHT's operations, the image of employees and the general health, welfare and safety of the employees, and the general public.

The Employer shall have authority to require employees to submit to toxicology and alcohol testing designed to detect the presence of any controlled substance, narcotic drug, or alcohol. The Employer agrees that requiring employees to submit to testing of this nature shall be limited to circumstances that indicate reasonable grounds to suspect that the employee is under the influence of such substances, suffers from substances or alcohol abuse, or is in violation of the Personnel Rules or Departmental Rules and Regulations regarding the use of such substances.

Employees reasonably believed to suffer from substance abuse may be referred, at the department's discretion, to the Employee Assistance

Program. An employee who voluntarily seeks assistance for substance abuse may not be disciplined for seeking assistance. However, voluntary participation in a substance abuse program shall not preclude discipline for the employee should job performance or employee conduct issues arise.

It is further understood by the parties that the aforementioned authority to require that employees submit to such testing be approved by a division director, or higher authority within the department to ensure proper compliance with the terms of this article. An employee who is to be tested in accordance with the provisions of this article, will be permitted to make a phone call to the Union. This phone call shall not prevent, inhibit, or unreasonably delay the testing of such employee.

The results of such test or the employees' refusal to submit to toxicology or alcohol testing as provided for in this article, can result in appropriate disciplinary action in accordance with the applicable provision of the County Code, the Personnel Rules, Departmental Rules and Regulations and this Collective Bargaining Agreement.

The parties agree that toxicology and alcohol testing are an acceptable part of regularly scheduled Employer required physical examinations.

## **ARTICLE XXVII - PHYSICAL AND PSYCHOLOGICAL IMPAIRMENTS**

A department director or their authorized representative(s) shall have the authority to require employees that have been determined, through reasonable suspicion, by the Department to possibly suffer from a physical, psychological or psychiatric impairment which may prevent the employee from satisfactorily performing the complete duties and responsibilities of his/her position, to submit to a physical, medical, psychological, or psychiatric examination deemed necessary for purposes of determining the employee's fitness to perform the complete duties and responsibilities of his/her position.

Such examinations will be performed by a physician approved and appointed by the Employer. The results of such examination(s) shall be promptly furnished to the concerned department director or their authorized representative. The results of the applicable information submitted by the examining physician to the Employer should be limited to information that is pertinent to the issues of the employee's ability to perform the duties and responsibilities of his/her position.

Based upon the results of such examinations, and other relevant information, the department director may place the employee on either paid or unpaid compulsory leave in accordance with the provision of the Leave Manual until such time as the department is satisfied that the employee can return to work. The department may require the employee or attending physician to furnish additional pertinent medical reports or information deemed necessary while the employee is on compulsory leave. The period of compulsory leave shall

not exceed one (1) year. Should the condition be corrected and so certified by the attending physician or psychologist, the employee may petition the Department for reinstatement. If the employee's petition for reinstatement is denied by the department, disciplinary action must be initiated by the department in accordance with the Personnel Rules. Nothing in the provision of this article shall prevent the concerned department from administering appropriate disciplinary action in accordance with the Personnel Rules and this Collective Bargaining Agreement.

## **ARTICLE XXVII - ASSIGNABILITY OF CONTRACT**

The provisions of this Agreement shall be binding upon the parties hereto and upon their successors and assigns (as those terms are defined by state or federal labor law, including but not limited to a taxing district or 501(c)(3) designated entity) for the full term of this Agreement. The parties agree that the terms and obligations herein contained shall not be affected, modified, altered or changed in any respect by the transfer or assignment by the Employer of any or all of its property, control, ownership or management or by any change in the legal status of the Employer or any part thereof. The parties further agree that:

- A. In the event of a sale, merger, assignment, or other transfer of operations of the Hospital, prior to the sale, merger, assignment or transfer the Hospital shall:
  1. Inform the prospective purchaser, merger party, assignee, transferee or other relevant acquiring or surviving entity ("New Employer") of the existence of this Agreement and of its terms and conditions;
  2. Provide a copy of this Agreement to the New Employer;
  3. Require as a condition of the sale, merger, assignment or transfer that the New Employer shall recognize the Union as the collective bargaining representative;
  4. Require as a condition of the sale, merger, assignment or transfer that the New Employer shall assume (by written instrument executed with the Union) this Agreement between the Hospital and Union [subject to the modification that the New Employer shall offer comparable benefit plans in lieu of benefits plans that are specifically administered by and available only through the Hospital, for the remainder of its term];
  5. Including the foregoing terms and conditions in a binding, written agreement between the Hospital and the New Employer, which states that the Union and the bargaining unit employees covered by this Agreement are the intended beneficiaries of these terms and conditions with the legal right to enforce them; and

6. Provide the Union satisfactory documentation of compliance with the foregoing terms and conditions prior to the sale, merger, assignment or transfer.

## **ARTICLE XXIX – MISCELLANEOUS**

Should any part of this Agreement or any portion herein contained be rendered illegal, legally invalid or unenforceable by a Court of competent jurisdiction, or by the decision of any authorized governmental agency, such invalidation of such part or portion of this Agreement shall not invalidate the remaining portion thereof. In the event of such occurrence, the parties agree to meet immediately, and, if possible, to negotiate substitute provisions for such parts or portions rendered or declared illegal or invalid. The remaining parts and provisions of this agreement shall remain in full force and effect.

The parties recognize that during the term of this Agreement situations may arise which require that terms and conditions set forth in this Agreement must be clarified or amended. Under such circumstances, SEIU Local 1991 is specifically authorized by bargaining unit employees to enter into the settlement of grievance disputes or memoranda of understanding to clarify or amend this Agreement without having to be ratified by bargaining unit members.

## **ARTICLE XXX - STRIKES AND LOCKOUTS**

There will be no strikes, work stoppages, picket lines, slowdowns or concerted failure or refusal to perform assigned work by the employees or the Union and there will be no lockouts by the Employer for the duration of this Agreement. The Union guarantees to support the Employer fully in maintaining operations in every way.

Any employee who participates in or promotes a strike, work stoppage, picket line, slowdown, or concerted failure or refusal to perform assigned work may be discharged or otherwise disciplined by the Employer.

It is recognized by the parties that the Employer and the Union are responsible for and engaged in activities which are the basis of the health and welfare of our citizens and that any violation of this section would give rise to irreparable damage to the Employer and to the public at large. Accordingly, it is understood and agreed that in the event of any violation of this section the Employer shall be entitled to seek and obtain immediate injunctive relief. However, it is agreed that the Union shall not be responsible for any act alleged to constitute a breach of this section if it can show that the Union did not instigate, authorize, condone, sanction or ratify such action, and further, that the Union has used every reasonable means to prevent or terminate such action.

## **ARTICLE XXXI - TERM OF AGREEMENT**

- A. The collective bargaining agreement between the PHT, Miami Dade County and Local 1991, Service Employees International Union, shall be effective October 1, 2023 and continue to September 30, 2026.

- B. The parties agree to resume bargaining no later than June 1, 2024 for the sole purpose of negotiating Cost of Living Adjustment (COLA), Clinical Nursing Ladder, and Medical-Surgical Staffing ratios at Jackson Memorial Hospital.
- C. The parties to agree to resume bargaining no later than June 1, 2025 for the sole purpose of negotiating a Cost of Living Adjustment (COLA).
- D. Either party may require by written notice to the other no later than June 30, 2026 negotiations concerning modification, amendments, and renewal of this Agreement to be effective October 1, 2026.

## **ARTICLE XXXII - NURSE STAFFING RATIOS**

In recognition of the fact that sufficient nurse staffing is imperative to the development of a healthy practice work environment, evidenced by the following: a collaborative practice culture; expert, competent, credible, and visible leadership; shared decision- making; patient safety; and, recognition of nurses for their meaningful contribution to practice, Jackson Health System (JHS) shall implement the following Nurse Staffing Ratios:

- 1. When planning staffing in advance or for the next shift, and taking into consideration the acuity, case mix index, technology and equipment needs, infection control needs, qualified available staff etc., staffing patterns will be:
  - A. Adult medical, surgical, rehabilitation and palliative care patients, one (1) registered nurse for up to six (6) patients.
  - B. Telemetry patients, one (1) registered nurse for up to five (5) patients.
  - C. Pediatric Medical/Surgical patients, one (1) registered nurse for up to five (5) patients.
  - D. Medical Oncology and Gyn/Gyo patients, one (1) registered nurse for up to five (5) patients.
  - E. Transplant and Intermediate Care patients, one (1) registered nurse for up to three (3) or four (4) patients based on acuity.
  - F. Acute and emergency mental health patients, one (1) registered nurse for up to nine (9) patients with direct support from a number of care providers who are specially-trained in the management of the psychiatric milieu. Depending on the acuity, complexity and mix of psychiatric patients being cared for within a clinical service, the number of patients assigned to each Mental Health RN can be adjusted to promote concurrent safe staffing.

- G. Geriatric Psychiatric patients, one (1) registered nurse for up to eight (8) patients.
- H. In Emergency Services, one (1) registered nurse for up to four (4) or five (5) patients based on acuity.
- I. Critical Care patients, one (1) registered nurse for up to two (2) patients.
- J. Charge Nurse and/or Associate Nurse Managers will not routinely be assigned patients.
- K. The staffing ratios provided for in this Article will apply regardless of whether the patient is physically located in the units specified above.
- L. In blended units, staffing will be based on the acuity of the patient(s).

Patient acuity, not the unit in which they are housed, will determine the appropriate ratio.

2. Additionally, the Jackson Health System will endorse and make every reasonable effort to adhere to the staffing ratios/guidelines set forth and recommended by national professional nursing organizations (i.e., AWHONN [Association of Women's Health, Obstetric and Neonatal Nurses]; RPICC [Regional Perinatal Intensive Care Center]; AORN [Association of Peri- Operative Registered Nurses]; ASPAN [American Society of Peri-Anesthesia Nurses], etc.) and external regulatory agencies (i.e., DCF, AHCA, and the Florida Department of Health, Office of Trauma), unless a different staffing ratio/guideline is specifically set forth above.

Unforeseen emergencies and swings in volume, and multiple unplanned absences in any one unit, may at times preclude compliance with this Article. When a unit is not in compliance with this Article under these circumstances, the Department Manager or his/her designee will immediately make all reasonable attempts to return the unit to compliance by assigning additional personnel to the unit. The Nurse Manager, Associate Nurse Manager, Nurse Educator or Charge Nurse may temporarily assume a patient assignment until the unit is back in compliance, but no longer than is necessary to resolve the issue. It is not a violation of this Article for a registered nurse to step away temporarily for breaks, meals, and to meet their personal needs as consistent with professional judgment.

JHS agrees that a pre-grievance meeting will occur between the Associate VP of Human Resources (or designee), the CNO of the

affected area, and the President of SEIU 1991 (and/or designee) within 72 hours of an alleged violation of the ratios listed above.

This Article shall be enforceable by expedited arbitration. An arbitration hearing will be held within five (5) business days of notice by the Union that the Hospital is not in compliance with this Article. The parties agree the hearing could be telephonic. The arbitrator will announce a “bench ruling” at the conclusion of the hearing which will be followed up by a written ruling within thirty (30) days of the hearing.

### **ARTICLE XXXIII - PENSION BENEFITS**

- A. Effective March 1, 2012, the pension benefits of the Public Health Trust Retirement Plan shall be amended to reflect the following changes to the pension benefits of the Florida Retirement System (FRS) which became effective July 1, 2011: cost-of-living adjustments; changes to the definition of retirement age for new hires, other than the increase of the minimum years of service requirement; and changes to the calculation of average final compensation for new hires. Similarly, effective upon ratification of this Agreement, employee contribution levels shall also be amended to reflect the FRS employee contribution levels in effect as of July 1, 2011 (3% of pensionable earnings on a pre-tax basis, other than per diem pool).
- B. The Summary Plan Description for the PHT Retirement Plan shall be amended to conform to this Agreement, and a copy shall be provided to the Union upon its completion.

### **ARTICLE XXXIV – EMPOWERMENT PROGRAM FOR SEIU REGISTERED NURSES, ATTENDING PHYSICIANS & PROFESSIONALS BARGAINING UNITS**

#### **SECTION 1. LABOR-MANAGEMENT PARTNERSHIP AGREEMENT**

- A. Purpose

Health care services and the institutions that provide them are undergoing rapid change. Advances in health care and ensuring the well-being of the Miami-Dade County community present challenges as well as opportunities for the Public Health Trust (PHT), the public, SEIU Local 1991 (Union), and the members they represent. The PHT and the Union believe that now is the time to enter into a new way of doing business. Now is the time to unite around our common purposes and work together to most effectively deliver high quality health care.

Founded on the common principle of making life better for those we serve, it is our common goal to make Jackson Health System (JHS) a pre-eminent deliverer of health care in the United States. It is further

our goal to demonstrate by any measure that labor-management collaboration produces superior health care outcomes, leading performance, and a superior workplace for PHT employees.

In this spirit and with this intent, the PHT and the Union agree to establish a partnership in pursuit of our common goals to:

- Improve quality health care for the communities we serve;
- Assist the PHT in achieving and maintaining leading performance;
- Make the PHT a better place to work;
- Provide PHT employees with the maximum possible employment and income security within the PHT; and
- Involve employees and their union in operational, clinical, and business decisions.

## B. Process and Structure

### 1. Senior Partnership Committee

The parties will establish a Senior Partnership Committee (SPC) consisting of an equal number of (but not less than four (4) each) PHT executive level staff and Union leadership. JHS's COO and CFO, as well as the Union President, will be members of the SPC. The COO and the Union President shall be co-chairs of the SPC. The SPC may expand the Partnership to include representatives of other parties as necessary, as agreed to by the labor and management representatives on the SPC. The responsibilities of the SPC are to establish, consistent with the terms and scope outlined in this agreement, targets, goals, objectives, time lines and other Partnership initiatives. The SPC will meet as often as necessary but no less than twice per quarter to discuss strategic issues of the Partnership, and implement, review and oversee initiatives at all levels.

The powers of the SPC do not supersede the legally mandated obligations of the parties such as the duty to bargain over mandatory subjects, the responsibilities and duties of the governing board of the PHT, and the duty of the Union to represent the interests of its members. However, any initiatives approved by a super majority vote (i.e. six (6) out of eight (8)), of the members of the SPC shall not be rejected.

The initial initiatives of the Partnership shall be: (1) Primary Care Implementation, (2) ER through-put, and (3) Clinical Staffing and Training.

## 2. Access to Information

It is the express intention of the parties to freely share information with each other. The parties will have timely access to all relevant and pertinent information necessary to address the purpose of the Partnership. The PHT will provide such documentation at no cost to the Union.

## 3. Consultants

The parties will jointly select a third-party consultant to assist the Partnership formation and implementation process and to continue with such assistance until such time as the SPC members agree that these services are no longer required. The PHT and the Union shall be equally responsible for all fees and costs of the consultant hired for the first \$200,000 annually; thereafter, the PHT will be responsible for the fees and costs of the consultant.

## 4. Partnerships at Other Organizational Levels

The SPC acknowledges that the involvement of employees from all levels of the organization in appropriate and relevant issues results in high quality decisions beneficial to the continued viability of the enterprise. To this end, the SPC may create joint committees to monitor the implementation of action plans and initiatives. All joint committees created by the SPC will consist of an equal number of members from the Union and the PHT.

## 5. Costs of the Partnership

Following execution of this agreement, the PHT shall cover lost time for any PHT employees who are members of the SPC to attend these meetings. Any lost time for bargaining unit employees chosen by the Union to participate in any sub-committee established by the SPC shall be covered by the Union.

## 6. Scope

The issue of scope is inextricably tied to decision making. Scope sets the boundaries for the Partnership; what is in play, what is not. The decision-making process describes the procedures for disposing of or resolving the issues deemed within the parameters of the Partnership.

The scope of this Partnership should be broad and includes: strategic initiatives; quality; member and employee satisfaction; business planning; and business unit employment issues.

With respect to quality, we recognize that business units aim to meet and/or exceed quality requirements of various accrediting and review organizations. The SPC's quality focus will be on achieving results to meet and surpass these requirements.

Business unit activities will be consistent with principles established at the strategic level.

7. Existing Labor-Management Cooperation Arrangements

These arrangements should be permitted to continue and where possible be enhanced by partnering efforts.

8. Current and Future Business Issues and Plans

The PHT will make every effort to educate and fully brief members of the SPC about current business initiatives, business plans, including executive plans and plans relating to bonds, and the environment in which the PHT currently operates. Opportunity for recommendations will be made available to Partnership participants with respect thereto. Business initiatives or plans, including executive plans and plans relating to bonds, begun following formal establishment of the Partnership will be managed in compliance with the Partnership process outlined in this document and opportunity for recommendations will be made available to Partnership participants before final decisions are made where feasible.

9. Employment Security

There will be no loss of employment to any employee because of participation in a Partnership program at the worksite.

10. Applicability

Articles VII and VIII do not apply to subsections B., 1, 2, 3, 5 and 9 of this Section.

## **SECTION 2. EMPOWERMENT AND EFFICIENCIES**

The Union and the Employer recognize that it is in the interest of all parties and the public to ensure the stability, efficiency, and improvement of the Jackson Health System. To that end, upon ratification of this Agreement, the Employer shall provide one million dollars (\$1,000,000.00) annually to SEIU for the Registered Nurses, Professionals and Attending Physicians bargaining units to work on ways to achieve these goals (the "Empowerment and Efficiencies Funds"), or, alternatively, and in lieu of the aforementioned and upon mutual agreement, the Employer shall provide no less than 8 FTE paid released employees (total and not "per bargaining unit") selected by the SEIU to work on ways to achieve these goals (or upon mutual agreement, a combination of less than 8 FTE paid released employees and monetary payment to the maximum combined value of one million dollars).

Any expert or consultant hired by the Union shall have access to all SEIU requests for data, financial records (including underlying primary documents), financial analyses, models, computer runs, contracts, billing, audits and other records. The documents shall be provided at no charge. The parties agree to discuss the most cost effective ways to provide information requested. Such experts or consultants shall be provided access to the employer facilities and shall be provided suitable working space at the facility.

