

**Jackson Health System and SEIU Local 1991
Re-Opener Negotiations**

**Union Proposal
June 4, 2024**

RN Unit

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 registered nurse for up to five (5) ~~six (6)~~ patients.
 - B. Telemetry patients, One (1) registered nurse for up to four (4) ~~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 four (4) ~~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 (behavioral) 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 (Behavioral) 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.

A bargaining unit employee whose patient assignment exceeds the staffing ratios set forth herein for more than one (1) hour shall receive an additional \$10.00 per hour until his or her patient assignment is back in compliance. The obligation to make all reasonable attempts to return the unit to compliance shall continue so long as the unit is not in compliance.

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 remote or 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.

Tentatively Agreed to by:

SEIU Local 1991

JHS