

COLLECTIVE BARGINING AGREEMENT
By and Between

**KAISER FOUNDATION HEALTH PLAN OF
WASHINGTON,
INC. (KFHPWA) and SEIU Healthcare 1199NW**

**Kaiser Permanente
RN/ARNP**

2023–2027



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COLLECTIVE BARGAINING AGREEMENT
By and Between
KAISER FOUNDATION HEALTH PLAN OF WASHINGTON, INC.
(KFHPWA)
And
SEIU HEALTHCARE 1199NW
REGISTERED NURSES/
ADVANCED REGISTERED NURSE PRACTITIONERS (ARNP)

November 8, 2023 – September 30, 2027

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REGISTERED NURSES/

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November 8, 2023 – September 30, 2027

This Agreement is made and entered into by and between (KFHPWA), hereinafter referred to as the "Employer," and SEIU Healthcare 1199NW, hereinafter referred to as the "Union." The purpose of this Agreement is to set forth the understanding reached between the parties hereto with respect to wages and salaries, hours of work and conditions of employment with the objective of improving the practice of nursing through the promotion of equitable employment standards.

ARTICLE 1 – RECOGNITION

1.1 Recognition. Pursuant to the National Labor Relations Board Certification dated May 26, 1983 (Case No. 19-RC-10700) and as subsequently agreed to by the parties in January 2005, the Employer recognizes the Union as the sole and exclusive representative for all Registered Nurses employed by the employer as Registered Nurses at all of the Employer's locations, including, but not limited to the following: staff nurse, visiting nurse, liaison nurse, nurse practitioner, consulting nurse, and registered nurse/oncology, employed by the Employer at the Employer's medical centers, excluding nurses in supervisory and administrative/management positions and all other employees.

1.2 New Classifications. New registered nurse job classifications established during the term of this Agreement shall be covered by this Agreement unless they are administrative/management or supervisory positions.

1.3 Supervisor Defined. The term "supervisor" means any individual having authority, in the interest of the Employer, to hire, transfer, suspend, lay off, recall, promote, discharge, assign, reward or discipline other employees, or responsibility to direct them, or to adjust their grievances, or effectively to recommend such action, if in connection with the foregoing the exercise of such authority is not of a merely routine or clerical nature, but requires the use of independent judgment.

ARTICLE 2 - UNION MEMBERSHIP- AUTHORIZED DEDUCTIONS

2.1 Membership. All employees in the bargaining unit shall become and remain members of the Union. Newly hired full-time, part-time and temporary employees shall, as a condition of continued employment, become members of the Union within thirty (30)

calendar days after the date of hire. The Employer shall make newly hired employees aware of this requirement at the time of hire. Employees who fail to comply with this requirement shall be discharged by the Employer within thirty (30) calendar days after the receipt of written notice to the Employer from the Union, unless the employee fulfills the membership obligation set forth in this Agreement. Newly hired employees shall not be required to pay the Union's initiation fee until after ninety (90) days of employment.

2.2 Religious Objection. Any employee who is a member of and adheres to established and traditional tenets or teachings of a bona fide religion, body, or sect which has historically held conscientious objections to joining or financially supporting a labor organization shall not be required to join or financially support the Union but, in the alternative, shall be required to pay a monthly amount equal to the monthly dues of the Union, to a non-religious charitable fund exempt from taxation under Section 501(c)(3) of the Internal Revenue Code. These religious objections and decisions as to which fund will be used must be documented and declared in writing.

2.3 Dues Deduction. During the term of this Agreement, the Employer shall deduct an amount equal to the Union's uniform monthly dues or agency fees from the pay of each member of the Union who voluntarily executes a wage assignment authorization form. Upon request, the Employer shall deduct an initiation fee and any additional dues amounts as specified by the Union and authorized by the employee. When filed with the Employer, the authorization form will be honored in accordance with its terms. Deductions will be promptly transmitted to the Union by electronic transfer.

Upon electronic transfer of funds to the Union, the Employer's responsibility shall cease with respect to such deductions. The Union and each employee authorizing the assignment of wages for the payment of Union dues hereby undertakes to indemnify and hold the Employer harmless from all claims, demands, suits and other forms of liability that may arise against the Employer for or on account of any deduction made from the wages of such employee.

2.4 Employee Rosters. Upon the signing of this Agreement and monthly thereafter, the Employer shall supply to the Union a list of all employees covered by this Agreement. The list shall include the name, classification, department, assigned work location, employee ID number, address, personal phone numbers, personal email address, date of hire, hourly rate of pay, regular hours worked, current FTE level, and shift for each employee. Each month the Employer shall also send a list of new hires and their addresses and a list of all employees who have terminated during the month.

2.5 Voluntary Political Action Fund Deduction. The Employer shall deduct the sum specified from the pay of each member of the Union who voluntarily executes a political action contribution authorization form. The amount deducted and a roster of nurses using this voluntary deduction will be transmitted to the PAC Fund. The Union and each nurse authorizing the assignment of wages for the payment of voluntary political action contributions hereby undertakes to indemnify and hold the Employer harmless from all claims, demands, suits and other liability that may arise against the Employer for or on account of any deduction made from the wages of such nurse.

In consideration for the Employer's agreement regarding voluntary PAC Fund deductions, the Union agrees that neither employees nor its representatives will solicit for political action fund deductions in patient care areas. The parties recognize that the Union is

obligated under the Federal Election Campaign Act ("FECA") to reimburse KFHPWA for its reasonable cost of administering the PAC check-off in the parties' collective bargaining agreement. The Employer and the Union agree that one quarter of one percent (0.25%) of all amounts checked off is a reasonable amount to cover KFHPWA costs of administering this check-off. Accordingly, the parties agree that KFHPWA will retain one-quarter of one percent (0.25%) of all amounts deducted pursuant to the PAC check off provision in the parties' collective bargaining agreement to reimburse KFHPWA for its reasonable costs of administering the check-off.

ARTICLE 3 - UNION REPRESENTATIVES

3.1 Union Access. The Union's authorized staff representatives may have access to the Employer's premises where employees covered by this Agreement are working, excluding direct patient care areas, for the purpose of investigating grievances and contract compliance at reasonable times, after notifying the Employer. Access for other purposes shall not be unreasonably denied by the Employer. The Union's representatives shall advise the Employer as to which department or area the staff representative wishes to visit, and will confine such visits to the department or areas agreed upon. Such visits shall not interfere with or disturb employees in the performance of their work during working hours and shall not interfere with patient care.

3.1.1 New Employee Orientation. During the Employer's new hire orientation program, KFHPWA will make a conference room available for up to one-half (½) hour for any KFHPWA union to meet with new employees in their bargaining unit. Employee attendance at new employee orientation will be on paid time for the new employee.

Union membership applications and payroll deduction cards will be distributed to each new employee during orientation. The Union will provide copies of the Agreement, membership applications and payroll deduction cards to the Employer.

3.2 Facility Use. The Union shall be permitted to use designated premises of the Employer for meetings of the local unit, with or without Union staff present, provided sufficient advance request for meeting facilities is made to Labor Relations and space is available.

3.3 Union Delegates. A list of Union Delegates from the bargaining unit, elected in accordance with District and National Union by-laws, shall be provided to the Employer. Such Delegates shall be authorized to serve as the representative in Steps 1, 2 and 3 of the grievance procedure and Article 6.3 as provided in this Agreement. The parties acknowledge the general proposition that Union business performed by the Union Delegates, including the investigation of grievances, will be conducted during non-working hours (e.g., coffee breaks, lunch periods, and before and after shift). When it is not practical or reasonable to transact such business during non-working periods, the Union Delegates will be allowed a reasonable amount of time during working hours to perform such functions, except that such activity shall not take precedence over the requirement of patient care.

3.4 Bulletin Boards. Bulletin boards in prominent locations in each work area shall be designated for the Union's use. Posting of union related matters will be limited to the designated bulletin boards.

3.5 Contract Distribution. The Employer shall make available a copy of this Agreement to all newly hired employees.

3.6 Negotiations Release Time. Subject to patient care requirements, the Employer will make a good faith effort to assist in providing unpaid release time for employees participating in contract negotiations. Employees will work with their managers to arrange this time off. Unpaid release time to participate in this activity will accrue benefits.

3.7 Employee Participation in Union Activities. Subject to appropriate advance notice and scheduling/staffing requirements, Union officers, delegates and members of contract committees may use eight (8) hours per calendar year of their continuing education leave/time to attend union-sponsored training in leadership representation and dispute resolution. The Union must provide written notification to the Employer's Human Resources Division yearly of the names of union officers, delegates and members of the contract committees in order for those individuals to be eligible to access their continuing education leave/time under this provision.

An unpaid leave of absence to attend union Executive Board meetings, officer meetings, delegate meetings and training sessions, district delegate assemblies, or union conventions may be approved subject to patient care needs/consumer service requirements. Unpaid release time to participate in these activities will accrue benefits. Subject to patient care and staffing needs, an employee may be granted an unpaid leave of absence for up to twelve (12) weeks to assume a position with the Union and the employee shall be entitled to return to the employee's former position. On a leave of absence exceeding twelve (12) weeks, the employee would be entitled to the first available position for which the employee is qualified in order of seniority relative to other employees with return to work rights. The leave of absence may not exceed twelve (12) months.

ARTICLE 4 - RECOGNITION OF RIGHTS AND FUNCTIONS OF MANAGEMENT

4.1 The Union recognizes that the Employer has the obligation of serving the public with the highest quality of health care, efficiently and economically, and/or meeting medical emergencies. Except as modified elsewhere in this Agreement, the Union recognizes the right of the Employer to operate and manage KFHPWA including but not limited to the right to require standards of performance and to maintain order and efficiency; to direct employees and to determine job assignments and working schedules; to determine the materials and equipment to be used; to implement improved operational methods and procedures; to determine staffing requirements; to determine the kind and location of facilities; to determine whether the whole or any part of the operation shall continue to operate; to select and hire employees; to promote and transfer employees; to discipline, demote or discharge employees for just cause; to layoff employees for lack of work; to recall employees; to require reasonable overtime work of employees; and to promulgate rules, regulations and personnel policies, provided that such rights shall not be exercised so as to violate any of the specific provisions of this Agreement.

ARTICLE 5 - DEFINITIONS

5.1 Probationary Employee. The following employees will be subject to a three (3) calendar month probationary period: (1) employees hired to work on a full-time basis, and (2) employees hired to work on a part-time basis at a 0.5 FTE or more.

Employees in the following categories shall be subject to a six (6) month probationary period: (1) employees hired to work on a part-time basis at less than a 0.5 FTE; (2) nurse practitioners; and (3) employees hired as resident nurses.

After completing the applicable probationary period, the employee shall be considered regular unless specifically advised by the Employer of an extended probationary period. In no event shall the probationary period exceed six (6) months. Prior to extending the probationary period, the employee shall receive a written evaluation. During the probationary period, an employee may be terminated without notice and without recourse to the grievance procedure. Probationary employees shall not be required to give two (2) weeks' notice of intention to terminate.

5.2 Regular Full-Time Employee. For benefit purposes, a regular full-time employee is one who in the performance of assigned duties normally works a regular continuing schedule of forty (40) hours per week or, in Urgent Care and other 24/7 settings as allowed under applicable overtime law, eighty (80) hours per fourteen (14) day period. Irregular seventy (70) hours per ten (10) day period, or thirty-six (36) hours per three (3) day period schedules also constitute full time.

5.3 Regular Part-time Employee. A regular part time employee who is regularly scheduled on a regular basis to work less than forty (40) hours per week and who has successfully completed the required probationary period. All regular part-time employees shall receive salary increments. Unless otherwise provided for herein, a part-time employee shall be compensated in the same manner as a full-time employee except that wages and benefits shall be prorated. Proration of Paid Time Off benefits shall be based on all straight-time hours paid in a regular job assignment.

In lieu of all fringe benefits (see Section 5.11), a part-time nurse may elect a fifteen percent (15%) wage premium until March 31, 2009. Due to IRS regulations, after that date this option will no longer be available. Employees who are receiving the fifteen percent (15%) wage premium as of March 31, 2009 may continue to receive the premium. However, when an employee who is receiving the premium elects to opt for benefits, the employee may not thereafter request the fifteen percent (15%) wage premium.

Employees who are receiving the wage premium may elect to opt for benefits between the dates of July 1 through July 10 of every year or at the first of the month following an increase in the employee's FTE to 0.5 or greater from an FTE of 0.49 or less. Additionally, employees receiving the wage premium who thereafter opt for benefits will be able to receive medical coverage as of the first day of the month after opting for benefits. The two (2) month waiting period will not apply.

5.4 Durational Temporary Part Time Employee (D-TPT). An employee hired to work during any period when additional work of any nature requires a temporarily augmented work force or in the event of an emergency or authorized leave of absence. D-TPT employees hired during the term of this Agreement shall be compensated at the salary step consistent with the hire-in rates set forth in Article 8.2. D-TPT employees shall receive a fifteen percent (15%) premium in lieu of all fringe benefits. Regular employees reclassified to temporary status shall retain their prior increment level for pay purposes plus fifteen percent (15%) premium in lieu of all fringe benefits. The fifteen percent (15%) premium shall be determined by computing fifteen percent (15%) of the employee's rate of pay. D-TPT employees will not be regularly utilized to fill regular positions. D-TPT

employees may be terminated without notice and without recourse to the grievance procedure for terminations. Length of service shall be a primary consideration when temporary employees apply for regular positions, providing skill, competence and ability are substantially equal to that of other applicants. D-TPT employees' length of service will not exceed six (6) calendar months, except when replacing a regular employee on an approved leave of absence.

5.4.1 Ongoing- Temporary Part Time Employee (O-TPT). An O-TPT Employee works on an intermittent basis without a regularly predetermined schedule and is assigned a specific shift. All terms and conditions of work in Article 5.4, Durational-Temporary Part Time Employees, shall apply to O-TPT employees, except that O-TPT employees' length of service can exceed six (6) months.

5.5 Resident Nurse. A registered nurse whose clinical experience after graduation is less than six (6) months or a registered nurse who is returning to practice, with no current clinical training or experience in the opinion of Nursing Administration. A resident nurse shall be assigned under the close and direct supervision of designated preceptor(s) and shall have limited responsibilities as defined by the supervisor. Residency shall not exceed six (6) continuous months unless extended by mutual agreement between the Employer and individual nurse involved. A resident nurse who is required to function continuously without close and direct supervision and who is assigned the same level of responsibilities as a staff nurse shall be promoted to the position of staff nurse.

5.6 Staff Nurse. A registered nurse who is responsible for the direct and indirect nursing care of the patient in either inpatient or outpatient setting. An experienced registered nurse returning to practice who has recently satisfactorily completed a nursing refresher course approved by Nursing Administration shall be classified as a staff nurse for starting salary purposes.

5.7 Charge Nurse. A registered nurse who is assigned by the Employer specific responsibilities for a designated time period. As agreed to by the Union and the Employer, Charge Nurse Responsibilities and Requirements can be found in Exhibit A.

5.8 Nurse Practitioner. A registered nurse with additional education or training in health care delivery possessing the skills and knowledge for diagnostic evaluation and treatment of patients with full prescriptive authority. The practitioner functions in a collaborative relationship with other health care professionals in the clinical management of patients.

Nurse Practitioners working 0.5 FTE or greater will be compensated as exempt (salaried) employees under the Fair Labor Standards Act and will not be eligible for overtime compensation.

This entire CBA shall apply to exempt Nurse Practitioners unless otherwise noted, except the following provisions shall not apply: Article 7.5 (Rest Between Shifts); Article 7.9 (Doubleback Pay); Article 8.5 (Shift Differential); Article 8.7 (Callback Pay); Article 8.8 (Work in Advance of Shift); Article 8.9 (Work on Day Off); Article 8.11 (Report Pay); and Article 8.17 (Float Pool Premium)

5.9 Visiting Nurse. A registered nurse with a baccalaureate degree or equivalent clinical experience, which has qualified the nurse to work as a community health/visiting nurse.

5.10 Preceptor. A preceptor is an employee who is assigned precepting responsibilities by the Employer. Preceptor assignments may be temporary or ongoing. As agreed to by the Union and Employer, Preceptor Responsibilities & Requirements can be found in Exhibit B.

5.11 Fringe Benefits. For purposes of this Agreement, “fringe benefits” are defined as paid time off, holidays, insurance coverage (medical, dental, life, etc.) education, professional, and bereavement leave.

5.12 Nursing Technician. A nursing student employed in a hospital licensed under Chapter 70.41 RCW or a nursing home licensed under Chapter 18.51 of the RCW, who:

- a) Is currently enrolled in good standing in a nursing program approved by the commission and has not graduated; or
- b) Is a graduate of a nursing program approved by the commission who graduated.

The purpose of the role of Nursing Technician is to provide opportunity for students enrolled in an AND or BSN program to gain experience within the limits of their education, but not limited to the scope of functions of nursing assistant-certified. The registered nurse is responsible at all times for supervising the Nursing Technician. Supervision is defined in WAC 246 840 880.

5.13 WWA Seniority Defined. Seniority shall mean an employee’s continuous length of service as a registered nurse with the Employer from most recent date of regular hire. Seniority benefits shall not apply to an employee until completion of the required probationary period. Upon satisfactory completion of this probationary period, the employee shall be credited with seniority from most recent date of regular hire.

5.14 Liaison Nurse Seniority Defined. Seniority shall be defined as time worked in the bargaining unit plus time worked in the job classification. For purposes of unit layoff, unit job posting and vacation scheduling, seniority shall be defined as the date of hire into the job classification.

5.15 EW Seniority Defined. Seniority shall mean an employee’s continuous length of service with the Employer from most recent date of regular hire. Seniority benefits shall not apply to an employee until completion of the required probationary period. Upon satisfactory completion of this probationary period, the employee shall be credited with seniority from most recent date of regular hire.

5.16 NHS ARNP Seniority Defined. Seniority shall be defined as time worked in the bargaining unit plus time worked in the job classification. For purposes of unit layoff, unit job posting and vacation scheduling, seniority shall be defined as the date of hire into the job classification.

5.17 RN Care Management Spokane and Northwest District. Seniority shall be determined by the employee’s most recent date of hire as a RN. Seniority benefits shall not apply to an employee until completion of the required probationary period. Upon satisfactory completion of this probationary period, the employee shall be credited with seniority from the most recent date of regular hire.

5.18 Seniority Tie-Breaker. In the event two (2) or more seniority dates are tied, the relative order of priority will be determined by the date an employee's application or transfer form was received for the position on which the employees' seniority is based. The employee with the earliest date of receipt on the application/transfer form will have first priority within the group. In the event one (1) or more employees do not have a date stamped application/transfer form, the last four (4) digits of the employees' social security number will be added up with the highest number receiving first priority and so on.

5.19 Termination. Seniority shall terminate upon cessation of the Employer-employee relationship; for example, discharge, resignation, retirement, refusal to accept recall to a regular comparable job opening offered by the Employer, after twenty-four (24) consecutive months of layoff, or failure to comply with specified recall procedures.

5.20 Change to Temporary Status. Regular employees changing to temporary status and returning to regular status within twelve (12) months shall not lose previously accrued seniority or their prior Paid Time Off accrual rate. Time spent during temporary status shall not count toward the accrual of benefits or seniority. This same right to retain seniority shall apply to regular employees transferring to a position outside of the bargaining unit and returning to regular status within the bargaining unit within twelve (12) months. Seniority dates will be bridged in these situations.

Previously accrued Paid Time Off shall be paid upon transfer to temporary status. Employees changing to temporary employment status may not use previously accrued EIB hours during such temporary status. Temporary employees returning to regular status without a break in service within twelve (12) months shall have previously accrued EIB hours reinstated.

5.21 Work Unit. A work unit is defined as primary care services in a medical center; specialty services in a medical center; a separately established urgent care department in a medical center with its own identified staff; a separately established ambulatory surgery center department in a medical center with its own identified staff; Home Health & Hospice services in a branch office of Continuing Care; Nursing Home Services; Bartell Drugs Care Clinics.

ARTICLE 6 - EMPLOYMENT PRACTICES AND PERSONNEL POLICIES

6.1 Non-discrimination. The Employer and the Union agree that there shall be no discrimination against any employee because of race, color, creed, national origin, religion, sex (including pregnancy and childbirth), gender identity or expression, age, marital status, sexual orientation, military status or status as a veteran or the presence of physical or mental disabilities. Nor shall either party discriminate against any employee due to any reason covered by applicable federal, state or local law. No employee covered by this Agreement shall be discriminated against because of membership in the Union or activities on behalf of the Union. The employer maintains policies that address harassment in the workplace. Commitment to a Harassment-Free Work Environment NATL.HR.005. When an employee reports an incident of harassment, the Employer will take all reasonable steps to ensure the safety of the employee during the investigation.

6.1.1 Language Protection. The Employer acknowledges that KFHPWA employees who speak languages other than English may wish to communicate in another language outside of performing their job duties, such as in casual conversations with coworkers or while engaged in personal matters. Harassment of employees engaging in these casual conversations will not be tolerated.

6.2 Job Postings. When a vacancy occurs, notice of such vacancy shall be posted by work email (or an alternative appropriate means for that unit mutually agreed to by the Employer and the Union) on-unit for seventy-two (72) hours. Qualified regular employees on the unit will be considered for hire prior to all other applicants. Among qualified on-unit applicants, seniority will be the determining factor when competence, skill and ability are equal. After the on-unit posting process is complete, the vacancy will be posted on-line at www.kaiserpermanentejobs for a minimum of seventy-two (72) hours, excluding holidays and weekends. Seniority will be the determining factor when competence, skill and ability are equal.

Staff and management on the work unit are responsible for developing a mutually agreeable notification process other than work email. The employer must notify the union and the union must consent to the alternative notification process.

6.2.1 Corrective Actions that are older than the following time periods shall not be considered when evaluating and selecting applicants for lateral transfers and/or promotions.

- Level 3 & 4 – twelve (12) months

Level 1 and 2 documents shall not be included when evaluating and selecting applicants for lateral transfers and/or promotions.

6.3 Discipline/Discharge for Just Cause. Discipline/Discharge shall be for just cause. Employees who have been discharged by the Employer shall be given a written statement of the cause of discharge within three (3) working days thereafter. Upon request by the employee, a copy of the notice will be sent to the Union. Every reasonable attempt will be made to counsel employees prior to discharge for cause.

While the provisions of this Article do not apply to temporary employees, in recognition of KFHPWA's desire to deal fairly with all employees, any temporary employee who is not performing satisfactorily will be notified by the immediate supervisor and may request a meeting with the immediate supervisor for purposes of discussing the employee's performance or other concerns affecting continued employment. A union delegate may be present if requested by the employee.

The Employer shall utilize the Issue Resolution and Corrective Action process, to include the concept of progressive discipline, for poor work performance, formal reprimands and suspensions. Copies of related documents and action plans shall be given to the employee at the time formal disciplinary action is taken or shortly thereafter. The employee shall be requested to sign the corrective action plans. The employee's signature thereon shall not be construed as admission of guilt or concurrence with the reprimand, but rather shall be requested as an indication that they have seen and comprehend the gravity of the disciplinary action taken. Unless declined by the employee, a copy of the corrective action will be sent to the Union. The Employee shall have the right to request the attendance of a Union Representative during any investigatory or joint discovery meeting.

and may request the assistance of an interpreter. Management will make a good faith effort to notify employees of the right to a representative and an interpreter.

6.4 Notice of Termination. Regular employees who have completed the required probationary period shall receive fourteen (14) days' notice of termination or pay in lieu thereof (prorated for part-time employees) including any accrued Paid Time Off pay, except in cases of discharge for just cause.

6.5 Notice of Resignation. Regular employees shall be required to give at least fourteen (14) days' written notice of resignation except that at least three (3) weeks' notice in writing shall be required of employees working alternative periods such as every other week or every other weekend. Failure to give such notice shall result in loss of accrued fringe benefits. The Employer will give consideration to situations that would make such notice by the employee impossible.

6.5.1 ARNP Notice of Resignation. Notice of resignation for regular status ARNPs is ninety (90) days.

6.6 Personnel Records. Written personnel action forms in duplicate shall be used to specify conditions of hiring, termination changes in employee status, pay or shift, or leave of absence. Reasons for termination, change in status, pay or shift shall be noted on the form. The employee shall be given one copy of this form. Employees may review their personnel file upon request to the Human Resources Service Center. Employees may provide a written response to any material contained in their personnel file.

6.7 Performance Appraisals. All nurses will be formally evaluated in writing prior to completion of the residency or probationary period and annually thereafter. Interim evaluations may be conducted as may be required. The evaluation is an educational tool for assessing the professional skills of the nurse and for improving and recognizing the nurse's performance. The nurse's participation, including self-evaluation as well as co-worker input, is an integral part of the evaluation process. The nurse will be given a copy of the evaluation. Nurses will be required to sign the evaluation acknowledging receipt thereof. Nurses will be given the opportunity to provide a written response to the evaluation, which will be retained with the evaluation in the nurse's personnel file.

6.8 Pay Days. The Employer will pay employees every other Friday. Payroll deposit information will be available by Thursday.

6.8.1 Underpayment. If an employee notices an underpayment of wages, they may notify the employer to request an off-cycle payment through the KP Time approval process with their direct manager. The employer shall issue a supplemental payment to make the employee whole within three business days that a payroll error has been confirmed by national payroll, if an off-cycle check is requested. If the Employer cannot refund the repayment within three business days, the employee will be informed in writing with an explanation.

6.8.2 Overpayment. Per WAC 296.126.030, in the event of an overpayment made to an employee, KFHPWA shall notify the employee within ninety (90) days and shall provide a complete, revised pay statement clearly indicating where the overpayment occurred. KFHPWA shall further provide numerous repayment options. The Employer will follow state law as it relates to overpayments.

6.9 In-service and Orientation. In-service education and orientation programs shall be instituted and maintained, with programs posted in advance. In-service education programs will be scheduled in an effort to accommodate varying work schedules. The procedures and content for such programs shall be appropriate subjects for discussion by the Nursing Practice Committees. Such programs shall be consistent with the standards established by the Joint Commission on Accreditation of Hospitals. Participation in in-service education shall be one criterion used in performance evaluation.

6.10 Personnel Policies. All Employees of this bargaining unit, in addition to being governed by this Agreement, shall also be subject to the personnel policies published by the Employer having general applicability to all employees of the Employer and any subsequent personnel policies, rules and regulations that may be promulgated in the future, so long as they do not conflict with the letter or intent of this Agreement. In case of any conflict, this Agreement shall be the controlling policy for the employees covered by this Agreement.

6.11 Floating. The Employer retains the right to change the employee's daily work assignment to meet patient care needs. Employees will not be required to perform tasks or procedures for which they have not been currently trained. In consultation with unit preceptors and employees regularly assigned to the unit, managers will develop unit specific orientation tools to be used by employees floated into the unit. Employees will only be floated to those areas where they have received adequate orientation, except in cases of emergency. The Employer will notify employees as far in advance as possible if they are to be floated to another work area. Employees will not be required to float to more than one (1) work unit per shift, except in cases of emergency. Efforts shall be made to return a floated employee to the floated employee's regularly assigned unit rather than replace the employee with another float. At the request of the employee or union, the parties shall meet to discuss and problem solve any situation where an employee in a Specialty Center or location with multiple Primary Care units is floated out of their unit for twenty-five percent (25%) or more of their shifts over a three (3) month period.