The parties expressly agree that an accurate on-going accounting of the one million dollars (\$1,000,000.00) of Empowerment and Efficiencies Funds expenditures will be provided in detail on a quarterly basis. In that regard, beginning January 1, 2022, SEIU will send to the Employer a quarterly accounting of all moneys expended and the current balance of the funds. The accounting will include all purchases and/or payments to/from individuals or organizations, with invoices submitted by such individuals or organizations related to the expenditures. The accounting will be provided quarterly to the Senior Partnership Committee. It is further agreed that if funds are used to pay salaries or stipends to employees of SEIU and/or the PHT, each recipient will detail their activities, which must involve direct representational actions on their part on behalf of bargaining unit employees. SEIU will oversee any such payments to ensure these activities comply with the law.

## **ARTICLE XXXV - HEALTH AND WELLNESS CULTURE**

The Public Health Trust has implemented health and wellness programs which benefit employees and promote an optimal state of wellness.

### **SECTION 1. INTRODUCTION**

Jackson Health System, in collaboration with the Union, is committed to the optimal health of every employee. The purpose of the wellness program is to create an emphasis on wellness from a perspective that promotes overall balance, awareness, and well-being such that employees can thrive in work and life.

The top motivators for offering a program are to reduce healthcare costs, improve the health of employees, reduce absenteeism/presenteeism, improve employee morale, increase productivity, and provide an example to the community.

### **SECTION 2. PILLARS OF WELLNESS**

1. Role model of health
2. Culture of healthy living
3. Provide variety of programs

4. Provide positive incentives
5. Track participation with outcomes
6. Measure for Return on Investment (ROI)
7. Sustainability

### **SECTION 3. GOALS & OBJECTIVES**

- Primary Goals:
  - o Nutrition coaching
  - o Physical activity
  - o Stress management
- Secondary Goals:
  - o Weight management
  - o Smoking Cessation
  - o Biometric screening –PCP visit
    - ◇ Diabetes
    - ◇ HTN (hypertension)
    - ◇ Cardiovascular disease markers, such as cholesterol
- Tertiary Goals:
  - o Existing health problems
  - o Reduce and/or control symptoms
  - o Chronic illness management:
    - ◇ Hypertension
    - ◇ Diabetes
    - ◇ Obesity
    - ◇ Tobacco

## **SECTION 4. IMPLEMENTATION AND RECOMMENDATIONS:**

- Create Wellness Taskforce of equal parts JHS Management and the Union recommending 3 and 3 for the purpose to further mature the wellness program.

Recommendations to be considered by the Wellness Taskforce:

- Nutrition with counseling
- Permanent designated areas for lactating employees in each building
- Nutrition Specialist/coaches included in our benefit
- Nutrition Specialist counseling on campus (Employee Health Services.) to help employees with food addictions
- Partner with Sodexo:
- Color code high calorie foods versus medium and low calorie food on glass panels in cafeteria. Should be visible
- Discounts for low calorie foods
- More healthy food available at all hours in cafeteria and vending machines
- Cafeteria should offer weight watchers program with a selection of meals on a daily basis. Should also provide flyers, classes, and education.
- “Healthier Hospital Initiative” - multiple hospitals participates
- Bring back farmer’s market at the Alamo and introduce it at all campuses
- Spouse eligibility for all programs to boost motivation for continuous wellness especially on off-hours
- Physical activity
- Outdoor and indoor walking paths (all campuses)
- Stairs/motivational signs
- In-house gym or gym discounts (more gyms added to list), trainer discounts, and gym classes/programs discounts
- Biometric/wellness screenings quarterly in house (all campuses)

- Online wellness profiles for employees
- Incentives for community walks/runs/etc.
- Current UM wellness center discount or tiered program for participation and free Jackson employee trainers
- Access to water in each unit
- Stress management
- Chair massage
- Email newsletter for ideas for: Stretch breaks, Yoga breaks, Meditation breaks, etc.
- 15min sleeping breaks after lunch
- Tracking and Sharing:
- Department of Nutrition/Employee Services Nutrition Specialists team
- Offer employees to buy “Step Counters”, “Fitbits”, or other trackers at discount
- Using badge IDs or Calorie/step count Score Cards to keep track of wellness programs’ success
- Platform where employees can participate and offer not only each other help and share ideas and stories but can also provide ideas for the Department of Nutrition/Employee services Nutrition Specialists team
- Offer scheduled counseling, lectures, and newsletter on Jackson Media
- Newsletter should include healthy eating meals, for employees who reached goals, made improvements in their lifestyle, and other success stories
- Provide Return on Investment (ROIs) for the employees, employee-groups, and overall hospital

## **SECTION 5. JOIN THE MOVEMENT (WELLNESS INCENTIVE PLAN)**

All bargaining unit members currently enrolled in PHT health insurance will be eligible to participate in the Jackson Health System Wellness Program. This program will allow bargaining unit members to earn and accumulate wellness reward points. In order to begin earning reward points, bargaining

unit members must first complete a Personal Health Assessment and their annual wellness visit.

Below is a sample breakdown of the activities available for bargaining unit members to participate in, and the corresponding value of reward points. These activities and points are subject to change on an annual basis.

- Disease Management → 20 reward points
- Weight Watchers → 10 reward points
- Biometric Screening → 5 reward points
- Flu shot → 10 reward points
- Complete the CHIP Journey → 15 reward points
- Wellness Challenge → 5 reward points each, 25 points max
- Be Smoke Free → 5 reward points
- Emotional Wellbeing → 5 reward points each
- Maintain a Healthy BMI- 10 reward points
- Elect a JHS primary Care Physician → 15 reward points

An accumulation of 50 reward points will be worth Fifty (\$50.00) dollars; 75 reward points will be worth Seventy-five (\$75.00) dollars and 100 reward points will be worth One hundred and fifty (\$150.00) dollars. The deadline to complete the program and submit any required documentation is December 1st, with incentive to be paid out in January of the following calendar year.

All forms, websites, and an updated activity list can be found on [www.JacksonBenefits.org](http://www.JacksonBenefits.org).

**SEIU RN STEP PROGRESSION EFFECTIVE 07/09/2023**

MAXIMUM NUMBER OF STEPS:	8	9	10	11
STEP PROGRESSION	Step 1 to Step 2 = 12 months	Step 1 to Step 2 = 12 months	Step 1 to Step 2 = 12 months	Step 1 to Step 2 = 12 months
	Step 2 to Step 3 = 12 months	Step 2 to Step 3 = 12 months	Step 2 to Step 3 = 12 months	Step 2 to Step 3 = 12 months
	Step 3 to Step 4 = 12 months	Step 3 to Step 4 = 12 months	Step 3 to Step 4 = 12 months	Step 3 to Step 4 = 12 months
	Step 4 to Step 5 = 12 months	Step 4 to Step 5 = 12 months	Step 4 to Step 5 = 12 months	Step 4 to Step 5 = 12 months
	Step 5 to Step 6 = 12 months	Step 5 to Step 6 = 12 months	Step 5 to Step 6 = 12 months	Step 5 to Step 6 = 12 months
	Step 6 to Step 7 = 36 months	Step 6 to Step 7 = 24 months	Step 6 to Step 7 = 24 months	Step 6 to Step 7 = 24 months
	Step 7 to Step 8 = 36 months	Step 7 to Step 8 = 36 months	Step 7 to Step 8 = 24 months	Step 7 to Step 8 = 24 months
		Step 8 to Step 9 = 36 months	Step 8 to Step 9 = 24 months	Step 8 to Step 9 = 24 months
			Step 9 to Step 10 = 36 months	Step 9 to Step 10 = 36 months
				Step 10 to Step 11 = 36 months

MAXIMUM NUMBER OF STEPS:	12	13	14	16
STEP PROGRESSION	Step 1 to Step 2 = 12 months	Step 1 to Step 2 = 12 months	Step 1 to Step 2 = 12 months	Step 1 to Step 2 = 12 months
	Step 2 to Step 3 = 12 months	Step 2 to Step 3 = 12 months	Step 2 to Step 3 = 12 months	Step 2 to Step 3 = 12 months
	Step 3 to Step 4 = 12 months	Step 3 to Step 4 = 12 months	Step 3 to Step 4 = 12 months	Step 3 to Step 4 = 12 months
	Step 4 to Step 5 = 12 months	Step 4 to Step 5 = 12 months	Step 4 to Step 5 = 12 months	Step 4 to Step 5 = 12 months
	Step 5 to Step 6 = 12 months	Step 5 to Step 6 = 12 months	Step 5 to Step 6 = 12 months	Step 5 to Step 6 = 12 months
	Step 6 to Step 7 = 24 months	Step 6 to Step 7 = 24 months	Step 6 to Step 7 = 24 months	Step 6 to Step 7 = 24 months
	Step 7 to Step 8 = 24 months	Step 7 to Step 8 = 24 months	Step 7 to Step 8 = 24 months	Step 7 to Step 8 = 24 months
	Step 8 to Step 9 = 24 months	Step 8 to Step 9 = 24 months	Step 8 to Step 9 = 24 months	Step 8 to Step 9 = 24 months
	Step 9 to Step 10 = 24 months	Step 9 to Step 10 = 24 months	Step 9 to Step 10 = 24 months	Step 9 to Step 10 = 24 months
	Step 10 to Step 11 = 36 months	Step 10 to Step 11 = 24 months	Step 10 to Step 11 = 24 months	Step 10 to Step 11 = 24 months
	Step 11 to Step 12 = 36 months	Step 11 to Step 12 = 36 months	Step 11 to Step 12 = 24 months	Step 11 to Step 12 = 24 months
		Step 12 to Step 13 = 36 months	Step 12 to Step 13 = 36 months	Step 12 to Step 13 = 24 months
			Step 13 to Step 14 = 36 months	Step 13 to Step 14 = 24 months
			Step 14 to Step 15 = 36 months	
			Step 15 to Step 16 = 36 months	

MAXIMUM NUMBER OF STEPS:	17
STEP PROGRESSION	Step 1 to Step 2 = 12 months
	Step 2 to Step 3 = 12 months
	Step 3 to Step 4 = 12 months
	Step 4 to Step 5 = 12 months
	Step 5 to Step 6 = 12 months
	Step 6 to Step 7 = 12 months
	Step 7 to Step 8 = 12 months
	Step 8 to Step 9 = 12 months
	Step 9 to Step 10 = 12 months
	Step 10 to Step 11 = 24 months
	Step 11 to Step 12 = 24 months
	Step 12 to Step 13 = 24 months
	Step 13 to Step 14 = 24 months
	Step 14 to Step 15 = 24 months
	Step 15 to Step 16 = 36 months
	Step 16 to Step 17 = 36 months

**SEIU RN RATE SCHEDULE FOR 2023- 2026**

JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
3340	APP Supervisor APRN	1	61.0930		
3340	APP Supervisor APRN	2	63.6587		
3340	APP Supervisor APRN	3	66.3327		
3340	APP Supervisor APRN	4	69.1185		
3340	APP Supervisor APRN	5	72.3111		
3340	APP Supervisor APRN	6	75.3480		
3340	APP Supervisor APRN	7	78.5128		
3340	APP Supervisor APRN	8	81.8103		
3340	APP Supervisor APRN	9	85.2465		
3340	APP Supervisor APRN	10	88.8268		
3340	APP Supervisor APRN	11	92.5575		
3340	APP Supervisor APRN	12	96.4449		
3343	APRN CVTX Navigator	1	53.9990		
3343	APRN CVTX Navigator	2	56.2671		
3343	APRN CVTX Navigator	3	58.6304		
3343	APRN CVTX Navigator	4	61.0930		
3343	APRN CVTX Navigator	5	63.6587		
3343	APRN CVTX Navigator	6	66.3327		
3343	APRN CVTX Navigator	7	69.1185		
3343	APRN CVTX Navigator	8	72.0215		
3343	APRN CVTX Navigator	9	75.0464		
3343	APRN CVTX Navigator	10	78.1972		
3343	APRN CVTX Navigator	11	81.4816		
3343	APRN CVTX Navigator	12	84.9037		
3518	APRN Inpatient	1	53.4750		
3518	APRN Inpatient	2	55.7209		
3518	APRN Inpatient	3	58.0612		
3518	APRN Inpatient	4	60.4998		
3518	APRN Inpatient	5	63.0408		
3518	APRN Inpatient	6	65.6886		
3518	APRN Inpatient	7	68.4474		
3518	APRN Inpatient	8	71.6091		
3518	APRN Inpatient	9	74.6167		
3518	APRN Inpatient	10	77.7505		
3518	APRN Inpatient	11	81.0161		
3518	APRN Inpatient	12	84.4187		
3517	APRN Outpatient	1	49.7339		
3517	APRN Outpatient	2	51.8226		
3517	APRN Outpatient	3	53.9994		
3517	APRN Outpatient	4	56.2672		
3517	APRN Outpatient	5	58.6305		
3517	APRN Outpatient	6	61.0931		
3517	APRN Outpatient	7	63.6588		
3517	APRN Outpatient	8	66.3327		
3517	APRN Outpatient	9	69.1186		
3517	APRN Outpatient	10	72.3112		
3517	APRN Outpatient	11	75.3483		
3517	APRN Outpatient	12	78.5129		
1161	Assoc Nurse Manager	1	39.3295	39.7228	41.3914
1161	Assoc Nurse Manager	2	40.9816	41.3914	43.1296
1161	Assoc Nurse Manager	3	42.7026	43.1296	44.9413
1161	Assoc Nurse Manager	4	44.4963	44.9413	46.8287
1161	Assoc Nurse Manager	5	46.3650	46.8287	48.7955
1161	Assoc Nurse Manager	6	48.3124	48.7955	50.8451
1161	Assoc Nurse Manager	7	50.3417	50.8451	52.9803
1161	Assoc Nurse Manager	8	52.4557	52.9803	55.2055
1161	Assoc Nurse Manager	9	54.6589	55.2055	57.5242
1161	Assoc Nurse Manager	10	56.9547	57.5242	59.9404
1161	Assoc Nurse Manager	11	59.3470	59.9404	62.4579
1161	Assoc Nurse Manager	12	61.8395	62.4579	65.1654
1161	Assoc Nurse Manager	13	64.4658	65.1654	68.3712
1161	Assoc Nurse Manager	14	67.6943	68.3712	71.2428
3423	Assoc Nurse Manager Anesthesia	1	89.9285	90.8278	94.6426
3423	Assoc Nurse Manager Anesthesia	2	93.7056	94.6426	98.6176
3423	Assoc Nl				102.7595
3423	Assoc Nl				107.0753
3423	Assoc Nurse Manager Anesthesia	3	97.5446	97.5722	111.5726
3423	Assoc Nurse Manager Anesthesia	6	110.4679	111.5726	116.2587
3423	Assoc Nurse Manager Anesthesia	7	115.1076	116.2587	121.1416
3423	Assoc Nurse Manager Anesthesia	8	119.9422	121.1416	127.4562
3423	Assoc Nurse Manager Anesthesia	9	126.1942	127.4562	132.8094

SEIU RN RATE SCHEDULE FOR 2023- 2026						
JOB CODE	TITLE	STEP	RATES EFFECTIVE 07/09/2023		RATES EFFECTIVE 10/1/2023	
			8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT	
3423	Assoc Nurse Manager Anesthesia	10	131.4944	132.8094	138.3874	
3642	Assoc Nurse Manager CVTX	1	39.3295	39.7228	41.3914	
3642	Assoc Nurse Manager CVTX	2	40.9816	41.3914	43.1296	
3642	Assoc Nurse Manager CVTX	3	42.7026	43.1296	44.9413	
3642	Assoc Nurse Manager CVTX	4	44.4963	44.9413	46.8287	
3642	Assoc Nurse Manager CVTX	5	46.3650	46.8287	48.7955	
3642	Assoc Nurse Manager CVTX	6	48.3124	48.7955	50.8451	
3642	Assoc Nurse Manager CVTX	7	50.3417	50.8451	52.9803	
3642	Assoc Nurse Manager CVTX	8	52.4557	52.9803	55.2055	
3642	Assoc Nurse Manager CVTX	9	54.6589	55.2055	57.5242	
3642	Assoc Nurse Manager CVTX	10	56.9547	57.5242	59.9404	
3642	Assoc Nurse Manager CVTX	11	59.3470	59.9404	62.4579	
3642	Assoc Nurse Manager CVTX	12	61.8395	62.4579	65.6154	
3642	Assoc Nurse Manager CVTX	13	64.9658	65.6154	68.3712	
3642	Assoc Nurse Manager CVTX	14	67.6943	68.3712	71.2428	
3641	Assoc Nurse Manager Neuro	1	39.3295	39.7228	41.3914	
3641	Assoc Nurse Manager Neuro	2	40.9816	41.3914	43.1296	
3641	Assoc Nurse Manager Neuro	3	42.7026	43.1296	44.9413	
3641	Assoc Nurse Manager Neuro	4	44.4963	44.9413	46.8287	
3641	Assoc Nurse Manager Neuro	5	46.3650	46.8287	48.7955	
3641	Assoc Nurse Manager Neuro	6	48.3124	48.7955	50.8451	
3641	Assoc Nurse Manager Neuro	7	50.3417	50.8451	52.9803	
3641	Assoc Nurse Manager Neuro	8	52.4557	52.9803	55.2055	
3641	Assoc Nurse Manager Neuro	9	54.6589	55.2055	57.5242	
3641	Assoc Nurse Manager Neuro	10	56.9547	57.5242	59.9404	
3641	Assoc Nurse Manager Neuro	11	59.3470	59.9404	62.4579	
3641	Assoc Nurse Manager Neuro	12	61.8395	62.4579	65.6154	
3641	Assoc Nurse Manager Neuro	13	64.9658	65.6154	68.3712	
3641	Assoc Nurse Manager Neuro	14	67.6943	68.3712	71.2428	
3640	Assoc Nurse Manager OR L&D	1	39.3295	39.7228	41.3914	
3640	Assoc Nurse Manager OR L&D	2	40.9816	41.3914	43.1296	
3640	Assoc Nurse Manager OR L&D	3	42.7026	43.1296	44.9413	
3640	Assoc Nurse Manager OR L&D	4	44.4963	44.9413	46.8287	
3640	Assoc Nurse Manager OR L&D	5	46.3650	46.8287	48.7955	
3640	Assoc Nurse Manager OR L&D	6	48.3124	48.7955	50.8451	
3640	Assoc Nurse Manager OR L&D	7	50.3417	50.8451	52.9803	
3640	Assoc Nurse Manager OR L&D	8	52.4557	52.9803	55.2055	
3640	Assoc Nurse Manager OR L&D	9	54.6589	55.2055	57.5242	
3640	Assoc Nurse Manager OR L&D	10	56.9547	57.5242	59.9404	
3640	Assoc Nurse Manager OR L&D	11	59.3470	59.9404	62.4579	
3640	Assoc Nurse Manager OR L&D	12	61.8395	62.4579	65.6154	
3640	Assoc Nurse Manager OR L&D	13	64.9658	65.6154	68.3712	
3640	Assoc Nurse Manager OR L&D	14	67.6943	68.3712	71.2428	
3569	Associate Nurse Manager, CLIR	1	39.3295	39.7228	41.3914	
3569	Associate Nurse Manager, CLIR	2	40.9816	41.3914	43.1296	
3569	Associate Nurse Manager, CLIR	3	42.7026	43.1296	44.9413	
3569	Associate Nurse Manager, CLIR	4	44.4963	44.9413	46.8287	
3569	Associate Nurse Manager, CLIR	5	46.3650	46.8287	48.7955	
3569	Associate Nurse Manager, CLIR	6	48.3124	48.7955	50.8451	
3569	Associate Nurse Manager, CLIR	7	50.3417	50.8451	52.9803	
3569	Associate Nurse Manager, CLIR	8	52.4557	52.9803	55.2055	
3569	Associate Nurse Manager, CLIR	9	54.6589	55.2055	57.5242	
3569	Associate Nurse Manager, CLIR	10	56.9547	57.5242	59.9404	
3569	Associate Nurse Manager, CLIR	11	59.3470	59.9404	62.4579	
3569	Associate Nurse Manager, CLIR	12	61.8395	62.4579	65.6154	
3569	Associate Nurse Manager, CLIR	13	64.9658	65.6154	68.3712	
3569	Associate Nurse Manager, CLIR	14	67.6943	68.3712	71.2428	
3464	Case Manager Clin Resr Utlztn	1	45.5071			
3464	Case Manager Clin Resr Utlztn	2	47.4185			
3464	Case Manager Clin Resr Utlztn	3	49.4101			
3464	Case Manager Clin Resr Utlztn	4	51.4852			
3464	Case Manager Clin Resr Utlztn	5	53.6476			
3464	Case Manager Clin Resr Utlztn	6	55.9008			
3464	Case Manager Clin Resr Utlztn	7	58.2486			
3464	Case Manager Clin Resr Utlztn	8	60.6951			
3464	Case Manager Clin Resr Utlztn	9	63.2444			
3464	Case Manager Clin Resr Utlztn	10	65.9006			
2829	Case Manager RN	1	40.6919			
2829	Case Manager RN	2	42.4010			
2829	Case Manager RN	3	44.1818			
2829	Case Manager RN	4	46.0375			

SEIU RN RATE SCHEDULE FOR 2023- 2026					
JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
2829	Case Manager RN	5	47.9711		
2829	Case Manager RN	6	49.9857		
2829	Case Manager RN	7	52.0852		
2829	Case Manager RN	8	54.2728		
2829	Case Manager RN	9	56.5524		
2829	Case Manager RN	10	59.1650		
2829	Case Manager RN	11	61.6497		
2829	Case Manager RN	12	64.2390		
3414	Clin Doc Coord RN	1	41.9126		
3414	Clin Doc Coord RN	2	43.6728		
3414	Clin Doc Coord RN	3	45.5071		
3414	Clin Doc Coord RN	4	47.4186		
3414	Clin Doc Coord RN	5	49.4102		
3414	Clin Doc Coord RN	6	51.4852		
3414	Clin Doc Coord RN	7	53.6476		
3414	Clin Doc Coord RN	8	55.9008		
3414	Clin Doc Coord RN	9	58.2487		
3414	Clin Doc Coord RN	10	60.9399		
1133	Clinical Care Coordinator	1	41.9126		
1133	Clinical Care Coordinator	2	43.6728		
1133	Clinical Care Coordinator	3	45.5071		
1133	Clinical Care Coordinator	4	47.4186		
1133	Clinical Care Coordinator	5	49.4102		
1133	Clinical Care Coordinator	6	51.4852		
1133	Clinical Care Coordinator	7	53.6476		
1133	Clinical Care Coordinator	8	55.9008		
1133	Clinical Care Coordinator	9	58.2487		
1133	Clinical Care Coordinator	10	60.9399		
2941	Clinical Documentation Educatr	1	43.8502		
2941	Clinical Documentation Educatr	2	45.6919		
2941	Clinical Documentation Educatr	3	47.6110		
2941	Clinical Documentation Educatr	4	49.6107		
2941	Clinical Documentation Educatr	5	51.6943		
2941	Clinical Documentation Educatr	6	53.8653		
2941	Clinical Documentation Educatr	7	56.1278		
2941	Clinical Documentation Educatr	8	58.4852		
2941	Clinical Documentation Educatr	9	60.9415		
2941	Clinical Documentation Educatr	10	63.5011		
2941	Clinical Documentation Educatr	11	66.1684		
3566	Clinical Education Coord	1	40.9815	41.3913	43.1296
3566	Clinical Education Coord	2	42.7025	43.1295	44.9413
3566	Clinical Education Coord	3	44.4963	44.9413	46.8287
3566	Clinical Education Coord	4	46.3650	46.8287	48.7955
3566	Clinical Education Coord	5	48.3123	48.7954	50.8451
3566	Clinical Education Coord	6	50.3417	50.8451	52.9803
3566	Clinical Education Coord	7	52.4557	52.9803	55.2055
3566	Clinical Education Coord	8	54.6589	55.2055	57.5242
3566	Clinical Education Coord	9	56.9546	57.5241	59.9504
3566	Clinical Education Coord	10	59.3469	59.9404	62.4578
3566	Clinical Education Coord	11	61.8393	62.4577	65.1544
3566	Clinical Education Coord	12	64.4657	65.1544	68.0128
3566	Clinical Education Coord	13	67.2427	68.0128	71.0428
3566	Clinical Education Coord	14	70.1733	71.2427	74.2350
2482	Clinical Resource Coordinator	1	45.2661		
2482	Clinical Resource Coordinator	2	47.1673		
2482	Clinical Resource Coordinator	3	49.1483		
2482	Clinical Resource Coordinator	4	51.2127		
2482	Clinical Resource Coordinator	5	53.3637		
2482	Clinical Resource Coordinator	6	55.6049		
2482	Clinical Resource Coordinator	7	57.9402		
2482	Clinical Resource Coordinator	8	60.3739		
2482	Clinical Resource Coordinator	9	62.9095		
2482	Clinical Resource Coordinator	10	65.5160		
3358	Clinical Robotic Nurse	1	38.8769		
3358	Clinical Robotic Nurse	2	40.5094		
3358	Clinical Robotic Nurse	3	42.2110		
3358	Clinical Robotic Nurse	4	43.9836		
3358	Clinical Robotic Nurse	5	45.8312		
3358	Clinical Robotic Nurse	6	47.7560		
3358	Clinical Robotic Nurse	7	49.7619		
3358	Clinical Robotic Nurse	8	51.8519		

**SEIU RN RATE SCHEDULE FOR 2023- 2026**

JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
3358	Clinical Robotic Nurse	9	54.0295		
3358	Clinical Robotic Nurse	10	56.2988		
3358	Clinical Robotic Nurse	11	58.6634		
3358	Clinical Robotic Nurse	12	61.1274		
3358	Clinical Robotic Nurse	13	63.6945		
3358	Clinical Robotic Nurse	14	66.9149		
1136	Clinical Service Coordinator	1	45.2661		
1136	Clinical Service Coordinator	2	47.1673		
1136	Clinical Service Coordinator	3	49.1483		
1136	Clinical Service Coordinator	4	51.2127		
1136	Clinical Service Coordinator	5	53.3637		
1136	Clinical Service Coordinator	6	55.6049		
1136	Clinical Service Coordinator	7	57.9402		
1136	Clinical Service Coordinator	8	60.3739		
1136	Clinical Service Coordinator	9	62.9095		
1136	Clinical Service Coordinator	10	65.8160		
1137	Clinical Staff Nurse	1	33.0053	33.3354	34.7354
1137	Clinical Staff Nurse	2	34.3915	34.7354	36.1944
1137	Clinical Staff Nurse	3	35.8360	36.1944	37.7146
1137	Clinical Staff Nurse	4	37.3412	37.7146	39.2986
1137	Clinical Staff Nurse	5	38.9095	39.2986	40.9492
1137	Clinical Staff Nurse	6	40.5437	40.9492	42.6690
1137	Clinical Staff Nurse	7	42.2466	42.6690	44.4611
1137	Clinical Staff Nurse	8	44.0209	44.4611	46.3285
1137	Clinical Staff Nurse	9	45.8698	46.3285	48.2744
1137	Clinical Staff Nurse	10	47.7965	48.2744	50.3018
1137	Clinical Staff Nurse	11	49.8038	50.3018	52.4145
1137	Clinical Staff Nurse	12	51.8955	52.4145	54.6159
1137	Clinical Staff Nurse	13	54.0752	54.6159	56.9098
1137	Clinical Staff Nurse	14	56.3463	56.9098	59.3000
1137	Clinical Staff Nurse	15	58.7129	59.3000	63.0948
1137	Clinical Staff Nurse	16	62.4701	63.0948	65.7447
1137	Clinical Staff Nurse	17	65.0938	65.7447	68.5060
1138	Clinical Staff Nurse CHS	1	36.2840	36.6468	38.1860
1138	Clinical Staff Nurse CHS	2	37.8079	38.1860	39.7898
1138	Clinical Staff Nurse CHS	3	39.3958	39.7898	41.4609
1138	Clinical Staff Nurse CHS	4	41.0504	41.4609	43.2022
1138	Clinical Staff Nurse CHS	5	42.7745	43.2022	45.0169
1138	Clinical Staff Nurse CHS	6	44.5712	45.0169	46.9076
1138	Clinical Staff Nurse CHS	7	46.4431	46.9076	48.8777
1138	Clinical Staff Nurse CHS	8	48.3937	48.8777	50.9305
1138	Clinical Staff Nurse CHS	9	50.4263	50.9305	53.0695
1138	Clinical Staff Nurse CHS	10	52.5441	53.0695	55.2984
1138	Clinical Staff Nurse CHS	11	54.7509	55.2984	57.6210
1138	Clinical Staff Nurse CHS	12	57.0505	57.6210	60.0412
1138	Clinical Staff Nurse CHS	13	59.4468	60.0412	62.5628
1138	Clinical Staff Nurse CHS	14	61.9434	62.5628	65.1904
1138	Clinical Staff Nurse CHS	15	64.5449	65.1904	67.9286
1138	Clinical Staff Nurse CHS	16	67.2560	67.9286	70.7815
1138	Clinical Staff Nurse CHS	17	70.0807	70.7815	73.7543
3287	Clinical Staff Nurse CVTX	1	33.0053	33.3354	34.7354
3287	Clinical Staff Nurse CVTX	2	34.3915	34.7354	36.1944
3287	Clinical Staff Nurse CVTX	3	35.8360	36.1944	37.7146
3287	Clinical Staff Nurse CVTX	4	37.3412	37.7146	39.2986
3287	Clinical Staff Nurse CVTX	5	38.9095	39.2986	40.9492
3287	Clinical Staff Nurse CVTX	6	40.5437	40.9492	42.6690
3287	Clinical Staff Nurse CVTX	7	42.2466	42.6690	44.4611
3287	Clinical Staff Nurse CVTX	8	44.0209	44.4611	46.3285
3287	Clinical Staff Nurse CVTX	9	45.8698	46.3285	48.2744
3287	Clinical Staff Nurse CVTX	10	47.7965	48.2744	50.3018
3287	Clinical Staff Nurse CVTX	11	49.8038	50.3018	52.4145
3287	Clinical Staff Nurse CVTX	12	51.8955	52.4145	54.6159
3287	Clinical Staff Nurse CVTX	13	54.0752	54.6159	56.9098
3287	Clinical Staff Nurse CVTX	14	56.3463	56.9098	59.3000
3287	Clinical Staff Nurse CVTX	15	58.7129	59.3000	63.0948
3287	Clinical Staff Nurse CVTX	16	62.4701	63.0948	65.7447
3287	Clinical Staff Nurse CVTX	17	65.0938	65.7447	68.5060
1178	Clinical Staff Nurse Float	1	33.0053	33.3354	34.7354
1178	Clinical Staff Nurse Float	2	34.3915	34.7354	36.1944
1178	Clinical Staff Nurse Float	3	35.8360	36.1944	37.7146
1178	Clinical Staff Nurse Float	4	37.3412	37.7146	39.2986

SEIU RN RATE SCHEDULE FOR 2023- 2026						
JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023	
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT	
1178	Clinical Staff Nurse Float	5	38.9095	39.2986	40.9492	
1178	Clinical Staff Nurse Float	6	40.5437	40.9492	42.6690	
1178	Clinical Staff Nurse Float	7	42.2466	42.6690	44.4611	
1178	Clinical Staff Nurse Float	8	44.0209	44.4611	46.3285	
1178	Clinical Staff Nurse Float	9	45.8698	46.3285	48.2744	
1178	Clinical Staff Nurse Float	10	47.7965	48.2744	50.3018	
1178	Clinical Staff Nurse Float	11	49.8038	50.3018	52.4145	
1178	Clinical Staff Nurse Float	12	51.8955	52.4145	54.6159	
1178	Clinical Staff Nurse Float	13	54.0752	54.6159	56.9098	
1178	Clinical Staff Nurse Float	14	56.3463	56.9098	59.3000	
1178	Clinical Staff Nurse Float	15	58.7129	59.3000	63.0948	
1178	Clinical Staff Nurse Float	16	62.4701	63.0948	65.7447	
1178	Clinical Staff Nurse Float	17	65.0938	65.7447	68.5060	
3570	Clinical Staff Nurse FP, CLIR	1	33.0053	33.3354	34.7354	
3570	Clinical Staff Nurse FP, CLIR	2	34.3915	34.7354	36.1944	
3570	Clinical Staff Nurse FP, CLIR	3	35.8360	36.1944	37.7146	
3570	Clinical Staff Nurse FP, CLIR	4	37.3412	37.7146	39.2986	
3570	Clinical Staff Nurse FP, CLIR	5	38.9095	39.2986	40.9492	
3570	Clinical Staff Nurse FP, CLIR	6	40.5437	40.9492	42.6690	
3570	Clinical Staff Nurse FP, CLIR	7	42.2466	42.6690	44.4611	
3570	Clinical Staff Nurse FP, CLIR	8	44.0209	44.4611	46.3285	
3570	Clinical Staff Nurse FP, CLIR	9	45.8698	46.3285	48.2744	
3570	Clinical Staff Nurse FP, CLIR	10	47.7965	48.2744	50.3018	
3570	Clinical Staff Nurse FP, CLIR	11	49.8038	50.3018	52.4145	
3570	Clinical Staff Nurse FP, CLIR	12	51.8955	52.4145	54.6159	
3570	Clinical Staff Nurse FP, CLIR	13	54.0752	54.6159	56.9098	
3570	Clinical Staff Nurse FP, CLIR	14	56.3463	56.9098	59.3000	
3570	Clinical Staff Nurse FP, CLIR	15	58.7129	59.3000	63.0948	
3570	Clinical Staff Nurse FP, CLIR	16	62.4701	63.0948	65.7447	
3570	Clinical Staff Nurse FP, CLIR	17	65.0938	65.7447	68.5060	
3385	Clinical Staff Nurse Neuro	1	33.0053	33.3354	34.7354	
3385	Clinical Staff Nurse Neuro	2	34.3915	34.7354	36.1944	
3385	Clinical Staff Nurse Neuro	3	35.8360	36.1944	37.7146	
3385	Clinical Staff Nurse Neuro	4	37.3412	37.7146	39.2986	
3385	Clinical Staff Nurse Neuro	5	38.9095	39.2986	40.9492	
3385	Clinical Staff Nurse Neuro	6	40.5437	40.9492	42.6690	
3385	Clinical Staff Nurse Neuro	7	42.2466	42.6690	44.4611	
3385	Clinical Staff Nurse Neuro	8	44.0209	44.4611	46.3285	
3385	Clinical Staff Nurse Neuro	9	45.8698	46.3285	48.2744	
3385	Clinical Staff Nurse Neuro	10	47.7965	48.2744	50.3018	
3385	Clinical Staff Nurse Neuro	11	49.8038	50.3018	52.4145	
3385	Clinical Staff Nurse Neuro	12	51.8955	52.4145	54.6159	
3385	Clinical Staff Nurse Neuro	13	54.0752	54.6159	56.9098	
3385	Clinical Staff Nurse Neuro	14	56.3463	56.9098	59.3000	
3385	Clinical Staff Nurse Neuro	15	58.7129	59.3000	63.0948	
3385	Clinical Staff Nurse Neuro	16	62.4701	63.0948	65.7447	
3385	Clinical Staff Nurse Neuro	17	65.0938	65.7447	68.5060	
3639	Clinical Staff Nurse OR L&D	1	33.0053	33.3354	34.7354	
3639	Clinical Staff Nurse OR L&D	2	34.3915	34.7354	36.1944	
3639	Clinical Staff Nurse OR L&D	3	35.8360	36.1944	37.7146	
3639	Clinical Staff Nurse OR L&D	4	37.3412	37.7146	39.2986	
3639	Clinical Staff Nurse OR L&D	5	38.9095	39.2986	40.9492	
3639	Clinical Staff Nurse OR L&D	6	40.5437	40.9492	42.6690	
3639	Clinical Staff Nurse OR L&D	7	42.2466	42.6690	44.4611	
3639	Clinical Staff Nurse OR L&D	8	44.0209	44.4611	46.3285	
3639	Clinical Staff Nurse OR L&D	9	45.8698	46.3285	48.2744	
3639	Clinical Staff Nurse OR L&D	10	47.7965	48.2744	50.3018	
3639	Clinical Staff Nurse OR L&D	11	49.8038	50.3018	52.4145	
3639	Clinical Staff Nurse OR L&D	12	51.8955	52.4145	54.6159	
3639	Clinical Staff Nurse OR L&D	13	54.0752	54.6159	56.9098	
3639	Clinical Staff Nurse OR L&D	14	56.3463	56.9098	59.3000	
3639	Clinical Staff Nurse OR L&D	15	58.7129	59.3000	63.0948	
3639	Clinical Staff Nurse OR L&D	16	62.4701	63.0948	65.7447	
3639	Clinical Staff Nurse OR L&D	17	65.0938	65.7447	68.5060	
3568	Clinical Staff Nurse, CLIR	1	33.0053	33.3354	34.7354	
3568	Clinical Staff Nurse, CLIR	2	34.3915	34.7354	36.1944	
3568	Clinical Staff Nurse, CLIR	3	35.8360	36.1944	37.7146	
3568	Clinical Staff Nurse, CLIR	4	37.3412	37.7146	39.2986	
3568	Clinical Staff Nurse, CLIR	5	38.9095	39.2986	40.9492	
3568	Clinical Staff Nurse, CLIR	6	40.5437	40.9492	42.6690	
3568	Clinical Staff Nurse, CLIR	7	42.2466	42.6690	44.4611	