6.11.1 Floating for non-designated employees outside of the assigned work facility. It is the Employer's intent to utilize designated Travel Group or Float Pool employees prior to offering voluntary floating to employees who are not designated specifically as Travel Group or Float Pool employees. Floating outside of the assigned facility for the shift of regular, temporary, and probationary employees who are not specifically designated to a Travel Group or Float Pool, will be on a voluntary basis only. If employees who are not designated specifically to a Travel Group or Float Pool volunteer to go to a facility other than where they are assigned they will be paid the appropriate float premium and mileage reimbursement.

6.11.2 Designated Float Pool or Travel Group Employees.

Work Unit: Unless otherwise specified in the CBA, the work units for staff designated to a Float Pool or Travel Group for the purpose of layoffs, job postings and vacation bidding will be defined as the geographic pod in which they are assigned.

Mileage: Mileage reimbursement is subject to IRS guidelines laid out in the addendum to the CBA signed by SEIU Healthcare 1199NW on May 8, 2018. That addendum was intended to supersede any current CBA language or addendums in defining employee's commute and reimbursable miles only.

Commute Miles: Commute miles are the round-trip distance from an employee's personal residence to their assigned work location. Only miles in excess of these commute miles can be claimed as reimbursable miles.

An employee's assigned work location is the location designated by the Employer and aligns with the geographic pod in which they are assigned. The employee's assigned work location does not change, regardless if an employee works in other locations. Examples of how to calculate are in the May 8, 2018 addendum re: IRS Guidelines and Mileage Reimbursement, which references the *Business Expense Reporting and Reimbursement – Travel and Entertainment Expenses NATL.FIN.FSO.001* policy.

Travel Time: Travel time is defined as travel between work locations during the work shift. Travel time will be paid and will count as hours worked for overtime calculation.

6.11.3 Float Pool or Travel Group Premium Day One. Employees who are regularly assigned to a designated float pool or travel group will receive the appropriate Float Pool or Travel Group premium per hour for all hours worked starting on their date of hire into a designated Float Pool or Travel Group

6.11.4 Pods.

6.11.4.1 Primary Care Travel Group. The Primary Care Travel Group is comprised of Medical Assistants (MAs), Licensed Practical Nurses (LPNs) and Staff Nurses (RNs) who travel to medical centers within their designated pod in the North or South work units. The North Primary Care Travel Group is comprised of the East King, Seattle, South King, and Snohomish pods and is considered a single work unit for the purpose of layoffs, vacation bidding, and job postings. The South Primary Care Travel Group is comprised of the Peninsula, Tahoma, Olympia pods and is considered a single work unit for the purpose of layoffs, vacation bidding, and job postings. The Eastern Washington pod is considered a single work unit for the purpose of layoffs, vacation bidding, and job posting.

Primary Care Travel Group Pods:

○ North Pods:

- **East King:** Bellevue, Factoria, Redmond, (Home base: Bellevue)
- **Seattle:** Capitol Hill, Rainier, Northgate, South Lake Union, Ballard (Home base: Capitol Hill)
- **Snohomish:** Everett, Lynnwood, Northshore, Smokey Point (Home base: Everett)
- **South King:** Federal Way, Burien, Renton, Kent (Home base: Burien)

○ South Pods:

- **Peninsula:** Port Orchard, Silverdale, Poulsbo, Gig Harbor (Home base: Silverdale)
- **Tahoma:** Tacoma Medical Center, Steele Street, Puyallup (Home base: Tacoma)
- **Olympia:** Olympia, West Olympia (Home base: Olympia)

- **Eastern WA Pod:**
 - **EWA:** Riverfront, Lidgerwood, Veradale, Kendall Yards, South Hill

6.11.4.2 Specialty Float Pool

The Specialty Float Pool is comprised of Medical Assistants (MAs), Licensed Practical Nurses (LPNs) and Staff Nurses (RNs), who are expected to be trained in Specialty departments who float within their designated single facility (larger specialty centers) or pod (group of smaller medical centers as listed below). Each Specialty Pod is considered a single work unit for the purpose of layoffs, vacation bidding, and job postings.

Specialty Pods:

- **Bellevue**
- **Capitol Hill**
- **Tacoma**
- **Olympia**
- **Everett & Lynnwood** (Home Base: Everett)
- **Burien, Federal Way & Renton** (Home Base: Federal Way)
- **Silverdale & Port Orchard** (Home Base: Silverdale)
- **Eastern Washington** (Home Base: Riverfront)

6.11.4.3 Urgent Care Travel Group

The Urgent Care Travel Group was bargained and amended to the CBA in May 2022 to address staffing gaps in our advanced Urgent Care facilities. The North Urgent Care Travel Group is comprised of the Bellevue and Capitol Hill urgent care facilities and is considered a single work unit for the purpose of layoffs, vacation bidding and job postings. The South Urgent Care Travel Group is comprised of the Tacoma, Olympia and Silverdale urgent care facilities, and is considered a single work unit for the purpose of layoffs, vacation bidding and job postings.

The Urgent Care Travel Group shall be implemented with two (2) geographic pods: **North & South**

- **North Pod** is defined as Bellevue & Capitol Hill urgent care facilities (Home Base: Capitol Hill)
- **South Pod** is defined as Silverdale, Tacoma & Olympia urgent care facilities (Home Base: Tacoma)

6.11.4.4 Occupational Health Float Pool

Occupational Health staff are hired within a designated pod in one or more location at which they have a regular schedule and FTE. The Occupational Health Float Pool is comprised of Staff Nurses (RNs), Licensed Practice Nurses (LPNs) and Medical Assistants (MAs). Because of their skill set and training, coverage for staff members at other locations must come from within the Occupational Health program staff group. They may be assigned occasionally to other locations to provide enhanced staffing in response to patient demand. At times they may be required to travel to other Occupational Health sites.

For Pod information refer to the 2023 Collective Bargaining MOU section at the end of the contract.

When Occupational Health staff work outside their assigned geographic pod, they shall be paid the float premium which corresponds to their job classification.

6.11.4.5 Perioperative Services Float Pool Pilot

Starting January 1, 2024, the parties shall meet to jointly develop a Perioperative Float Pool Pilot, to include defining pods, work units, roles and scope. The pilot will include o Staff Nurses (RNs), Endo Techs, Surgical Techs, Anesthesia Techs, Patient Care Techs (PCTs), Central Sterilizing (CS) Techs, and Health Unit Coordinators (HUCs). Other conditions of work for the pilot shall be consistent with those of other float pool/travel group employees that are negotiated in this Agreement. Launch of the pilot would be dependent on reaching mutual agreement around the details outlined above.

The parties agree that the float pool is not intended to replace the permanent regular non-float FTEs for all job classes listed above already allotted and will be additive on top of the current number of non-float FTEs.

The Perioperative Services Float Pool Pilot's purpose is to improve staffing across the perioperative service line. This covers the job classifications outlined above within the Surgery Centers (ORs) and Shared Procedure Units (SPU).

Periop Float Pool Pods:

- o Capitol Hill (Seattle) & Bellevue (Home Base: Capitol Hill)
- o Bellevue & Tacoma (Home Base: Bellevue)
- o Tacoma & Capitol Hill (Seattle) (Home Base: Tacoma)

6.12 Transfer. Nurses may transfer within KFHPWA without loss of accrued benefits provided for in this Agreement. When skill, competency and ability are considered substantially equal in the judgment of the Employer, seniority shall be a controlling consideration in the transfer and promotion to other positions within the bargaining unit.

A "transfer" shall be defined as an employee-initiated change in employment status, location or shift. Upon being selected for a new position, an employee shall be ineligible for other job openings for a period of six (6) months unless otherwise agreed to by the Employer. This six (6) month ineligibility shall not apply when the employee remains in the same job classification in the same accounting unit but makes changes to their FTE or schedule.

If the Employer is unable to transfer an employee to a vacant position due to patient care considerations, the position may be filled on a temporary basis and the employee will be notified in writing as to when the transfer will be expected to occur.

6.13 Subcontracting. At the time of ratification of this Agreement, it is understood that KFHPWA has no plan to subcontract any bargaining unit work.

At least one-hundred and eighty (180) days prior to reaching a final determination to subcontract, sell or transfer services that would result in the loss of regular hours of work currently performed by bargaining unit employees, KFHPWA agrees to:

- 1) Provide the Union with documentation of the need, financial impact, affected work and employees and other factors;

- 2) Using Interest Based Bargaining principles and methods, meet with the Union to discuss and consider the feasibility of creating and/or implementing alternatives to the subcontracting that would satisfy consumer needs, avoid negative impact on bargaining unit employees and meet KFHPWA's primary business objectives.

This agreement to meet for purposes of further review and consideration of alternatives is not intended to create a duty to bargain that would otherwise not be required nor to waive a duty to bargain that would otherwise exist. Such discussions about the decision will be concluded within ninety (90) calendar days from the date KFHPWA provided the Union with the initial one-hundred and eighty (180) day notice.

In the event KFHPWA decides to contract out a service which will result in the elimination of an entire work unit, department or facility, KFHPWA will make a good faith effort to obtain preferential hiring opportunities with the contracting entity for affected employees as an alternative to exercising layoff related rights under the collective bargaining agreement. Preferential hiring commitments include first consideration over other qualified candidates for positions created as a result of the contract and favorable treatment of such employment conditions as credit for seniority/tenure, sick leave and pension.

6.14 - Dual Licensure. When KFHPWA requires more than one state RN license, the second and any subsequent license fees for such dual licensure will be paid by the Employer.

ARTICLE 7 - HOURS OF WORK AND OVERTIME

7.1 Work Day. The normal workday shall consist of eight (8) hours work to be completed within eight and one-half (8½) or nine (9) consecutive hours. KFHPWA has a commitment to the eight (8) hour shift as the normal workday. KFHPWA will not involuntarily reduce an employee's workday to a shift of less than eight (8) hours duration for the primary purpose of achieving cost savings. Any recurring employee schedule that includes one or more shifts shorter than eight (8) hours of work is an alternative work schedule, such that the conditions of Article 7.3 shall apply.

7.2 Work Week. The normal work week shall consist of forty (40) hours of work within a seven (7) day period (beginning Sunday and ending Saturday) or eighty (80) hours of work within a fourteen (14) day period in Urgent Care and other 24/7 settings as allowed under applicable overtime law.

7.3 Alternative Work Schedules. An alternative work schedule is defined as a work schedule that requires a change, modification or waiver of certain provisions of this Agreement. Alternative work schedules not specified in this Agreement or Addendums hereto may be established by the Employer with the consent of the Union. Where work schedules other than a five (5) eight (8) hour day schedule are utilized, the Employer shall have the right to revert back to the five (5) eight (8) hour day schedule or the work schedule which was in effect immediately prior to the alternative work schedule, after sixty (60) days advance notice to the employees. No employee shall be required to work a schedule that includes six (6) days in a normal work week, unless the employee volunteers to do so. Prior to implementation of a change in work schedule involving a unit or facility, the Employer will meet with the Union to discuss the contemplated change of schedule.

7.4 Overtime Non-Exempt Employees. Overtime shall be compensated for at the rate of one and one-half (1½) times the regular rate of pay for all time worked beyond the normal or scheduled work shift (8, 9, 10); provided however, all additional overtime after twelve (12) consecutive hours shall be paid at double (2X) the employee's regular rate of pay (except as noted in the 12/40 alternative staffing pattern or the Twelve hour innovative weekend schedule addendums). The regular rate of pay shall include shift differential and any special service premium. Paid Time Off, and all other categories of paid absences will be excluded as time worked from the determination of the obligation to pay overtime and the calculation of the overtime. The calculation of double-time will be on the same basis as overtime at time and a half, i.e., the obligation to pay double time shall be based on actual hours worked. Overtime worked consecutive to the regularly scheduled shift shall be considered part of the regularly scheduled shift. Upon the mutual consent of the employee and immediate supervisor, employees working a seven (7) day work period may schedule compensatory time off in lieu of receiving overtime pay providing the time off is scheduled during the same work week in which the overtime was worked. Compensatory time off will be scheduled off at the rate of time and one-half (1½) unless the schedule change is for the employee's convenience in which case compensatory time off will be at the straight time rate. Compensatory time off may be taken on a low census day. All overtime must be arranged by supervision.

Each department and/or unit shall establish procedures for the approval of overtime. Overtime shall be considered in effect when eight (8) minutes or more are worked after the end of a scheduled shift of at least eight (8) hours or more in duration. Thereafter, overtime will be paid to the nearest quarter hour. No overtime shall be paid when less than eight (8) minutes have been worked after the end of the shift. There shall be no pyramiding or duplication of overtime pay and/or other premium compensation paid at the rate of one and one-half (1½) of the regular rate of pay which would result in compensation exceeding one and one-half (1½) for the same hours worked.

7.4.1 Additional Shifts for Exempt Employees. Nurse Practitioners who work additional shifts beyond their regular schedule/FTE shall be compensated on a lump sum basis: up to five (5) hours worked (5 hours x regular rate), over five (5) and up to eight (8) hours worked (10 8 hours x regular rate), over eight (8) and up to ten (10) hours worked (12 40 x regular rate), and anything over ten (10) hours worked (14 42 times the regular rate).

7.5 Rest Between Shifts. In scheduling work assignments, the Employer will make a good faith effort to provide each employee with at least twelve (12) hours off duty between shifts. In the event an employee is required to work with less than twelve (12) hours off duty between shifts, all time worked within this twelve (12) hour period shall be paid at one and one-half (1½) times the regular rate of pay.

7.6 Weekends Off. All regular employees regularly scheduled thirty (30) or more hours per week, with the exception of those employees specifically employed to provide weekend coverage (as per #6 and #7 below) or those employees who voluntarily agree to more frequent weekend work, shall be scheduled for at least two (2) out of every four (4) weekends off. If a staff member works a third consecutive weekend or a third weekend in a month all such time worked will be compensated at one and a half (1 ½) times their regular rate of pay. Staff receiving straight time pay take precedence over staff getting compensated at one and a half (1 ½) times their regular rate of pay in covering weekends. If an employee voluntarily initiates a trade in weekends with another employee for their

own benefit, they would not be eligible for time and a half for working three consecutive weekends. For employees who have a regular schedule working every other weekend, the "third weekend" one and a half (1 ½) times pay shall apply to hours worked on an employee's regularly scheduled weekend off, so that if an employee works three weekends in a row, the employee receives straight time pay for the weekend hours on their "regular" weekends and one and a half (1 ½) times pay for the weekend hours they pick up on their "off" weekend. For employees who do not have a regular schedule working every other weekend, it is the third consecutive weekend or third weekend in the month when the one and a half (1 ½) times pay will occur.

In setting weekend schedules, management shall determine schedules based on clinical need using the following options, in no particular order:

1. Set schedules with at least 2 out of 4 weekends a month OFF.
2. Seek volunteers to fill weekend schedules, adjust weekly schedule to accommodate
3. Set regular weekend schedules for part-time staff .74FTE and below
4. .75FTE and above part-time volunteers picking up extra shifts (must not incur overtime unless approved)
5. Rotation (see below 7.6.1)
6. Hire weekend shift only employees
7. Hire employees into schedules that include every weekend shifts. If there is a rebid, the employee with an every weekend shift can bid out, but no employees will be required to bid in to that shift. If unfilled, the shift will be covered by #1-5 or will be posted.

On a monthly basis, the employer will provide a report to the union of all positions posted that include a regular, recurring weekend schedule.

7.6.1 Outpatient Department Weekend Scheduling. For shifts not covered by employees that provide weekend coverage per article 7.6, the Employer shall first make weekend shifts needing coverage available for staff to volunteer for at the home clinic. Thereafter, employees within the districts defined below, shall have the opportunity to voluntarily sign-up for weekend shifts. The Employer will devise a means for all employees to indicate their interest for additional weekend work in the districts.

A weekend shift voluntarily signed up for will normally be built into the employee's regular FTE, except that a part-time employee may volunteer for a weekend shift to be an additional shift beyond their regular FTE (provided it does not incur overtime).

If there are weekend shifts that remain unfilled after these first two (2) steps, the Employer will assign remaining weekend shifts to employees within the districts on a rotational basis, beginning with the least senior person and proceeding on a rotational basis through all employees in the districts. If an employee who comes up in the rotation is already signed up for two (2) weekends in a given month, that employee will be skipped in the rotation and signed up for the next weekend shift needing rotational coverage where the employee is not already scheduled for two (2) weekends in that month.

If a weekend shift becomes vacant after the coverage schedule has been made, but before the full work schedule is posted for a given month (for instance, due to an employee leaving employment), that shift shall be assigned to the next employee in the rotation. When new employees are hired into vacant shifts that include weekends, employees that were scheduled into weekend shifts, either due to voluntary or assigned rotation process, shall revert back to their regular schedules.

The districts are as follows:

- FHC, NGT & BLR: Supported by Seattle District (FHC, NGT, DTW, RVM, SLU, BLR)
- TAS: Supported by Tahoma District (TAS, TAC, PLP)
- BVU: Supported by East King District (BVU, RED, FAC)
- EVM: Supported by Snohomish District (EVM, SMK)
- LYM: Supported by Snohomish District (LYM, NSH)
- RNT & FED: Supported by South King District (RNT, FED, KNT, BRN)
- OLY: Supported by Olympia District (OLY, WOY)
- SIL: Supported by Peninsula District (SIL, PBO, PRT, GGH)
- RFM: Supported by Spokane District (RFM, LWH, VRH, SRH, KYM, NPM, LHT)

7.7 Work Schedule Posting. The employer retains the right to adjust work schedules to maintain an efficient and orderly operation. A four (4) week schedule shall be posted at least two (2) weeks prior to the beginning of the scheduled work period.

7.7.1 Extra Shifts: Vacant shifts known at the time the schedule is posted will be made available as extra shifts and shall be posted by work email (or by the most appropriate means for that unit mutually agreed to by the Employer and the Union) on-unit for seventy-two 72 hours, unless the situation requires immediate shift coverage and will be filled based on seniority. Shifts that become vacant after the schedule has been posted will be made available as extra shifts, and posted using the process described above, on-unit for 24 hours and filled based on seniority.

After the on-unit process, extra shifts will be posted outside of the unit for 24 hours and filled on a first come first serve basis. Employees not in overtime status will be prioritized. If overtime is approved, a rotation process will be utilized starting with the most senior employee to award extra shifts with overtime.

Staff and management on the work unit are responsible for developing a mutually agreeable notification process other than work email. The union must be notified and consent to the alternative notification process.

For temporary clinics (such as vaccines, testing, etc.), all employees will have access to EZCall for the purpose of being able to view and sign up for shifts.

7.8 Rotation. There shall be no rotation of shifts except by mutual agreement between the Employer and the employee. Any employee who rotates shifts by mutual agreement shall receive four dollars (\$4.00) per hour for each hour worked in addition to the

employee's regular rate of pay. The Employer shall have the right to revert back to non-rotating shifts after thirty (30) days' advance notice to the employee. In such event, the affected employee shall have the option of regular assignment to one of the shifts to which the employee previously rotated.

7.9 Doubleback Pay. When an employee is required to work two (2) complete shifts within a twenty-four (24) hour period, the first of which is not a normally scheduled shift, all time worked on the second shift shall be paid at the rate of time and one-half (1½) the regular rate of pay. The twenty-four (24) hour period begins with the start of the first shift worked.

7.10 Meal and Rest Periods Non-Exempt Employees. All employees shall receive an unpaid meal period of at least one-half (½) hour during each normal workday. Meal periods shall occur as near the middle of the shift as is practical. Employees required by the supervisor to remain in the working area during their meal period shall be compensated for such time at the appropriate rate of pay. All employees shall be allowed two (2) paid rest periods of fifteen (15) minutes each, during each shift of eight (8) hours or more in duration. Rest periods may be taken on an intermittent basis. Employees, who are not released for rest periods after requesting release from the supervisor or designee, shall be paid for the missed rest period at the employee's regular rate of pay. The employee shall have the obligation of requesting relief on a timely basis.

7.11 Daylight Savings Time. Employees who work the night shift during the conversion from Pacific Standard Time to Pacific Daylight Savings Time will be compensated for all hours worked. In no case will employees be required to work additional hours in order to fulfill the shift hours normally worked.

Employees who work the night shift during the conversion from Pacific Daylight Savings Time to Pacific Standard Time will be paid one and one-half (1½) times the regular rate of pay for all hours worked beyond the normal shift.

7.12 Low Census. During a temporary period of low census, the Employer will seek out volunteers to take time off before determining and implementing the reduced staffing schedule required.

7.12.1 Hospital/Home Health and Hospice Low Census. Hospital/Home Health & Hospice, Ambulatory Surgical Departments, Shared Procedures Low Census. Where unanticipated low census occurs in the inpatient facility, Tacoma, Bellevue, Capitol Hill ambulatory surgery units, Bellevue and Capitol Hill Shared Procedures Units, or Home Health and Hospice, the following steps will be taken in the order below:

1. Floating where there are patient care needs
2. Voluntary low census.
3. Other nursing related work assignments or skill development consistent with organizational and patient care needs as determined by the Employer. These activities will be funded up to a maximum amount of \$100,000 per calendar year (one fund for all SEIU units).

ARTICLE 8 – WAGES

8.1 Wage Schedule. Employees covered by this Agreement shall be paid in accordance with the wage schedules attached. The wage schedules will be updated each year in accordance with the terms agreed to in the Coalition National Agreement.

Market Adjustments.

Effective the first full pay period following November 1, 2023, in addition to the Year 1 (October 1, 2023) Coalition National Agreement ATB, KFHPWA will provide a nine percent (9%) market adjustment in the first year to the following classifications:

- Staff Nurse
- Liaison Nurse
- Visiting Nurse
- Lactation Consulting Nurse
- Mental Health Case Manager RN
- Nurse Technician

For all other classifications, effective the first full pay period following November 1, 2023, in addition to the Year 1 (October 1, 2023) Coalition National ATB, KFHPWA will provide a six percent (6%) market adjustment in the first year.

8.2 Hire-In Rates. Employees hired during the term of this Agreement shall be given full credit for continuous recent experience when placed on the wage scale. For purposes of this section, continuous recent experience shall be defined as clinical experience (including temporary employment with KFHPWA) in an accredited hospital or ambulatory care setting, home health agency, long term care facility or equivalent health care experience or participation in a formal program of nursing education without a break in experience which would reduce the level of skills and is experience relevant to that required in the position being hired in the opinion of Nursing Administration. It shall remain the prerogative of the Employer to establish at what step in the schedule to place newly hired employees in all other circumstances.

8.2.1. RN Experience for ARNPs.

- Newly hired ARNPs, both external hires and internal KFHPWA RNs who obtain an ARNP license, shall receive one step on the ARNP scale for every two years of continuous recent experience as RNs. Internal RNs who obtain an ARNP shall be placed, at a minimum, at a wage level that is not less than the RN's current level of compensation at KFHPWA.

8.3 ARNP Additional Pay.

8.3.1 ARNP Project Pay. KFHPWA recognizes the importance of ARNPs in the continued redesign of our healthcare delivery system and commits to providing extra compensation in the form of non-productive project work paid at the rate of forty-six dollars (\$46.00) per hour to compensate NPs engaged in mutually agreed upon projects/non-clinical work that supports the NP plan and KFHPWA goals.

8.3.2 ARNP L&I Forms Pay. KFHPWA will pay ARNPs ten dollars (\$10) for completing L&I forms predicated upon verification that this is current practice for PA staff performing the same work.

8.3.3 Nurse Practitioner Nursing Home Services AAA/Mileage. Regular employees assigned a 0.75 FTE or greater will be eligible for the full cost of an AAA “Plus” membership after six (6) months of regular employment. Regular employees assigned an FTE less than 0.75 FTE will be eligible for one half the cost of a membership after six (6) months of employment. This policy is subject to administrative procedures or requirements as established by the Employer.

Employees shall be reimbursed for the business use of their personal automobiles at the IRS rate. The Employer will make a good faith effort to have the automobile reimbursement check available each pay period contingent upon submission of required recordkeeping within Home Health & Hospice time standards.

8.3.4 ARNP Panel Pay. Panel pay will be no less than it is as of ratification for a given panel size.

- \$3000 – 100-800 patients
- \$5000 – 801-1500
- \$7000 – 1501+

In order to be equivalent with professional colleagues, if KFHPWA panel pay increases for a given panel size, ARNP panel pay will increase equivalently.

8.4 LPN Experience.

An internal KFHPWA Licensed Practical Nurse who becomes a KFHPWA Registered Nurse will be placed at a wage level that is not less than the LPN's current compensation or will receive a credit of one (1) RN year of experience for every three (3) LPN years of experience, up to and including Step three (3); whichever is greater. For external hires who were previously LPNs but have less than twelve (12) months of RN experience, these hires will also receive credit for past LPN experience in the same manner of one (1) year credit for every three (3) years LPN experience for placement onto the wage scales, up to and including Step three (3). Note – internal or external candidates applying for RN positions with 12 months or more RN experience should not be given credit for prior LPN experience – only for RN experience.

Applicable clinical LPN experience for placement shall be defined as continuous recent experience in an accredited hospital, ambulatory care setting, home health agency, skilled nursing facility, or equivalent health care experience without a break in nursing experience which would reduce the level of licensed practical nursing skills in the opinion of the Employer.

8.5 Shift Differential.

Shift differential is to be applied with the following guidelines for staff assigned a shift less than 12 hours:

- Staff who start their shift at **10a or later** will receive-

- Shift 2 differential for their entire shift only when three and one-half (3 1/2) or more of their hours worked are in the Shift 2 zone (3p-11p). Shift 2 differential is \$2.75 per hour in addition to the regular hourly rate.
- Shift 3 differential for their entire shift only when three and one-half (3 1/2) or more of their hours worked are in the Shift 3 zone (11p-7a). Shift 3 differential is \$4.00 per hour in addition to the regular hourly rate.
- Staff who work at least three and one-half (3 1/2) hours in both Shift 2 and 3 zones shall receive Shift 3 differential for their entire shift.
- Staff who start their shift **before 10a** will receive-
 - Shift 2 differential for one or more hours worked after 5:30p; and the differential will pay starting from 5:30p. Shift 2 differential is \$2.75 per hour in addition to the regular hourly rate.

Note - Shift 3 differential does not apply to any day shifts starting after 4a.

Shift differential is to be applied with the following guidelines for staff assigned a shift of 12 hours or more:

- Any hours worked in the Shift 2 zone (3p-11p) shall receive Shift 2 differential of \$2.75 per hour in addition to the regular hourly rate.
- Any hours worked in the Shift 3 zone (11p-7a) shall receive Shift 3 differential of \$4.00 per hour in addition to the regular hourly rate, however, if the majority of the hours worked are in the Shift 3 zone, Shift 3 differential will apply to their entire shift.
- Note - Shift 3 differential does not apply to any day shifts starting after 4a.