SEIU RN RATE SCHEDULE FOR 2023- 2026					
JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
3568	Clinical Staff Nurse, CLIR	8	44.0209	44.4611	46.3285
3568	Clinical Staff Nurse, CLIR	9	45.8698	46.3285	48.2744
3568	Clinical Staff Nurse, CLIR	10	47.7965	48.2744	50.3018
3568	Clinical Staff Nurse, CLIR	11	49.8038	50.3018	52.4145
3568	Clinical Staff Nurse, CLIR	12	51.8955	52.4145	54.6159
3568	Clinical Staff Nurse, CLIR	13	54.0752	54.6159	56.9098
3568	Clinical Staff Nurse, CLIR	14	56.3463	56.9098	59.3000
3568	Clinical Staff Nurse, CLIR	15	58.7129	59.3000	63.0948
3568	Clinical Staff Nurse, CLIR	16	62.4701	63.0948	65.7447
3568	Clinical Staff Nurse, CLIR	17	65.0938	65.7447	68.5060
2229	Clinical Transplant Coord	1	46.0375		
2229	Clinical Transplant Coord	2	47.9711		
2229	Clinical Transplant Coord	3	49.9857		
2229	Clinical Transplant Coord	4	52.0851		
2229	Clinical Transplant Coord	5	54.2727		
2229	Clinical Transplant Coord	6	56.5523		
2229	Clinical Transplant Coord	7	59.1650		
2229	Clinical Transplant Coord	8	61.6497		
2229	Clinical Transplant Coord	9	64.2390		
2229	Clinical Transplant Coord	10	66.9372		
2229	Clinical Transplant Coord	11	69.7486		
2229	Clinical Transplant Coord	12	72.6780		
3660	Community Health Nurse	1	31.9122		
3660	Community Health Nurse	2	33.2524		
3660	Community Health Nurse	3	34.6491		
3660	Community Health Nurse	4	36.1043		
3660	Community Health Nurse	5	37.6206		
3660	Community Health Nurse	6	39.2010		
3660	Community Health Nurse	7	40.8470		
3660	Community Health Nurse	8	42.5627		
3660	Community Health Nurse	9	44.3505		
3660	Community Health Nurse	10	46.2132		
3660	Community Health Nurse	11	48.1541		
3660	Community Health Nurse	12	50.1765		
3660	Community Health Nurse	13	52.2840		
3555	Discharge Planning Liaison	1	37.4049		
3555	Discharge Planning Liaison	2	38.9760		
3555	Discharge Planning Liaison	3	40.6130		
3555	Discharge Planning Liaison	4	42.3187		
3555	Discharge Planning Liaison	5	44.0962		
3555	Discharge Planning Liaison	6	45.9482		
3555	Discharge Planning Liaison	7	47.8781		
3555	Discharge Planning Liaison	8	49.8889		
3555	Discharge Planning Liaison	9	51.9843		
3555	Discharge Planning Liaison	10	54.1676		
3555	Discharge Planning Liaison	11	56.4425		
3555	Discharge Planning Liaison	12	58.8132		
1170	Enterostomal Therapist	1	39.9974		
1170	Enterostomal Therapist	2	41.6772		
1170	Enterostomal Therapist	3	43.4276		
1170	Enterostomal Therapist	4	45.2519		
1170	Enterostomal Therapist	5	47.1524		
1170	Enterostomal Therapist	6	49.1328		
1170	Enterostomal Therapist	7	51.1964		
1170	Enterostomal Therapist	8	53.3465		
1170	Enterostomal Therapist	9	55.5872		
1170	Enterostomal Therapist	10	58.1547		
1933	Enterostomal Therapist Coord	1	44.3787		
1933	Enterostomal Therapist Coord	2	46.2426		
1933	Enterostomal Therapist Coord	3	48.1847		
1933	Enterostomal Therapist Coord	4	50.2087		
1933	Enterostomal Therapist Coord	5	52.3174		
1933	Enterostomal Therapist Coord	6	54.5145		
1933	Enterostomal Therapist Coord	7	56.8043		
1933	Enterostomal Therapist Coord	8	59.1900		
1933	Enterostomal Therapist Coord	9	61.6760		
1933	Enterostomal Therapist Coord	10	64.5255		
1168	Graduate Nurse	1	33.0053	33.3354	34.7354
3276	Hospital Flow Coordinator	1	39.3295	39.7228	41.3914
3276	Hospital Flow Coordinator	2	40.9816	41.3914	43.1296
3276	Hospital Flow Coordinator	3	42.7026	43.1296	44.9413

**SEIU RN RATE SCHEDULE FOR 2023- 2026**

JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
3276	Hospital Flow Coordinator	4	44.4963	44.9413	46.8287
3276	Hospital Flow Coordinator	5	46.3650	46.8287	48.7955
3276	Hospital Flow Coordinator	6	48.3124	48.7955	50.8451
3276	Hospital Flow Coordinator	7	50.3417	50.8451	52.9803
3276	Hospital Flow Coordinator	8	52.4557	52.9803	55.2055
3276	Hospital Flow Coordinator	9	54.6589	55.2055	57.5242
3276	Hospital Flow Coordinator	10	56.9547	57.5242	59.9404
3276	Hospital Flow Coordinator	11	59.3470	59.9404	62.4579
3276	Hospital Flow Coordinator	12	61.8395	62.4579	65.6154
3276	Hospital Flow Coordinator	13	64.9658	65.6154	68.3712
3276	Hospital Flow Coordinator	14	67.6943	68.3712	71.2428
1195	Lactation Specialist RN	1	39.9974		
1195	Lactation Specialist RN	2	41.6772		
1195	Lactation Specialist RN	3	43.4276		
1195	Lactation Specialist RN	4	45.2519		
1195	Lactation Specialist RN	5	47.1524		
1195	Lactation Specialist RN	6	49.1328		
1195	Lactation Specialist RN	7	51.1964		
1195	Lactation Specialist RN	8	53.3465		
1195	Lactation Specialist RN	9	55.5872		
1195	Lactation Specialist RN	10	58.1547		
1158	Nurse Anesthetist	1	85.3101		88.8930
1158	Nurse Anesthetist	2	88.8930		92.6263
1158	Nurse Anesthetist	3	92.6263		96.5167
1158	Nurse Anesthetist	4	96.5167		100.5704
1158	Nurse Anesthetist	5	100.5704		104.7942
1158	Nurse Anesthetist	6	104.7942		109.1956
1158	Nurse Anesthetist	7	109.1956		113.7819
1158	Nurse Anesthetist	8	113.7819		118.5608
1158	Nurse Anesthetist	9	118.5608		123.5404
1158	Nurse Anesthetist	10	123.5404		129.9799
1158	Nurse Anesthetist	11	129.9799		135.4391
1139	Nurse Educator	1	39.3295	39.7228	41.3914
1139	Nurse Educator	2	40.9816	41.3914	43.1296
1139	Nurse Educator	3	42.7026	43.1296	44.9413
1139	Nurse Educator	4	44.4963	44.9413	46.8287
1139	Nurse Educator	5	46.3650	46.8287	48.7955
1139	Nurse Educator	6	48.3124	48.7955	50.8451
1139	Nurse Educator	7	50.3417	50.8451	52.9803
1139	Nurse Educator	8	52.4557	52.9803	55.2055
1139	Nurse Educator	9	54.6589	55.2055	57.5242
1139	Nurse Educator	10	56.9547	57.5242	59.9404
1139	Nurse Educator	11	59.3470	59.9404	62.4578
1139	Nurse Educator	12	61.8394	62.4578	65.6154
1139	Nurse Educator	13	64.9658	65.6154	68.3712
1139	Nurse Educator	14	67.6943	68.3712	71.2428
1140	Nurse Educator CHS	1	40.9815	41.3913	43.1296
1140	Nurse Educator CHS	2	42.7026	43.1296	44.9411
1140	Nurse Educator CHS	3	44.4961	44.9411	46.8286
1140	Nurse Educator CHS	4	46.3649	46.8286	48.7954
1140	Nurse Educator CHS	5	48.3123	48.7954	50.8448
1140	Nurse Educator CHS	6	50.3414	50.8448	52.9803
1140	Nurse Educator CHS	7	52.4557	52.9803	55.2054
1140	Nurse Educator CHS	8	54.6588	55.2054	57.5241
1140	Nurse Educator CHS	9	56.9546	57.5241	59.9401
1140	Nurse Educator CHS	10	59.3466	59.9401	62.4577
1140	Nurse Educator CHS	11	61.8393	62.4577	65.6154
1140	Nurse Educator CHS	12	64.9658	65.6154	69.4664
1140	Nurse Educator CHS	13	68.7786	69.4664	72.3840
1140	Nurse Educator CHS	14	71.6673	72.3840	75.4241
2710	Nurse Educator Transplant	1	39.3295	39.7228	41.3914
2710	Nurse Educator Transplant	2	40.9816	41.3914	43.1296
2710	Nurse Educator Transplant	3	42.7026	43.1296	44.9413
2710	Nurse Educator Transplant	4	44.4963	44.9413	46.8287
2710	Nurse Educator Transplant	5	46.3650	46.8287	48.7955
2710	Nurse Educator Transplant	6	48.3124	48.7955	50.8451
2710	Nurse Educator Transplant	7	50.3417	50.8451	52.9803
2710	Nurse Educator Transplant	8	52.4557	52.9803	55.2055
2710	Nurse Educator Transplant	9	54.6589	55.2055	57.5242
2710	Nurse Educator Transplant	10	56.9547	57.5242	59.9404
2710	Nurse Educator Transplant	11	59.3470	59.9404	62.4578

**SEIU RN RATE SCHEDULE FOR 2023- 2026**

JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
2710	Nurse Educator Transplant	12	61.8394	62.4578	65.6154
2710	Nurse Educator Transplant	13	64.9658	65.6154	68.3712
2710	Nurse Educator Transplant	14	67.6943	68.3712	71.2428
1162	Nurse Manager	1	51.9640	52.4836	54.6879
1162	Nurse Manager	2	54.1464	54.6879	56.9847
1162	Nurse Manager	3	56.4205	56.9847	59.3780
1162	Nurse Manager	4	58.7901	59.3780	61.8720
1162	Nurse Manager	5	61.2594	61.8720	64.4706
1162	Nurse Manager	6	63.8323	64.4706	67.1784
1162	Nurse Manager	7	66.5133	67.1784	69.9999
1162	Nurse Manager	8	69.3068	69.9999	72.9399
1162	Nurse Manager	9	72.2178	72.9399	76.0035
1162	Nurse Manager	10	75.2509	76.0035	79.1955
1162	Nurse Manager	11	78.4113	79.1955	82.5216
1162	Nurse Manager	12	81.7046	82.5216	85.9875
1604	Nurse Manager Anesthesia	1	94.8420	95.7905	99.8137
1604	Nurse Manager Anesthesia	2	98.8254	99.8137	104.0059
1604	Nurse Manager Anesthesia	3	102.9762	104.0059	108.3739
1604	Nurse Manager Anesthesia	4	107.3009	108.3739	112.9257
1604	Nurse Manager Anesthesia	5	111.8076	112.9257	117.6687
1604	Nurse Manager Anesthesia	6	116.5037	117.6687	122.6108
1604	Nurse Manager Anesthesia	7	121.3969	122.6108	127.7605
1604	Nurse Manager Anesthesia	8	126.4955	127.7605	133.1265
1604	Nurse Manager Anesthesia	9	131.8084	133.1265	138.7179
1604	Nurse Manager Anesthesia	10	137.3445	138.7179	144.5439
1604	Nurse Manager Anesthesia	11	143.1127	144.5439	150.6147
1604	Nurse Manager Anesthesia	12	149.1235	150.6147	156.9405
2323	Nurse Manager Transplant	1	51.9640	52.4836	54.6879
2323	Nurse Manager Transplant	2	54.1464	54.6879	56.9847
2323	Nurse Manager Transplant	3	56.4205	56.9847	59.3780
2323	Nurse Manager Transplant	4	58.7901	59.3780	61.8720
2323	Nurse Manager Transplant	5	61.2594	61.8720	64.4706
2323	Nurse Manager Transplant	6	63.8323	64.4706	67.1784
2323	Nurse Manager Transplant	7	66.5133	67.1784	69.9999
2323	Nurse Manager Transplant	8	69.3068	69.9999	72.9399
2323	Nurse Manager Transplant	9	72.2178	72.9399	76.0035
2323	Nurse Manager Transplant	10	75.2509	76.0035	79.1955
2323	Nurse Manager Transplant	11	78.4113	79.1955	82.5216
2323	Nurse Manager Transplant	12	81.7046	82.5216	85.9875
1166	Nurse Midwife	1	53.4750		
1166	Nurse Midwife	2	55.7209		
1166	Nurse Midwife	3	58.0612		
1166	Nurse Midwife	4	60.4998		
1166	Nurse Midwife	5	63.0408		
1166	Nurse Midwife	6	65.6886		
1166	Nurse Midwife	7	68.4474		
1166	Nurse Midwife	8	71.6091		
1166	Nurse Midwife	9	74.6167		
1166	Nurse Midwife	10	77.7505		
1166	Nurse Midwife	11	81.0161		
1166	Nurse Midwife	12	84.4187		
2621	Nurse Navigator Outpatient	1	34.6491		
2621	Nurse Navigator Outpatient	2	36.1043		
2621	Nurse Navigator Outpatient	3	37.6206		
2621	Nurse Navigator Outpatient	4	39.2010		
2621	Nurse Navigator Outpatient	5	40.8470		
2621	Nurse Navigator Outpatient	6	42.5627		
2621	Nurse Navigator Outpatient	7	44.3505		
2621	Nurse Navigator Outpatient	8	46.2132		
2621	Nurse Navigator Outpatient	9	48.1541		
2621	Nurse Navigator Outpatient	10	50.1765		
2621	Nurse Navigator Outpatient	11	52.2840		
2621	Nurse Navigator Outpatient	12	54.4800		
2621	Nurse Navigator Outpatient	13	56.9803		
3399	Nurse Supervisor SNF	1	33.0053	33.3354	34.7354
3399	Nurse Supervisor SNF	2	34.3915	34.7354	36.1944
3399	Nurse Supervisor SNF	3	35.8360	36.1944	37.7146
3399	Nurse Supervisor SNF	4	37.3412	37.7146	39.2986
3399	Nurse Supervisor SNF	5	38.9095	39.2986	40.9492
3399	Nurse Supervisor SNF	6	40.5437	40.9492	42.6690
3399	Nurse Supervisor SNF	7	42.2466	42.6690	44.4611

**SEIU RN RATE SCHEDULE FOR 2023- 2026**

JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
3399	Nurse Supervisor SNF	8	44.0209	44.4611	46.3285
3399	Nurse Supervisor SNF	9	45.8698	46.3285	48.2744
3399	Nurse Supervisor SNF	10	47.7965	48.2744	50.3018
3399	Nurse Supervisor SNF	11	49.8038	50.3018	52.4145
3399	Nurse Supervisor SNF	12	51.8955	52.4145	54.6159
3399	Nurse Supervisor SNF	13	54.0752	54.6159	56.9098
3399	Nurse Supervisor SNF	14	56.3463	56.9098	59.3000
3399	Nurse Supervisor SNF	15	58.7129	59.3000	63.0948
3399	Nurse Supervisor SNF	16	62.4701	63.0948	65.7447
3399	Nurse Supervisor SNF	17	65.0938	65.7447	68.5060
3108	Organ Plcmnt Clinical Coord RN	1	38.4614		
3108	Organ Plcmnt Clinical Coord RN	2	40.0767		
3108	Organ Plcmnt Clinical Coord RN	3	41.7600		
3108	Organ Plcmnt Clinical Coord RN	4	43.5140		
3108	Organ Plcmnt Clinical Coord RN	5	45.3415		
3108	Organ Plcmnt Clinical Coord RN	6	47.2458		
3108	Organ Plcmnt Clinical Coord RN	7	49.2303		
3108	Organ Plcmnt Clinical Coord RN	8	51.2979		
3108	Organ Plcmnt Clinical Coord RN	9	53.4523		
3108	Organ Plcmnt Clinical Coord RN	10	55.6973		
3108	Organ Plcmnt Clinical Coord RN	11	58.0366		
3108	Organ Plcmnt Clinical Coord RN	12	60.4742		
2771	Pedi Palliative Care Coord	1	37.8647		
2771	Pedi Palliative Care Coord	2	39.4549		
2771	Pedi Palliative Care Coord	3	41.1119		
2771	Pedi Palliative Care Coord	4	42.8388		
2771	Pedi Palliative Care Coord	5	44.6381		
2771	Pedi Palliative Care Coord	6	46.5128		
2771	Pedi Palliative Care Coord	7	48.4664		
2771	Pedi Palliative Care Coord	8	52.2205		
3621	Rehab Interdiscip Edu Coord	1	51.9640		
3621	Rehab Interdiscip Edu Coord	2	54.1464		
3621	Rehab Interdiscip Edu Coord	3	56.4205		
3621	Rehab Interdiscip Edu Coord	4	58.7901		
3621	Rehab Interdiscip Edu Coord	5	61.2594		
3621	Rehab Interdiscip Edu Coord	6	63.8323		
3621	Rehab Interdiscip Edu Coord	7	66.5133		
3621	Rehab Interdiscip Edu Coord	8	69.3068		
3621	Rehab Interdiscip Edu Coord	9	72.2178		
3621	Rehab Interdiscip Edu Coord	10	75.2509		
3621	Rehab Interdiscip Edu Coord	11	78.4113		
3621	Rehab Interdiscip Edu Coord	12	81.7046		
3012	Rehab PPS Coord	1	32.1826		
3012	Rehab PPS Coord	2	33.5340		
3012	Rehab PPS Coord	3	34.9425		
3012	Rehab PPS Coord	4	36.4103		
3012	Rehab PPS Coord	5	37.9394		
3012	Rehab PPS Coord	6	39.5330		
3012	Rehab PPS Coord	7	41.1933		
3012	Rehab PPS Coord	8	42.9233		
3012	Rehab PPS Coord	9	44.7264		
3012	Rehab PPS Coord	10	46.6048		
3012	Rehab PPS Coord	11	48.5621		
3012	Rehab PPS Coord	12	50.6019		
2825	Retinpthy of Prematurity Nurse	1	35.9181		
2825	Retinpthy of Prematurity Nurse	2	37.4268		
2825	Retinpthy of Prematurity Nurse	3	38.9986		
2825	Retinpthy of Prematurity Nurse	4	40.6367		
2825	Retinpthy of Prematurity Nurse	5	42.3435		
2825	Retinpthy of Prematurity Nurse	6	44.1219		
2825	Retinpthy of Prematurity Nurse	7	45.9747		
2825	Retinpthy of Prematurity Nurse	8	47.9057		
2825	Retinpthy of Prematurity Nurse	9	49.9179		
2825	Retinpthy of Prematurity Nurse	10	52.0145		
2825	Retinpthy of Prematurity Nurse	11	54.1990		
2825	Retinpthy of Prematurity Nurse	12	56.4755		
1177	RN First Assistant	1	52.0851		
1177	RN First Assistant	2	54.2727		
1177	RN First Assistant	3	56.5523		
1177	RN First Assistant	4	58.9276		
1177	RN First Assistant	5	61.4024		