***Lunch is considered 'time worked' for purposes of shift differential calculations**

8.6 Standby Pay. Employees placed on standby status shall be compensated at the rate of four dollars and twenty-five cents (\$4.25) per hour. The Employer shall provide paging devices to nurses assigned to standby.

An employee called into work from standby shall be compensated at the overtime rate for a minimum of three (3) hours. When standby is taken in lieu of a pre-scheduled shift, the hours worked will be paid at the regular rate of pay, for a minimum of three (3) hours.

8.7 Callback Pay. Employees called back to work after completion of the employee's regular workday shall be compensated at the rate of time and one-half (1½) the regular rate of pay. Call back pay shall be paid in addition to any standby pay. When called back, the employee shall receive time and one-half (1½) for a minimum of three (3) hours. Travel time to and from a facility shall not be considered as time worked. Call back pay shall not apply when an employee reports for work in advance of the assigned shift. The minimum call back hours shall not apply in this instance.

8.8 Work in Advance of Shift. When an employee, at the request of the Employer, reports for work in advance of the assigned shift and continues working through the entire scheduled shift, all hours worked prior to the scheduled shift shall be paid at one and one-half (1½) times the straight time rate of pay. Work performed during the scheduled shift shall be paid at the regular rate of pay.

8.9 Work on Day Off. Full-time employees called in on their day off shall be paid at the rate of one and one-half (1½) times the regular rate of pay for the hours worked.

8.10 Work in Higher Position. Temporary assignment to a higher paid position for eight (8) or more consecutive hours shall be compensated at the higher rate of pay.

8.11 Report Pay. Employees who report for work as scheduled (unless otherwise notified in advance) and are released from duty by the Employer because of low census shall receive a minimum of four (4) hours' work for four (4) hours' pay at the straight time rate of pay. It shall be the responsibility of each employee to notify the Employer of their current address and telephone number. Failure to do so shall excuse the Employer from these minimum pay requirements. This commitment shall not apply when the Employer has made a good faith effort to notify the employee of shift cancellation but has been repeatedly unable to reach the employee on separate occasions.

Employees who are required to report to work for staff meetings, training or other similar circumstances shall be compensated for such duty not less than one (1) hour pay at the employee's regular rate of pay unless overtime is due.

8.12 Changes in Title. A change in job title within the bargaining unit shall not alter an employee's accrued bargaining unit seniority for purposes of accrual of benefits.

8.12.1 Promotions. A promotion shall be defined as a move from a job classification with a lower base rate to one with a higher base rate. Employees promoted to a higher classification shall be placed at the step in the new scale which provides at least a three percent (3%) increase in rate of pay up to the maximum rate of pay for the new classification. An employee's longevity increment date shall not be changed as a result of a promotion. See Article 6.2.1.

8.13 Charge Pay. Employees assigned as charge nurse shall receive two dollars and twenty-five cents (\$2.25) per hour over the regular staff nurse rate of pay.

8.14 WWA Weekend Premium Pay. Employees who work weekend hours shall receive four dollars (\$4.00) per hour for each hour worked on the weekend in addition to the employee's regular rate of pay. The weekend shall be defined as hours between 11:00 p.m. Friday and 11:00 p.m. Sunday. Weekend premium pay shall not be included in the employee's regular rate of pay for overtime calculations, unless required by the Fair Labor Standards Act.

8.14.1 EW Weekend Premium Pay. Employees who work weekend hours shall receive two dollars (\$2.00) per hour for each hour worked on the weekend in addition to the employee's regular rate of pay. The weekend shall be defined as hours between 11:00 p.m. Friday and 11:00 p.m. Sunday. Weekend premium pay shall not be included in the employee's regular rate of pay for overtime calculations, unless required by the Fair Labor Standards Act.

8.14.2 Weekend Premium Pay – Exempt ARNPs. Effective upon ratification, exempt ARNP employees who work weekend hours shall receive two dollars (\$2.00) per hour for each hour worked on the weekend in addition to the employee's regular rate of pay. The weekend shall be defined as hours between 11:00 p.m. Friday and 11:00 p.m. Sunday. Weekend premium pay shall not be included in the employee's regular rate of pay for overtime calculations, unless required by the Fair Labor Standards Act. This premium will be paid in quarterly installments.

Effective the first day of the pay period following October 1, 2021, exempt ARNP employees who work weekend hours shall receive two dollars and fifty cents (\$2.50) per hour for each hour worked on the weekend in addition to the employee's regular rate of pay. The weekend shall be defined as hours between 11:00 p.m. Friday and 11:00 p.m. Sunday. Weekend premium pay shall not be included in the employee's regular rate of pay for overtime calculations, unless required by the Fair Labor Standards Act. This premium will be paid in quarterly installments.

8.15 Preceptor Pay. When assigned preceptor responsibilities, an employee shall receive two dollars (\$2.00) per hour over the regular rate of pay.

8.15.1 ARNP Preceptor Pay. ARNPs who are assigned to precept an ARNP student shall receive a preceptor stipend of \$1040/quarter for each quarter during which they precept, pro-rated for FTE.

8.16 Certification Pay. Registered nurses certified in a specialty area by a national organization and working in that area of certification shall be paid a premium of one dollar (\$1.00) per hour for all hours worked, provided the particular certification has been approved by the Executive Director of Nursing, or their designee, and further provided that the nurse continues to meet all educational and other requirements to keep the certification/recertification current and in good standing. A certified nurse is eligible for only one (1) certification premium, regardless of other certifications the nurse may have. Certifications required for the job such as ACLS, PALS, TNCC are not eligible for certification pay. The Employer will determine if the certification qualifies for the area in which the nurse works. Certified nurses will notify their manager in writing at the time of certification/recertification and provide evidence of certification/recertification when received. Certification pay will be effective the next full pay period after the manager receives the date documentation. Certification pay will cease if renewal documents are not received by the established timeline.

A list of approved certifications will be developed by the Continuing Education Committee and posted online through the Nursing Operations website. The CE Committee will review the certification list annually and recommend updates to the Executive Director of Nursing. New certification programs may be considered for addition to the list by submitting a thorough program description, including purpose, scope, term, prerequisites for certification, recertification, fee schedule and other pertinent information to the CE Committee who may make a recommendation to the Executive Director of Nursing.

The certification premium will be paid on a straight-time basis, even if the hours worked are deemed overtime.

8.16.1 Nurse Practitioners Nursing Home Services Certification Pay.

Non-Exempt Nurse Practitioners shall be compensated for a maximum of one (1) approved certification at one dollar (\$1.00) per hour for each hour worked.

Exempt Nurse Practitioners shall be compensated for a maximum of one (1) certification at five hundred dollars (\$500.00) per quarter, prorated for FTE.

8.17 Float Pool Premium. Employees who are regularly assigned to a designated float pool and who float on a daily basis between medical centers (Primary Care) or between specialties (Specialty) will receive three dollars and fifty cents (\$3.50) per hour premium.

8.17.1 Nursing Home Services (NHS) ARNP Float Pool Premium. Employees who are regularly assigned (50% or more) to the float pool and float on a daily basis to cover other staff's caseload will receive a one-thousand-dollar (\$1,000) premium per quarter prorated for FTE. The premium will be paid on the first payroll period that occurs after March 31, June 30, September 30 and December 31.

8.18 Temporary Employee Pay Increments. Effective the first full pay period on or after every January 15, temporary employees who have worked at least five hundred (500) hours during the previous calendar year will be eligible for a longevity increment in the new calendar year.

A regular employee who changes to temporary status who has worked at least five hundred (500) hours in any combination of regular or temporary hours will also receive a longevity increment on the employee's previous anniversary date. Thereafter employees shall continue to receive a longevity increment on their previous anniversary date if they have worked five hundred (500) temporary hours in the previous twelve (12) months.

8.19 Targeted Location Premium. Effective the first full pay period following November 1, 2023, regular employees who are regularly assigned to work onsite at the Capitol Hill Campus or Bellevue Medical Center will receive two dollars (\$2.00) per hour premium (quarterly lump sum for exempt staff, pro-rated for FTE). Excludes staff picking up shifts, temporary staff or others intermittently working at these locations.

8.20 Acute Care Premium. Effective the first full pay period following November 1, 2023, regular Staff Nurses and Nurse Practitioners who are regularly assigned to work in Urgent Cares, Periop/Surgical Services and Capitol Hill In-patient Services (CHIPS) will receive two dollars (\$2.00) per hour premium (quarterly lump sum for exempt staff, pro-rated for FTE). Excludes staff picking up shifts, temporary staff or others intermittently working at these locations.

8.21 Lump Sum Payments. When an employee who is eligible for a lump sum premium payment leaves employment before the end of the quarter in which they are eligible for the premium, they will be paid the premium prorated based on days worked.

ARTICLE 9 - HOLIDAYS

9.1 Holidays. The following holidays shall be granted with regular pay including shift differential:

New Year's Day	Labor Day
Martin Luther King Jr.'s Birthday	Thanksgiving
Presidents' Day	Christmas
Memorial Day	Floating Holiday
Independence Day	

The floating holiday will be scheduled off with the approval of supervision. New employees shall not be eligible to take the floating holiday until after six (6) months of continuous employment. Floating holidays must be taken in the same calendar year as an employee becomes eligible for the floating holiday.

9.2 Holiday During Paid Time Off. If a holiday falls during an employee's Paid Time Off, the day will be charged as a holiday.

9.3 Holiday "Premium" Pay. Employees who work on the actual and/or observed holiday will receive 1.5x their regular rate of pay for all hours worked that day. When an actual holiday and observed holiday are two different dates, then employees would receive holiday premium pay (1.5 times) for both the observed and actual holiday as per Article 9.3, Holiday "Premium" Pay. If an employee worked both the actual and observed holiday they will receive Holiday "Regular" pay for only the actual holiday, but they shall receive Holiday "Premium" pay (1.5X) for both days._

9.4 Non-Exempt Holiday "Regular" Pay.

- If Employee works the actual holiday - Employee will receive their regular hourly rate for the number of hours worked, or, the number of hours of their average shift length, whichever is greater. Average shift length is calculated by dividing the total # of hours worked in a regular pay period by the # of regularly scheduled shifts worked, and then multiplying by their FTE.
- If Employee does not work the actual holiday, but is regularly scheduled to work that day except for the holiday, the employee will receive the regular rate of pay for all hours normally worked, regardless of FTE. If the employee does not work the actual holiday, and is not regularly scheduled to work that day - multiply the employee's average shift length (divide total # hours worked in a regular pay period by the # of regularly scheduled shifts worked) by their FTE to determine # hours paid.
- Upon mutual agreement, a day off as unpaid leave with benefits may be taken within thirty (30) days following the holiday.

9.5 Exempt Nurse Practitioner Holiday Pay. Exempt Nurse Practitioner shall receive a day off with pay within thirty (30) days following the holiday. A part-time Nurse Practitioner who works on a holiday shall receive a paid day off equivalent to their assigned FTE. In no event shall an employee receive more than their regular salary.

9.6 Night Shift Holiday Pay. Holiday pay for third (night) shift employees shall be paid for the shift where the majority of the hours worked are on the designated calendar date for the holiday.

9.7 Holiday Dates. Calendar dates to be observed as holidays shall be specified by the Employer at least one (1) month in advance by notices posted in conspicuous locations in a facility. Holidays shall be observed on the legally designated day.

9.8 Holiday Hours- Christmas and New Year's. Christmas holiday begins at 3pm Dec 24 and ends at 11:59 pm Dec 25, and New Year's holiday begins at 3pm on Dec 31 and ends at 11:59 pm Jan 1, however a majority of hours must be worked during this time period to trigger holiday premium pay (1.5x) or constitute working a holiday for purposes of holiday "straight" time pay calculations.

9.9 Holiday Rotation. Holidays will be scheduled off on a rotational basis subject to hours of operation, patient care needs and staffing considerations on the work unit. Staff and management on the work unit are responsible for developing a mutually agreeable, equitable holiday rotation plan for the work unit. Staff or management may request the assistance of a union delegate/organizer and Employee and Labor Relations consultant, if needed.

ARTICLE 10 - PAID TIME OFF

10.1 Purpose. Paid Time Off (PTO) is intended to provide employees with paid time to cover needs for vacation, personal and family illness in addition to other needs or uses as defined by the employee and to encourage use of such time on a scheduled basis.

10.2 Definitions.

10.2.1 Unscheduled Absence. The following notification standards shall be used to determine whether an absence is scheduled or unscheduled, for purposes of determining an employee's attendance record:

10.2.1.1 Absences of Less Than 5 Days. Any absence taken with less than forty-eight (48) hours' advance notice.

10.2.1.2 Absences of 5 Days or Longer. Any absence taken with less than fourteen (14) days' advance notice.

10.2.2 Maximum PTO Accrual. PTO hours continue to accrue until the employee's PTO balance reaches one hundred fifty percent (150%) of the employee's annual accrual (1.5 times the annual accrual rate). Once employee's PTO balance falls below one hundred fifty percent (150%) of the employee's annual accrual, the accrual of PTO hours would resume.

10.3 Eligibility. All regular employees shall accrue hours under the PTO plan from their date of employment or date of transfer to the PTO plan. PTO accrual hours may be used as accrued.

10.4 Accrual Schedule. The combined accrual schedule is as follows:

Completion of	Full-Time/pay period	Part-Time
1-2 years	4.92 hours	.0615 hrs/hr
3 years	5.544 hours	.0693 hrs/hr
4-5 years	7.376 hours	.0922 hrs/hr
6-7 years	7.696 hours	.0962 hrs/hr
8-9 years	8.000 hours	.1000 hrs/hr
10-11 years	8.304 hours	.1038 hrs/hr
12+ years	8.92 hours	.1115 hrs/hr

10.5 Use of PTO Accrued Hours. PTO hours may be taken in hourly, daily or weekly increments, subject to supervisory approval of requests for scheduled absences. Each department's established PTO rules as well as the provisions of Article 10 of this Agreement shall apply regarding advance notice, supervisory approval, and scheduling requirements.

10.6 Vacation Scheduling. The vacation year shall be based upon an employee's anniversary date. Employees may schedule and take PTO as vacation to the extent it has been earned. Vacations shall be scheduled by the Employer in such a way as will least interfere with the functions of the department and the continuity of patient care. The Employer will make a good faith effort to secure adequate staffing to provide improved vacation scheduling opportunities.

Vacations shall be scheduled in the Nursing Department by work unit. A vacation-scheduling chart will be posted in each unit from January 1 through February 14 that covers the vacation period of May 15 through May 14 of the following year. Employees who fail to register their vacation selection during the period of posting will forfeit their seniority rights concerning vacation schedules. Where vacation conflicts with the rotation of holidays, and/or the day before and the day after those holidays, individual holiday rotation shall take precedence. The Employer will notify employees of their vacation dates by the first Monday in March. Vacation requests made outside the scheduled posting period will be approved or denied by supervision within four (4) weeks of the request. Subject to staffing and patient care requirements; length of service in the bargaining unit shall be the determining factor within each department or facility in vacation selection during the designated posting period.

PTO that has been scheduled and approved will not be cancelled under the following conditions:

- a. The employee had adequate PTO or could reasonably be expected to have accrued adequate PTO by the time that the time off is scheduled to occur.
- b. The employee's PTO hours have been impacted due to unforeseen illness or injury.
- c. The employee does not have any attendance/tardy-related discipline in the past twelve (12) months.

- d. The employee is within twenty-four (24) PTO hours of having enough PTO to cover the scheduled time off.
- e. Time off for hourly employees that is not covered by PTO will be unpaid- Leave no Pay Approved (LNA). This time off is a maximum of twenty-four (24) hours (prorated for FTE) that may only be used in one (1) instance per year and the hours may not be split up amongst multiple occasions. The employee may not choose to use unpaid time instead of available PTO. The LNA time under this circumstance will not count as an occurrence for attendance tracking purposes and is subject to manager approval.
- f. Unforeseen situations such as emergencies, catastrophic conditions and the like may necessitate scheduled PTO to be cancelled.

10.6.1 Vacation Scheduling for NHS ARNPs. The vacation year shall be based upon an employee's anniversary date. Employees may schedule and take PTO as vacation to the extent it has been earned. Vacations shall be scheduled by the Employer in such a way as will least interfere with the functions of the department and the continuity of patient care. The Employer will make a good faith effort to secure adequate staffing to provide improved vacation scheduling opportunities.

Vacations shall be scheduled in the Department and a vacation scheduling chart will be posted electronically in the department from January 2 through January 16 that covers the vacation period of July 1 through December 31 of that year. A vacation scheduling chart will be posted electronically in the department from August 1-August 15 that covers the vacation period of January 1 through June 30 of the following year.

Employees who fail to register their vacation selection during the period of posting will forfeit their seniority rights concerning vacation schedules. Where vacation conflicts with the rotation of holidays, and/or the day before and the day after those holidays, individual holiday rotation shall take precedence.

The Employer will notify employees of their vacation dates on or before February 28 for the January posting and on or before September 30 for the August posting. Vacation requests made outside the scheduled posting period will be approved or denied by supervision within four (4) weeks of the request. Subject to staffing and patient care requirements, seniority date shall be the determining factor within each department or facility in vacation selection during the designated posting period.

PTO that has been scheduled and approved will not be cancelled under the following conditions:

- a. The employee had adequate PTO or could reasonably be expected to have accrued adequate PTO by the time that the time off is scheduled to occur.
- b. The employee's PTO hours have been impacted due to unforeseen illness or injury.
- c. The employee does not have any attendance/tardy-related discipline in the past twelve (12) months.

- d. The employee is within twenty-four (24) PTO hours of having enough PTO to cover the scheduled time off.
- e. Time off for hourly employees that is not covered by PTO will be unpaid- Leave no Pay Approved (LNA). This time off is a maximum of twenty-four (24) hours (prorated for FTE) that may only be used in one (1) instance per year and the hours may not be split up amongst multiple occasions. The employee may not choose to use unpaid time instead of available PTO. The LNA time under this circumstance will not count as an occurrence for attendance tracking purposes and is subject to manager approval.
- f. Unforeseen situations such as emergencies, catastrophic conditions and the like may necessitate scheduled PTO to be cancelled.

10.7 Transfer of Unused PTO. During the Open Enrollment Period, employees may elect to transfer up to forty-eight (48) hours into their Extended Illness Bank (EIB) account at one hundred percent (100%) value. The minimum transfer to EIB is one (1) hour. PTO account balances may not go under eighty (80) hours.

In order to exercise this election, eligible employees must notify Human Resources within the Benefits Open Enrollment Period of their decision to transfer the current year's accrual to EIB. The EIB hours will accumulate year-to-year to a maximum of five hundred (500) hours.

10.8 Extended Illness Bank (EIB). Employees shall accrue forty-eight (48) hours per year (prorated for part-time employees) into the Extended Illness Bank (EIB) for use in the event of extended illness. The accrual shall be at the rate of 1.85 hours per pay period or .023 hours per hour worked. The maximum accumulation to the EIB bank shall be five hundred (500) hours. Employees who reach the five hundred (500) hour cap will not accrue additional EIB hours until their accrual drops below five hundred (500) hours. Employees with existing (as of the date of contract ratification) accrued EIB hours in excess of five hundred (500) hours will retain and utilize those hours first and will not accrue additional hours until their accrual is below five hundred (500) hours. EIB hours may be used in the event of an illness lasting longer than sixteen (16) consecutive scheduled work hours (prorated for part-time employees). The first sixteen (16) consecutive hours of scheduled work time (prorated for part-time employees) missed due to an illness shall be deducted from the employee's PTO account. As an example of pro-ration, an employee assigned a 0.5 FTE may access EIB after the first eight (8) consecutive hours of scheduled work are missed due to an illness. (0.5 FTE x 16 work hours = 8 hours.)

Employees will use sixteen (16) consecutive hours of PTO (pro-rated for FTE) for each occurrence of illness or certified health condition for the employee or the employee's qualified family member before using EIB hours. For example: An employee has been certified as having asthma. As a result, the employee is absent for three (3) eight (8) hour days due to asthma. PTO is used for the first two (2) eight (8) hour days and EIB is used for the third (3rd) eight (8)-hour day. Two (2) weeks later, the employee has another asthma attack or a different illness or qualifying family illness that requires an absence of another three (3) days. Because this is a different occurrence, the employee will use another sixteen (16) consecutive PTO hours, and available EIB hours will be used beginning on the third (3rd) day.

There are five (5) exceptions for which EIB hours may be used for the first day of absence due to illness:

1. **Occupational Injury** - In the event an employee incurs an occupational injury for which the employee is eligible for workers compensation insurance, then the employee will have access to their EIB accrual at the first day of absence due to the occupational injury if requested by the employee. Otherwise, employees may use PTO or have the time be unpaid.
2. **Relapse** - In the event an employee suffers a relapse of the same illness within five (5) calendar days of returning to work, the additional hours of illness shall be treated as part of the original illness for purposes of eligibility to access the EIB.
3. **Ten-Day Absence** - In the event an employee has an extended illness lasting ten (10) or more calendar days, the first sixteen (16) scheduled hours of work (pro-rated for part-time employees) missed due to that illness shall be paid retroactively from the employee's EIB account.
4. **Hospitalization** - In the event an employee is hospitalized overnight, the employee will have access to their EIB accrual at the first day of absence due to the hospitalization. Same day surgery, if requiring five (5) or more days of recovery, may also be paid from the employee's EIB account.
5. **On-going Treatment Following an Illness, Medical Procedure or Injury.** If a medical condition of an employee or the employee's qualified family member requires on-going therapy and/or treatment (such as chemotherapy, radiation treatment and physical therapy), the additional hours of illness or on-going therapy and/or treatment shall be treated as part of the original condition for purposes of eligibility to access the EIB. The employee will not be required to use sixteen (16) hours of PTO (pro-rated for part-time employees) for each follow-up therapy and/or treatment as long as the employee has used the sixteen (16) hours (pro-rated for part-time employees) for the medical condition, illness, procedure or injury that precipitated the on-going therapy and/or treatment. This provision does not apply to ongoing maintenance of chronic conditions.

10.9 PTO Compensation. Accrued PTO as appropriate shall be payable at the employee's regular rate of pay on the first (1st) day of bona fide illness, injury, disability due to pregnancy or childbirth, or illness or injury of the employee or the employee's dependent child, spouse, parent, parent-in-law, or grandparent, pursuant to state law. Employees shall be required to notify the Employer at least two (2) hours in advance of the employee's scheduled shift if unable to report for duty on the first shift. Three (3) hours' advance notice shall be required if the employee is unable to report for scheduled duty on the second or third shift. Failure to do so may result in loss of PTO compensation for that day.

The Employer reserves the right to require reasonable proof of illness. Proven abuse of accrued PTO (i.e., a false claim of illness or other justification for an unscheduled absence) shall be grounds for discharge.

10.9.1 Accrued PTO shall not be payable on contractually designated or scheduled holidays.

10.10 Medical Appointments- Non-Exempt Employees. Employees will be expected to schedule medical appointments and/or treatments during non-working hours. Paid release time will be allowed for medical and dental appointments and/or treatments which an employee is unable to schedule during non-work hours. Up to four (4) hours per calendar year may be included as release time, to be paid only when a minimum of three (3) days' advance notice is received and the absence is approved by management. Release time for medical appointments and/or treatments with KFHPWA is subject to supervisory approval based upon patient care considerations and departmental needs. Medical appointment time will be taken in at least fifteen (15) minute blocks of time, up to a total of four (4) hours per year. These four (4) hours will not be considered toward attendance purposes.

10.11 On-The-Job Injury. Accrued PTO may be used to supplement the amount received by an employee from Workers Compensation Insurance as provided in Section 12.5 up to the amount of the employee's pay for the hours the employee would have worked had the employee been available for work.

10.12 Paid Sick Time Laws. The Employer shall comply with paid sick time laws established at the state, municipal, and other levels.

ARTICLE 11 - LEAVES OF ABSENCE

11.1 Leave Request. All leaves of absence shall be requested from the Employer in writing as far in advance as possible stating the amount of time requested. A written reply will be given by the Employer in response to the request. Leaves of absence for the purpose of extending vacation shall be entirely at the convenience of the Employer. A written reply to grant or deny the request shall be given by the Employer within thirty (30) days. Temporary employees shall not be eligible for any leave of absence.

11.1.1 Reinstatement. When a nurse returns from a leave of absence not exceeding thirty (30) days, the employee shall be assigned to the same position, shift and unit held before the leave.

11.1.2 Maintenance of Seniority. Leave with pay or for industrial injury shall not alter a nurse's anniversary date of employment or otherwise affect the employee's compensation or status with the Employer. Leave without pay for a period less than thirty (30) consecutive calendar days shall not alter any regular employee's anniversary date of employment. Employee-initiated leave without pay for up to four (4) days (32 hours) per calendar year shall not alter any regular employee's Paid Time Off accrual. This limitation shall not apply to low census/low need.

11.1.3 Return to Position. A leave of absence will guarantee an employee the first available position for which the employee is qualified if the employee reports back to the Employer on or before the expiration of the leave.

11.2 Military Leave. A regular employee called for military duty will be paid the difference between the pay they receive for such service and the amount of regular pay lost by reason of such service up to a maximum of one hundred twenty (120) hours in any rolling twelve (12) month period for routine training, and the first ninety (90) days of active duty. Leave required in order for a regular employee to maintain status in a military reserve of the United States shall be granted without loss of accrued benefits. Leave for active

military duty shall be granted in accordance with applicable law. In order to be eligible for payments under this paragraph, the employee must furnish KFHPWA with a copy of the employee's government check stub(s) showing the amount of military pay received. Except as provided in this paragraph, time off for military duty will be unpaid, although the employee may voluntarily choose to use available PTO.

11.3 Health Leave. In order to provide job protection for employees who are not covered by FMLA, after one (1) year of continuous employment with an FTE, one (1) durational leave of absence per rolling calendar year will be granted to employees who are not eligible for FMLA leave for a personal illness or injury, or disability because of pregnancy or childbirth without loss of accrued benefits. An employee who exhausts all of their FMLA leave is not eligible for a health leave.

A leave of absence begins on the date of first absence from work. Accrued Paid Time Off (PTO) and Extended Illness Bank (EIB) for the period of temporary disability shall be used during this period, except that an employee may elect to reserve up to eighty (80) hours (prorated for part-time employees) of PTO. The one (1) year service requirement shall not apply to health leaves for temporary disability due to pregnancy or childbirth. The Employer will use reasonable efforts to staff the vacant position created by the leave of absence on a temporary basis for the period of the employee's sick leave, subject to patient care considerations and departmental needs.

All persons hired temporarily to replace employees who are on leave of absence shall be so advised and shall be informed of the approximate date the regular employee is expected to return.

Length of service credit and benefits will not accrue but will remain the same as at the time of beginning the leave. Prior to returning to work after an extended absence for personal illness or injury, the Employer may require a statement from the attending physician attesting to the employee's capability to perform the work required of the job. Health leave shall not exceed six (6) months. If a health leave of absence exceeds twelve (12) weeks, only then may the Employer permanently fill the vacancy. If the Employer has filled the position permanently, pursuant to the above, the employee on leave of absence, upon returning to the job during the six (6) month health leave period, will be offered the first open position for which the employee is qualified.