**SEIU RN RATE SCHEDULE FOR 2023- 2026**

JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
1177	RN First Assistant	6	63.9814		
1177	RN First Assistant	7	66.6686		
1177	RN First Assistant	8	69.4687		
1177	RN First Assistant	9	72.3865		
1177	RN First Assistant	10	75.4267		
1177	RN First Assistant	11	78.5945		
1177	RN First Assistant	12	81.8955		
1177	RN First Assistant	13	85.3351		
3561	Stroke Program Navigator	1	40.9815		
3561	Stroke Program Navigator	2	42.7026		
3561	Stroke Program Navigator	3	44.4961		
3561	Stroke Program Navigator	4	46.3649		
3561	Stroke Program Navigator	5	48.3123		
3561	Stroke Program Navigator	6	50.3414		
3561	Stroke Program Navigator	7	52.4557		
3561	Stroke Program Navigator	8	54.6588		
3561	Stroke Program Navigator	9	56.9546		
3561	Stroke Program Navigator	10	59.3466		
3561	Stroke Program Navigator	11	61.8393		
3561	Stroke Program Navigator	12	64.9658		
3561	Stroke Program Navigator	13	68.7786		
3561	Stroke Program Navigator	14	71.6673		
2985	Transplant Donor Coordinator	1	28.8409		
2985	Transplant Donor Coordinator	2	30.0522		
2985	Transplant Donor Coordinator	3	31.3144		
2985	Transplant Donor Coordinator	4	32.6296		
2985	Transplant Donor Coordinator	5	34.0001		
2985	Transplant Donor Coordinator	6	35.4281		
2985	Transplant Donor Coordinator	7	36.9160		
2985	Transplant Donor Coordinator	8	38.4665		
2985	Transplant Donor Coordinator	9	40.0820		
2985	Transplant Donor Coordinator	10	41.7657		
2985	Transplant Donor Coordinator	11	43.5197		
2985	Transplant Donor Coordinator	12	45.3476		
2985	Transplant Donor Coordinator	13	47.2522		
3229	Trauma Cntr Clin Outreach Prev	1	43.6730		
3229	Trauma Cntr Clin Outreach Prev	2	45.5072		
3229	Trauma Cntr Clin Outreach Prev	3	47.4186		
3229	Trauma Cntr Clin Outreach Prev	4	49.4102		
3229	Trauma Cntr Clin Outreach Prev	5	51.4852		
3229	Trauma Cntr Clin Outreach Prev	6	53.6477		
3229	Trauma Cntr Clin Outreach Prev	7	55.9009		
3229	Trauma Cntr Clin Outreach Prev	8	58.2487		
3229	Trauma Cntr Clin Outreach Prev	9	60.9400		
3229	Trauma Cntr Clin Outreach Prev	10	63.7551		
2665	Trauma Perf Improv Nurse	1	41.9126		
2665	Trauma Perf Improv Nurse	2	43.6728		
2665	Trauma Perf Improv Nurse	3	45.5071		
2665	Trauma Perf Improv Nurse	4	47.4186		
2665	Trauma Perf Improv Nurse	5	49.4102		
2665	Trauma Perf Improv Nurse	6	51.4852		
2665	Trauma Perf Improv Nurse	7	53.6476		
2665	Trauma Perf Improv Nurse	8	55.9008		
2665	Trauma Perf Improv Nurse	9	58.2487		
2665	Trauma Perf Improv Nurse	10	60.9399		
1176	Trauma Program Manager	1	54.7292		
1176	Trauma Program Manager	2	57.0279		
1176	Trauma Program Manager	3	59.4231		
1176	Trauma Program Manager	4	61.9187		
1176	Trauma Program Manager	5	64.5196		
1176	Trauma Program Manager	6	67.2294		
1176	Trauma Program Manager	7	70.0529		
1176	Trauma Program Manager	8	72.9951		
1176	Trauma Program Manager	9	76.0611		
1176	Trauma Program Manager	10	79.5757		
2525	Vascular Access Specialist	1	33.0053	33.3354	34.7354
2525	Vascular Access Specialist	2	34.3915	34.7354	36.1944
2525	Vascular Access Specialist	3	35.8360	36.1944	37.7146
2525	Vascular Access Specialist	4	37.3412	37.7146	39.2986
2525	Vascular Access Specialist	5	38.9095	39.2986	40.9492
2525	Vascular Access Specialist	6	40.5437	40.9492	42.6690

SEIU RN RATE SCHEDULE FOR 2023- 2026					
JOB CODE	TITLE	RATES EFFECTIVE 07/09/2023			RATES EFFECTIVE 10/1/2023
		STEP	8% COLA	1% ADJUSTMENT	MARKET ADJUSTMENT
2525	Vascular Access Specialist	7	42.2466	42.6690	44.4611
2525	Vascular Access Specialist	8	44.0209	44.4611	46.3285
2525	Vascular Access Specialist	9	45.8698	46.3285	48.2744
2525	Vascular Access Specialist	10	47.7965	48.2744	50.3018
2525	Vascular Access Specialist	11	49.8038	50.3018	52.4145
2525	Vascular Access Specialist	12	51.8955	52.4145	54.6159
2525	Vascular Access Specialist	13	54.0752	54.6159	56.9098
2525	Vascular Access Specialist	14	56.3463	56.9098	59.3000
2525	Vascular Access Specialist	15	58.7129	59.3000	63.0948
2525	Vascular Access Specialist	16	62.4701	63.0948	65.7447
2525	Vascular Access Specialist	17	65.0938	65.7447	68.5060
3050	Wound Care Coordinator	1	34.5304		
3050	Wound Care Coordinator	2	35.9806		
3050	Wound Care Coordinator	3	37.4920		
3050	Wound Care Coordinator	4	39.0666		
3050	Wound Care Coordinator	5	40.7075		
3050	Wound Care Coordinator	6	42.4172		
3050	Wound Care Coordinator	7	44.1986		
3050	Wound Care Coordinator	8	46.0550		
3050	Wound Care Coordinator	9	47.9895		
3050	Wound Care Coordinator	10	50.0050		
3050	Wound Care Coordinator	11	52.1052		
3050	Wound Care Coordinator	12	54.2935		

## SEIU RN PER-DIEM RATE SCHEDULE FOR 2023- 2026

JOB CODE	TITLE	EFFECTIVE 07/09/2023	EFFECTIVE 10/1/2023	Incumbents as of 7/9/2023
3340	APP Supervisor APRN	65.0000	65.0000	No incumbents
3343	APRN CVTX Navigator	53.9990	53.9990	No incumbents
3518	APRN Inpatient	60.0000	60.0000	
3517	APRN Outpatient	60.0000	60.0000	
2829	Case Manager RN	45.0000	45.0000	
1133	Clinical Care Coordinator	41.9126	41.9126	No incumbents
1137	Clinical Staff Nurse	40.0000	40.0000	
1138	Clinical Staff Nurse CHS	40.0000	40.0000	
3287	Clinical Staff Nurse CVTX	40.0000	40.0000	
1178	Clinical Staff Nurse Float	40.0000	40.0000	
3385	Clinical Staff Nurse Neuro	40.0000	40.0000	
3639	Clinical Staff Nurse OR L&D	40.0000	40.0000	
3568	Clinical Staff Nurse, CLIR	40.0000	40.0000	
2229	Clinical Transplant Coord	46.0375	46.0375	
1168	Graduate Nurse	33.3354	34.7354	
3276	Hospital Flow Coordinator	41.0000	41.3914	No incumbents
1195	Lactation Specialist RN	39.9974	39.9974	No incumbents
1158	Nurse Anesthetist	135.0000	135.0000	
3545	Nurse Mentor	45.0000	45.0000	
1166	Nurse Midwife	60.0000	60.0000	No incumbents
3108	Organ Plcmt Clinical Coord RN	40.0000	40.0000	No incumbents
3391	PRM CSN	40.0000	40.0000	
2825	Retinopathy of Prematurity Nurse	39.0000	39.0000	No incumbents
2525	Vascular Access Specialist	40.0000	40.0000	No incumbents

# MEDICAL PLANS



## Group Medical Plans

### What AvMed medical plans are offered?

- Jackson First HMO
- Jackson Select HMO
- Jackson Point of Service (POS)

NOTE: Members are required to select a primary care physician if selecting health insurance.

#### Jackson First HMO

Plan offers “no referral needed” to access the Jackson-only network. Employee and covered dependents must reside in Miami-Dade, Broward or Palm Beach Counties. The plan provides 100% of benefits for services performed at Jackson Health System facilities and University of Miami (except emergency care) or by any AvMed physician with admitting privileges at Jackson Health System. Concierge services are available under this plan.

- No deductibles
- No copays
- No coinsurance
- Concierge services

**Jackson First Rider:** for dependents of Employees enrolled under Jackson First, who may reside outside of the tri-county area (Miami-Dade, Broward and Palm Beach). Please complete an “Away from Home” form available on [JacksonBenefits.org](https://JacksonBenefits.org)

#### Jackson Select HMO

Plan offers “no referral needed” to access the Jackson Select HMO Network of providers. The plan provides 100% of benefits for covered services after applicable copays. Concierge services and SmartShopper benefits are available under this plan. Provides an “Away from Home” wraparound program for dependents who reside outside of the coverage area.

#### Jackson Point of Service (POS)

**IN NETWORK** - Plan offers “no referral needed” to access an expanded network of providers. The plan provides 100% of benefits for covered services after the applicable copayments. SmartShopper benefits are available under this plan.

**OUT OF NETWORK** - A fee for service program that provides you the freedom to use any physician or accredited hospital of your choice outside of the network. Payments are based on Maximum Allowable Payment (MAP) charges. Providers who do not participate in the network may balance bill you for the amount which exceeds MAP. Coverage is subject to deductibles and coinsurance.

Why I Choose

## Jackson First

“I chose Jackson First Insurance because not only is it the most affordable plan, but it also offers many physician options, including inpatient, outpatient, and telemedicine providers outside Jackson. Also, there are many pharmacies to choose from, and I even have free prescriptions that were filled in the Jackson pharmacy. No other plan can provide both broad local coverage and affordability like Jackson First.”

– Seth Bleicher, Hospitalist Inpatient Services, Jackson Behavioral Health Hospital

To learn more about the Jackson First HMO or to enroll online, visit [JacksonBenefits.org](https://JacksonBenefits.org).

[JacksonBenefits.org](https://JacksonBenefits.org)

If there is any discrepancy between the plan details in this benefits guide and the official plan documents, the language in the official plan documents shall prevail as accurate.

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# MEDICAL PLANS

## Medical Biweekly Rates

AvMed Employee, Spouse,  
Domestic Partner & Child(ren)

	WELLNESS MEDICAL PREMIUM		
	JACKSON FIRST HMO PLAN	JACKSON SELECT HMO PLAN	JACKSON POS PLAN
Employee	\$0.00	\$57.75	\$173.25
Employee + Child(ren) <sup>†</sup>	\$105.00	\$197.41	\$440.46
Employee + Spouse/DP	\$120.00	\$232.50	\$530.87
Family	\$160.00	\$330.72	\$917.68
Jackson First Rider	\$45.00	\$45.00	

<sup>†</sup> Option also applies to Adult Child(ren) (AC) between 26 through 30 years of age and/or Child(ren) of a Domestic Partner (CDP)

Premiums above are subject to the completion of your Annual Wellness. If you did not complete your wellness visit, your premiums will include an additional \$50 increase bi-weekly.

## Medical Biweekly Rates

Medical Premium for Part-Time  
24 Hours Status (B5)

	WELLNESS MEDICAL PREMIUM		
	JACKSON FIRST HMO PLAN	JACKSON SELECT HMO PLAN	JACKSON POS PLAN
Employee	\$25.00	\$107.75	\$273.25
Employee + Child(ren) <sup>†</sup>	\$155.00	\$272.41	\$565.46
Employee + Spouse/DP	\$195.00	\$332.50	\$680.87
Family	\$260.00	\$455.72	\$1,092.68
Jackson First Rider	\$45.00	\$45.00	N/A

<sup>†</sup> Option also applies to Adult Child(ren) (AC) between 26 through 30 years of age and/or Child(ren) of a Domestic Partner (CDP)

Premiums above are subject to the completion of your Annual Wellness. If you did not complete your wellness visit, your premiums will include an additional \$50 increase bi-weekly.

"Jackson First has been the best choice we could have made in selecting health insurance for my family, year after year. We do our best to find the best coverage possible with the most affordable premium. Under this plan we have received the best medical care without any strain on our finances. Having had Jackson First turned a what could have been a stressful emergency for my daughter injured while travelling out of state, into the easiest process imaginable. The plan took care of everything, and eliminating all possible points of stress."

- Lianne Lopez-Montero, Pharmacy

learn more about the Jackson First HMO  
to enroll online, visit [JacksonBenefits.org](https://JacksonBenefits.org).

Why I Choose  
**Jackson  
First**

[JacksonBenefits.org](https://JacksonBenefits.org)

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If there is any discrepancy between the plan details in this benefits guide and the official plan documents, the language in the official plan documents shall prevail as accurate.

# MEDICAL PLANS

## Understanding Your Medical Options

2024 MEDICAL PLAN CHARTS - <a href="http://avmed.org/jhs">avmed.org/jhs</a>		
	JACKSON FIRST HMO	JACKSON SELECT HMO
	<ul style="list-style-type: none"> <li>Freedom to choose from a variety of JHS and UM healthcare professionals.</li> <li>Jackson Rider Wraparound: separate plan with buy-up option of \$45 per pay period; designed for dependents living outside of South Florida.</li> <li>Access to a concierge appointment scheduling</li> <li>Savings of up to \$4,438.72 annually</li> </ul>	<p>HMO Plan offered to Jackson Health System employees and covered dependents who reside or work in Miami-Dade, Broward and Palm Beach counties. Members who enroll in the JHS Select Network plan must receive all medical care except for emergency and urgent care services through an AvMed contracted Jackson Health System Select HMO Network Provider.</p> <ul style="list-style-type: none"> <li>Offers nationwide network for dependents residing outside of service area</li> <li>Jackson Rider Wraparound; separate plan with buy-up option of \$45 per pay period; designed for dependents living outside of South Florida.</li> </ul>
<b>Concierge Services</b>	Concierge Services Available	Concierge Services and Smartshopper Benefits Are Available
<b>Deductibles</b>	\$0	\$0
<b>PCP Office Visits</b>	\$0	\$15
<b>Specialist Office Visits</b>	\$0	\$30
<b>Preventive Services</b>	\$0	\$0
<b>Pediatrician Office Visits</b>	\$0	\$15
<b>Routine Physical</b>	\$0	\$0
<b>Obstetrical/Gynecological</b>	\$0	\$30
<b>Maternity</b>	\$0	\$30 Copay for First Visit. No Charge For Subsequent Visits
<b>Preventive Mammogram/Pap Smears</b>	\$0	\$0
<b>Hospitalization - In-Patient</b>	Benefits Covered At 100%	Benefits payable at 100% after \$100 copayment
<b>Urgent Care</b>	\$50 participating; \$100 non-participating; \$5 copay/visit at Uhealth Jackson Urgent Care Centers	
<b>Emergency</b>	\$200 copay (waived if admitted) , or \$50 for ages 17 and under (Waived if Admitted)	\$200 copay (waived if admitted) or \$50 for ages 17 and under (Waived if Admitted)
<b>Outpatient Surgery</b>	\$0	\$200

# MEDICAL PLANS

## Understanding Your Medical Options

### 2024 MEDICAL PLAN CHARTS - [avmed.org/jhs](http://avmed.org/jhs)

	JACKSON POS IN NETWORK	JACKSON POS OUT OF NETWORK
	Access to an expanded network of providers in the state of Florida. In addition, AvMed offers a nationwide network for those residing outside of the service area.	A fee for service program that provides Jackson Health System employees and covered dependents the freedom to use any physician or accredited hospital of their choice outside of the network. Payments are based on maximum allowable payment (MAP) charges. Providers who do not participate in the network may balance bill members for the amount which exceeds MAP. Coverage is subject to deductibles and coinsurance.
<b>Concierge Services</b>	Smartshopper Benefits Are Available	Smartshopper Benefits Are Available
<b>Deductibles</b>	\$0	\$200 Deductible Individual/\$500 Family
<b>PCP Office Visits</b>	\$15	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Specialist Office Visits</b>	\$30	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Preventive Services</b>	\$0	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Pediatrician Office Visits</b>	\$15	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Routine Physical</b>	\$0	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Obstetrical/Gynecological</b>	\$30	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Maternity</b>	\$30 copay for first visit. No charge for subsequent visits.	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Preventive Mammogram/Pap Smears</b>	\$0	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Hospitalization - In-Patient</b>	\$200 copay (waived if admitted)	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Urgent Care</b>	\$100 at both participating and non-participating; \$5 copay/visit at Uhealth Jackson Urgent Care Centers	
<b>Emergency</b>	\$200 copay (waived if admitted) or \$100 for ages 17 and under (Waived if Admitted)	\$200 copay/\$100 for age 17 and under (Waived if Admitted)
<b>Outpatient Surgery</b>	Benefits payable at 100% after \$200 copayment	Plan Pays 70% Coinsurance, After Deductible Is Met

**Chart continued on next page.**

If there is any discrepancy between the plan details in this benefits guide and the official plan documents, the language in the official plan documents shall prevail as accurate.