11.4 Family Leave. Pursuant to the Family and Medical Leave Act of 1993, upon completion of one (1) year of employment, an employee shall be granted up to twelve (12) weeks of unpaid leave to: (a) care for the employee's child after birth, or placement for adoption or foster care; or (b) care for the employee's spouse/domestic partner, son or daughter, or parent, who has a serious health condition; or (c) for a serious health condition that makes the employee unable to perform the employee's job, provided that: the employee shall have worked one thousand two hundred fifty (1,250) hours in the twelve (12) months preceding the start of the leave; (It being understood that hours worked includes all "low census hours" and all hours for which the employee was on unpaid union leave). The Employer shall maintain the employee's health benefits during this leave and shall reinstate the employee to the employee's former or equivalent position at the conclusion of the leave. The use of family leave shall not result in the loss of any employment benefit that accrued prior to the commencement of the leave. Under certain conditions, family leave may be taken intermittently or on a reduced work schedule.

If a leave qualifies under both federal and state law, the leave shall run concurrently. Ordinarily, the employee must provide thirty (30) days' advance notice to the Employer when the leave is foreseeable. An employee shall use accrued paid leave time for which the employee is eligible during family leave, except that an employee may elect to reserve up to eighty (80) hours (pro-rated for part-time employees) of vacation. Family leave shall be interpreted consistently with the conditions and provisions of the state and federal law.

11.5 Dependent Care Leave. After one (1) year of continuous employment, an unpaid leave may be granted to an employee to care for a dependent child who resides with the employee for conditions other than those set forth in Article 11.4 (Family Leave) or for the care of a dependent parent or spouse or domestic partner of the employee. Such leave will occur without loss of seniority or accrued benefits, subject to the Employer's policy on vacation carryover. An employee on childcare leave shall be entitled to the first available position for which they are qualified. Such leave shall not exceed (1) one year.

11.6 Jury Duty. Regular employees who are called to serve on jury duty shall be compensated by the Employer for their scheduled days of work that the employee is required to report for jury duty. Employees called to jury duty who intend to serve will notify the Employer at least three (3) weeks in advance of their jury service or the employee may not be paid for the time they are required to report for jury duty. When an employee is excused from jury duty for all or part of a scheduled day, the employee will immediately contact their supervisor/manager for a work assignment. Employees required to return to work will continue to be paid during the transition from jury duty to work time.

11.7 Bereavement Leave. A regular employee shall be allowed a maximum of three (3) scheduled days off (need not be consecutive) with pay by reason of a death in the employee's immediate family. The term "immediate family" includes:

- Spouse/domestic partner
- Parent
- Step-parent
- Parent of spouse/domestic partner (parent-in-law)
- Parent in-law of spouse/domestic partner
- Children
- Children, adopted
- Children of spouse/domestic partner
- Children in-law
- Children in-law of spouse/domestic partner
- Sibling
- Sibling in-law
- Sibling in-law of spouse/domestic partner
- Grandparent
- Grandparent of spouse/domestic partner
- Grandchildren
- Grandchildren of spouse/domestic partner.

One (1) additional day off with pay will be granted when an employee is required to travel more than five hundred (500) miles in any one direction to attend the funeral. Regular employees may not take bereavement leave for days on which they were not regularly scheduled to work.

11.8 Sabbatical Leave. The purpose of a sabbatical leave is to provide an extended period of leave from a registered nurse's customary work to acquire new skills and training. The sabbatical makes available the necessary time to pursue significant professional development activities, e.g., full-time academic study, participation in research projects, foreign travel to examine alternative health care options, providing health care in underserved areas, publishing.

Registered nurses are eligible for their first sabbatical after working a minimum of ten (10) years of continuous regular employment as a registered nurse. An employee who qualifies may request 1) a sabbatical of up to six (6) months, or 2) a sabbatical of up to one (1) year after working thirteen (13) years of continuous regular employment. Registered nurses granted a sabbatical will receive fringe benefits consistent with their FTE level, subject to the availability of insurance coverage, and will retain their seniority. The total number of sabbatical leaves that may be granted during any one (1) year will not exceed ten (10).

An employee granted a sabbatical agrees to return to employment with KFHPWA following sabbatical for at least one (1) year. Employees returning from sabbatical leave of no more than six (6) months shall be reinstated to their prior position. Thereafter, employees will be reinstated to the first available position.

An employee is eligible to apply for another sabbatical only after seven (7) years have elapsed after the original sabbatical leave. The education committee under Article 14.1 shall recommend criteria for selection of the candidates and other guidelines for administering the sabbatical leave.

11.9 Educational/Professional Leave.

Unpaid Educational Leave: Up to twenty-four (24) hours of leave without pay per year, pro-rated for FTE, shall be granted for educational purposes, providing nursing services will not be jeopardized.

Paid Educational/Professional Leave/Time: After six (6) months of continuous regular employment, employees shall be allowed up to fifty-six (56) hours of paid leave/time per year, pro-rated for FTE, for education or professional purposes, providing such leave/time shall be subject to scheduling requirements of the Employer, approval by the Employer of the subject matter and certification of attendance and/or completion of the course, where applicable. Educational/professional leave/time may be used on an hourly basis. Educational/professional leave/time accrues on a calendar year basis. Unused time may not be carried over to the next calendar year.

Nurse Practitioners will be allowed up to seventy-two (72) hours of paid educational/professional leave/time per year, pro-rated for FTE.

Professional leave/time may be granted to employees to attend conventions of employees' respective professional nursing association provided the number of nurses who wish to attend does not jeopardize provision of health care services. District, State, or National Officers of the Professional Nursing Association shall be exempt from the six (6) months' eligibility requirement of this Section. Professional leave/time may be used for professional nursing certification exams.

Educational/professional time shall be paid at straight time when taken on a scheduled day off. Paid educational/professional time taken on a scheduled day off shall not be included as time worked for purposes of calculating overtime under Article 7.4 or the accrual of benefits.

11.11 Training Trust RN/ARNP. Purpose. The purpose of the SEIU Healthcare 1199NW Multi-Employer Training and Education Fund (the "Fund") is to provide a training and education program for addressing the workforce needs of participating employers and healthcare career advancement for eligible bargaining unit employees. The Fund provides training, college preparation courses, career counseling and case management services and tuition assistance for educational instruction. The Fund is funded by contributions from contributing employers and grant funds.

Participation and Trust Agreement. The Employer agrees to participate in the Fund and abide by the terms of the Trust Agreement of the Fund. As a major contributor to the Training Fund, the Employer has a position on the Training Fund Board of Trustees. The Fund provides the Board of Trustee members with regular budget updates, the review of the annual audit, an Employer-specific annual utilization report showing the number of members using the Fund, and the information regarding the allocation and balance of the combined employers' funds. These updates, reviews, and reports are available to KFHPWA.

Employer agrees to make contributions to the Fund, The Employer contribution to the Fund shall be an amount equal to one half of one percent (0.5 %) of the gross payroll of the RN/ARNP bargaining unit employees. Gross payroll shall be defined as the amount included on Box 5 of the W-2 form report of the Employer, excluding per diem/temporary part-time employees.

Fund Contributions, Records and Collections. The Employer shall remit the Fund contributions required under this Article on a pay period basis, based upon the payroll for the previous pay period. Payments shall be due no later than thirty (30) days following the end of the pay period on which they are based.

The Employer shall submit with the payment of such contributions, or at such other regular intervals as the trustees of the Fund may require, written reports as to the wages paid to employees and the contributions due or payable to the Fund pursuant to the collective bargaining agreement, as the trustees of the Fund may require.

The Employer shall promptly furnish to the trustees of the Fund, upon their written demand, such pertinent wage and other records relating to its employees as the trustees may deem necessary for the administration of the Fund.

The Employer agrees that the trustees of the Fund, or their authorized representative(s), may examine the pertinent payroll books and records of the Employer whenever such examination reasonably may be deemed necessary or advisable by the trustees of the Fund in connection with the proper administration of the Fund.

The failure of the Employer to pay the contributions required shall be in violation of the collective bargaining agreement as well as a violation of the Employer's obligations under the Trust Agreement of the Fund. The Employer agrees that the collection of the

delinquent Employer contributions shall be subject to the collection policy established by the trustees of the Fund.

Joint Labor Management Committee. As an established labor management committee, part of the committee's responsibilities will be to assess the needs of the bargaining unit employees related to education/career advancement interests and needs, and to promote the advantages of and participation in this Fund.

Information collected regarding training interests and needs and any barriers will be forwarded to Fund staff.

Availability of Onsite Rooms. In order to facilitate employee's access to education and training, the Employer will make a good faith effort to make rooms available on-site for conducting training, counseling and other activities of the Fund.

ARTICLE 12 - MEDICAL, DENTAL LIFE INSURANCE and RETIREMENT

12.1 Medical Insurance. Effective January 1, 2020, the Employer shall provide a medical plan for eligible regular, full-time and part-time employees assigned 0.5 FTE or greater, effective the first day of the month following of the date of hire into continuous eligible employment. As an exception to this Article, employees enrolled in the medical plan as of January 22, 2005 who are 0.26 - 0.49 FTE shall not lose eligibility for coverage during the term of this agreement. Provided however, that if such an employee's FTE subsequently increases to 0.5 or above, the employee will become ineligible for coverage if their FTE later drops back below 0.5 FTE.

The Employer shall also provide family member coverage for regular employees assigned a 0.75 FTE or greater, subject to the employee's agreement to pay the required monthly premium cost share. Employees with a 0.5-0.74 FTE can enroll their eligible family members into the medical plan, subject to the employee paying the full cost of the family member's coverage.

12.2 Dental Insurance. The Employer shall provide a dental plan for eligible regular, full-time and part-time employees assigned 0.5 FTE or greater, effective the first of the month following two (2) months of continuous eligible employment. The Employer shall also provide family member coverage for regular employees assigned a 0.75 FTE or greater, subject to the employee's agreement to pay the required monthly premium cost share.

12.3 Employee Premium Sharing. Enrolled employees shall pay monthly premiums for coverage in the employer medical and dental plans as determined in the Benefit Coalition and detailed in the Memorandum of Understanding resulting from the agreement made by the Benefits Coalition.

12.4 Retirement Plans. Employees who are currently participating in or who have made an election to participate in the Defined Contribution Plan may not change to the Defined Benefit Plan during their employment with KFHPWA.

For all employees covered by this Agreement, the Employer will continue to offer its 403(b)(7) Custodial Plan for employee voluntary pre-tax contributions. In addition, the Employer will match fifty (50) percent of the first four (4) percent of pay that employees defer into their account. These matching contributions will vest immediately.

The Employer will continue in full force and effect its Defined Contribution Employee Retirement Plan (6.3% of eligible compensation including overtime). The Employer agrees not to reduce the current level of contributions during the term of this Agreement. This commitment does not apply to administrative changes that may occur to the plan.

Except as provided in Section 12.4.4, the Employer agrees not to reduce the current level of retirement benefit defined in the Defined Benefit Plan during the term of this Agreement. This commitment does not apply to administrative (non-benefit) changes that may occur to the plan.

12.4.1 Retiree Medical Coverage. The Employer will offer its retiree medical plan coverage for eligible regular employees age fifty-five (55) or greater with twelve (12) years of continuous KFHPWA employment assigned a 0.75 FTE or greater. The premium for retiree coverage will be one hundred percent (100%) employee-paid if the employee retires on or after 12/31/2009.

12.4.2 Retirement Notice Award. Regular employees who give between six (6) and nine (9) months' advance notice of retirement and are at least age fifty-five (55) with at least twelve (12) years of continuous service will be eligible for a Retirement Notice Award. The Award will be prorated for FTE at the employee's regular rate of pay at the time of retirement. The Award will be paid at the end of the employee's career with KFHPWA.

Retirement Notice Award Schedule:

- 12 through 19 years of service – 80 hours of pay
- 20 or more years of service - 120 hours of pay

12.4.3 Retirement Service Award. Employees will receive a cash award at retirement if they are at least age fifty-five (55) *and* have been continuously employed in a 0.75 FTE position for twelve (12) or more years at retirement. The Retirement Service Award is fifty-five dollars (\$55) for every year that employees have worked at KFHPWA.

12.4.4 Changes to Defined Benefit Plan (DB). Effective as described below (and as further described in the DB Plan), the following changes were made to the DB to the extent allowable under applicable pension laws:

- 1) Ninety (90) days after ratification of the 2015-2019 Agreement, employees who are:
 - a) hired,
 - b) rehired (unless the employee was laid off, was an active participant in the DB at the time of the layoff, and is reinstated to a position eligible to participate in the DB within twelve (12) months of the layoff),
 - c) transferring employment to a position covered by this Agreement from a position not eligible to participate in the DB (unless the employee was an active participant in the DB within twelve (12) months prior to the transfer, and provides written notification to Employer of employee's

transfer back in to a position covered by this Agreement within thirty (30) days of transfer), or

- d) who are current employees that have not entered the DB by ninety (90) days after ratification of this Agreement will not be eligible to participate (or recommence active participation) in the DB and, if otherwise eligible, they will be enrolled in the Defined Contribution Plan (DC),

will not be eligible to participate (or recommence active participation) in the DB and, if otherwise eligible, they will be enrolled in the Defined Contribution Plan (DC).

2) Effective for Plan Years beginning on or after January 1, 2017:

- a) The calendar year hours requirement for pension accrual will be increased to five hundred (500) paid service hours. Credit for paid time where no services are provided (PTO, EIB, Holiday pay) is limited to five hundred one (501) consecutive hours in one (1) or more consecutive plan years. "Service hours" does not include leave while receiving pay under a plan maintained solely to comply with workers compensation, unemployment compensation or disability insurance laws.
- b) Accruals for employees in the DB who work beyond the Plan's Normal Retirement Age of 65 will be limited to the greater of 1) the accrued benefit at age 65, actuarially increased to the commencement date, or 2) the accrued benefit with continued accruals for post-65 service.

12.5 Worker's Compensation. The Employer shall provide Worker's Compensation Insurance for all employees. Upon completion of eighteen (18) months of regular employment, employees assigned a 0.75 FTE or more on a leave of absence due to an on-the-job injury shall continue to receive Employer-paid medical coverage for themselves and their eligible dependents for a period of up to six (6) months.

12.6 Life Insurance. The Employer shall provide life insurance for regular employees assigned 0.75 FTE or greater, effective the first of the month following one (1) month of continuous eligible employment. The Employer will provide a ten thousand dollar (\$10,000) basic life insurance and a ten thousand dollar (\$10,000) basic accidental death & dismemberment (AD&D) during the term of this Agreement, subject to the specific terms, conditions, and eligibility requirements of the plan. The employee will have the option of purchasing supplemental life and AD&D coverage as may be available under the Plan.

12.7 Long Term Care. The Employer agrees to provide Long Term Care Insurance for employees to purchase, should the option become available.

12.8 Long-Term Disability. The Employer shall provide long-term disability insurance for regular employees assigned a 0.75 FTE or greater, subject to the terms and conditions of the plan, and employee's agreement to pay the required monthly premium cost share.

12.9 Child Bonding. The Employer shall provide child bonding leave for regular employees assigned 0.75 FTE or more with at least one (1) year of service. Child bonding leave is two (2) weeks of leave at the regular rate of pay, pro-rated for FTE, provided to parents of a newborn baby or a child newly placed for adoption. Child bonding leave must be completed within six (6) weeks of the child's birth or placement for adoption and runs concurrently with other forms of leave an employee might be eligible for (such as FMLA, LTD).

12.10 Adoption Assistance. The Employer shall provide the standard adoption reimbursement benefit (currently up to two thousand dollars (\$2000)) to help offset the costs of adopting a child for regular employees assigned 0.75 FTE or greater with at least one (1) year of continuous KFHPWA employment.

12.11 Eligibility Requirements. Participation in medical, dental, insurance, pension and other benefits specified in this Agreement shall be subject to the specific terms, conditions and eligibility requirements of the benefit plan unless otherwise specified in this Agreement.

12.12 Domestic Partner. Domestic partners will be included in dependent coverage for employees assigned a .75 or more FTE status. The term "domestic partner" as used throughout this Agreement will be as defined in the KFHPWA affidavit of marriage/domestic partnership. The definition of "son and daughter" as used in Article 11.5 shall include the child of the employee over the age of 18 years but who is eligible for dependent coverage under the terms of the Employer's Group Medical Coverage Plan.

12.13 Flexible Spending Accounts. This is to acknowledge that KFHPWA offers all employees the opportunity to reduce taxes through flexible spending accounts (FSA) for health care and/or dependent care expenses and pre-tax medical/dental insurance premiums.

12.14 Short Term Disability. The Employer will provide access to a short-term disability supplemental insurance plan to employees through payroll deduction. Such plan will be 100% paid for by the employee through payroll deduction using pre-taxed dollars. Prior to the implementation, the Employer will review the plan with the Union. If an employee purchases the short-term disability insurance plan and incurs hours of leave that would qualify for both short-term disability and Extended Illness Bank paid leave, the employee may elect to use either short-term disability leave or Extended Illness Bank hours.

ARTICLE 13 – REBID – LAYOFF - RECALL

13.1 Layoff. In the event that a permanent or prolonged reduction in the number of regular full-time or part-time employees in a job classification within a work unit is determined by the Employer to be necessary, layoff procedures will be instituted on the affected work unit. If a reduction in staffing is needed, a layoff will be considered before any reduction of hours under Article 13.5.1. Upon request the parties will meet for the purpose of discussing implementation of the layoff. Prior to issuing a formal notice of layoff, hiring into all vacant positions in western Washington facilities will cease (or, for employees in EW, all vacant positions in EW facilities).

13.2 Layoff Notice. Except in emergency situations or unforeseeable conditions beyond the Employer's control, the Union and employees involved shall be given at least thirty (30) days' advance written notice of layoff. Employees on the Low Seniority Roster whose position is assumed ("bumped") by a more senior employee (or, in EW, employees whose position is assumed ("bumped") by a more senior employee subject to layoff) subject to layoff will be given at least 10 days advance notice.

13.2.1 ARNP Layoff Notice. KFHPWA will give ARNPs minimum of sixty (60) days' notice of layoff.

13.3 Work Unit Rebid and Layoff Process. To be used for multiple FTE changes, multiple length of shift changes, reduction of more than one position, and unit mergers/closures. The Employer shall provide the Union and affected employees with the new work schedule at least fourteen (14) calendar days in advance of the rebid.

13.3.1 Work Unit Rebid (Round 1). Work unit rebid for future state positions in the work unit by job classification. Employees, in order of seniority, may select:

- 1) Future state position;
 - a. There is no restriction on employees increasing or decreasing FTE or changing shifts during Round 1
 - b. Any employee with a .5FTE or greater who selects a future state position in Round 1 that results in a qualifying FTE decrease (more than .25FTE) may choose to accept the position (and go on recall) or to move into Round 2, but would have options as described per 13.5.1 "Hours Reduction". Those who move into Round 2 maintain their Round 1 selection until/unless they choose another option in Round 2.
 - c. Any employee with a .5FTE or greater whose only option is a future state position in Round 1 that results in an hours increase (more than .25 FTE) is considered to be "assigned" but must work this increased FTE for 6 months before additional rights per 13.5.2 "Hours Increase" may be triggered.

OR;

- 2) Move to Round 2
 - a. The number of staff allowed to move to Round 2 is equal to the number of position eliminations identified in this Round

13.3.2 Layoff process (Round 2). Employees, in order of seniority, may select:

- 1) Vacancy for which the employee is qualified
 - a. FTE reductions or increases will not trigger additional options as they do in Round 1

- b. If employee declines a comparable vacancy and fails to select another vacancy, the employee must resign from KFHPWA.

OR;

- 2) If there is no comparable vacancy, employee may select one of the following:
 - a. Severance benefit, if eligible (qualifying hours reduction employees are not eligible); or
 - b. Recall rights; or
 - c. For employees not on the LSR/least senior person, assume any position on the appropriate Low Seniority Roster (or in Eastern Washington, the employee may choose a position “bump” of the least senior person in EW in the same job title (for example, “Staff Nurse” or “Liaison Nurse”). In all cases the employee must be qualified for the position; or
 - d. Resign from KFHPWA

13.3.3 Low Senior employees who are bumped may select (Round 3).
Employees, in order of seniority, may select:

- 1) Vacancy for which the employee is qualified
 - a. FTE reductions or increases will not trigger additional options as they do in Round 1
 - b. If employee declines a comparable vacancy and fails to select another vacancy, the employee must resign from KFHPWA.

OR;

- 2) If there is no comparable vacancy, employee may select one of the following:
 - a. Severance benefit; or
 - b. Recall rights; or
 - c. Resign from KFHPWA

13.4 Single Position Elimination. In these situations, the Employer will first seek volunteers and no rebid is required. The least senior employee on the unit will be subject to layoff, provided that the remaining employees are qualified to do the work remaining. Employees not subject to layoff will be reassigned in order of seniority to all remaining positions so long as patient care and staffing considerations (including weekend coverage) are met. An employee subject to layoff shall participate in the layoff process, starting with Round 2.

13.5 Single FTE increase or decrease. In these situations, the Employer will first seek volunteers and no rebid is required.

13.5.1 Hours Reduction. It is KFHPWA's intent to assign employees an FTE status consistent with the number of hours normally assigned and worked by the employee on a regular, continuing basis. It is not KFHPWA's intent to reduce an employee's FTE for purposes of eliminating an employee's eligibility for medical coverage. If a reduction in FTE is determined by the Employer to be necessary, the Employer will first ask for volunteers from the unit and shift where changes are needed. When involuntary reductions are needed, the Employer will make a good faith effort to reduce the hours of the least senior person on a work unit and shift, subject to patient care needs, staffing considerations and hours of operation.

Any employee subject to an involuntary reduction in their FTE resulting in a loss of employee or dependent medical insurance coverage will be placed on the recall roster for a period of twenty-four (24) months subject to the requirements of Article 13.6.

An employee who is assigned to a .50 or more FTE status whose hours are reduced more than .25 FTE shall have the following options:

- 1) The employees shall, by seniority, be offered any vacant position for which they are qualified prior to the vacant positions being offered to employees not subject to an hour's reduction.
- 2) Accept the reduced hours. An employee choosing this option may elect to be placed on the recall roster for a period of twenty-four (24) months subject to the requirements of Article 13.6. Failure to accept a position comparable to that held prior to the schedule change will result in termination of recall rights.
- 3) For employees not on the LSR/least senior person, if there is no comparable vacancy, the employee may select a position from the low seniority roster (on in EW, the position of the least senior person in the same classification).

In the event that additional regular hours in a classification become available on a continuing basis in a unit, department, or facility, the Employer will assign the hours to the regular continuing schedule of the most senior qualified employee in the classification who has had an FTE reduction under this Article, if the Employer determines the assignment of hours best satisfies staffing, scheduling and other operational and patient care needs. In making its decision, the Employer will give consideration to the adverse impact on the employee and employee morale.

The Employer will continue to provide dependent medical coverage for the first month in which an employee's dependents are no longer eligible as a result of an FTE reduction pursuant to this provision.

13.5.2 Hours Increase. It is KFHPWA's intent to assign employees an FTE status consistent with the number of hours normally assigned and worked by the employee on a regular, continuing basis. It is not KFHPWA's intent to permanently increase an employee's FTE, absent mutual agreement, as a means to permanently filling vacant FTE in the department.

In the event that KFHPWA needs to make a temporary increase to an employee's FTE in order to provide coverage for a vacancy in the process of being filled, the Employer will first ask for volunteers from the unit and shift where changes are needed. When an involuntary increase is needed, the Employer will make a good faith effort to increase the hours of the least senior person on a work unit and shift, subject to patient care needs, staffing considerations, and hours of operation. The Employer will notify the affected employee(s) in writing of the effective date of the increase and, to the extent known, the expected duration of the increase.

In the event that an employee who was formerly assigned to a 0.5 or more FTE status is assigned an hour's increase of more than 0.25 FTE that lasts for six (6) or more months, the employee shall have access to the following options:

- 1) The employee shall, by seniority, be offered any vacant position for which they are qualified prior to the vacant positions being offered to employees not subject to an hours increase.
- 2) Accept the increased hours. An employee choosing this option may elect to be placed on the recall roster for a period of twenty-four (24) months subject to the requirements of 13.6. Failure to accept a position comparable to that held prior to the schedule change will result in termination of recall rights.
- 3) For employees not on the LSR/least senior person, if there is no comparable vacancy, the employee may select a position from the low seniority roster (on in EW, the position of the least senior person in the same classification).

13.5.3 Employee-Initiated FTE Decrease. By mutual agreement with the manager, an employee may decrease FTE by up to 0.20 FTE without the position being posted. This provision is intended to address circumstances when an FTE decrease initiated by the employee would contribute to an employee's retention, success, and satisfaction in their position. It is not intended to address FTE decreases initiated by the Employer. While this provision does allow an employee to initiate a request for FTE reduction and the Employer to agree to that reduction without job posting, if multiple employees initiate requests for FTE reduction at the same time, and the Employer cannot accommodate all of them, the Employer will grant the requests based on seniority so long as needs in the department can be met. The Employer shall notify the Union when it agrees to an FTE decrease under this section of the contract. Any reduction in FTE for an individual employee as a result of this article, is a permanent reduction in FTE for that employee. It is management's discretion to determine where and if the reduced FTE is allocated in the rest of the department/worksites.

13.6 Recall Process.

13.6.1 Recall Roster. Employees who select recall shall be placed on a recall roster for a period of twenty-four (24) months from the date of layoff. An employee placed on the recall roster shall provide and keep updated while on the recall roster a current mailing address, email address and telephone number where the employee can be reached, including an alternative phone number where the employee can be reached within two (2) business days. Employees on the recall roster remain eligible to attend any KFHPWA-sponsored continuing education activities at the employee tuition rate.

13.6.2 Order of Recall. As vacancies occur, employees will be recalled to available work in the order of the seniority providing skill; competence and ability are considered substantially equal in the judgment of the Employer. Subject to the above qualifications, an employee on layoff shall be offered reinstatement to vacant positions prior to any employees being newly hired and after any appropriate internal transfers as further set forth in this section. Employees regularly assigned to a specific unit, department or facility will be given preferential consideration for transfer to other shifts or positions in that unit, department or facility over all other employees except more senior employees returning from layoff status to their previous unit and shift or position and department/facility. If any offer of recall is accepted, the employee shall be deemed recalled and be removed from the recall roster. Any recall of employees out of seniority will be communicated to the Union representative in advance of the recall.

13.6.3 Refusal of Offer. An employee who refuses an offer of recall to comparable employment shall be terminated.

13.6.4 Statements of Continued Interest. Employees who have been on recall for six (6) months or more must submit to the Employer a written statement indicating a continuing interest in employment that is received by the first business day of the seventh (7th) month and on a monthly basis thereafter. If the employee fails to meet this requirement by the first business day of each month, the employee's name will be eliminated from the recall list and the Employer's recall commitments shall terminate.

Employees may voluntarily enter into a written agreement with the Employer to waive recall to those types of non-comparable vacant positions as specified by the employee. The employee may change or cancel any such waiver by providing the Employer with appropriate written notice on the designated form available from the Human Resources Department. Any changes or cancellation of waiver is effective only upon receipt by the Employer as to those positions still available for recall.

13.6.5 Duration of Recall Rights. The Employer's obligation contained herein shall cease after twenty-four (24) consecutive months on layoff status, if the employee refuses to accept an offer of employment pursuant to Article 13.6.3, or if the employee fails to comply with the requirements of Article 13.6.4.

13.7 Definitions

13.7.1 Severance Benefits. Benefits will consist of severance pay and extended medical benefits. Employees will be entitled to two (2) weeks of severance pay for each year of service to a maximum of twelve (12) weeks of severance pay, appropriately prorated to the employee's FTE and rate of pay at the time of selecting severance. Non-probationary employees who have less than one (1) year of service shall be entitled to two (2) weeks of severance pay. Years of service shall be calculated on the employee's last day of employment with the Employer.

Extended medical coverage will consist of KFHPWA paid medical benefits for the employee at their current benefit level and enrolled family members or other dependents under the KFHPWA Medical Coverage Plan for a period of twelve (12) months after the date on which their medical coverage would have otherwise terminated because of the termination of their employment with KFHPWA. Should the former employee become eligible for Medicare, the KFHPWA provided medical coverage will switch to Medicare

supplement coverage for the remainder of the twelve (12) months when the employee timely registers for Medicare.

13.7.2 Initially Subject to Layoff. The number of employees initially subject to layoff is defined as the number of least senior bargaining unit employees on the unit whose total FTEs satisfies the required FTE reduction. The actual number of bargaining unit employees who are finally eligible to exercise layoff options as provided in Article 13.3 may be different than the number initially subject to layoff due to the choices exercised by eligible employees during the reassignment process.

13.7.3 WWA Low Seniority Roster. The Low Seniority Roster shall be a listing of the fifty (50) least senior employees within KFHPWA for a layoff when the number of employees initially subject to layoff is ten (10) or fewer. The listing shall consist of the seventy-five (75) least senior employees when the number of employees initially subject to layoff is between eleven (11) and thirty (30) and the one hundred (100) least senior employees within KFHPWA when the number of employees initially subject to layoff is between thirty-one (31) and fifty (50). The listing shall consist of the one hundred twenty-five (125) least senior employees when the number of employees initially subject to layoff exceeds fifty (50). In the event the number of employees initially subject to layoff exceeds one hundred twenty-five (125), the number of employees on the listing will equal the number of employees initially subject to layoff. For purposes of this section, least senior employees are those working in the KFHPWA's WWA facilities.

13.7.3.1 WWA Low Seniority Roster. An employee identified for layoff whose name already appears on the Low Senior Job Roster, and any employee on the Low Senior Job Roster whose position has been selected as a result of this process, shall be subject to layoff with recall rights or severance benefits, providing the employee is eligible under the terms of the policy.

If there is a need to restrict the number of Low Seniority Roster employees within a work unit whose positions may be assumed so as to not compromise patient care, the Employer, prior to making a final determination, will meet with the Union in a good faith effort to reach agreement on the need for such a restriction. If there are any restrictions placed on the number of Low Seniority Roster employees within a particular work unit whose position is subject to being assumed, the Low Seniority Roster will be adjusted in order to provide the contractually required number of employees.

13.7.4 EW Least Senior Position. An employee identified for layoff who is already the least senior person in a job title (for example, "Staff Nurse" or "Liaison Nurse") and any employee whose position has been selected as a result of this process, shall be subject to layoff with recall rights or severance benefits, providing the employee is eligible under the terms of the policy.

13.7.5 Discretionary Relocation Assistance. In order to encourage and facilitate relocation from one work unit to another by those employees subject to layoff, KFHPWA may offer relocation assistance. When determined opportune, KFHPWA will rely on its then current policy, for any relocation assistance the employer may choose to offer.

13.7.6 Temporary Work. Employees on layoff who are qualified shall be given preference to work intermittent shifts subject to the requirements for all temporary

employees at the facility. Employees desiring temporary work while on layoff shall be responsible for contacting the facility where they desire temporary work to indicate the employee's interest and availability. Acceptance of intermittent work will not affect an employee's recall rights.

13.7.7 Work Unit. A work unit is defined as primary care services in a medical center; specialty services in a medical center; a separately established urgent care department in a medical center with its own identified staff; a separately established ambulatory surgery center department in a medical center with its own identified staff; Home Health & Hospice services in a branch office of Continuing Care; Nursing Home Services; Bartell Drugs Care Clinics.

13.7.8 Comparable Employment. For purposes of this Article, "comparable employment" or vacancy shall be defined to include:

- (a) Same rate of pay;
- (b) Similar shift, which is defined as a change of three hours or less in an employee's previous start time;
- (c) Similar FTE, which shall be defined as a decrease or increase of .1 FTE in an employee's previously assigned FTE status;
- (d) Similar geographic location;
 - 1) Northgate, Lynnwood, Capitol Hill Campus, Ballard, South Lake Union
 - 2) Burien, Renton, Federal Way, Capitol Hill Campus, Renton Administrative Campus, Kent, South Lake Union
 - 3) Capitol Hill Campus, Rainier, Renton Administrative Campus, Ballard, South Lake Union
 - 4) Olympia, Tacoma Mall, Steele Street, Tacoma Medical Center, Puyallup, West Olympia
 - 5) Bellevue Medical Center, Redmond, Renton, Factoria, Renton Administrative Campus
 - 6) Tacoma Mall, Steele Street, Port Orchard, Silverdale, Tacoma Medical Center, Poulsbo, Gig Harbor
 - 7) Federal Way, Tacoma Mall, Steele Street, Tacoma Medical Center, Puyallup, Kent
 - 8) Everett, Lynnwood, Bellevue Medical Center, Redmond, Northshore
 - 9) Everett, Northshore, Lynnwood, Smokey Point
 - 10) Capitol Hill Home Health and Hospice
 - 11) East Region Home Health and Hospice
 - 12) South Region Home Health and Hospice
 - 13) Seattle Mental Health Services, Snohomish Mental Health Services and Factoria Medical Center Mental Health Services
 - 14) Olympia Mental Health Services, Tacoma Mental Health Services, Kitsap Mental Health Services
 - 15) Eastern Washington
 - 16) Remote positions (working from home 100% of the time and in perpetuity) will be considered geographically comparable if the available position is also remote. Remote positions will also be considered geographically comparable to those similar geographic locations above (1-15) that encompass the same zip code as the residence of the employee. For those without a matching zip code to the similar geographic locations above (1-15), they would align to the nearest similar geographic location above (1-15). In no circumstance

would a position be considered comparable under similar geographic location if the distance between the staff member's home address and the nearest geographic location that is 20 miles or greater.

In-Patient Hospital Units:

- 1) North: Peace Health (Bellingham), Providence Everett
- 2) Central: Overlake (Bellevue), Swedish (Cherry Hill & First Hill), CHIPS (Cap Hill)
- 3) South: St Joes (Tacoma), St Peters (Olympia), St Michaels ~~Harrison~~ (Bremerton)

13.7.9 Qualified. For purposes of this Agreement, an employee will be considered qualified if, in the opinion of the Employer, the employee has the skills, competence and ability based on established criteria to perform the responsibilities of a particular position within the time period normally expected of an employee new to the position.

If, after four (4) weeks of orientation, the employee has not achieved a satisfactory level of performance in the judgment of the Employer based upon established criteria, the employee may resign or choose to be placed on the recall roster without further notice.

13.7.10 Multi-Unit Layoff/Unit Merger. A multi-unit layoff occurs when there is a layoff as a result of the merger of two or more units and/or division of one or more units into new units. In the event of a work unit closure, employees of the work unit will exercise their layoff options provided in Article 13.3 in order of seniority.

13.7.11 Work Unit Closure. A work unit closure occurs when a work unit ceases to operate because the Employer has decided to discontinue the type of service for the patient population normally provided within the work unit. In the event of a work unit closure, employees of the work unit will exercise their layoff options provided in Article 13.3 in order of seniority.

13.7.12 Future State Position. Positions to remain in a work unit after taking into account the necessary reductions and/or schedule/FTE adjustments that need to be made.

13.7.13 Vacant positions. Positions in the same job classification requiring comparable skills will not be filled during the period beginning with the notice of layoff to the date of the layoff. Additionally, subject to skill, competence and ability being substantially equal in the opinion of the Employer, the use of agency/registry employees in a vacant position in the affected unit will be discontinued prior to layoff.

13.7.14 Geographic Locations – New Worksites. The Employer will notify the Union of its intention to establish new geographic locations that will be worksites for bargaining unit members. At that time, the Union and Employer will meet to determine how these geographic locations fit into comparable geographic areas in Article 13.7.8.d.

ARTICLE 14 - COMMITTEES

14.1 Nursing Practice Committees (NPC). Nursing Practice Committees (NPCs) shall be instituted and maintained at KFHPWA. NPCs shall consist of Inpatient, Primary Care, Consultative Specialty, Care Management, and Home Health and Hospice Services. The purposes of these NPCs will be to: (1) assess and make recommendations to

Administration on broad-based productivity, workload, patient acuity systems, or other issues such as scheduling practices and innovative staffing patterns that may impact or contribute to an improved work environment and patient care delivery, and, in recognition of the mutual desire of the parties to maintain staffing consistent with quality patient care and good working conditions, (2) serve as a resource for problem-solving and development of alternatives when chronic facility or unit-wide staffing problems have not been adequately addressed after reasonable efforts between staff and management at the facility or unit level. Employees are responsible for first bringing such concerns to their manager in a timely manner for purposes of mutual discussion and problem solving.

Compliance with RCW 70.41.420 will be delegated to the inpatient NPC. Individual staff may identify a staffing concern and submit the concern in writing to their manager. The manager may convene a small workgroup of unit-based staff to problem solve and make recommendations for resolution. The manager will acknowledge receipt of the staffing concern within seven (7) days and establish a mutually agreeable timeframe for resolution with the staff. If there is no resolution or unsatisfactory resolution, the staffing concern may be forwarded in writing by either the staff or manager to the next level of supervision. The next level of supervisor will respond in writing within fourteen (14) working days. If there is no resolution or unsatisfactory resolution the concern may be forwarded in writing to the next level of supervision (VP level) for final resolution in writing.

At any point in the process the manager or staff may forward in writing the staffing concern to the respective NPC for advice, input, and/or recommendations.

The NPCs may make recommendations to Administration in support of satisfactorily resolving such chronic staffing situations. Chronic facility or unit-wide staffing problems may be reviewed by the Joint Labor/Management Committee if not adequately addressed after recommendations have been made by the NPCs to Administration. The NPCs role in assessing staffing issues will include on-going evaluation of nursing delivery models through development of criteria (that may include staffing ratios) or measures to evaluate staff and consumer satisfaction, patient care outcomes, and cost efficiencies.

Except for the Primary Care and Consultative Specialty NPCs, each committee will consist of three (3) staff nurses and three (3) nurse managers. The NPCs will meet bi-monthly or more often by mutual agreement. NPC members shall be compensated for their meeting time. Such meetings shall be scheduled so as to minimize conflict with scheduling routines. The NPCs will prepare an agenda and keep minutes of all meetings.

The Primary Care and Consultative Specialty NPCs will meet quarterly or more often by mutual agreement and will include no more than six (6) union-designated employees including LPN and MA members for the meetings that pertain to staffing and other team-based issues. Agenda items for these meetings will be developed in advance.

The NPCs will develop and submit to Administration and the Joint Labor/Management Committee annual work plans. The NPCs will be advisory to Administration and will operate within the provisions of the collective bargaining agreement.

14.2 Joint Labor Management Committee (JLMC). It is the goal of SEIU Healthcare 1199NW and KFHPWA to engage in joint problem-solving efforts wherein the mutual interest of the Union and management can be addressed on an on-going basis during the term of this Agreement. The JLMC shall serve as a forum for union input to the

management decision-making process and mutual education and information sharing by both parties. The primary goal of the JLMC is to support staff and management in the delivery of quality patient care, including improved conditions conducive to the delivery of quality care and the recruitment and retention of nurses.

The Employer and the Union recognize the importance of working together to provide an environment in which staff can effectively and safely provide care. The parties also recognize that staffing and workload are integral and critical elements of the work environment. The JLMC will develop an annual plan to address issues of mutual concern including but not limited to staffing, patient safety, workforce planning, etc.

The JLMC shall use an interest-based process for problem solving.

The JLMC may address matters subject to collective bargaining but shall not substitute for the contractually agreed-upon process for resolving grievances under Article 16. Issues and problems pertaining to specific worksites will continue to be addressed at the facility or work unit level.

The approach, structure and composition of the committee may vary depending on the issues; however, each party will appoint a core of no more than six (6) representatives. The JLMC and/or the appropriate NPC may upon mutual agreement be convened to include members of the Service Unit to discuss staffing issues/concerns. Employee attendance at these meetings will be on paid time. The JLMC will meet quarterly or more often by mutual agreement.

As part of the JLMC's work plan, it is agreed that in the first year of this agreement the JLMC will look at the structure of the nurse practice committees (NPCs) and make recommendations to improve the structure to ensure their success.

14.3 EW Relations and Communications Committee. This committee is made up of both RN and Service staff. The Union and the Employer agree to establish a labor management committee to discuss shared workplace concerns with the purpose of promoting good communications, problem-solving at the lowest appropriate organizational level and follow through on worksite resolutions. It is the intent of the Union and the Employer that the Committee has decision-making authority with the understanding that the committee members may need to confer with their respective organizations prior to reaching a final decision.

The committee will consist of three (3) Service union appointed representatives, three (3) RN union appointed representatives, and at least three (3) managers selected by the Employer. Participation on the committee will not result in loss of paid time. The committee is not intended to address matters appropriate for the grievance process but may resolve issues that might otherwise come forward as grievances. The committee will meet quarterly, or more often as determined by the group.

14.4 Nurse Practitioners Nursing Home Services Joint Labor Management Committee (JLMC). It is the goal of SEIU Healthcare 1199NW and KFHPWA to engage in joint problem-solving efforts wherein the mutual interest of the Union and management can be addressed on an ongoing basis during the term of this Agreement. The JLMC shall serve as a forum for mutual education and information sharing by both parties. The primary goal of the JLMC is to support staff and management in the delivery of quality patient care,

including improved conditions conducive to the delivery of quality care and the recruitment and retention of Nurse Practitioners Nursing Home Services.

The JLMC shall use an interest-based process for problem solving. Up to three (3) staff members shall be appointed by SEIU 1199NW to the Committee.

This JLMC will meet bi-monthly. JLMC members shall be compensated for their meeting time. Such meetings shall be scheduled so as to minimize conflict with scheduling routines. An agenda will be jointly developed by JLMC members and management prior to the meeting. Minutes will be kept of all meetings.

The purpose of this JLMC will be to: (1) assess and make recommendations to Administration on broad based productivity, workload, patient acuity systems, or other issues such as scheduling practices and innovative staffing patterns that may impact or contribute to an improved work environment and patient care delivery, and, in recognition of the mutual desire of the parties to maintain staffing consistent with quality patient care and good working conditions, (2) serve as a resource for problem solving and development of alternatives when chronic facility or unit wide staffing problems have not been adequately addressed after reasonable efforts between staff and management at the facility or unit level. Employees are responsible for first bringing such concerns to their manager in a timely manner for purposes of mutual discussion and problem solving.

The JLMC may address matters subject to collective bargaining but shall not substitute for the contractually agreed upon process for resolving grievances under Article 16. Issues and problems pertaining to specific worksites will continue to be addressed at the facility or work unit level.

At the end of the contract term, the JLMC will determine if it is meeting its objectives. Factors that will be considered include: whether the JLMC's effort is duplicative of another pre-existing committee, whether realistic, concrete recommendations for improvement are being generated, whether the JLMC is effectively meeting its purpose and if the time spent is providing a return to the organization and to the Nurse Practitioners Nursing Home Services.

Additionally, one (1) representative will be included in the ARNP Practice Workgroup.

14.5 Nurse Practitioners Work Group. KFHPWA will continue to hold meetings between nurse practitioners with KFHPWA managers and the Medical Director to discuss issues of mutual concern related to the work of nurse practitioners including a study session on variable compensation and the potential impact on nurse practitioners.

- a) KFHPWA supports ARNPs' participation in DNP programs to increase their proficiency in research appraisal, translation of evidence into practice and direct clinical expertise that will lead to the advancement of higher quality patient care. The ARNP Practice work group will engage in discussion over the next year on scope of duties and appropriate opportunities for DNPs. KFHPWA and SEIU will discuss appropriate compensation. Employees who are in a DNP program or are graduates of a DNP program should participate in the development of the appropriate duties.

- b) In addition, KFHPWA commits to using best efforts to remove internal KFHPWA barriers to having ARNPs/DNPs assuming positions that are part clinical and part administrative. KFHPWA recognizes the importance of ARNPs' ability to maintain licensure while working in administrative roles. Human Resources and Payroll will support efforts to encourage full utilization of the ARNP/DNP roles.
- c) KFHPWA and SEIU will, through the ARNP practice work group, explore mechanisms to provide a variable pay program that could include secure messaging and other alternatives to visits, patient satisfaction scores, HEDIS, etc.

14.6 Steering Committee. The parties will establish a Steering Committee consisting of KFHPWA President and Senior level staff along with SEIU Healthcare 1199NW President and Senior Union leadership to meet for the purpose of developing the joint work to be conducted by the Steering Committee. The first tasks of the Steering Committee will be to identify areas of mutual interest to the parties, determine what the goals and scope of the Steering Committee are, establish a decision-making process, introduce reporting out of the committee's work, set the meeting agendas and location, and determine what, if any, training is needed. The Steering Committee shall meet quarterly for one year (or more often if mutually agreeable), discuss the progress of the group, and then decide if/how future work should be organized. The Steering Committee shall not engage in collective bargaining nor shall it supplant or duplicate contract negotiations. The parties may employ the services of a neutral consultant/facilitator.

14.7 JLMCs Transition. At the conclusion of the implementation of Unit-Based Teams (UBTs) the following Labor/Management Committees will be discontinued:

- Nursing Home Services
- All Nursing Practice Committees (Primary, Specialty, Care Management, and Home Health and Hospice) except for Inpatient, which will be renamed the Staffing Committee
- The Spokane Relations and Communication Committee
- The ARNP workgroup, if a "service-line" ARNP UBT is implemented. If there is no "service-line" UBT for all ARNPs, the ARNP workgroup will continue.
- Members from Spokane may join the bargaining unit JLMCs (RN, SWEA, Service). Each BU committee will add one (1) EWA position.
- Strike "WWA" from RN/ARNP
- Prioritize launching service line HH & HP UBTs post-ratification

The following Labor/Management Committees will remain in place for the duration of the agreement:

- RN/ARNP JLMC
- Steering Committee
- Staffing Committee
- EID Committee
- Local Attendance Committee
- Benefits Committee

Current target to implement all UBTs is December 31, 2024.

ARTICLE 15 – EQUITY, INCLUSION AND DIVERSITY (EID)

Joint Commitment to a Just, Inclusive Workplace

It is the expressed, shared interest of both Kaiser Foundation Health Plan of Washington (KFHPWA) and SEIU Healthcare 1199NW (SEIU) that racism, discrimination, transphobia/homophobia, bias, and harassment will not be tolerated. It is the interest of both parties, upon encountering substantiated instances of racism, discrimination, transphobia/homophobia, bias, and harassment, to take action.

As initial steps to operationalize the parties' shared values around equity, inclusion, diversity, and racial justice within the framework of labor-management partnership, the parties agree to the following:

Joint Labor Management Equity, Inclusion and Diversity (EID) Workforce Committee

The parties will reconvene the Joint Labor Management Equity, Inclusion and Diversity Workforce Committee. The committee is tri-chaired by Labor, WPMG (at their discretion) and KFHPWA. The committee may include regional representatives from labor, WPMG, operations leaders, staff business resource groups, etc., inclusive of marginalized communities. The charter for the committee includes jointly agreed upon objectives, scope, participants, quorum, meeting cadency and more, and any updates will be made jointly. The focus of the committee is to address the culture and climate of KPWA as it relates to EID, including reviewing the current culture and climate, identifying concrete solutions, and developing and implementing a joint plan of action. The work of the committee will align and support national and organizational EID strategies and initiatives. The committee will engage in a labor management change process to promote leadership discussion, awareness and improvement that encompasses an ongoing work plan.

The committee will continue the work to develop a shared analysis and increased skills around issues of EID and racial justice through a joint learning process, which may include workshops from outside facilitators. This committee will meet every other month.

Like other LMP committees, this committee will continue unless the parties mutually agree to sunset it.

The parties will utilize jointly selected independent facilitators. All time for the committee will be paid time. The parties will seek funding from the LMP budget for committee work including facilitation and workshops. Any mutually agreed upon costs that are not covered in the LMP budget will be paid by the Employer.

Workplans. The committee will discuss, analyze and evaluate the work conducted during the prior year, to prepare a workplan within three months of ratification. The group will present about their individual organizational work on EID and Racial Justice, including *Belong@KP*, identify goals for the next years' work to inform the workplan for the next year and make any changes to the process or workplan as needed and identified by the committee. In addition, the committee will develop an overall workplan that may ~~will~~ include the workshops needed for the committee and specific topic areas for the group to discuss. Topics may include, but are not limited to concerns related to discrimination, harassment including sexual harassment, bias and/or prejudice, as well as a review of the employer's policies and practices that pertain to discrimination, harassment, equity and inclusion, racism, and overlapping identities or intersectionality. The parties will develop their workplans to incorporate the individual needs of each organization to find common

ground and shared goals. The workplan will align and support National and organizational EID strategy and initiatives. The committee will develop processes for capturing and analyzing mutually agreed upon pertinent data. The employer will provide jointly agreed to data to the committee. The committee may also incorporate into its work analyzing situations that have occurred in the workplace.

1. **Workshops:** as part of the workplan the parties will mutually agree on workshops to support the goals of the parties. In the first year workshops may be the People's Institute Northwest's Undoing Racism workshop and Belong@KP Part 2. There will be at least 2 workshops each year unless the parties mutually agreed to more.
2. **Facilitation:** In the first two years, mutually agreed upon facilitation support will be provided for bi-monthly meetings for the EID Workforce Committee to advance their work on the above goals and to work towards constructive and proactive planning, and support self-facilitation. For subsequent years, the parties will convene to determine if further facilitation is needed.
3. **Individual and joint monthly planning, strategy, and preparation meetings** for the parties will be led by the tri-chairs. They may seek other feedback from relevant parties for these discussions.

Commitment to No Retaliation

There will be no retaliation for speaking out about discrimination concerns. In a circumstance where an individual or group of individuals have a specific allegation of discrimination, a delegate will be provided upon request.

Confidentiality

Unless the Employer is otherwise required to release the information by law, including for the union to represent members in a grievance, bargaining, or similar circumstance, review or use of confidential employee information or workplace data is at the discretion of KPHPWA.

Ongoing Accountability

As a key organizational strategy, this joint work will have ongoing oversight by KPHPWA executives. This joint work will be discussed quarterly at the KP Leadership and SEIU Executive Steering Committee.

Religious accommodation

When a request for religious accommodation is made, KP will engage in the interactive process with the individual to determine if the individual can be reasonably accommodated. The interactive process is a dialogue between the individual and the KP representative (e.g., manager, recruiter, HR Consultant, or Employee Relations and Labor Relations Consultant) to clarify the individual's needs and identify the appropriate reasonable accommodation.

Bathroom Equity

The Employer will ensure employees have safe access to restrooms of their choosing in all work locations. The location of gender-neutral bathrooms will be broadly communicated and identified by signage as they become available.

Transgender & Non-Binary Employees

The Employer will support the gender identity and expression of employees, including by:

- Ensuring employees have safe access to restrooms and changing of their

choosing.

- The employer will respect name changes. Where permissible, employees will be allowed to use a chosen name (known as “preferred name” in HR systems) without proof of a legal name change. HR will work with the employee to make the applicable changes. The Employer will also change gender designation without proof of a legal gender change upon request of the employee or physician in KP’s HR systems. The Employer is required by law under certain circumstances to require a legal name change before an employee can use a preferred name. Examples may include HR and payroll, retirement/pension accounts, and licensing and certification requirements.

ARTICLE 16 - OCCUPATIONAL HEALTH AND SAFETY

16.1 The Employer will maintain a safe and healthful workplace in compliance with all Federal, State and local laws applicable to the safety and health of its employees.

16.2 The Employer shall form a Health and Safety committee composed of employee and Employer representatives. The purpose of the committee shall be to investigate safety and health issues and to advise the Employer of education and preventive health measures for the workplace and its employees. The committee shall allow for proportionate membership representation of employee groups. Broad-based and persistent health and safety concerns of individual employees or employee groups can be addressed to the Committee if they have not been adequately responded to at the facility or unit level.

16.3 The Employee’s Safety and Health committee, and the Union representatives to the joint committee, act hereunder exclusively in an advisory capacity and that the International Union, National Union, Local Union, Union Safety and Health Committee, and their officers, employees and agents shall not be liable for any work-connected injuries, disabilities, or diseases which may be incurred by employees.

16.4 The Employer shall provide adequate orientation, training and education for employees who may be routinely exposed to potentially hazardous substances and harmful biological and/or physical agents in their jobs.

16.5 Employees assigned to locations where exposure to ionizing radiation is possible in the course of the work assignment shall be issued a film badge or similar detection device. The Employer will maintain records of employee exposure.

16.6 Safer medical devices and exposure control. KFHPWA is committed to reducing and preventing the risk of percutaneous injuries and blood/body fluid exposures through the application of technology, evaluation of work procedures, and prevention measures. KFHPWA will provide surveillance of parenteral exposures and other blood/body fluid exposures, to include identification of device-specific mechanisms of injuries.

The Employer will continue to maintain a Sharps Injury Log and shall record each exposure incident involving a sharp on the log within fourteen (14) days of the incident, including information consistent with federal OSHA requirements.

Consistent with federal OSHA's 1999 Compliance Directive, KFHPWA will evaluate and buy the most effective safer needles and other safer sharps to prevent needle stick injuries. This will include engineering controls such as needleless devices, retractable or self-blunting devices and plastic capillary tubes. Employees will be provided with adequate training and orientation on the use of safer devices.

The Employer will involve frontline employees in the identification and selection of needles and other sharps and in designing and conducting the evaluations and pilot testing of products.

Evaluation of devices with integrated safety features and protective barriers include cost, applicability, and effectiveness, with effectiveness being a primary determinant. The process will be overseen by the Regional Infection Control Practitioners and the Infection Control and Safety Committees. KFHPWA will continue to evaluate current and new products in conjunction with our surveillance data to enhance the safety of employees and patients.

KFHPWA will continue to provide testing pursuant to KFHPWA policies and protection, such as vaccines and preventative strategies, to employees from occupational transmission of blood borne and airborne communicable diseases. KFHPWA will continue to provide the following, consistent with CDC recommendations: hepatitis C testing, hepatitis B vaccine, hepatitis immunity screen, hepatitis boosters as determined to be medically appropriate, PPD screening and confidential HIV testing associated with accidental parenteral exposures.