# MEDICAL PLANS

2024 MEDICAL PLAN CHARTS - <a href="http://avmed.org/jhs">avmed.org/jhs</a>		
	JACKSON FIRST HMO	JACKSON SELECT HMO
<b>Prescription Drugs</b>	Includes prescription contraceptives at participating pharmacies nationwide. If member/physician selects Brand when Generic is available, member pays difference in cost plus Brand copayment. See plan literature for other participating pharmacies. No charge for generic medications under the Jackson First HMO for employees using the Jackson Pharmacy.	
<b>Participating Network Pharmacy</b>	\$15 Generic/\$35 Brand/ \$50 Non-Preferred For 30-Day Supply	\$15 Generic/\$35 Brand/ \$50 Non-Preferred For 30-Day Supply
<b>Mail Order</b>	\$30 Generic/\$60 Brand/ \$90 Non-Preferred For 90-Day Supply	\$30 Generic/\$60 Brand/ \$90 Non-Preferred For 90-Day Supply
<b>Specialty Rx</b>	\$50 For 30-Day Supply Through Specialty Pharmacy	\$50 For 30-Day Supply Through Specialty Pharmacy
<b>Substance Abuse Treatment</b>		
<b>Inpatient</b>	\$0	\$100
<b>Outpatient</b>	\$0	\$15 per visit
<b>Behavioral Health</b>		
<b>Inpatient</b>	\$0	\$100
<b>Outpatient</b>	\$0	\$15 per visit
<b>Durable Medical Equipment (DME)</b>	\$50 Per Episode Per Illness	\$50 Per Episode Per Illness
<b>Coverage Area</b>	Jackson Health System; University of Miami • Dependents residing outside the network area may be covered through the PCHS network by electing to buy into the Jackson First Rider. (must complete a "Away From Home" form for approval)	Network includes over 33 hospitals and over 7,000 physicians. All AvMed participating providers with admitting privileges at one of the covered hospitals are also covered in the Select HMO. Dependents residing outside the network area may be covered through the PHCS network (Must complete "Away From Home" form for approval).

# MEDICAL PLANS

## 2024 MEDICAL PLAN CHARTS - [avmed.org/jhs](http://avmed.org/jhs)

	JACKSON POS IN NETWORK	JACKSON POS OUT OF NETWORK
<b>Prescription Drugs</b>	Includes prescription contraceptives at participating pharmacies nationwide. If member/physician selects Brand when Generic is available, member pays difference in cost plus Brand copayment. See plan literature for other participating pharmacies.	
<b>Participating Network Pharmacy</b>	\$15 Generic/\$50 Brand/ \$65 Non-Preferred For 30-Day Supply	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Mail Order</b>	\$30 Generic/\$90 Brand/\$120 Non-Preferred For 90-Day Supply	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Specialty Rx</b>	\$100 For 30-Day Supply Through Specialty Pharmacy	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Substance Abuse Treatment</b>		
<b>Inpatient</b>	Benefits Paid At 100%, After \$200 Copayment	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Outpatient</b>	\$15 per visit	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Behavioral Health</b>		
<b>Inpatient</b>	Benefits Paid At 100%, After \$200 Copayment	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Outpatient</b>	\$15 per visit	Plan Pays 70% Coinsurance, After Deductible Is Met
<b>Durable Medical Equipment (DME)</b>	DME And Orthotic Covered At 100%. External Prosthetic Appliance - No Charge After \$200 Deductible Per Contract Year.	Plan Pays 70% Coinsurance, After Deductible In MET For DME and Orthotic. External Prosthetic Appliance Not Covered Out Of Network.
<b>Coverage Area</b>	Covers hospitals excluded on the Select Plan. Dependents residing outside the network area may be covered through the PHCS network (Must complete "Away From Home" form for approval).	N/A

# HEALTH + WELLNESS

## Additional AvMed Features MDLive

### VIRTUAL VISITS ANYWHERE, ANYTIME. 24/7/365 ACCESS TO HEALTHCARE PROVIDERS

AvMed Virtual Visits, powered by MDLIVE®, are available to all Jackson employees and dependents covered under any of the AvMed medical plans. It provides remote access to board-certified doctors from your home, office, or on the go. All you have to do is register online. Members can speak with a doctor about non-emergency medical issues by phone or by secure video using a computer, tablet, or smartphone, for only a \$10 copay. Virtual Visits can be used to treat minor illnesses and injuries, including but, not limited to:

- Acne
- Headache
- Constipation
- UTI
- Pink eye
- Cough
- Fever
- Sore throats
- Insect bites
- Cold/flu
- Earache
- Rash
- Allergies
- Respiratory problems
- Nausea/Indigestion

Register online: [bit.ly/Avmedvirtualvisits](https://bit.ly/Avmedvirtualvisits) or by phone: 1-888-834-1532 or by downloading the “MDLIVE” app  
Employer Code: AvMed

## Smartshopper

### How AvMed SmartShopper Works

1. Your doctor recommends a qualifying procedure.
2. Call SmartShopper at 1-866-285-7453 and a Health Cost Adviser will provide cost-effective locations in your area for your doctor’s recommended service. Have your member ID for verification. You may also shop online at [AvMed.VitalsSmartShopper.com](https://AvMed.VitalsSmartShopper.com).
3. Then, contact your doctor to schedule the service and inform Contact AvMed SmartShopper AT LEAST 24 hours before the procedure to qualify for the incentive.
4. If you choose to use a cost-effective location, as identified by AvMed SmartShopper, you will receive an incentive check in the mail within 60 days after your claim has been paid.

[CLICK TO VIEW THE SMARTSHOPPER FLYER >>](#)

### CASH INCENTIVES ON MEDICAL PROCEDURES AND DIAGNOSTIC TESTS

AvMed continues to offer SmartShopper for Plan Year 2024. When enrolling in Jackson Select HMO and Jackson POS Plan, you have a chance to earn cash back while saving on healthcare costs. **Please note that Jackson First medical plan does not qualify for Smartshopper services.**

- Medical procedures or diagnostic tests can qualify you or your dependents for a \$25-\$500 CASH BACK when you shop with SmartShopper!
- To access SmartShopper, go to [avmed.org/smartshopper-jhs](https://avmed.org/smartshopper-jhs) or call 1-866-285-7453 to shop healthcare services in your area.

## Reduced Copays When Using Jackson

Jackson Health System is dedicated to providing quality and cost-effective healthcare benefits that meet the needs of our employees and their dependents. All employees, regardless of the plan you enroll in, will be eligible for lower copayments for most services received at Jackson Providers. To access the Jackson Providers, go to [avmed.org/jhs](https://avmed.org/jhs).

	ENROLLED IN JACKSON SELECT HMO		ENROLLED IN JACKSON POS IN NETWORK	
	USE A JACKSON PROVIDER AND PAY	OTHER JACKSON SELECT HMO NETWORK PROVIDERS YOU PAY	USE A JACKSON PROVIDER AND PAY	OTHER JACKSON POS IN NETWORK PROVIDERS YOU PAY
PCP Office Visit	\$5	\$15	\$5	\$15
Specialist Office Visit	\$15	\$30	\$15	\$30
Pediatrician Office Visit	\$5	\$15	\$5	\$15
Maternity Office Visits (1st visit only. No charge for subsequent visits)	\$15	\$30	\$15	\$30
Inpatient Facility	\$0	\$100	\$0	\$200
Outpatient Surgery	\$0	\$200	\$0	\$200
Behavioral Health Outpatient	\$5	\$15	\$5	\$15
Substance Abuse Outpatient	\$5	\$15	\$5	\$15
Behavioral Health Inpatient	\$0	\$100	\$0	\$200
Substance Abuse Inpatient	\$0	\$100	\$0	\$200

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[JacksonBenefits.org](https://JacksonBenefits.org)

If there is any discrepancy between the plan details in this benefits guide and the official plan documents, the language in the official plan documents shall prevail as accurate.

## Healthcare Biweekly Premium Comparison

Plan	Tier	2022	2023	2024	2025	2026
Jackson First	Employee Only	\$ -	\$ -	\$ -	\$ -	\$ -
	Employee + Spouse	\$120.00	\$120.00	\$120.00	\$120.00	\$ 120.00
	Employee + Child(ren)	\$105.00	\$105.00	\$105.00	\$105.00	\$ 105.00
	Family	\$160.00	\$160.00	\$160.00	\$160.00	\$ 160.00
Select HMO	Employee Only	\$ 50.00	\$ 55.00	\$57.75	\$ 60.64	\$63.67
	Employee + Spouse	\$201.30	\$221.43	\$232.50	\$244.13	\$256.33
	Employee + Child(ren)	\$170.92	\$188.01	\$197.41	\$207.28	\$217.64
	Family	\$286.34	\$314.98	\$330.72	\$347.26	\$364.62
POS	Employee Only	\$150.00	\$165.00	\$173.25	\$181.91	\$191.01
	Employee + Spouse	\$459.62	\$505.59	\$530.87	\$557.41	\$585.28
	Employee + Child(ren)	\$381.35	\$419.48	\$440.46	\$462.48	\$485.60
	Family	\$794.53	\$873.98	\$917.68	\$963.57	\$1,011.74

### Medical Plan Bi Weekly Premiums for Part-Time 24 Status

Plan	Tier	2024	2025	2026
Jackson First	Employee Only	\$ 25.00	\$25.00	\$ 25.00
	Employee + Spouse	\$ 195.00	\$195.00	\$ 195.00
	Employee + Child(ren)	\$ 155.00	\$155.00	\$ 155.00
	Family	\$ 260.00	\$260.00	\$ 260.00
Select HMO	Employee Only	\$107.75	\$110.64	\$ 113.67
	Employee + Spouse	\$332.50	\$344.13	\$ 356.33
	Employee + Child(ren)	\$272.41	\$282.28	\$ 292.64
	Family	\$455.72	\$472.26	\$ 489.62
POS	Employee Only	\$273.25	\$281.91	\$ 291.01
	Employee + Spouse	\$680.87	\$707.41	\$ 735.28
	Employee + Child(ren)	\$565.46	\$587.48	\$ 610.60
	Family	\$1,092.68	\$1,138.57	\$ 1,186.74

<b>UNITS EXCLUDED FROM IN-PATIENT UNIT DIFFERENTIAL</b>
Breast Center/Diagnostic Treatment Center
Radiology
Cardiac CATH Lab
Pedi Dialysis
ACC East Wing/West Wing
Education Department at JMT
Employee Health Office
Park Plaza West Women's Center
Poison Information Center
GI Station
Clinical Resource Management
Pediatric Special Procedures Room

**SEIU RN ACTIVE JOB CLASSIFICATIONS**

UNION CODE	JOB CODE	JOB TITLE
400	3340	APP Supervisor APRN
400	3343	APRN CVTX Navigator
400	3518	APRN Inpatient
400	3517	APRN Outpatient
400	3172	APRN Perinatal Coordinator
400	1161	Associate Nurse Manager
400	3423	Associate Nurse Manager Anesthesia
400	3642	Associate Nurse Manager CVTX
400	3641	Associate Nurse Manager Neuro
400	3640	Associate Nurse Manager OR L&D
400	3569	Associate Nurse Manager, CLIR
400	3464	Case Manager Clinical Resource Utilization
400	2829	Case Manager RN
400	3414	Clinical Documentation Coordinator RN
400	1133	Clinical Care Coordinator
400	2941	Clinical Documentation Educator
400	3566	Clinical Education Coordinator
400	2482	Clinical Resource Coordinator
400	3358	Clinical Robotic Nurse
400	1136	Clinical Service Coordinator
400	1137	Clinical Staff Nurse
400	1138	Clinical Staff Nurse CHS
400	3287	Clinical Staff Nurse CVTX
400	1178	Clinical Staff Nurse Float
400	3570	Clinical Staff Nurse FP, CLIR
400	3385	Clinical Staff Nurse Neuro
400	3639	Clinical Staff Nurse OR L&D
400	3568	Clinical Staff Nurse, CLIR
400	2229	Clinical Transplant Coordinator
400	3660	Community Health Nurse
400	3555	Discharge Planning Liaison
400	1170	Enterostomal Therapist
400	1933	Enterostomal Therapist Coordinator
400	1168	Graduate Nurse
400	3276	Hospital Flow Coordinator
400	1195	Lactation Specialist RN
400	3377	Lead Clinical Documentation Coordinator
400	1158	Nurse Anesthetist
400	1139	Nurse Educator

400	1140	Nurse Educator CHS
400	2710	Nurse Educator Transplant
400	1162	Nurse Manager
400	1604	Nurse Manager Anesthesia
400	2323	Nurse Manager Transplant
400	3545	Nurse Mentor
400	1166	Nurse Midwife
400	2621	Nurse Navigator Outpatient
400	3399	Nurse Supervisor SNF
400	3108	Organ Placement Clinical Coordinator RN
400	2771	Pedi Palliative Care Coordinator
400	3704	Post Discharge Care Coordinator
400	3391	PRM CSN
400	3621	Rehab Interdisciplinary Education Coordinator
400	3012	Rehab PPS Coordinator
400	2825	Retinotherapy of Prematurity Nurse
400	1177	RN First Assistant
400	3561	Stroke Program Navigator
400	2985	Transplant Donor Coordinator
400	3229	Trauma Center Clinical Outreach & Prevention Coordinator
400	2665	Trauma Performance Improvement Nurse
400	1176	Trauma Program Manager
400	2525	Vascular Access Specialist
400	3050	Wound Care Coordinator

# FLU VACCINE MOU

## MEMORANDUM OF UNDERSTANDING Flu Vaccine

This Memorandum of Understanding ("MOU") entered into this 9<sup>th</sup> day of December 2020, by and between the Jackson Health System/Public Health Trust ("JHS"), and the Service Employees International Union, Local 1991 (SEIU) collectively referred to as the "Parties".

**WHEREAS**, the Parties recognize the need to continue to protect themselves and others during pandemic and epidemic periods and thus recognize the need to wear masks while on JHS property in accordance with lawful federal, state, or local government COVID-19 emergency orders and in accordance with JHS's designated flu vaccination policy;

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. Effective upon execution of this MOU all bargaining unit members must adhere to the Trust's flu vaccination policy while on any JHS/PHT property by wearing masks that cover their nose and mouth from October 1<sup>st</sup> to March 31<sup>st</sup> of each year. These employees must wear masks at all times while on any JHS/PHT property and may only remove masks while participating in activities in which a mask cannot be practically worn such as eating, drinking or utilizing equipment which cannot be operated with a mask, or when alone in an enclosed room or space. This mask requirement is in addition to the mask requirements that may lawfully exist because of the COVID-19 pandemic. We strongly encourage all bargaining unit members to receive an annual flu vaccine during the above-mentioned flu season.
2. The Parties agree that this is a onetime non-precedent setting agreement, that no promise, inducement or agreement not expressly contained herein has been made, that this MOU contains the entire agreement between the parties hereto, and that the terms of this MOU are contractual and not a mere recital; and

**IN WITNESS HEREOF**, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International Union  
Local 1991 (SEIU)

Jackson Health System/Public Health Trust

Martha Baker RN 12-9-20  
Signature Date

[Signature] 12-9-2020  
Signature Date

MARATHA BAKER, RN  
Printed Name PRESIDENT SEIU 1991

Roberto Campos-Mangretti  
Printed Name Director Employee/Labor Relations

# ON CALL - CRNA MOU

## MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding is entered into on this 21<sup>st</sup> day of April, 2023, by and between the Public Health Trust/Miami-Dade County (hereafter "PHT"), and the Service Employees International Union, Local 1991 (hereafter "SEIU"). The PHT and SEIU shall be collectively referred to as "the Parties." The Parties agree as follows:

**WHEREAS**, there is a need to provide the CRNAs with a flexible work schedule for staffing purposes and provide them with additional benefits under certain circumstances;

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. The PHT agrees to pay overtime pay (time and one-half the normal pay rate) for hours worked beyond the CRNA's scheduled shift and when called back for ON-Call JMHI Liver Call.
2. The PHT agrees that CRNA's who have a regular schedule of a 4-day workweek shall not be scheduled on-call the day before their scheduled day off.
3. (a) The PHT agrees to grant administrative leave (AD) to the CRNA who has either been called in to work or who has been requested to work beyond his/her scheduled shift and is scheduled to return to work with less than eleven and a half (11 ½) hours rest break between the ending of the most recent shift and the start of the next regularly scheduled shift. The PHT shall grant AD time to CRNA's in this circumstance for their successive shift up to a maximum of 11.5 hours.  
(b) The PHT will provide a maximum of eleven and a half (11 ½) hours rest prior to returning to work. The CRNA will have the option of: (1) Working the balance of the scheduled shift; (2) Supplementing the AD Leave with Personal Leave (PL) for the remainder of the scheduled shift; or (3) Taking the remainder of the scheduled shift as unpaid leave.  
(c) Exception: Scheduled overtime shifts are excluded from the Administrative Leave entitlement period.
4. The PHT agrees to reimburse full-time CRNA's up to five hundred (\$500.00) dollars per calendar year for CME credits and travel, lodging and professional dues. Appropriate

*M. Bell  
4/21/23  
RB*

receipts and invoices must support the request for reimbursement and must be submitted before the end of the calendar year. All reimbursements require supervisory approval.

5. The PHT agrees to give full-time CRNA's an additional two (2) days of Educational Leave per contract year, up to a maximum of seventy-two (72) hours depending on the hours of the shifts worked.
6. The PHT agrees that the CRNA's may do self-scheduling using parameters provided by management and providing the self-scheduling meets staffing needs while decreasing use of overtime, agency and Travelers expense.
7. The Parties agree that this is a onetime non-precedent setting agreement, that no promise, inducement or agreement not expressly contained herein has been made, that this MOU contains the entire agreement between the parties hereto, and that the terms of this MOU are contractual and not a mere recital; and

**IN WITNESS HEREOF**, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International  
Local 1991

Jackson Health System/Public Health Union,  
Trust

Martha Baker  
Signature Date

[Signature] 4/21/22  
Signature Date

MARTHA BAKER  
Printed Name

Roberto Campos Maguetti  
Printed Name

8.