ARTICLE 17 - GRIEVANCE PROCEDURE

Grievance Defined. A grievance is defined as an alleged violation of the terms and conditions of this Agreement. The Employer and the Union endorse the general proposition that, whenever possible, grievances, complaints and other disputes shall be resolved at the lowest possible level of authority, and specifically directly among the employee, the delegate and the immediate supervisor wherever possible. Both parties will extend efforts to establish a working relationship between the delegates and immediate supervisors. If any such grievance arises, including but not limited to a grievance concerning a discharge or a substantially excessive continuous workload, it shall be submitted to the following grievance procedure. Time limits set forth in the following steps may only be extended by mutual consent of the parties hereto. The grievance process is not available for terminations of probationary or temporary employees.

Step I: Immediate Supervisor or Department Head.

The employee (and the Delegate, if requested by the employee) shall present the grievance in writing to the immediate supervisor or department head within fourteen (14) calendar days of the employee's knowledge of the facts that constitute the grievance and the parties shall attempt to resolve the problem immediately. A Step I meeting shall be held within fourteen (14) calendar days of receipt of the grievance. The immediate supervisor or department head shall respond in writing to the grievance within fourteen (14) calendar days of the meeting.

Step II: Next Level of Supervision.

If the matter is not resolved to the employee's satisfaction in Step I, the employee (and the Delegate if requested by the employee) shall present the grievance to the next level of supervision within fourteen (14) calendar days of the immediate supervisor's decision. A Step II meeting shall be held within fourteen (14) calendar days of receipt of the request for Step II. This individual shall respond in writing to the grievance within fourteen (14) calendar days of the meeting.

Step III: Labor Relations.

If the matter is not resolved to the union's satisfaction in Step II, the Delegate (and the employee if requested) shall present the grievance to Labor Relations within fourteen (14) calendar days of the Step II decision. A Step III meeting shall be held within fourteen (14) calendar days of receipt of the request for Step III. Labor Relations shall respond in writing to the grievance within fourteen (14) calendar days of the meeting.

Grievance Mediation.

The parties may by mutual agreement use grievance mediation of contractual disputes prior to arbitration at Step IV upon mutually agreed upon terms. The fees of the mediator shall be divided equally between the parties.

Step IV: Arbitration.

If the grievance is not settled on the basis of the foregoing procedures, the Employer or Union may submit the issue in writing to arbitration within fourteen (14) calendar days following the response from Labor Relations. A list of eleven (11) arbitrators shall be requested from the Federal Mediation and Conciliation Service. The parties shall there upon alternate in striking a name from the panel until one name remains. The person whose name remains shall be the arbitrator. The arbitrator's decision shall be final and binding on all parties. The arbitrator shall have no authority to add to, subtract from, or otherwise change or modify the provisions of this Agreement, but shall be authorized only to interpret existing provisions of this Agreement as they may apply to the specific facts of the issue in dispute. Each party shall bear one-half ($\frac{1}{2}$) of the fee of the arbitrator and any other expense jointly incurred incident to the arbitration hearing. All other expenses shall be borne by the party incurring them, and neither party shall be responsible for the expenses of witnesses called by the other party.

ARTICLE 18 - UNINTERRUPTED PATIENT CARE

18.1 This clause is included in recognition of the mutual responsibility of the Union and the Employer for continuity of patient care. For the duration of this Agreement, the Union and its members will not cause, sanction, condone, take part in, or in any way directly or indirectly aid in any strike, sympathy strike, walkout, picketing, boycott, slowdown or stoppage of work, or any other interference whatever with the efficient operation and conduct of the Employer's business, or take any action whatever to prevent access of employees to the Employer's place of business. The Employer agrees that during this

same period there shall be no lockouts, nor shall any employees be required to perform other than usual duties.

ARTICLE 19 - GENERAL PROVISIONS

19.1 Unlawful Provisions. This Agreement shall be subject to all present and future applicable federal and state laws, executive orders of the President of the United States or the Governor of the State of Washington, and rules and regulations of governmental authority. Should any provision or provisions become unlawful by virtue of the above or by declaration of any court of competent jurisdiction, such action shall not invalidate the entire Agreement. Any provisions of this Agreement not declared invalid shall remain in full force and effect for the term of the Agreement. If any provision is held invalid, the Employer and Union shall enter into immediate collective bargaining negotiations for the purpose, and solely for the purpose, of arriving at a mutually satisfactory replacement for such provision.

19.2 Changes in Writing. Any changes or amendments to this Agreement shall be in writing and duly executed by the parties hereto.

19.3 Past Practices. Any and all agreements, written and verbal, previously entered into between the parties hereto are mutually canceled and superseded by this Agreement. Unless specifically provided herein to the contrary, past practices shall not be binding on the Employer. The Employer agrees that it will not make any changes in past practices that would have the effect of discriminating solely against members of the bargaining unit. The Employer will communicate any changes in past practices to the nursing staff in advance of the change.

19.4 Conclusion of Bargaining. The parties acknowledge that during the negotiations which resulted in this Agreement all had the unlimited right and opportunity to make demands and proposals with respect to any subject or matter not removed by law from the area of collective bargaining, 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. Therefore, the Employer and the Union, for the term of this Agreement, each voluntarily and unqualifiedly waives the right, and each agrees that the other shall not be obligated, to bargain collectively with respect to any subject or matter specifically referred to or covered in this Agreement. The parties further agree, however, that this Agreement may be amended by the mutual consent of the parties in writing at any time during its term.

ARTICLE 20 - TERM OF AGREEMENT

20.1 This Agreement shall be effective November 8, 2023 and shall continue in full force and effect through September 30, 2027, and shall continue in effect from year to year thereafter, unless written notice of desire to amend or terminate the Agreement is served by either party by certified mail upon the other no more than one hundred twenty (120) days and no less than ninety (90) days prior to date of expiration.

If written notice to amend or terminate is timely given, then this Agreement shall remain in effect until the terms of a new amended Agreement are agreed upon or until the date of expiration of the Agreement, whichever is earlier.

In the event of inadvertent failure by either party to give the notice set forth in this Article, such party may give notice of desire to terminate at any time prior to the termination date of this Agreement. If a notice is given in accordance with the provisions of this paragraph, the expiration date of this contract shall be the ninetieth (90th) day following such notice.

ARTICLE 21 – SUCCESSOR

21.1 This Agreement shall be binding upon any successor Employer including membership provisions, voluntary payroll dues deduction authorizations and voluntary political action fund deduction authorizations (i.e. SEIU-COPE program). A successor is to promptly transmit such deducted funds to the Union after closing of the business structure change. The Employer shall have the affirmative duty to call this provision to the attention of any successor organization. The Employer shall provide the Union with documentation that the successor has agreed to assume this Agreement at least sixty (60) days in advance of the business structure change.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement this

18th day of March, 2024.

**KAISER FOUNDATION HEALTH PLAN
of WASHINGTON**

SEIU HEALTHCARE 1199NW

Jocelynnne McAdory
Jocelynnne McAdory (Mar 26, 2024 16:34 PDT)

Jocelynnne McAdory
Vice President, Human Resources

Jane Hopkins
Jane Hopkins (Apr 8, 2024 15:24 PDT)

Jane Hopkins
President

Joe Killinger
Joe Killinger (Mar 18, 2024 15:19 PDT)

Joe Killinger
Director, Employee & Labor Relations

Robin Wyss
Robin Wyss (Mar 28, 2024 08:46 PDT)

Robin Wyss
Executive Vice President

SEIU HEALTHCARE 1199NW MEMBERS



Danielle Doyon McGovern
Lead Organizer, SEIU Healthcare 1199NW



Alanna Martin
Social Worker, Social Services, Capitol Hill



Alesha Hodge
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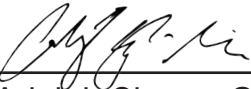


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Anesthesia Tech, Day Surgery- Pre/Post-Op, Capitol Hill



Alice Ambrose
Medical Assistant, OB, Capitol Hill

Amber Judd,
Medical Assistant, Primary Care, Kendall Yards



Arleigh Champ-Gibson
Spiritual Counselor, Hospice, South Region



Atalanta Pierre-Lewis
RN, Primary Care, Northgate



Carrie Burke
Medical Assistant, Primary Care, Silverdale



Cathy Jessup
PT, Physical Therapy, Burien



Christine Muña
EVS Tech, Environmental Services, Capitol Hill



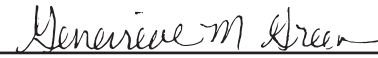
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Danna Burnett
Medical Assistant, Primary Care, Port Orchard



Emily Collins
RN, Day Surgery, Bellevue



Genevieve Green
Community Resource Specialist, Social Services, Kendall Yards



Gwendolyn Darks
Liaison RN, Discharge Planning



Jamie Vanden Bos
Medical Assistant, Primary Care, Silverdale, Contract Specialist



Jessica Wolfe
RN, Day Surgery- Recovery Room, Capitol Hill



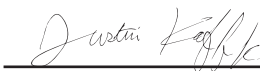
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Justin Kaffka
HUC, Day Surgery- Recovery Room, Capitol Hill



Katie Roman
Medical Assistant, Urgent Care, Riverfront

SEIU HEALTHCARE 1199NW MEMBERS



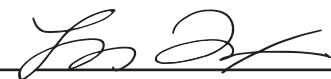
Kirsti Marsden
Medical Assistant, THMC



Laura Kilberg
RN, Urgent Care, Silverdale



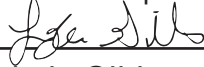
Laura Taylor
Medical Assistant, Neurology, Steele St



Laura Texera
Mental Health Access Coordinator, MHAC



Leslie Cohn
ARNP, Primary Care, Northgate
Contract Specialist



Lola Gibbs
RN, CHIPS, Capitol Hill

Lori Robertson
OT, Occupational Therapy, Home Health



Madison Overton
Visiting RN, Hospice



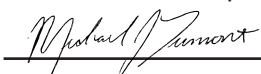
Makereta "Maggie" Vulaono
Medical Assistant, Primary Care, Capitol Hill



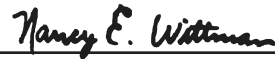
Marica Lloyd
Medical Assistant, Sports Medicine, Everett



Marie Neumayer
Medical Assistant, Primary Care, Spokane
Union Partnership Representative



Mike Dumont
MLT, Mental Health & Wellness, Tacoma



Nancy Wittman
RN, Consulting Nurse Services



Randy Steinhaus
MSW, Social Services, Rainier

Richard Ronquillo
Surgical Tech, Day Surgery, Tacoma



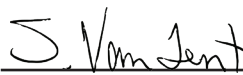
Carene "Rocky" Wilson
Ortho Tech, Orthopedics, Silverdale



Russell Campbell
EVS Tech, Environmental Services, Olympia



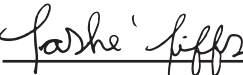
Sarah Pierani
RN, Injection Room, Port Orchard



Sheri Van Tent
SPD Tech, Sterile Processing, Bellevue



Tanya Ortigoza
LPN, Primary Care, Lynnwood



Tashe Tibbs
EVS Tech, Environmental Services travel Group,
Kitsap



Teri Murray
Liaison RN, Care Management
Union Partnership Representative

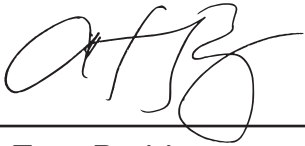


Theresa Lewis
Medical Assistant, GI, Bellevue



Tim Ma
PT, Physical Therapy, Bellevue
Union Partnership Representative

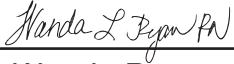
SEIU HEALTHCARE 1199NW MEMBERS



Tony Rodriguez
RN, Urgent Care, Bellevue



Tupi Maestas
RN, Interventional Radiology, Capitol Hill



Wanda Ryan
RN, Primary Care, Federal Way



Wendy Rychwalski
ARNP, Primary Care, Northgate

ARTICLE 22 – ADDENDUMS

7/70 ALTERNATIVE STAFFING PATTERN

- I. All Registered Nurses assigned to work within a 7/70 staffing pattern have agreed to so work on a voluntary basis recognizing that it is a new and innovative staffing pattern within KFHPWA.
 - a. Full-time Employee: A Registered Nurse who has completed the initial hiring probationary period and is regularly scheduled to work seventy (70) hours within two (2) consecutive seven- (7) day workweeks consisting of four (4) ten-hour days in one (1) workweek followed by three (3) ten- (10) hour days in the next work week. Such employee shall receive full benefits to include: medical, surgical, and hospital insurance, including Employer-paid dependent coverage, subject to co-payments and premiums as set forth in this Agreement; Employer-paid portion of life insurance when eligible; employee-paid accident insurance; dental insurance, Employer-paid to the extent designated in the KFHPWA/1199NW Employment Agreement; and the KFHPWA Employee's Retirement Plan.
 - b. Part-time Employee: A Registered Nurse who is regularly scheduled on a continuing basis to work less than seventy (70) hours in ten- (10) hour shifts within two (2) consecutive seven- (7) day workweeks. Such an employee shall be compensated in the same manner as a full-time employee except that wages and benefits would be prorated in proportion to the employee's actual hours worked and consistent with the KFHPWA/SEIU Healthcare 1199NW Employment Agreement. Part-time employees may also have the option of 15% salary premium in lieu of benefits, as described in the KFHPWA/SEIU Healthcare 1199NW Employment Agreement.
- II. 7/70 Registered Nurses assigned charge nurse responsibilities shall be paid the charge nurse differential.
- III. 7/70 Registered Nurses shall be paid overtime compensation at the rate of one and one-half (1½) times the regular rate of pay for all time worked beyond ten (10) hours in one (1) work day or any hours worked beyond forty (40) hours in one seven (7) day workweek or in excess of thirty (30) hours in the workweek consisting of three (3) ten- (10) hour shifts.
- IV. 7/70 Registered Nurses shall earn Paid Time Off benefits prorated based upon hours worked. In one (1) anniversary year, accrued Paid Time Off time shall be limited to one (1) period of seven (7) consecutive days off. Longer Paid Time Off periods may be granted on an individual request basis. The balance of accrued Paid Time Off shall be scheduled in a manner agreeable to both the employee and the Employer.
- V. 7/70 Registered Nurses unable to continue working the 7/70 staffing pattern and whose performance has been satisfactory shall be guaranteed the first available position for which the employee is qualified within KFHPWA.

- VI. Registered Nurses will not be required to work on their regularly scheduled days off. Anytime worked on a voluntary basis shall be paid at time and one-half (1½) their regular rate of pay.
- VII. Provisions of the KFHPWA/SEIU Healthcare 1199NW Employment Agreement inconsistent with the foregoing are hereby superseded with respect to the Registered Nurses working the 7/70 staffing pattern. The provisions of this Addendum shall be subject to renegotiation simultaneous with the KFHPWA/SEIU Healthcare 1199NW negotiations.

IT IS FURTHER AGREED AND UNDERSTOOD that it shall continue to be the goal of KFHPWA and SEIU Healthcare 1199 NW to encourage innovation in all areas of the nursing profession consistent with quality patient care and the needs of the individual nurse; and further that KFHPWA and SEIU Healthcare 1199 NW will continue to work together toward their mutual achievement of that goal.

9/40 ALTERNATIVE STAFFING PATTERN

- I. When mutually agreeable to the Employer and employee, an alternative schedule may be utilized consisting of four (4) nine (9) hour days and one four (4) hour day in one (1) work week, or four (4) nine (9) hour days only in one (1) work week.
- II. 9/40 employees shall be paid overtime compensation at the rate of one and one-half (1½) times the regular rate of pay for all time worked beyond nine (9) hours in one (1) day or any hours worked beyond forty (40) hours in a seven (7) day period.
- III. Full-time and part-time employees working the 9/40 schedule shall participate in the Paid Time Off plan as outlined in Article 10 of this agreement.
- IV. 9/40 employees unable to continue working the 9/40 staffing pattern and whose performance has been satisfactory shall be guaranteed the first available position for which the employee is qualified within KFHPWA.
- V. Provisions of the KFHPWA/SEIU Healthcare 1199NW Employment Agreement inconsistent with the foregoing are hereby superseded with respect to the employees working the 9/40 staffing pattern. The provisions of this addendum shall be subject to renegotiation simultaneous with the KFHPWA/SEIU Healthcare 1199NW negotiations.

10/40 ALTERNATIVE STAFFING PATTERN

- I. All Registered Nurses assigned to work within a 10/40 staffing pattern have agreed to so work on a voluntary basis recognizing that it is a new and innovative staffing pattern within KFHPWA.
- II. Shift differentials per Article 8.5 will apply.

- III. 10/40 Registered Nurses assigned charge nurse responsibilities shall be paid the charge nurse differential.
- IV. 10/40 Registered Nurses shall be paid overtime compensation at the rate of one and one-half (1½) times the regular rate of pay for all time worked beyond ten (10) hours in one (1) day or any hours worked beyond forty (40) hours in a seven(7) day work-week.
- V. Full-time and part-time nurses working the 10/40 schedule shall participate in the Paid Time Off plan as outlined in Article 10 of this agreement.
- VI. 10/40 Registered Nurses unable to continue working the 10/40 staffing pattern and whose performance has been satisfactory shall be guaranteed the first available position for which the employee is qualified within KFHPWA.
- VII. The 10/40 staffing pattern may be utilized in patient care units within KFHPWA with the consent of the individual employee affected. The Union will be notified in advance of such changes in staffing patterns.
- VIII. Full-time Registered Nurses will not be required to work on their regularly scheduled days off. Any time worked on a voluntary basis shall be paid at time and one-half (1½) their regular rate of pay.
- IX. Provisions of the KFHPWA/SEIU Healthcare 1199NW Employment Agreement inconsistent with the foregoing are hereby superseded with respect to the Registered Nurses working the 10/40 staffing pattern. The provisions of this addendum shall be subject to renegotiation simultaneous with the KFHPWA/SEIU Healthcare 1199NW negotiations.

IT IS FURTHER AGREED AND UNDERSTOOD that it shall continue to be the goal of KFHPWA and SEIU Healthcare 1199NW to encourage innovation in all areas of the nursing profession consistent with quality patient care and the needs of the individual nurse; and further that KFHPWA and SEIU Healthcare 1199NW will continue to work together toward their mutual achievement of that goal.

TWELVE-HOUR INNOVATIVE WEEKEND SCHEDULE

- I. All registered nurses assigned to work two (2) twelve (12) hour weekend shifts every weekend have agreed to do so on a voluntary basis recognizing that it is a new and innovative staffing pattern within KFHPWA. The weekend shall be defined as hours between 7:00 AM Saturday and 7:00 AM Monday.
- II. A registered nurse regularly scheduled to work twenty-four (24) hours within a seven- (7) day period shall be compensated for thirty-six (36) hours of pay. Such employees shall receive the following benefits: medical, surgical, and hospital insurance, including Employer-paid dependent coverage, subject to co-payments and premiums as set forth in this Agreement; employer-paid portion of life insurance when eligible, long-term disability pursuant to the conditions of the plan, employee paid accident insurance; Employer-paid dental including dependent coverage to the extent designated in the KFHPWA/SEIU Healthcare 1199NW Employment Agreement; and the

KFHPWA Employee's Retirement Plan. Registered nurses working a twelve- (12) hour weekend innovative shift shall accrue Paid Time Off prorated based on actual hours worked, according to the terms of the PTO plan in Article 10 with EIB accrual accumulating to a maximum of five hundred (500) hours. Other benefits not named herein shall be appropriately prorated.

- III. Twelve-hour weekend innovative shift nurses assigned charge nurse responsibilities shall be paid the charge nurse differential.
- IV. Meal and Rest Periods: All employees shall receive an unpaid Meal period of at least one-half ($\frac{1}{2}$) hour during each normal workday. Meal periods shall occur as near the middle of the shift as is practical. Employees required by the supervisor to remain in the working area during their meal period shall be compensated for such time at the appropriate rate of pay. All employees shall be allowed three (3) paid rest periods of fifteen (15) minutes each during each shift of twelve (12) hours or more duration. Rest periods may be taken on an intermittent basis. Employees who are not released for rest periods after requesting release from the supervisor or designee shall be paid for the missed rest period at the employee's regular rate of pay. The employee shall have the obligation of requesting relief on a timely basis.
- V. Registered nurses working an innovative twelve (12) hour shift shall be paid overtime compensation at the rate of one and one-half ($1\frac{1}{2}$) times the regular rate of pay for the first hour worked beyond twelve (12) hours in one (1) work day or any hours worked beyond forty (40) hours in a seven (7) day period. If a nurse works more than one (1) hour beyond the end of a scheduled shift all overtime hours for that shift will be paid at double-time. The workweek of each employee will be individually determined for purposes of calculating overtime.
- VI. The provisions of Article 7.6 (Weekend Work) shall not apply to nurses who voluntarily participate in the Twelve Hour Innovative Weekend Schedule.
- VII. Registered nurses will not be required to work on their regularly scheduled days off. Any time worked on a voluntary basis shall be paid at time and one-half their regular rate of pay after forty (40) hours in a seven- (7) day period.
- VIII. Registered nurses working this innovative schedule will be eligible for only those premiums specified in this addendum.
- IX. Registered nurses unable to continue working the twelve (12) hour staffing pattern and whose performance has been satisfactory shall be guaranteed the first available position for which the employee is qualified within KFHPWA.

TWELVE (12) HOUR ALTERNATIVE STAFFING PATTERN

- I. All Registered Nurses assigned to work within a twelve- (12) hour shift-staffing pattern have agreed to do so on a voluntary basis.

- a. Registered nurses assigned this schedule on or before June 8, 1998 regularly scheduled to work a total of seventy-two (72) hours in twelve- (12) hour shifts within two (2) consecutive seven (7) day periods will be compensated for eighty (80) hours of pay; also such employees shall receive full benefits including: holiday, paid educational/professional leave, emergency leave, medical, surgical, and hospital insurance, including Employer-paid dependent coverage, subject to co-payments and premiums as set forth in this Agreement; Employer-paid portion of life insurance when eligible; employee-paid accident insurance; dental, Employer-paid to the extent designated in the KFHPWA/1199 Northwest Employment Agreement, and the KFHPWA Employee's Retirement Plan. Registered nurses on the twelve (12) hour alternative staffing pattern shall accrue Paid Time Off prorated based on actual hours worked as described in the PTO Plan at Article 10; accrual accumulating to a maximum of five hundred (500) EIB hours.
 - b. All other full-time registered nurses assigned to twelve (12) hour schedules after June 8, 1998 are compensated only for the hours they work.
- II. Part time employee: A registered nurse who is regularly scheduled to work less than seventy-two (72) hours in twelve- (12) hour shifts in two (2) consecutive seven- (7) day periods. Wages and benefits for such employees would be prorated in a manner consistent with the terms described for full-time employees and consistent with KFHPWA/SEIU Healthcare 1199NW Employment Agreement. Employees who have a 0.45 FTE shall be treated as 0.5 for benefit purposes only. Paid Time Off accruals would be prorated in a manner consistent with the terms described for full-time employees. Part-time employees may also have the option of 15% salary premium in lieu of benefits, as described in the KFHPWA/SEIU Healthcare 1199NW Employment Agreement.
- III. Twelve (12) hour shift registered nurses assigned charge nurse responsibilities shall be paid the charge nurse differential.
- IV. Employees working the first shift (7:00am – 7:30pm) shall notify the employer two (2) hours in advance of the employee's scheduled shift if the employee is unable to report for duty as scheduled. Employees working the second shift (7:00pm - 7:30am) will notify the employer three (3) hours in advance of the employee's scheduled shift if the employee is unable to report for duty as scheduled. Failure to do so may result in loss of paid sick leave for that day. Prior to payment for sick leave, reasonable proof of illness may be required. Proven abuse of sick leave may, at the employer's option, be grounds for discharge.
- V. Meal and Rest Periods: All employees shall receive an unpaid meal period of at least one-half (½) hour during each normal workday. Meal periods shall occur as near the middle of the shift as is practical. Employees required by the supervisor to remain in the working area during their meal period shall be compensated for such time at the appropriate rate of pay. All employees shall be allowed three (3) paid rest periods of fifteen (15) minutes each during each

shift of twelve (12) hours or more duration. Rest periods may be taken on an intermittent basis. Employees who are not released for rest periods after requesting release from the supervisor or designee shall be paid for the missed rest period at the employee's regular rate of pay. The employee shall have the obligation of requesting relief on a timely basis.

- VI. Registered Nurses working an innovative twelve (12) hour shift shall be paid overtime compensation at the rate of one and one-half times the regular rate of pay for the first hour after the end of the shift or any hours worked beyond forty (40) hours in a seven (7) day period. If a nurse works more than one (1) hour beyond the end of a scheduled shift all overtime hours for that shift will be paid at double-time (2x). The workweek of each employee will be individually determined for the purposes of calculating overtime.
- VII. Registered Nurses will not be required to work on their regularly scheduled day off. Any time worked on a voluntary basis shall be paid at time and one-half (1½) their regular rate of pay after forty (40) hours in a seven- (7) day period.
- VIII. Registered Nurses unable to continue working the twelve (12) hour staffing pattern and whose performance has been satisfactory shall be guaranteed the first available position for which the employee is qualified with KFHPWA.
- IX. The Employer will make a good faith effort to provide each employee with eleven (11) hours and thirty (30) minutes off duty between shifts. In the event an employee is required to work with less than eleven (11) hours thirty (30) minutes off duty between shifts, all time worked within this eleven (11) hour thirty (30) minute period shall be paid at one and one-half (1½) times the regular rate of pay.
- X. Provisions of the KFHPWA/SEIU Healthcare 1199NW Employment Agreement inconsistent with the foregoing are hereby superseded with respect to the Registered Nurses working the twelve- (12) hour staffing pattern. The provisions of this Addendum shall be subject to renegotiations simultaneous with the KFHPWA/SEIU Healthcare 1199NW negotiations.

It is further agreed and understood that it shall continue to be the goal of KFHPWA and SEIU Healthcare 1199NW to encourage innovation in all areas of the nursing profession consistent with quality patient care and the needs of the individual nurse and further that KFHPWA and SEIU Healthcare 1199NW will continue to work together toward their mutual achievement of that goal.

HOME HEALTH & HOSPICE- AFTER HOURS CARE/VISITING SERVICES

I. Reimbursement and safety provisions

- a. Visiting nurses shall be reimbursed for the business use of their personal automobiles at the IRS rate. The Employer will make a good faith effort to have the automobile reimbursement check available each pay period

contingent upon submission of required recordkeeping within Home Health & Hospice time standards.

- b. Regular employees assigned a 0.75 FTE or greater will be eligible for the full cost of an AAA "Plus" membership after six (6) months of regular employment. Regular employees assigned an FTE less than 0.75 FTE will be eligible for one half (1/2) the cost of a membership after six (6) months of employment. This policy is subject to administrative procedures or requirements as established by the Employer.
- c. Cellular phones will be provided to staff for purposes of coordinated, efficient care delivery and employee and patient safety.
- d. Visiting nurse calls to consumers and computer laptop transfer time will be considered as time worked. Overtime shall be paid for consumer calls and transfers consistent with Article 7.4 and this addendum.
- e. Flexible Schedule. Where there is mutual agreement between an employer and her/his manager based on an employee-initiated request, Overtime under Article 7.4 will be based solely on time worked beyond forty (40) hours in the normal work period. This provision is intended to respond to the individual visiting nurses who desire greater flexibility in managing their workday while satisfying the Employer's legal obligation around the required payment of overtime compensation.
- f. Article 7.5 addressing Rest Between Shifts does not apply to Home Health and Hospice clinical staff.
- g. Compensation on a Per Visit Basis. The Employer may establish, subject to the Union's agreement on the terms, a pay per visit compensation plan for temporary employees. Participation by the visiting nurse will be voluntary. The Plan will be evaluated for cost effectiveness, impact on availability of relief coverage, and patient care considerations through the Nurse Practice Committee.

II. After Hours Coverage

- a. Regular employee/FTE designation- The After Hours Coverage position is a regular position established to provide phone support and home visits between the hours of 4:30 pm and 8:30 am. FTE designation for employees in the After Hours Coverage position will be determined on the basis of the number of sixteen (16)-hour shifts during which an employee must be available for duty, on an on-call basis, within a seven (7)-day week: An employee who must be available for four (4) shifts per week will be classified as a 1.0 FTE; an assignment of three (3) shifts per week will equal a 0.75 FTE, etc.
- b. Availability- The After Hours Coverage employee shall be available on an on-call basis to respond to patient calls via pager throughout the shift. Employees may engage in non-work related activities as long as they are

prepared to respond to calls “fit for duty”, and ready to make home visits as required.

- c. Staffing Levels- The Employer will determine the number and FTE of regular employees needed to best meet patient care needs.
- d. Actual Hours Worked- For purposes of tracking actual hours worked within the On-Call shift, the following activities are included:
 - i. Home visits, to include time spent for delivery of services at the home, travel time to and from the patient’s home, documentation time and related phone calls.
 - ii. Phone calls, to include time spent responding to pager, talking to patients, related phone calls and documentation.
 - iii. Time spent during the shift for case conferences, meetings with supervisors and training as required by the Employer.
- e. Compensation- In lieu of receiving any stand-by pay under Article 8.6, the After-Hours Coverage employees will be compensated as described in this Addendum.
 - i. An employee who is on-call for a full sixteen- (16) hour shift shall be paid:
 - 1. A flat payment equal to ten (10) hours pay at the contractual straight-time rate, regardless of the number of hours actually worked; and
 - 2. For any hours actually worked in excess of ten (10) hours during the shift, overtime as described in paragraph 6.
 - 3. Shift 3 differential for the ten (10) hours flat payment for the On-Call shift, as well as for any hours of overtime incurred by providing patient care activities before, during or after the shift.
 - ii. An employee who is on call for less than a full sixteen- (16) hour shift shall be paid:
 - 1. A flat payment, at the contractual straight-time rate, equal to the number of hours on-call multiplied times 0.625, regardless of the number of hours actually worked;
 - 2. For any hours actually worked in excess of ten (10) hours during the partial shift, overtime as described in paragraph 6;
 - 3. Shift 3 differential for the flat payment hours and any overtime worked.
- f. In addition, Employees will be paid the contractual straight time rate per hour worked in the following situations:
 - i. Staff meetings, training, conferences, etc. outside of the On-Call shift hours.
 - ii. Unscheduled hours for covering high volume situations.

- g. Overtime- In lieu of receiving overtime under Article 7.4, After Hours Coverage employees will be compensated at the rate of one and one-half ($1\frac{1}{2}$) times their regular rate of pay for:
 - i. All hours of actual work in excess of ten (10) within the On-Call shift of 4:30 p.m. to 8:30 a.m.
 - ii. All hours of patient care activities before or after the sixteen (16) hour On Call shift
 - iii. All time worked beyond the normal work week as defined in Article 7.2.
- h. Weekend Premium (WEP) – For After Hours Coverage staff, the weekend is defined as 12:00 a.m. Saturday through 11:59 p.m. on Sunday. WEP will be paid as follows:
 - i. The shift starting Friday at 4:30 p.m. has 8.5 hrs x .625 = 5.25 hours of WEP pay (12:00 a.m. to 8:30 a.m.).
 - ii. The shift starting Saturday at 4:30 p.m. has 10 hours of WEP pay (4:30 p.m. to 8:30 a.m.).
 - iii. The shift starting Sunday at 4:30 p.m. has 7.5 x .625 = 4.75 hours of WEP pay (4:30 p.m. to 11:59 a.m.).
- i. Holidays- In lieu of Articles 9.3, 9.6, 9.7 & 9.8, for After Hours Coverage staff, holidays are defined as 12:00 a.m. to 11:59 p.m. on the calendar date of the holiday. The hours paid during the defined holiday hours of the shift will be paid as Holiday Worked pay (HOW).
 - i. The shift starting at 4:30 p.m. the day before the holiday will be paid:
 - 1. 4.75 hours of straight time for the hours of 4:30 PM-11:59 PM (7.5 hrs x .625)
 - 2. 5.25 hours of HOW pay for the hours of 12:00 AM to 8:30 AM. (8.5 hrs x .625)
 - ii. The shift starting at 4:30 P.M. on the calendar date of the holiday will be paid:
 - 1. 4.75 hours of HOW pay for the hours of 4:30 PM to 11:59 PM (7.5 hours x .625)
 - 2. 5.25 hours regular pay for the hours of 12AM to 8:30 AM. (8.5 hrs x .625)
- j. Relief Coverage- An employee who provides relief coverage for After Hours Coverage staff will be paid in the same manner as the After-Hours Coverage staff according to this addendum.
 - i. Relief Coverage Assignment- In order to minimize the occasions and circumstances when it is necessary to assign other HH/HP employees to provide relief coverage for after-hours care, the Employer will seek relief coverage in the following order of priority:
 - 1. Employees working under this Addendum.
 - 2. Regular or temporary employees trained to work the sixteen (16) hour shift for after-hours care as provided for under this Addendum.
 - 3. Standby coverage: When KFHPWA identifies an urgent care need, and when coverage under (a) and (b), is not available, competent, daytime employees will be needed to provide standby coverage for after-hours care. Volunteers

will be sought initially, with assignment on a rotating basis in inverse order of seniority the last option. Employee providing standby coverage will be paid according to article 8.6 of this agreement.

- k. Other Provisions- All other provisions of the KFHPWA/1199NW Agreement not inconsistent with this Agreement shall otherwise apply.

OTHER:

1) Chemically impaired nurse. The Employer and the Union recognize that alcoholism and chemical dependency are acknowledged to be chronic, treatable medical conditions. The Employer and the Union support efforts which will enable the chemically impaired nurse to remain in professional nursing practice so long as performance expectations are maintained. In recognition of this mutual interest, the Employer and Union support such efforts as:

- a) Identification of the disease as well as the establishment of treatment options at an early stage to prevent or minimize erosion in work performance.
- b) Participation in programs and services through which employees may seek confidential assistance and treatment in the resolution of chemical dependency problems.
- c) Participation in the State Board of Nursing Substance Abuse Monitoring Program, including individually tailored return to work agreements.

The Employer further acknowledges that alcoholism and chemical dependency are health conditions for which the employee is eligible to use accrued PTO and/or health leave of absence under the same terms as other health conditions. It is the intention of the Employer to work with an employee to adjust their work schedule on an ad hoc or temporary basis to support the chemically dependent employee's participation in prescribed treatment programs. The Employer and the Union acknowledge that employees continue to be responsible for their job performance and compliance with the Employer's policies and procedures and improvement of any unsatisfactory performance.

2) Dependent Care. The Employer shall bring any changes to the Bright Horizons backup childcare/eldercare benefit to the Benefits Committee for union discussion and input prior to implementation.

3) Membership Growth. The parties are committed to joint work in growing KFHPWA membership.

4) Labor Management Partnership. The parties are committed to the success of the LMP in KFHPWA.

EXHIBIT A: Charge Responsibilities and Requirements

The charge nurse plays an important role in providing leadership within the department and facilitating the delivery of effective, efficient, and safe care to our patients. The charge role may include, but is not limited to, the responsibilities and requirements specified below. Designation is appropriate when the nurse is assigned a substantial portion of these recognized responsibilities for groups of patients. There may be limited cases where certain responsibilities are not applicable or needed. Management should communicate to the nurse which responsibilities are being assigned at the time of designation.

SPECIFICATIONS	CLARIFICATIONS
CHARGE RESPONSIBILITIES • Monitors workflow, prioritizes and directs activities including task assignments of other employees in the department. • Coordinates staff assignments to meeting daily workflow or staffing coverage. This includes coverage for meal/break periods, staffing shortages, extended hours, or other urgent staffing gaps. • Ensures standard work, quality assurance, and service excellence initiatives, are performed in the department/unit. • May assist in the planning and implementation of training/education of new procedures, annual education/competencies, and/or technologies. • Facilitates information flow between management, staff, and other departments. May include reporting department, patient care, employee, or systems-related issues to management in a timely manner. • Participates in staff meetings, and in cooperation with manager, identifies agenda items. Under the guidance of the manager may conduct or participate in specific meetings with nursing personnel or broader service line. • Provides coaching, mentoring to employees for clinical skill development/performance of clinical responsibilities. • Provides feedback to employees and manager about performance, as appropriate. • Recognizes and intervenes with employee performance problems that require immediate attention utilizing manager, as appropriate. • Assists in ongoing departmental needs assessment planning. • Assists in resolution of consumer complaints/problems. Identifies and reports to the manager urgent risk management issues.	All staff, in the ordinary course of their responsibilities, are expected to participate in/contribute to problem-solving. All staff, in the ordinary course of their responsibilities, are expected to participate in/contribute to the orientation process. (See Preceptor role definitions)

Ensures all reporting is complete, including unusual occurrences, if applicable.	
CHARGE REQUIREMENTS • Ability to coordinate, instruct, and monitor work of others. • Ability to model KP standards, including customer service, reliability, collaboration, and other Core Behaviors. • Promotes teamwork, attention to detail, problem-solving, and good judgement. • Proficient in teaching and coaching. • Proficient in communication skills, including providing feedback and peer-to-peer conflict resolution. • Utilizes resources in an effective and cost-effective manner which provides safe patient care and supports the departmental budget plan. • Willing to serve in the Charge role • Performing current job responsibilities, including KP Service and Behavior Expectations, at an acceptable level • Conducts all aspects of leadership role in a fair, consistent and objective manner.	
MANAGER RESPONSIBILITIES • Assign Charge role to an eligible employee • Evaluation of Charge effectiveness • Initiate changes needed to issue Charge premium • Check in with Charge on status of team and operations.	Charge assignment remains at the discretion of management and may depend on additional factors including, but not limited to, consistent managerial presence, complexity of procedures, and/or team size. Charge assignments may be temporary, ongoing or on a rotational basis.

EXHIBIT B: Preceptor Responsibilities and Requirements

A preceptor is an experienced employee who has completed identified in-service programs or the equivalent, who is proficient in clinical teaching and communications skills, and is assigned by the Employer the responsibility for training other employees and/or students in Employer specified training programs. The Preceptor role may include, but is not limited to, the responsibilities and requirements noted below.

SPECIFICATIONS	CLARIFICATIONS
PRECEPTOR RESPONSIBILITIES • Plan, organize, oversee and evaluate an individual's onboarding to department in accordance with written onboarding plan • Deliver specific, criteria-based and goal-directed education and training in accordance with the onboarding plan or a Student Learning Agreement developed with a partner educational institution • Oversee completion of associated competency checklists • Complete required documentation • Check in with manager on progress, recommend adjustments as needed	An individual designated as needing precepting will have one Preceptor assigned. If the assigned Preceptor is unavailable for more than three days, the manager will assess the impact and, if needed, designate an alternate eligible employee to assume interim precepting responsibilities. The preceptor premium will shift from the assigned preceptor to the alternate when the alternate assumes the precepting duties. For the purpose of this document and the importance of this role, short-term assignments and shadowing with a current employee who is not the Preceptor, for the purpose of learning or observing a particular skill, process, or procedure, does not fit the definition of Preceptor. In the absence of the assigned preceptor for less than three days, when an alternate Preceptor is not assigned, the manager coordinates education, training, and shadowing opportunities, either based on the preplanned orientation plan or at their managerial discretion. All staff, in the ordinary course of their responsibilities, are expected to participate in/contribute to the orientation process. (See definitions) A Lead or Charge may concurrently be designated as a Preceptor.
PRECEPTOR REQUIREMENTS • Experienced employee, at or above the licensure level of the individual who will be precepted • Performing current job responsibilities, including KP Service and Behavior Expectations, at an acceptable level • Proficient in clinical teaching	The required Preceptor class is offered regularly by the Employer. In addition, an on-line alternative is available on demand. The requirement is intended to • support the Preceptor's success in this important role

• Proficient in communication skills, including providing feedback • Completion of a preceptor in-service program or equivalent, designated by the Employer • Willing to serve in the Preceptor role • Available for the duration of the precepting period	• ensure a common positive experience for the individuals being precepted Employer will provide verification of completion. It is the responsibility of the employee to maintain verification of course completion. It is recommended that a copy be saved by the local management or administration team. Where there is no documentation available for prior completion, a test-out option will be available. Employees who pass will not have to take the class in order to be assigned/paid for Preceptor responsibilities. Employees will be paid for taking the class, whether in person or online. Every effort will be made to adjust the employee's schedule so the class can be taken during regular work time. If this is not possible, and the class is outside the regular work schedule, standard pay rates shall determine whether pay for class time is at regular or overtime rates.
MANAGER RESPONSIBILITIES • Determine which individuals need precepting, and the duration required • Assign Preceptor role to an eligible employee • Approve the content of the onboarding, education and training plan • Confirm completion of documentation and associated competency checklists • Initiate changes needed to issue preceptor premium for the duration of the precepting period • Check in with Preceptor on progress, adjust plan or time frame for completion as needed	Based on prior experience, knowledge and skill, a manager may determine that an individual does not need formal precepting. The precepting period for a designated employee, resident or student will be determined by the Manager.
DEFINITIONS • <u>Precepting</u>: Planning, organizing and implementing the onboarding process for an individual to department workflows, service standards and clinical competencies. Includes coordination and delivery of specific criteria-based and goal-directed training, oversight of general orientation, provision of feedback, and evaluation of the individual's ability to demonstrate the required standards and competencies. • <u>Orientation</u>: Providing basic instruction and written information for specific tools, processes, workflows or tasks. Includes	IT system training, including Health Connect (formerly Epic), is provided centrally for all employees who need to use it. Learning about department-specific practices regarding these systems is considered orientation and should be incorporated into the onboarding plan.

providing informational assistance, support and guidance as needed. This does not constitute precepting. • <u>Job Shadowing</u>: Allowing an individual to observe as work is being performed. Simple explanations may be provided. This does not constitute precepting. • <u>Resident</u>: An individual whose clinical experience after graduation is less than six months or who is returning to practice with no current clinical training or experience. A Resident shall have limited responsibilities and be provided close oversight by an assigned Preceptor during the residency and associated precepting period. • <u>Preceptor Appropriate Student</u>: An individual who is still in school and is required to complete specified experiential learning in order to graduate. The required training, competency demonstration and time frames are specified in an agreement between the school and the Employer. A Preceptor may be assigned to implement the learning experiences and evaluate the individual against the designated criteria throughout the precepting period.	
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**Letter of Agreement
By and Between
Group Health
And
SEIU 1199NW
Regarding Consulting Nurse 12 Hour Alternative Weekend Staffing Pattern**

I. All Registered Nurses assigned to work within a twelve- (12) hour alternative staffing pattern have agreed to do so on a voluntary basis. Registered nurses assigned this schedule regularly scheduled to work a total of seventy-two (72) hours in twelve- (12) hour shifts within two (2) consecutive seven (7) day periods will be compensated for eighty (80) hours of pay; also such employees shall receive full benefits including: holiday, paid educational/professional leave, emergency leave, medical, surgical, and hospital insurance, including Employer-paid dependent coverage, subject to co-payments and premiums as set forth in this Agreement. Employer paid portion of life insurance when eligible; employee-paid accident insurance; dental, Employer-paid to the extent designated in the Group Health/1199 Northwest Employment Agreement, and the Group Health Employee's Retirement Plan. Registered nurses on the twelve (12) hour alternative staffing pattern shall accrue Paid Time Off prorated based on actual hours worked as described in the PTO Plan at Article 10; accrual accumulating to a maximum of one thousand (1000) EIB hours.

Registered nurses assigned this schedule will be expected to work each weekend of the pay period- either Friday, Saturday, Sunday OR Saturday, Sunday, Monday. Weekend differential shall apply.

II. Meal and Rest Periods: All employees shall receive an unpaid meal period of at least one-half ($\frac{1}{2}$) hour during each normal workday. Meal periods shall occur as near the middle of the shift as is practical. Employees required by the supervisor to remain in the working area during their meal period shall be compensated for such time at the appropriate rate of pay. All employees shall be allowed three (3) paid rest periods of fifteen (15) minutes each during each shift of twelve (12) hours or more duration. Rest periods may be taken on an intermittent basis. Employees who are not released for rest periods after requesting release from the supervisor or designee shall be paid for the missed rest period at the employee's regular rate of pay. The employee shall have the obligation of requesting relief on a timely basis.

III. Registered Nurses working an innovative twelve (12) hour shift shall be paid overtime compensation at the rate of one and one-half times the regular rate of pay for the first hour after the end of the shift or any hours worked beyond forty (40) hours in a seven (7) day period. If a nurse works more than one (1) hour beyond the end of a scheduled shift all overtime hours for that shift will be paid at double-time (2x). The workweek of each employee will be individually determined for the purposes of calculating overtime.

IV. Registered Nurses will not be required to work on their regularly scheduled day off. Any time worked on a voluntary basis shall be paid at time and one half ($1\frac{1}{2}$) their regular rate of pay after forty (40) hours in a seven- (7) day period. Registered nurses who work this pattern will not be required to work holidays that fall on their regularly scheduled days off but may volunteer to work those holidays if it is mutually agreed. Depending on the department holiday scheduling practice, they may be required to work on holidays that occur on their regularly scheduled days to work.

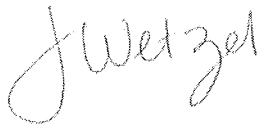
V. Registered Nurses unable to continue working the twelve (12) hour staffing pattern and whose performance has been satisfactory shall be guaranteed the first available position for which the employee is qualified with Group Health.

VI. The Employer will make a good faith effort to provide each employee with eleven (11) hours and thirty (30) minutes off duty between shifts. In the event an employee is required to work with less than eleven (11) hours thirty (30) minutes off duty between shifts, all time worked within this eleven (11) hour thirty (30) minute period shall be paid at one and one-half (1½) times the regular rate of pay.

VII. Provisions of the Group Health /SEIU Healthcare 1199NW Employment Agreement inconsistent with the foregoing are hereby superseded with respect to the Registered Nurses working the twelve- (12) hour staffing pattern. The provisions of this Addendum shall be subject to renegotiations simultaneous with the Group Health /SEIU Healthcare 1199NW negotiations.

It is further agreed and understood that it shall continue to be the goal of Group Health and SEIU Healthcare 1199NW to encourage innovation in all areas of nursing profession consistent with quality patient care and the needs of the individual nurse and further that Group Health and SEIU Healthcare 1199 NW will continue to work together toward their mutual achievement of that goal.

Signed and agreed to this 15th day of April, 2014.



Jenny Wetzel
GH Employee and Labor Relations



Phoebe Rounds
SEIU 1199NW

**Letter of Understanding
By and Between
Group Health and SEIU Healthcare 1199NW**

Regarding NHS ARNP Temporary Afterhours Coverage

This Letter of Understanding delineates the mutual agreement between Group Health (Employer) and SEIU Healthcare 1199NW (Union) regarding compensation and assignment of ARNPs for afterhours call coverage. The Employer and Union agree to the following:

Coverage for on-call shifts will be handled in the following order:

- 1) MDs will retain their current call coverage responsibilities
- 2) ARNPs will retain their current call coverage (weekdays 5p-8p, 8a-5p Official GH Holidays)
- 3) Locum MD providers will be utilized to fill additional call coverage needs.
- 4) Volunteer ARNPs (FTEd and TPT) will be sought and assignments will be awarded on a first come first serve basis.
- 5) If there are uncovered after hours assignments from 8p-8a Monday – Friday, and 5p-8a Saturday, Sunday, and 5p -8a Official GH Holidays, FTEd ARNPs will be assigned based on inverse seniority.

Compensation for after-hours call coverage:

To help ensure patient requirements are met, FTEd ARNPs may volunteer to perform the afterhours call assignment as specified below during weeknights, weekends and holidays. When performing such assignment, the ARNP shall be paid as follows:

- Flat rate compensation of \$600 for weekdays (Mon/Tues, Tues/Wed, Wed/Thurs, Thurs/Fri or Fri/Sat) afterhours call assignment from 8PM to 8 AM
- Flat rate compensation of \$800 for weekends (Sat/ Sun or Sun/Mon) afterhours call assignment from 5PM to 8 AM
- Flat rate compensation of \$800 for Official GH Holiday afterhours call assignment from 5PM to 8 AM

To help ensure patient requirements are met, TPT ARNPs may volunteer to perform the afterhours call assignment as specified below during weeknights, weekends and holidays. When performing such assignment, the ARNP shall be paid as follows:

- Flat rate compensation of \$690 for weekdays (Mon/Tues, Tues/Wed, Wed/Thurs, Thurs/Fri, or Fri/Sat) –afterhours call assignment from 8PM to 8 AM
- Flat rate compensation of \$920 for weekends (Sat/Sun or Sun/Mon) afterhours call assignment from 5PM to 8 AM

- Flat rate compensation of \$920 for Official GH Holliday afterhours call assignment from 5PM to 8 AM

When an ARNP fulfills an 8p-8a after hours assignment Sunday – Thursday, coverage will be arranged for the next day's patient care assignment as necessary.

FTEd ARNPs will receive their full salary in addition to flat rate for assigned call coverage shifts. Coverage for the next day's patient care responsibilities will not be charged as leave of any type.

The Employer will make every effort to put in place a sustainable call coverage plan within 6 months of this agreement and the status of this temporary after hour's coverage will be reviewed at every NHS JLMC. If a permanent plan for this coverage is not in place within 6 months, the parties shall meet to renegotiate terms of this agreement moving forward.

The Employer and Union agree that this Letter of Understanding only applies to ARNPs working in NHS and is a one-time, non-precedent setting agreement.

Group Health Cooperative

SEIU Healthcare 1199NW

By: Carol Turbow

By: Phoebe R. Rouns

Date: 2/24/16

Date: 2/24/16

Nurse Practitioner After Hours Coverage Addendum - Nursing Home Services

a. Regular employee/FTE designation - The After Hours Coverage position is a regular position established to provide phone support between the hours of 5:00 pm and 8:00 am. FTE designation for employees in the After Hours Coverage position will be determined on the basis of the number of fifteen (15)-hour shifts during which an employee must be available for duty, on an on-call basis, within a seven (7)-day week: an assignment of four (4) shifts per week will be classified as a 1.0 FTE; an assignment of three (3) shifts per week will equal a 0.75 FTE, etc.

b. Availability - The After Hours Coverage employee shall be available on an on-call basis to respond to facility calls throughout the shift. Employees may engage in non-work related activities as long as they are prepared to respond to calls "fit for duty".

- i. Epic remote access is required

c. Actual Hours Assigned - For purposes of defining work assignment within the after hours call coverage shift, the following activities are included:

- i. Phone calls, to include time spent responding to pager, talking to facility staff, related phone calls and documentation; and
- ii. Time spent during the shift for meetings with supervisors and training as required by the Employer.
- iii. Unforeseen work assignments may include unscheduled hours for covering high volume situations, daytime staff unavailable to receive calls, high volume/unique calls that could not be finished prior to 8a for example

d. Compensation - Per Article 5.8, Nurse Practitioners, unless otherwise noted, are not eligible for Article 7.5 (Rest Between Shifts); Article 7.9 (Doubleback Pay); Article 8.5 (Shift Differential); Article 8.7 (Callback Pay); Article 8.8 (Work in Advance of Shift), Article 8.9 (Work on Day Off), Article 8.11 (Report Pay); Article 8.14 (Weekend Premium Pay); and Article 8.17 (Float Pool Premium).

In addition, in lieu of receiving any stand-by pay under Article 8.6, the After-Hours Coverage employees will be compensated as described in this Addendum.

An employee who is assigned for a full fifteen- (15) hour shift shall be paid: A flat payment equal to ten (10) hours pay at the contractual straight-time rate, regardless of actual hours worked.

An employee who is assigned for less than a full fifteen- (15) hour shift shall be paid: A flat payment, at the contractual straight-time rate, equal to the number of hours on-call multiplied times 0.67, regardless of actual hours worked.

e. Holidays - FTE'd After Hours ARNPs will be responsible to cover a determined amount of holidays based on FTE assignment.

- 1. Dedicated after hours call ARNP staff will also have a scheduled "night" off for each holiday assignment as per article 9.5 of the Group Health/SEIU 1199 contract
- 2. ARNP Daytime FTE'd staff will be assigned to remaining 8a-5p holiday shift on a rotational basis. They also shall receive a day off with pay as per article 9.5.

f. **Relief Coverage** - An employee who provides relief coverage for After Hours Coverage staff will be paid in the same manner as the After Hours Coverage staff according to this Addendum.

g. **Relief Coverage Assignment** - In order to minimize the occasions and circumstances when it is necessary to assign other Nursing Home Services employees to provide relief coverage for after-hours care, the Employer will seek relief coverage in the following order of priority:

1. Employees working under this Addendum.
2. Regular or temporary employees trained to work the 15 hour shift for after-hours care as provided for under this Addendum.
3. When Group Health identifies an urgent care need, and when coverage under (a) and (b), is not available, competent, bargaining unit employees will be needed to provide coverage for after-hours care. Volunteers will be sought initially, with assignment on a rotating basis in inverse order of seniority the last option.

h. **Other Provisions** - All other provisions of the Group Health/SEIU 1199NW Agreement not inconsistent with this Addendum shall otherwise apply.

Signed and agreed to this 25th day of May, 2016.

Group Health Cooperative

SEIU Healthcare 1199NW



By: _____



By: _____

Date: May 25, 2016

Date: 5/25/16

Letter of Understanding Re: SEIU Float Care Management Liaison Nurses PODs, Premium Pay, Short Notice Shift Guarantee, Commute Time, Travel Time, Mileage and Parking

PODs: Care Management Liaison Nurses (CMLNs) are specifically hired to “float” between a home rounded facility and sister facilities within a POD. On occasion, CMLNs may be assigned to a rounded facility outside of their designated POD to provide enhanced staffing. PODs are defined as:

- #1: St Joseph’s Tacoma (Home); St Peter’s Olympia (Sister)
- #2: St Joseph’s Tacoma (Home); Harrison (Sister)
- #3: St Peter’s Olympia (Home); St Joseph’s Tacoma (Sister)
- #4: Swedish (Home); Providence Everett (Sister)
- #5: Overlake (Home); Providence Everett (Sister)
- #6: Swedish (Home); Overlake (Sister)
- #7: CIA at ASB (Home); St. Joseph’s, Tacoma (Sister)

Premium Pay: CMLNs specifically hired to “float” between home and sister rounded facilities will be eligible for a \$2.50 per hour pay premium for the first shift of any “short notice deviation” from the previously assigned rounded facility or when working at a rounded facility outside their assigned POD.