# SETTLEMENT AGREEMENT CRNA PEDIATRIC CARDIAC TEAM MOU

## SETTLEMENT AGREEMENTS AND MEMORANDA OF UNDERSTANDING

### CRNA Pediatric Cardiac Team

#### SIDE LETTER OF AGREEMENT BETWEEN

#### SERVICE EMPLOYEES INTERNATIONAL UNION, LOCAL 1991 (UNION) AND PUBLIC HEALTH TRUST/JACKSON MEMORIAL HOSPITAL (EMPLOYER)

**Whereas;** the Employer exercised its management rights and mandated that the Certified Registered Nurse Anesthetists (herein after CRNA) would be assigned to the Pediatric Cardiac Team (hereafter referred to as the Team) call schedule effective May 7, 2007, and

**Whereas;** the Union submitted a written request to the Employer dated May 4, 2007, requesting impact bargaining over the impact on the CRNA's, and

**Now Therefore;** in order to amicably resolve the issues raised by SEIU the parties have met and bargained over the impact and mutually agree to the following terms and conditions:

1. The Team will consist of six (6) CRNA's and may be adjusted by the Employer based on business need and the current call schedule.
2. No more than two (2) CRNA's who volunteered or were assigned to the Team, effective May 26, 2007, shall be eligible to leave the Team on May 26, 2008. Of the remaining four (4) original CRNA's a maximum of two (2) CRNA's may leave the team on or after November 26, 2008, provided that they have given at least three (3) months advance notice.
3. Assignment
  - a. To be eligible for assignment on the Team, a CRNA must have a minimum of one year of employment with the Employer and twenty-four (24) months of experience as a CRNA. The Employer agrees that they will train employees who are to be assigned to the team within six (6) months. Exceptions shall be reviewed by a panel composed of one physician, two (2) Team members, one (1) Supervisor and the Union Steward.
  - b. CRNA's who volunteer or are assigned to the Team shall serve a twenty-one (21) month commitment inclusive of training.
4. To be removed from the Team the following must apply:
  - a. CRNA Team members must have a minimum twenty-one (21) month service on the Team to elect to leave the team.
  - b. No more than two (2) Team members can leave the team within a one (1) year period (per calendar year)
  - c. Team members who elect to leave the team will notify the employer of their intentions six (6) months prior to being removed.
  - d. All requests (from either the current or future teams) to be removed from the Team shall be granted by seniority on the team first and if there is a contest, by bargaining unit seniority.

*Handwritten signatures and initials:*  
JSM  
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MS  
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JD

5. At the time the employee is responsible for the Team call they will be removed from the Liver Call obligation.
6. Vacancies created by attrition or by completion of a CRNA's twenty-one (21) month obligation shall be filled by volunteers beginning with the most senior employee. If there are insufficient volunteers, the Employer shall assign the vacant positions to employees in the classification with the least seniority.
7. Coverage for the Team will be twenty-four (24) hours per day. The Employer commits to make a good faith effort to expand the call obligation to other providers with the intention of limiting the weekend call for CRNA's.
8. CRNA's assigned to the Team will be responsible for self scheduling.
9. The Team will cover all operating room/bedside (PICU & NICU) "Complex" Pediatric Cardiac cases.
  - a. Team member will provide services during their regular scheduled work hours. An "On Call" Team member will provide services during nonscheduled work hours.
  - b. Routine Pediatric Catheterization Cardiac cases will be performed by non-cardiac team CRNA's between 7:00 am to 11:00 pm Monday through Friday (excluding holidays and weekends).
  - c. "Complex" Pediatric Cardiac cases will be performed by the Team twenty-four (24) hrs a day, seven (7) days per week. Management or the Pediatric Anesthesia Attending/Pediatric Cardiac Anesthesia Attending will determine which case is deemed "complex".
10. AD time shall be granted in the same manner as it is administered for Liver Call.
11. Neonatal Resuscitation and PALS certification courses shall be paid by the Employer. The employee shall be paid straight time for their regular schedule if the course is taken on their regular assigned work day and time and one half if the course is taken on a day off and exceeds forty (40) paid hours in the work week.
12. Consistent with Article XVII, Section 2 of the Collective Bargaining Agreement between the parties, the Employer agrees to train employees who are assigned to the Team, including those employees who may be scheduled on the team within six (6) months. Training will consist of weekly conferences, a lecture series, Cardiac Catheterization meetings (rotated among team members) and a skills checklist, which is mutually completed by the Employer and the employee throughout training.
13. The CRNA's who are assigned to the Team shall be paid time and one half their current base hourly rate of pay for all hours they are assigned to provide Pediatric Cardiac Anesthesia care except during the first six (6) months of orientation. Employees who complete orientation in less than six (6) months will also be paid time and one half their current base hourly rate of pay for all hours they are assigned to provide Pediatric Cardiac Anesthesia care. In addition, pursuant to Article XI, Salaries, Section 6, On-Call Pay; CRNA's assigned to the Team shall receive double the on-call shift pay rate for week days and weekends respectively all hours assigned to call.

DM  
 \*JC  
 DM  
 WSL  
 JC 2  
 JC  
 YS

14. The Employer agrees that all benefits which apply to Liver Call detailed in the Agreement between the parties effective July 2, 2006, shall apply to employees working the Team. Effective the date of execution of this agreement, the employees obligated to work the Team call and the Liver Call are separate. The exception to the above is that double time for Broward Liver call shall not apply.
15. Nothing in this Agreement shall prejudice the Employer as they carry out their obligations to manage the business or the Union as they administer the Collective Bargaining Agreement between the parties.
16. At the request of either party, the parties agree to re-open this agreement no sooner than one (1) year from the date of signature. Any such discussions shall not exceed a period of ninety (90) days from the date of the first meeting.
17. This agreement is made without precedent or prejudice to any future similar situation which may arise. This agreement shall not be introduced as evidence in any grievance or legal proceeding entered into by the parties except as is necessary to enforce the terms and conditions of this agreement.

**FOR THE EMPLOYER:**

[Signature] 5/15/08  
 Date

[Signature] 5-15-08

[Signature] 5-15-08

\_\_\_\_\_

\_\_\_\_\_

**FOR THE UNION:**

[Signature] 5-15-08  
 I.A.B. 5074.1991 Date

[Signature]

[Signature]

[Signature], I.A.B. 5074, and 5-15-08

\_\_\_\_\_

\_\_\_\_\_

# ADMINISTRATIVE LEAVE PERIOD CATH MOU

## MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding is entered into on this 10<sup>th</sup> day of December, 2021, by and between the Public Health Trust/Miami-Dade County (hereafter "PHT"), and the Service Employees International Union, Local 1991 (hereafter "SEIU"). The PHT and SEIU shall be collectively referred to as "the Parties." The Parties agree as follows:

**WHEREAS**, a number of grievances have arisen under the Collective Bargaining Agreement by and between SEIU and the PHT, regarding the granting of Administrative Leave for SEIU members who are on-call;

**WHEREAS**, the parties desire to amicably settle these grievances and arbitrations on the terms outlined below; and

**WHEREAS**, the parties without any admission of liability, or violation of any law, rule or regulation, desire to fully and finally settle all differences and disputes relating to the aforementioned claim; and

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. All grievances and any arbitration regarding the granting of Administrative Leave for SEIU members who are on-call are hereby withdrawn with prejudice. This agreement conclusively and finally resolves all issues related to these grievances and arbitration.
2. PHT agrees to grant Administrative Leave (hereinafter referred to "AD") to Clinical Staff Nurses, Associate Nurse Managers and Community House Physicians who work in the Cath Labs and in the Perioperative departments in all the facilities of the Jackson Health System who is either called in to work or who is requested to work beyond his/her scheduled shift and is scheduled to return to work with less than eleven and a half (11 ½) hours rest break between the ending of the most recent shift or working period and the start of the next regularly scheduled shift. The PHT shall grant AD time to a Cath Lab or Perioperative Clinical Staff Nurse in

MB  
12-10-21

ll

this circumstance for their immediately succeeding scheduled shift up to a maximum of 11.5 hours. Exceptions: (A) Scheduled overtime shifts are excluded from the AD Leave entitlement period. (B) If a Cath lab or Perioperative Clinical Staff Nurse is called back to commence work two (2) hours or less prior to the beginning of their regularly scheduled shift, he/she is excluded from the AD Leave entitlement provided by this agreement.

3. The effective date for implementation if this AD Leave entitlement is December 1, 2021.
4. The Parties agree that this is a onetime non-precedent setting agreement, that no promise, inducement or agreement not expressly contained herein has been made, that this MOU contains the entire agreement between the parties hereto, and that the terms of this MOU are contractual and not a mere recital; and

IN WITNESS HEREOF, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International  
Union, Local 1991

Matthew Blen 12-10-21  
Signature Date

MATTHEW BLEN  
Printed Name

Jackson Health System/Public Health  
Trust

Enbar Cohen 12-10-21  
Signature Date

Enbar Cohen  
Printed Name

## SHIFT BREAKS MOU

### 3-12 Shift Breaks

#### SETTLEMENT AGREEMENT

This Agreement is entered into this 10<sup>th</sup> day of March, 2010 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union Local 1991 ("SEIU").

WHEREAS, a grievance and/or arbitration has arisen under the collective bargaining agreement by and between Service Employees International Union, Local 1991 and the Jackson Health System/Public Health Trust of Miami-Dade County, case titled SEIU Local 1991 and Jackson Memorial Hospital/PHT, All Affected RNs Working 3-12 ½ Shifts (FMCS #090731-59436-3); and,

WHEREAS, the parties desire to amicably settle this arbitration/grievance on the terms outlined below; and,

WHEREAS, the parties without any admission of liability, or violation of any law, rule or regulation, desire to fully and finally settle all differences and disputes relating to the aforementioned claim; and

NOW THEREFORE, in consideration of the premises and mutual promises contained herein, it is agreed as follows:

1. The grievance filed on June 11, 2009 by SEIU on behalf of the RNs who work 3-12 ½ hour shifts per week who have not been converted to full-time status (72 hours pay per week), retroactive to December 17, 2008, as required by Article X, Section 1 of the current CBA between the parties (FMCS #090731-59436-3) is hereby withdrawn.
2. JHS agrees that it shall:
  - a. comply with Article X, Section 1 of the CBA and convert the affected RNs to full-time status retroactive from December 17, 2008.

b. insure that all RNs who work 3-12 ½ hour shifts per week receive two (2) one-half hour meal breaks per shift.

c. retroactivity under this Agreement shall apply only to longevity and date of status change.

3. The parties shall evenly split the cost of the arbitration, if any.

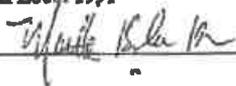
4. This Agreement shall be resolved and enforced pursuant to the parties' arbitration mechanism in the pertinent Collective Bargaining Agreement.

5. The settlement entered into herein shall set no precedent between the parties and nothing in this agreement shall be deemed to change, alter, or amend the Collective Bargaining Agreement between the parties.

IN WITNESS WHEREOF, the undersigned parties have caused this Settlement Agreement to be executed by their duly authorized representatives as of the day and year first above written.

Service Employees International  
Union Local 1991

By: \_\_\_\_\_



Jackson Health System/  
Public Health Trust/ Miami-Dade County

By: \_\_\_\_\_

  
DAVID R. Smith  
EXP. of CEO

March 10, 2010

# SEIU SPEAK UP AWARD MOU



Employee/Labor Relations &  
Workforce Compliance  
1500 NW 12<sup>th</sup> Ave, HR Suite 106W  
Miami, FL 33136-1096  
305-585-6771

February 11, 2022  
VIA e-mail: Martha@seiu1991.org

Martha Baker, Executive Director  
Service Employees International Union (SEIU) Local 1991

**RE: SpeakUp Award**

Dear Ms. Baker,

This Agreement is entered into this 11 day of February, 2022 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, the parties agree that there is a desire and need in promoting a culture where employees are empowered to speak up about safety concerns that provide opportunities to improve employee and patient safety and satisfaction;

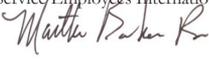
**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. On a monthly basis, JHS will review prior month's near miss events submitted through the RLDatix reporting system, and identify an outstanding Speak Up event, if any, for each facility.
2. The employee(s) will be rewarded with one (1) gift card in the amount of \$25.
3. The identified employee to be rewarded may come from any classification within the facility.
4. JHS may reward more than one (1) employee per month in instances of multiple exceptional Speak Up events.
5. A "Speak Up" certificate will be awarded to the employee and will be placed in the employee's file.
6. The Parties agree that this is a one-time non-precedent setting agreement, that no promise, inducement or agreement not expressly contained herein has been made, that this MOU contains the entire agreement between the Parties hereto, and that the terms of the MOU are contractual and not a mere recital.
7. JHS agrees to provide the Union with a minimum of 24 hours' notice of its intention to start and/or stop this program.

**IN WITNESS HEREOF**, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International Union, Local 1991

Jackson Health System/Public Health Trust

  
2/11/22

  
2/11/22

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature Date

Martha Baker, RN



\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name



# UPDATE TO IN-NETWORK PHARMACY BENEFITS



Employee/Labor Relations & Workforce

1500 NW 12<sup>th</sup> Ave, HR Suite 106W  
Miami, FL 33136-1096  
305-585-7268

October 20, 2023

VIA e-mail: [Martha@sciu1991.org](mailto:Martha@sciu1991.org)  
Executive Director  
Service Employees International Union Local 1991

**RE: Update to In-Network Pharmacy Benefits**

Dear Ms. Baker,

This Agreement is entered into this 20<sup>th</sup> day of OCTOBER, 2023 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, the parties agree that there is a desire to provide employees with varied benefit options and the recent changes the Florida Prescription Drug Reform Act;

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. Effective January 1, 2024 in accordance with Florida Prescription Drug Reform Act, retail pharmacy benefits will be available at all JHS/PHT Health Insurance in-network retail pharmacies, including Walgreens.

**IN WITNESS HEREOF**, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International Union, Local 1991

Jackson Health System/Public Health Trust

Martha Baker 10-20-23  
Signature Date

Enbar Cohen 10/20/23  
Signature Date

MARTHA BAKER, RN  
Printed Name EC. D.K.

Enbar Cohen  
Printed Name

# ON CALL PAY FOR CRNAS



Employee/Labor Relations & Workforce Compliance  
1500 NW 12<sup>th</sup> Ave, HR Suite 106  
Miami, FL 33136-1096  
305-585-6771

August 24, 2023

VIA e-mail: Martha@seiu1991.org

Martha Baker, Executive Director  
Service Employees International Union (SEIU) Local 1991

IT IS THEREFORE agreed that:

1. Effective immediately, all Certified Registered Nurse Anesthetist, (hereafter "CRNA") who are on call will be paid time and a half of their base rate of pay for all hours worked when they are called in.
2. CRNA's who were on call and worked on-call hours at Jackson West Medical Center between August 6, 2023 and the date this Agreement is fully executed will be paid time and a half of their base rate of pay for all hours worked when they were called in.

Service Employees International Union, Local 1991

Jackson Health System/Public Health Trust

Martha Baker M 8-28-23  
Signature Date

Enbar Cohen 8/28/23  
Signature Date

MARTHA BAKER, RN  
Printed Name SEIU 1991 Ex. Dir.

Enbar Cohen  
Printed Name

# PEDIATRIC TRANSPORT MOU



Employee/Labor Relations & Workforce Compliance  
1500 NW 12<sup>th</sup> Ave, HR Suite 106  
Miami, FL 33136-1096  
305-585-6771

June 28, 2022

VIA e-mail: Martha@seiu1991.org

Martha Baker, Executive Director  
Service Employees International Union (SEIU) Local 1991

**RE: Pediatric Transport**

Dear Ms. Baker,

This Agreement is entered into this 28 day of June, 2022 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, the parties agree that because of market pressures there is a need to increase the salary incentives to participate in the Neonatal Pediatric Transport Team;

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. This Agreement will go into effect July 10, 2022.
2. Members of "Team A" of the Neonatal Pediatric Transport team (*defined as Part-Time and Full-Time Nurses in cost code 64615*) will receive a two (2) step increase to their base salary. These employees are hired into the Neonatal Pediatric Transport department.
3. Members of "Team B" of the Neonatal Pediatric Transport team (*defined as Part-Time and Full-Time Nurses in cost codes 62605 and 62505*) will receive a one (1) step increase to their base salary. Eligibility for Team B requires completion of training and competencies to transport neonatal and pediatric critical care patients. Members of Team B will only be scheduled to work on-call for the Neonatal Pediatric Transport Team.
4. Members of Team A and B who are on-call and complete a patient transport will receive a one-hundred dollar (\$100.00) bonus for every transport trip in which they participate. Team A will not receive the bonus when transporting patients during their regular shift.
5. Members of Team A and B will be required to be on-call for four (4) eight (8) -hour shifts per four (4)-week schedule period. Members of Team A and B who are scheduled for on-call will receive the on-call pay as defined in Article XI, Section 7 On-Call Pay of 2020-2023 RN CBA.
6. In cases where an employee has one week or more of continuous vacation, on-call shifts will be pro-rated.
7. Eligible nurses who are not able to fulfill the above requirements will be removed from the Neonatal Pediatric Transport Team and their pay exceptions will be eliminated immediately.
8. Nurses who are not members of Team A or Team B but are asked to assist in a patient transport will receive a two-hundred dollar (\$200.00) pay supplement per transport.

*MB Baker*  
6-28-22

9. The pay exceptions described in (1) and (2) are pensionable and will be used toward the calculation of overtime.
10. The above-mentioned step increases and bonuses will take effect the beginning of the next pay period after the full execution of this MOU.
11. The Parties agree that this is a one-time non-precedent setting agreement, that no promise, inducement or agreement not expressly contained herein has been made, that this MOU contains the entire agreement between the Parties hereto, and that the terms of the MOU are contractual and not a mere recital.

**IN WITNESS HEREOF**, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International Union, Local 1991

Jackson Health System/Public Health Trust

Matha Baker      6-28-22  
 Signature                      Date

Erin Cohen      6/28/22  
 Signature                      Date

M. MATHA BAKER, RN  
 Printed Name

Erin Cohen  
 Printed Name

# SPEAK UP AND CARE SPOTLIGHT AWARD



Employee/Labor Relations & Workforce Compliance  
1500 NW 12<sup>th</sup> Ave, HR Suite 106  
Miami, FL 33136-1096  
305-585-6771

February 25, 2022

VIA e-mail: Martha@seiu1991.org  
Martha Baker, Executive Director  
Service Employees International Union (SEIU) Local 1991

## RE: Speak Up & CARE Spotlight Award

Dear Ms. Baker,

This Agreement is entered into this 28<sup>th</sup> day of FEBRUARY, 2022 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, the parties agree that there is a desire and need in promoting a culture where employees are empowered to speak up about safety concerns that provide opportunities to improve employee and patient safety and satisfaction; that there is a desire to publicly recognize employees who have exhibited the CARE values in an event where it has had system, unit, or departmental impact;

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

### Speak Up Award

1. On a quarterly basis, at minimum, JHS will review prior month's Speak Up events submitted through the RLDatix reporting system, and identify an outstanding submission, if any, for each facility.
2. The employee(s) will be rewarded with one (1) gift card in the amount of \$100.
3. The identified employee(s) to be rewarded may come from any classification within the facility.
4. JHS may reward more than one (1) employee in the facility in instances of multiple exceptional Speak Up events.
5. A "Speak Up" certificate will be awarded to the employee and will be placed in the employee's file.
6. Additionally, on an annual basis, a system-level Speak Up event will be identified and rewarded.
7. For the system-level Speak Up award, the employee will be rewarded with one (1) gift card in the amount of \$500.
8. JHS may reward more than one (1) employee for the annual, system-level Speak Up award in instances of multiple exceptional Speak Up events.
9. The Parties agree that this is a one-time non-precedent setting agreement, that no promise, inducement or agreement not expressly contained herein has been made, that this MOU contains the entire agreement between the Parties hereto, and that the terms of the MOU are contractual and not a mere recital.
10. JHS agrees to provide the Union with a minimum of 24 hours' notice of its intention to start and/or stop this program.

**CARE Spotlight Award**

1. On a quarterly basis, at minimum, JHS will review prior month's submissions in WePerform for employee's that have been nominated for a CARE spotlight award, and identify an outstanding submission, if any, for each facility.
2. The CARE Spotlight award is a public recognition of an employee who has demonstrated the CARE values in an occurrence, at an exceptional level, and which has had an impact on a system, unit or departmental level.
3. The employee(s) will be rewarded with one (1) gift card in the amount of \$25.
4. The identified employee(s) to be rewarded may come from any classification within the facility.
5. JHS may reward more than one (1) employee in the facility in instances of multiple exceptional CARE Spotlight events.
6. The Parties agree that this is a one-time non-precedent setting agreement, that no promise, inducement or agreement not expressly contained herein has been made, that this MOU contains the entire agreement between the Parties hereto, and that the terms of the MOU are contractual and not a mere recital.
7. JHS agrees to provide the Union with a minimum of 24 hours' notice of its intention to start and/or stop this program.

IN WITNESS WHEREOF, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International Union, Local 1991

Maitha Blake                      2-28-22  
Signature                              Date

Maitha Blake  
Printed Name

Jackson Health System/Public Health Trust

Erin Cohen                              3/1/22  
Signature                              Date

Erin Cohen  
Printed Name

# CLINICAL EDUCATOR COORDINATOR IMPACT BARGAINING RESOLUTION MOU



**Employee/Labor Relations & Workforce Compliance**  
 1500 NW 12<sup>th</sup> Ave, HR Suite 106  
 Miami, FL 33136-1096  
 305-585-6771

September 13, 2023  
 VIA e-mail: [Martha@seiu1991.org](mailto:Martha@seiu1991.org)

Martha Baker, Executive Director  
 Service Employees International Union (SEIU) Local 1991

**RE: Clinical Education Coordinator – Impact Bargaining Resolution Agreement**

This Agreement is entered into this 27 day of September, 2023 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, the parties agree that there is a desire to resolve effects of changes in the workplace, ensuring fair treatment of employees and maintaining positive employee relations.

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. Promotion to the Clinical Education Coordinator role will involve a one (1)-step increase, except for any administrative role such as Associate Nurse Manager or Nurse Manager, which will be a lateral.
2. The step schedule will have 14 steps and the difference between each step will be 4.2%.
3. The steps schedules are as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9	Step 10	Step 11	Step 12	Step 13	Step 14
7/9/2023	41.0225	42.7452	44.5408	46.4114	48.3606	50.3920	52.5082	54.7136	57.0116	59.4062	61.9011	65.0307	67.7619	70.6078
10/1/2023	43.1296	44.9413	46.8287	48.7955	50.8451	52.9803	55.2055	57.5242	59.9404	62.4578	65.6154	68.3712	71.2428	74.2350

4. Current full-time and part-time Clinical Education Coordinators will receive an additional 1% market adjustment retroactive to July 9, 2023, to follow the same negotiated wage increases as Nurse Educator.
5. Current full-time and part-time Clinical Education Coordinators will receive a 4.2% market adjustment effective October 1, 2023.
6. The Parties agree that this is a one-time non-precedent setting agreement. The parties also agree that no promise, inducement, or agreement not expressly contained herein has been made, that the agreement contains the entire agreement between the parties hereto, and that the terms of this agreement are contractual and not a mere recital.

Service Employees International Union, Local 1991

Jackson Health System/Public Health Trust

Martha Baker RN      9.27.23  
 Signature                      Date

Enbar Cohen                      9/27/23  
 Signature                      Date

MARTHA BAKER, RN  
 Printed Name

Enbar Cohen  
 Printed Name

**CATH LAB/INTERVENTIONAL RADIOLOGY  
CLINICAL STAFF NURSES AND ASSOCIATE  
NURSE MANAGERS SHIFT BONUS**



**Employee/Labor Relations &  
Workforce Compliance**  
1500 NW 12<sup>th</sup> Ave, HR Suite 106W  
Miami, FL 33136-1096  
305-585-6771

February 1, 2022  
VIA e-mail: Martha@seiu1991.org

Martha Baker, Executive Director  
Service Employees International Union (SEIU) Local 1991

**RE: Shift Bonus – Cath Lab/Interventional Radiology Clinical Staff Nurses & Associate Nurse Managers**

Dear Ms. Baker,

This Agreement is entered into this 3<sup>rd</sup> day of February, 2022 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, the parties agree that there is a need for JHS to implement incentives to recruit and retain dually trained Cath Lab/Interventional Radiology Clinical Staff Nurses to effectively meet its current needs;

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. In an effort to recruit and retain experienced and dedicated nurses, and in recognition of the increased demand for dually trained Cath lab and Interventional Radiology Clinical Staff Nurses and Associate Nurse Managers, JHS shall implement a shift bonus in the amount of **\$5 per hour** for all hours worked.  
  
To be eligible for the shift bonus, an employee must be a full-time or part-time w/benefits active employee, and have the skill, training, and competency, or actively be in the cross-training program, to deliver both Cath lab and Interventional Radiology care and demonstrate competency to work on their applicable team and take call independently, evidenced by a completed clinical competency checklist.
2. The shift bonus will be provided to eligible employees upon the beginning of their cross-training program.
3. To remain eligible for the shift bonus, employees must maintain training and competency requirements.
4. Training and competency requirements will be established no longer than 60 days from the effective date of this agreement with subject matter experts. On-call frequency will be addressed in the training and competency requirements.
5. The shift bonus will cease if the employee fails to maintain training and competencies, or withdraws from the cross-training program.
6. The Parties agree that this is a one-time non-precedent setting agreement, that no promise, inducement or agreement not expressly contained herein has been made, that this MOU contains the entire agreement between the Parties hereto, and that the terms of the MOU are contractual and not a mere recital.
7. JHS agrees to provide the Union with a minimum of 24 hours' notice of its intention to start and/or stop this program.

IN WITNESS HEREOF, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International Union, Local 1991

Jackson Health System/Public Health Trust

Marta Baker 2-3-22  
Signature Date

Eriq Cohen 2/2/22  
Signature Date

MARTA BAKER, RN  
Printed Name

Eriq Cohen  
Printed Name

# OPERATION ROOM AND LABOR & DELIVERY SPECIALTY MOU



**Employee/Labor Relations &  
Workforce Compliance**  
1500 NW 12<sup>th</sup> Ave, HR Suite 106W  
Miami, FL 33136-1096  
305-585-6771

February 2, 2023

VIA e-mail: Martha@seiu1991.org

Martha Baker, Executive Director

This Agreement is entered into this 3<sup>rd</sup> day of February, 2023 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, the parties have agreed that there is a need to provide a wage incentive for clinical staff nurses who work in Operating Room and Labor & Delivery units in order to retain and be able to hire these specialized nurses;

**NOW THEREFORE**, the parties agree as follows:

1. In an effort to retain and recruit experienced clinical staff nurses who work in Operating Room and Labor & Delivery units, PHT will implement a specialty differential.
2. Full-time and Part-Time employees in the classification of Clinical Staff Nurse CV/TX (Job code 3287), Clinical Staff Nurse Neuro (Job Code 3385), Associate Nurse Manager CV/TX (Job Code 3642), Associate Nurse Manager Neuro (Job Code 3641), Associate Nurse Manager OR/L&D (Job Code 3640) Clinical Staff Nurses OR/L&D (Job Code 3639) and First Assistant, RN (Job Code 1177) who work in Operating Room and Labor & Delivery units will be eligible for hourly specialty differentials as delineated below:
- 3.

SEIU Classifications	Current State	Facility Cost Centers	Increase/Add Specialty Differential
CSN CV/TX, ANM CV/TX	\$5/hour specialty differential	<b>JMH</b> 66207, 66407	Increase current specialty differential to \$10/hour
CSN Neuro, ANM Neuro	\$2.50/hour specialty differential	<b>JMH</b> 66207, 66407	Increase current specialty differential to \$5/hour
CSN OR/L&D, ANM OR/L&D and 1 <sup>st</sup> Assist RN	No specialty differential	<b>JMH</b> 66207 66407 61600, 61610 and 61905	Add \$2.50/hour specialty differential to CSN OR/L7D, ANM OR/L&D and 1 <sup>st</sup> Assist RN
CSN OR/L&D, ANM OR/L&D, and 1 <sup>st</sup> Assist RN	No specialty differential	<b>JN</b> 57010, 57027, 57111, 57147, 57239, and 57021	

*MB*  
*Ran*

CSN OR/L&D, ANM OR/L&D and 1 <sup>st</sup> Assist RN	No specialty differential	<b>JS</b> 83630, 83721, 83784 and 83701	Add \$2.50/hour specialty differential to CSN OR/L&D. ANM OR/L&D and 1 <sup>st</sup> Assist RN
CSN OR/L&D, ANM OR/L&D and 1 <sup>st</sup> Assist RN	No specialty differential	<b>JWest</b> 52011, 52021, 52028, 52025 and 52022	
CSN OR/L&D, ANM OR/L&D and 1 <sup>st</sup> Assist RN	No specialty differential	<b>Holtz</b> 61905, 61600 and 61610	

4. Per Diem employees will not be eligible for the specialty differential.
5. The specialty differentials will be pensionable, applied towards the calculation of overtime and compensated for all hours paid.
6. The job codes mentioned in this MOU, except for 1<sup>st</sup> Assist RN, were created for pay purposes only.
7. The Parties agree that this is a onetime non-precedent setting agreement. The parties also agree that no promise, inducement or agreement not expressly contained herein has been made, that the agreement contains the entire agreement between the parties hereto, and that the terms of this agreement are contractual and not a mere recital.
8. This agreement will be effective on November 13, 2022.

**TNESS HEREOF**, the undersigned Parties have caused this MOU to be executed by their duly authorized natives as of the day and year written above.

Employees International Union, Local 1991

Jackson Health System/Public Health Trust

*Katrina Bailon, RN* 2-3-23  
 re Date

*Don* 2-3-23  
 Signature Date

KATRINA BAILON, RN  
 Name EX. 012.

Robert Campos Negreiros  
 Printed Name

**CATH LAB AND INTERVENTIONAL RADIOLOGY DIFFERENTIAL MOU**

**MEMORANDUM OF UNDERSTANDING**

This Agreement is entered into this 2<sup>170</sup> day of DECEMBER, 2022 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, the parties agree that there is a need for JHS to implement incentives to recruit and retain dually trained Cath Lab/Interventional Radiology Clinical Staff Nurses to effectively meet its current needs;

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. The original MOU, dated February 3, 2022, that provides for Cath lab and Interventional Radiology Clinical Staff Nurses (Hybrid) as well as their Associate Nurse Managers to receive a differential in the amount of \$5.00 per hour will be revised to provide for the differential in the amount of \$5.00 per hour to be compensated for all hours paid.
2. This MOU will become effective November 13, 2022.

**IN WITNESS HEREOF**, the undersigned Parties have caused this MOU to be executed by their duly authorized representatives as of the day and year written above.

Service Employees International Union,  
Local 1991

Jackson Health System/Public Health Trust

Martha Baker RN      12-2-22  
Signature                      Date

[Signature]      12/2/2022  
Signature                      Date

MARTHA BAKER, RN  
Printed Name

Roberto Campos Magallon  
Printed Name

# JACKSON SOUTH SPECIALTY DIFFERENTIAL FOR OB TRIAGE



Employee/Labor Relations & Workforce Compliance  
1500 NW 12<sup>th</sup> Ave, HR Suite 106  
Miami, FL 33136-1096  
305-585-6771

September 26, 2023  
VIA e-mail: Martha@seiu1991.org

Martha Baker, Executive Director  
Service Employees International Union (SEIU) Local 1991

This Agreement is entered into this 26 day of September, 2023 by and between the Jackson Health System/Public Health Trust of Miami-Dade County (the "JHS") and the Service Employees International Union, Local 1991 ("SEIU").

**WHEREAS**, a Memorandum of Understanding (MOU) was entered into on November 16, 2022, specifying eligible job codes and cost codes for specialty differentials, and an additional cost code must be included.

**NOW THEREFORE**, in consideration of the mutual covenants contained herein, the Parties hereby agree to voluntarily enter into this MOU, which contains the following agreements and stipulations:

1. A Memorandum of Understanding (MOU) was entered into on November 16, 2022, specifying eligible job codes and cost codes for specialty differentials (see attached Exhibit A).
2. The cost code **83661 – OBE Triage at Jackson South** should be included in eligible cost codes for CSN OR/L&D, ANM OR/L&D, and 1<sup>st</sup> Assist RN.
3. Any employee who worked in this cost code from November 16, 2022 to the date this MOU is executed shall receive retroactive pay.
4. All terms, conditions, and stipulations made in Exhibit A shall continue to govern.

Service Employees International Union, Local 1991

Jackson Health System/Public Health Trust

Martha Baker 9-27-23  
Signature Date

Enbar Cohen 9/26/23  
Signature Date

MARTHA BAKER, MD  
Printed Name

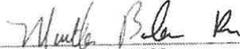
Enbar Cohen  
Printed Name

This Agreement between Service Employees International Union, Local 1991 (SEIU, Local 1991), Registered Nurses and the Public Health Trust is made in the State of Florida. Proper venue for this agreement shall be Miami-Dade County, Florida.

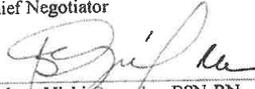
In witness whereof the parties have caused this Agreement to be executed on this 9 day of July 2023

Local 1991, Service Employees International Union

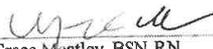
Jackson Health System Management Leadership

  
Martha Baker, BSN, RN  
Chief Negotiator

Designated by: Carlos Migoya 7/7/2023  
Carlos A. Migoya  
Chief Executive Officer

  
Barbara Vicki Gonzalez, BSN, RN  
President

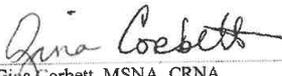
Designated by: Don Steigman 7/7/2023  
Don S. Steigman  
President

  
Grace Measley, BSN, RN  
Vice President

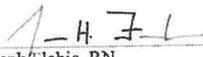
Designated by: David Zambrana 7/7/2023  
David Zambrana, PhD, DNP, MBA, RN  
Executive Vice President/COO

  
Lisa Bush, BSN, RN  
Jackson Memorial Hospital - TICU

Designated by: Mark Knight 7/7/2023  
Mark Knight  
Executive Vice President/CFO

  
Gina Corbett, MSNA, CRNA  
Jackson Memorial Hospital - Anesthesia

Designated by: Julie Staub 7/6/2023  
Julie Staub  
Executive Vice President/CHRO

  
Joseph Flahie, RN  
Jackson Memorial Hospital - NSICU

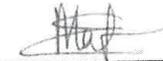
Designated by: Michelle Kligman 7/6/2023  
Michelle Kligman, Psy.D, MBA, MS  
Senior Vice President of HR/CXO

  
Angela Freshley-Fairchild, BHA, RN  
Jackson Memorial Hospital - Case Management

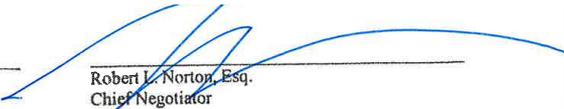
Designated by: Enbar Cohen 7/6/2023  
Enbar Cohen, J.D.  
Associate Vice President, Employee & Labor Relations

  
Nikki Luna, MSN, BSN, RN  
Jackson Memorial Hospital - WW11

Designated by: Tala Teymour 7/6/2023  
Tala Teymour  
Associate Vice President, Total Rewards & Employee Wellness



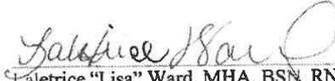
Edline Major, BSN, RN  
Corrections Health Services



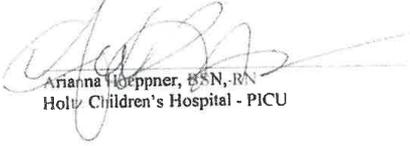
Robert L. Norton, Esq.  
Chief Negotiator  
Allen, Norton & Blue



Shelly Pagan-Jones, BSN, RN  
Holtz Children's Hospital - NBICU



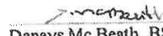
Laetrice "Lisa" Ward, MHA, BSN, RN  
Jackson North Medical Center - Telemetry



Arianna Hoppner, BSN, RN  
Holtz Children's Hospital - PICU



Andrew Miller, BSN, RN, SCRNP  
Jackson West Medical Center - ER



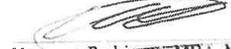
Danays Mc Beath, BSN, RN  
Holtz Children's Hospital - L & D



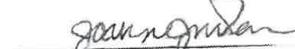
Mark Richard, Esq.  
General Counsel



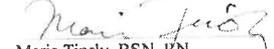
Carmen Rodriguez, RN  
Jackson Memorial Hospital - Liver Acquisition



Yocanis Rodriguez, MBA, MSLM, BSN, RN  
Jackson Memorial Hospital - ECC



Joanne Jourdan, DNP, APRN  
Jackson Memorial Hospital - MICU



Maria Tinsly, BSN, RN  
Jackson South Medical Center - ICU Tower



Jade Garcia, EMT-P, RN  
Jackson South Medical Center - ER



Lizette Posada, RN  
Jackson South Medical Center - Endoscopy