Short Notice Shift Guarantee: “Short notice deviation” is defined as notice received on the same day of a change in rounded facilities or after 4:30 pm the day prior to the change in rounded facilities. A shift guarantee and premium pay will only be paid on the first shift and will be paid only to the extent that the CMLN is available to work until the scheduled end of the shift at the rounded facility.

Travel Time: Travel time is defined as travel between different work locations during the work shift. Travel time will be paid straight time pay and will count as hours worked for overtime purposes.

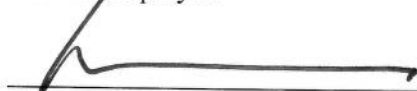
Commute Time: Commute time is travel from home to the first location of the workday. Commute time will not be paid when commuting within an assigned POD. Eligible commute time over 45 minutes will be paid at straight time, but does not count toward hours worked for overtime. MapQuest will be used unless applicable laws result in a calculation more favorable to the employee.

Mileage: Mileage will be calculated/ reimbursed based on mileage from the home rounded facility to the first assigned rounded facility for that day and from the final rounded facility of the day to the home facility. Additionally, mileage will be reimbursed for all travel between facilities during a work shift. Mileage reimbursement allowances will be paid in accordance with IRS guidelines consistent with Group Health policy. In all cases, Group Health’s mileage calculator will be used to determine mileage.

Parking: Parking will not be reimbursed if parking within an assigned POD.

Signed and dated this 7th day of November, 2016.

For the Employer:



Signature
Brett Hanson

For the Union:



Signature

**Memorandum of Understanding
Between
Kaiser Foundation Health Plan of Washington (“KFHPWA”)
and
Unions United, a coalition of unions at KFHPWA that includes
SEIU Healthcare 1199NW, UFCW Local 21, and OPEIU Local 8**

Medical Benefit

The parties to this Memorandum of Understanding (“MOU”) agree that KFHPWA will provide medical benefits to eligible union-represented staff in accord with the health plan design developed and agreed to by the parties during the Unions United Benefits Coalition bargaining which resulted in a comprehensive program to encourage overall employee wellness (“Wellness Works”). The health plan design for Wellness Works will be maintained through 2021 (See attached Appendix A) and will be incorporated in the Summary Plan Description (“SPD”).

The parties agree that union-represented employees who earn the required credits in each applicable year shall pay a premium that is less than the premiums paid by union-represented employees who do not participate in Wellness Works and earn the required credits. Premium costs for both participants and non-participants are set forth in Appendix B.

New Participants

Any union-represented employee entering the benefit plan after January 1 of any year will qualify for the lower participant rate for premiums paid in the following year. They do not need to complete their health screenings or take any other action. However, an employee on the benefit plan on or after October 1 of any given program year (October 1 – September 30) must complete the Wellness Works requirements for that year in order to receive the lower premium the following year. To qualify for the lower participant premium after this the employee must meet the credit requirements for the applicable year. The intent of this paragraph is that no employee would be required to complete all the activities in less than nine (9) months from entering the benefit plan.

Spousal/Domestic Partner Surcharge

Spouses/domestic partners of employees who decline coverage offered through the spouse’s employer may enroll in the KFHPWA plan through the employee at an additional premium cost of \$100 per month. The spousal/domestic partner surcharge will not apply under these conditions:

1. The employee’s spouse or domestic partner (DP) is not employed
2. The employee’s spouse or DP is employed and enrolls in their own employer’s coverage (coordination of benefits would take effect between both plans)
3. The employee’s spouse or DP is employed but his/her employer does not offer medical coverage
4. The employee’s spouse or DP is not eligible to receive medical coverage from his/her employer

The employee will be asked to attest that one of these conditions is true. The failure to provide the attestation will result in the surcharge being applied.

Appeal Process

KFHPWA will notify employees regarding whether they qualify for a lower participant rate by October 31, of every year. An employee wishing to appeal a determination must submit a written appeal to Human Resources department by 180 days from the date they were notified of their participant rate for the following year. Human Resources will notify employees of appeals decisions within 30 days.

The parties agree that from 2018 through 2021, the Wellness Works team will review and issue a decision in the first level of appeal for union-represented employees who challenge qualification for the lower participant premium. If the

Wellness Works team denies a first level appeal, an employee can request a second level review by the Appeals Committee. A request for a second level review must be submitted in writing to the Appeals Committee within 30 days of the employee's receipt of the first level decision. If the employee disagrees with the Appeals Committee's decision, then the employee may request a review by the third party determined by the Appeals Committee for a third level review. A request for a third level review must be submitted in writing to the Appeals Committee within 30 days of the employee's receipt of the second level decision. The decision of the third party shall be final and binding on the employee, the union that represents the employee, and KFHPWA. Notwithstanding the grievance and arbitration provisions of any collective bargaining agreement or the claims and appeals procedures set forth in the SPD, the appeal process set forth herein shall be the sole avenue for resolving any disputes regarding whether or not an employee qualifies for a lower participant premium.

The Appeals Committee will be comprised of 3 members from the union coalition, 3 members from the Administration, with alternates for each member, and a representative from Labor Relations, who will chair the committee and be the deciding vote in case of a vote that is tied. The Appeals Committee will review appeals at the second level based on the eligibility criteria of the Plan. At least 2 voting members (1 from union and 1 from Administration) and the Chair are needed for a quorum to hold a meeting.

Dental Plan

Dental plans and employee cost share percentages currently in place will continue through 2021.

Benefits Labor Management Committee

The parties agree to continue a Benefits Labor Management Committee ("BLMC") to meet at least quarterly to discuss issues related to medical and dental benefits. The BLMC will be comprised of employee representatives from all the bargaining units in the coalition in addition to union staff representatives. Management representatives will include the employee benefits manager, the wellness coordinator and KFHPWA Labor Relations representatives. The BLMC will review and provide input regarding various aspects of Wellness Works, including data relating to utilization and utilization trends, plan design and requirements and focused outcomes of containing costs. The BLMC will also review and provide input regarding dental renewals, plan design and cost.

Attendance and Absenteeism Committee

Within thirty (30) days of ratification, the parties agree to form an Attendance and Absenteeism Committee (AAC) to meet at least quarterly to discuss issues and identify best practices to improve attendance at KFHPWA. The goal of the committee is to support employee wellness and improve attendance through addressing the root causes of absenteeism. The AAC will be comprised of employee representatives from all the bargaining units in the coalition in addition to union staff representatives. Management representatives will include Human Resources, Providers and operational leaders. Areas of focus will include but are not limited to: identification of root causes of absenteeism, encouragement of appropriate uses of leave, creation of a toolkit to address holistic concerns, regular and standardized data-sharing regarding attendance, development of best practices for communication between managers and employees about their attendance status, improved wellness of employees, improved engagement, and additional opportunities around absenteeism.

Nondiscrimination

The parties agree that participation or non-participation in Wellness Works will not impact job performance evaluations, nor will there be any penalty or discrimination based upon participation or non-participation in the program.

Termination and Renewal

This MOU shall be in full force and effect until the expiration date of December 31, 2021, and shall continue in effect from year to year thereafter unless any party gives notice, in writing, no earlier than December 1, 2020 and no later than December 31, 2020 of its desire to terminate or modify such Agreement; provided that, in the event that any party serves written notice in accordance with this Section, any strike or stoppage of work after the expiration date shall not be deemed in violation of any provision of this Agreement, or any other provision of an existing collective bargaining agreement between the parties. It is anticipated that existing collective bargaining agreements between the parties will expire prior to the expiration of this MOU. The terms set forth in this MOU shall not be subject to bargaining during the negotiations for the collective bargaining agreements unless both parties agree in advance.

No later than March 30, 2021, any party to this agreement may terminate their participation in the Benefits Coalition and shall have the right to propose to modify existing terms or provisions of the health plan as provided in this MOU; and separate from any other agreements that may be reached.

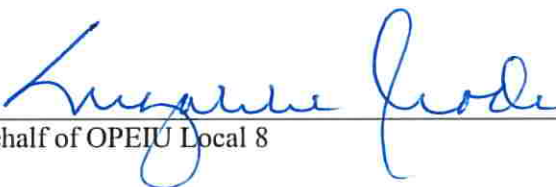
The parties to this agreement acknowledge the time-sensitive nature of implementing any successor agreements that would require health plan or wellness program changes in 2022. As a result, the unions and KFHPWA commit to completing negotiations by June 30, 2021.


On behalf of Kaiser Foundation Health Plan of Washington (KFHPWA)

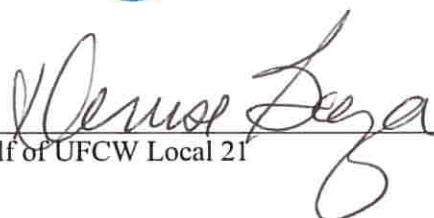
6/12/17
Date


On behalf of SEIU Healthcare 1199NW

6/15/17
Date


On behalf of OPEIU Local 8

6/12/17
Date


On behalf of UFCW Local 21

6-12-17
Date

Appendix A

Benefit Summary

Kaiser Foundation Health Plan of Washington (KFHPWA) – Wellness Works Union Plan

Group Number: 1206900/4206900

Effective Date: 1/1/2018

This is a brief summary of benefits based on current information, not to be mistaken for a contract or Certificate of Coverage. This summary is for general information purposes only. Based on final benefit determinations, KFHPWA reserves the right to modify, this summary, in whole or in part.

Benefits	Inside Network
Annual plan deductible	Employee pays \$100 individual /\$200 family
Plan coinsurance	No plan coinsurance
Annual Out-of-pocket limit	\$1,000 individual /\$2,000 family (all cost shares for covered services count towards this limit)
Lifetime maximum	Unlimited
Pre-existing condition (PEC) waiting period	No PEC
Office visit - primary	\$20 copay Includes, but is not limited to, family practice, general practice, internal medicine, nutrition, obstetrics & gynecology, occupational medicine, osteopathy, pediatrics, respiratory therapy, urgent care, and women's health care
Office visit - specialty	\$25 copay Includes, but is not limited to, allergy & immunology, anesthesiology, cardiology, critical care medicine, dentistry, dermatology, endocrinology, gastroenterology, genetics, hepatology, infectious disease, neonatal-perinatal medicine, nephrology, neurology, nematology/oncology, ophthalmology, ENT/otolaryngology, pathology, physiatry, podiatry, pulmonary medicine/disease, radiology (nuclear medicine/radiation), rheumatology, sports medicine, general surgery (all specific surgeries) and urology
Hospital services	Inpatient: \$100 copay, per admit Outpatient: \$50 copay
Prescription drugs (some injectable drugs may be covered under outpatient services)	\$15 generic/\$30 copay brand for 30-day supply Certain chronic condition medications (determined by KPHPWA) subject to a \$5 copay for 30-day supply
Prescription mail order	\$5 discount per 30 day supply. Copay waived for 90-day supply of certain chronic condition medications.
Ambulance services	Plan pays 80%, you pay 20%
Chemical dependency	Inpatient: \$100 copay, per admit
Devices, equipment, and supplies - Durable medical equipment - Orthopedic appliances - Post-mastectomy bras limited to two (2) every six (6) months - Ostomy supplies - Prosthetic devices	20% coinsurance, with cost shares waived for specific devices

Diabetic supplies	Insulin, needles, syringes and lancets – see prescription drugs External insulin pumps, blood glucose monitors, testing reagents and supplies – see devices, equipment and supplies. When devices, equipment and supplies or prescription drugs are covered and have benefit limits, diabetic supplies are not subject to these limits.
Diagnostic lab and x-ray services	Inpatient: covered under hospital services Outpatient: covered in full. \$50 copay for high-end imaging (MRI, CT, PET), up to \$200 maximum per calendar year. High-end radiology imaging services such as CT, MRI and PET must be medically necessary, and requires prior authorization except when associated with emergency or inpatient services.
Emergency services (copay waived if admitted)	\$100 copay at a designated facility \$150 copay at a non-designated facility
Hearing hardware	Plan pays \$300 per ear every 36 months
Manipulative therapy	Subject to office visit copay. Covered up to 10 visits per calendar year without prior authorization.
Massage services	See rehabilitation services
Maternity services	Inpatient: \$100 copay, per admit Outpatient: subject to office visit copay. Routine care not subject to copay.
Mental health	Inpatient: \$100 copay, per admit Outpatient: Covered in full for the first ten (10) visits, all additional visits are covered subject to the office visit copay.
Naturopathy	Subject to office visit copay. Covered up to 3 visits per medical diagnosis per calendar year without prior authorization; additional visits when approved by plan.
Organ transplants Donor search & harvest applies to lifetime max	Unlimited, no waiting period Inpatient: \$100 copay, per admit Outpatient: subject to office visit copay
Preventive care Well-care physicals, immunizations, pap smear exams, mammograms	Covered in full Women's preventive care services (including contraceptive drugs and devices and sterilization) are covered in full.
Rehabilitation services (occupational, speech, physical including services for neurodevelopmentally disabled children)	Inpatient: \$100 copay, per admit; 60 days per calendar year Outpatient: subject to office visit copay; 60 visits per calendar year Rehabilitation visits are a total of combined therapy visits per calendar year.
Skilled nursing facility	Covered in full, up to 60 days per calendar year
Sterilization (vasectomy, tubal ligation)	Inpatient: \$100 copay, per admit Outpatient: subject to office visit copay
Temporomandibular Joint (TMJ) services	Inpatient: \$100 copay, per admit Outpatient: subject to office visit copay Plan pays \$1,000 per calendar year; \$5,000 lifetime maximum
Tobacco cessation	Quit for Life program – covered in full
Optical hardware Lenses, including contact lenses and frames	Plan pays \$150 per 12 months

Appendix B

Wellness points and premium costs

Wellness Plan –The Wellness Works plan will focus on cardiovascular health (heart health). Key heart health factors are body mass index (BMI), blood pressure (BP), and tobacco use (nicotine). The Wellness Works Plan will provide medical premium discounts by earning points. The key areas of the plan are:

- Health Screenings
 - Health Assessments
 - Journeys
 - Points
 - Wellness Works Champions
 - Volunteer Activities
-
- **Health Screenings** – Health screenings will be an option for the employee to earn a discount on the medical plan premium. The screening will provide employees with their key numbers (BMI, BP and nicotine) to better manage their health. Healthy ranges are as follows:
 - **Nicotine** is no tobacco use
 - **Blood Pressure** is less than or equal to 140/90 mmHg
 - **BMI** is less than 30 or there is a 5% body weight loss from prior year's results.
- Screenings administered by a third party will be available annually at KFHPWA sites for convenience. Or, numbers can be verified by a provider by completing the *Health care provider form*.
- **Health Assessments** – To be eligible for a premium discount, employees are required to complete the online Health Assessment. The assessment gives a health score indicating potential for improvement and recommendations for action. The recommendations are called “Journeys”.
 - **Journeys** – Employee can earn points by taking a journey. A journey is a personalized online tool to help individuals engage in activities and track progress towards their health goals. Journeys focus on nutrition, weight management, physical activity and better management of chronic conditions.
 - **Points** - Employees will have an opportunity to qualify for a discount on medical plan premiums by earning points. One (1) point is equal to one dollar (\$1.00). The health assessment is required to be completed by the employee every year to be eligible for a discount.

Wellness Works Points Program

- Health Assessment required, plus:

Employees	
Activity	Points
Biometric screening	400
BMI – YoY improvement	100
BP – Healthy Factor	100
Health Assessment	200 (required)*
Tobacco non-user (self-report from the HA)	200
Journey (up to 3/year)	200/Journey
Track (earned for 300 on daily wellness meter)	8 per day (cap at 400 points)
Weight Watchers	200
Quit For Life	200
Wellness champion or Volunteer credit	200
Rally	Prize drawing
*get-what-you-earn model but must complete HA by EOY	
Total points available	2600
Maximum points earned	1200
Total incentive available	\$1200

Standard premium WITHOUT discount (2018-2021)

Employee only	\$130/mo.
Employee + spouse/partner	\$155/mo.
Employee + children	\$155/mo.
Family	\$185/mo.

Discounted premium after applying *MAXIMUM* points (2018-2021)

Employee only	\$30/mo.
Employee + spouse/partner	\$55/mo.
Employee + child	\$55/mo.
Family	\$85/mo.

[Below is the Medical Insurance article from each coalition union CBA, with amended language per this Memorandum of Understanding, underlined]:

OPEIU

Section 13.01 Health Insurance. The Employer shall provide its generally applicable employee medical, surgical and hospital services coverage for all regular employees from the first of the month following two (2) months of regular employment, subject to the conditions set forth in the Plan and subject to the employee's agreement to make the bi-weekly premium-share contribution. Medical, surgical and hospital services coverage shall be provided to employees assigned an FTE of .50 or greater. The Employer shall provide complete dependent coverage (including dependent children who are under the age of twenty-six (26) and are eligible to enroll in this plan) for regular employees assigned a .75 or more FTE. The Employer agrees not to reduce the current level of medical, surgical, and hospital services coverage for medical insurance under this Article during the term of this Agreement without negotiating with the Union. This shall include the conditions of co-payments and deductible. This commitment shall not apply to administrative (non-benefit) changes that may occur to the plan.

SEIU

12.1 Medical Insurance. The Employer shall provide a medical plan for eligible regular, full-time and part-time employees assigned 0.5 FTE or greater, effective the first of the month following two (2) months of continuous eligible employment. As an exception to this Article, employees enrolled in the medical plan as of January 22, 2005 who are 0.26 - 0.49 FTE shall not lose eligibility for coverage during the term of this agreement. Provided however, that if such an employee's FTE subsequently increases to 0.5 or above, the employee will become ineligible for coverage if his/her FTE later drops back below 0.5 FTE.

The Employer shall also provide family member coverage (including dependent children who are under the age of twenty-six (26) and are eligible to enroll in this plan) for regular employees assigned a 0.75 FTE or greater, subject to the employee's agreement to pay the required monthly premium cost share. Employees with a 0.5-0.74 FTE can enroll their eligible family members into the medical plan, subject to the employee paying the full cost of the family member's coverage.

UFCW

14.01 Health Insurance. The Employer shall provide medical, surgical and hospital services coverage for all regular full-time and part-time employees effective the first of the month following two (2) months of eligible employment. Medical, surgical and hospital services coverage shall be provided to employees assigned an FTE of .5 or greater. The Employer shall also provide dependent coverage (including dependent children who are under the age of twenty-six (26) and are eligible to enroll in this plan) for regular employees assigned a .75 or more FTE status, subject to the employee's agreement to pay the required monthly premium-share contribution.

Letter of Understanding
By and Between
Kaiser Foundation Health Plan of Washington and
SEIU Healthcare 1199NW - RN/ARNP Unit
Re: Home Infusion Therapy Travel Group Pods

Pods:

East King, Seattle, Snohomish: Everett, Bellevue, Capitol Hill (Home base; Everett, Bellevue, Capitol Hill)

Tacoma, Kitsap, Olympia: Tacoma Specialty, Silverdale, Olympia (Home Base; Tacoma)

HIT Travel Group: Bellevue, Capitol Hill, and Tacoma (Home Base: Capitol Hill or Bellevue)

The Home Infusion Therapy Travel Group is comprised of two pods, a north pod and a south pod. The North Pod is comprised of East King County and Seattle, and is considered a single work unit for the purpose of layoffs, vacation bidding, and job postings. The South Pod is comprised of the Tacoma, Kitsap, and Olympia pods and is considered a single work unit for the purpose of layoffs, vacation bidding and job postings. RNs assigned to the HIT Travel Group will be paid the additional float pool pay as outlined in 8.17 of SEIU/RN contract.

The following will apply to all Pod Assignments:

Commute Time: Commute time is defined as travel from home to the first location of the workday. Commute time does not count toward hours worked for overtime calculation. When travelling to locations within the pod, commute time will not be paid. The exception to this is that commute time over 45 minutes one way will be paid for all Pods. When commuting to locations outside the pod, all commute time over 45 minutes one way will be paid at straight time. The Group Health Mileage Calculator will be used to determine commute time, unless applicable laws result in a calculation more favorable to the employee.

Travel Time: Travel time is defined as travel between work locations during the work shift. Travel time will be paid and will count as hours worked for overtime calculations.

Mileage: Mileage will be calculated from the home base medical clinic/facility to the first assigned clinic/facility for that day and reimbursed on all miles in excess of 20 miles one way. Mileage related to travel within the work day will be calculated from the trip origin clinic/facility to the trip destination clinic/facility, and all miles will be reimbursed. Mileage will be calculated from the last assigned clinic/facility to the home base and reimbursed on all miles in excess of 20 miles each way. Mileage reimbursement allowance will be paid in accordance with IRS guidelines consistent with Kaiser Foundation Health Plan of Washington policy. In all cases, Kaiser Foundation Health Plan of Washington's mileage calculator will be used to determine mileage.

X

Jenny Wetzel
Kaiser Foundation Health Plan of Washington

Date:

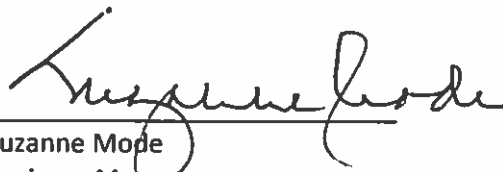
11/29/17

X

Phoebe Rounds
SEIU Healthcare 1199NW

Date:

11/30/17

A handwritten signature in black ink, appearing to read "Suzanne Mode", written over a horizontal line.

Suzanne Mode
Business Manager
OPEIU Local 8

A handwritten signature in black ink, appearing to read "Erin Adamson", written over a horizontal line.

Erin Adamson
HealthCare Membership Director
UFCW 21

**Letter of Understanding
By and Between
KPWA and SEIU Healthcare 1199NW**

Regarding Care Chat – Nurse Practitioners

Care Chat is a program that allows Kaiser Foundation Health Plan of Washington (KPWA) members to request a web-based chat session with a KPWA provider. The program is expected to ramp up through the first quarter of 2018 and be offered seven (7) days a week. The Nurse Practitioners (ARNPs) will be part of the care team and are the subject of this agreement.

The following terms and conditions will apply to ARNPs hired into this program:

Work Unit. Care Chat will be considered a separate designated work unit per the CBA 5.20 Work Unit.

FTE. Incumbent ARNPs who are selected for a position in the Care Chat work unit will have their total FTE increased, so long as it does not exceed 1.0 FTE. The additional FTE will be considered a job 2, reporting to the manager leading the Care Chat program.

In some cases, increasing the incumbent's total FTE will move them to an exempt status per the CBA 5.8 Nurse Practitioner. This will only occur when current ARNPs have FTE's below .50 and increase their total FTE to .50 and above. KPWA recognizes the combined total FTE from both job 1 and job 2 for all provisions of the CBA, except as provided in this Letter of Understanding. For ARNPs that become exempt as a result of their combined total FTE, the exempt language from the CBA for ARNPs will apply in both Job 1 and Job 2. It is understood that ARNPs with multiple FTEs must meet the scheduling requirements of each role, however their job 1 takes precedence.

Wages. Wages for incumbent ARNPs who are selected for a job 2 in the Care Chat work unit will be paid according to the ARNPs current pay rate if their total FTE is .50 or greater. All new external hires and existing non-exempt ARNPs (FTE less than .50) will be hired into the work unit under the ARNP, 1104 Nurse Practitioner, 1115 Nurse Practitioner/NE, or 1105 Nurse Practitioner/15%/NE job codes, and paid in accordance with their FLSA status and the CBA.

Extra Shift. Exempt Care Chat ARNPs who work beyond their Care Chat FTE/schedule, and exempt ARNPs from outside the Care Chat unit who work beyond their regular FTE/schedule to provide short term coverage for unanticipated absences in the Care Chat work unit will be paid in accordance with article 7.4.1 Additional Shifts for Exempt Employees.

PTO. Staff will accrue PTO consistent with their combined total FTE. PTO bidding will take place per CBA within the work unit for Care Chat.

Benefits. If the combined total FTE triggers changes in benefit eligibility, the effective dates and changes will be per standard KPWA practices.

Telecommuting. ARNPs may have the option to telecommute for the portion of their FTE related to Care Chat. In order to telecommute, a telecommuting agreement must be approved and executed by the manager and employee. The template for this telecommuting agreement will be reviewed and agreed to between the Employer and the union. ARNPs who wish to work at a KPWA facility will have a

desk location/facility available. In order to get the Care Chat program up and running, ARNPs will not be required to work on-site 12 months before eligible to apply for telecommuting. They will be eligible upon successful completion of job training and onboarding. Section 3. Application and Selection of the telecommuting agreement will not apply to Care Chat ARNPs.

Layoff and Qualifying Hours Reductions. In the event of an FTE reduction or layoff, it will be processed within the Care Chat work unit only by seniority. Care Chat staff will not have the ability to exercise layoff options outside of the Care Chat work unit. This exception to the CBA language would only apply during the first two years of the program, while long-term viability is assessed. Impacted staff will be provided with 60 days advance notice [consistent with the "Addendum Regarding ARNPs"] of any necessary FTE reductions within the work unit. Additionally, any resulting benefits eligibility changes would be handled through standard KPWA processes.

Performance. This agreement does not waive any management rights. However, if an incumbent temporary or regular staff member with a job 1 outside of the Care Chat work unit is unable to meet the performance expectations that are exclusively related to the job 2 Care Chat position, it will not jeopardize employment in their ARNP job 1. If unable to meet the performance expectations specific to the Care Chat unit, staff will not be disciplined pursuant to article 6.3 Discipline/Discharge for Just Cause, rather they will just be returned to their primary job 1. This does not waive a staff member's ability to file a grievance.

Signed and dated this 18th day of January, 2018.

For the Employer:



Jenny Wetzel
VP Employee & Labor Relations
KPWA

For the Union:



Chris Barton
Director SEIU Nurse Alliance NW
SEIU Healthcare 1199 NW

Addendum
Regarding IRS Guidelines and Mileage Reimbursement
By and Between
KFHPW and SEIU Healthcare 1199NW, OPEIU Local 8, & UFCW 21

KFHPW mileage reimbursement is subject to IRS Guidelines. This Addendum is intended to supersede any current CBA language or addendums in defining employees' commute and reimbursable miles only.

Commute miles are the round trip distance from an employee's personal residence to their assigned work location. Moving forward, only miles in excess of these commute miles can be claimed as reimbursable miles.

An employee's **assigned work location** is the location designated by KPWA and aligns with the location that the employee works most frequently. This location does not change, regardless if an employee works at other locations.

The following examples illustrate how to calculate reimbursable mileage:

Example 1: Three clinics, A, B, C. Employee's assigned work location is A, which is 20 miles from their home address. They are asked to work at location B to begin their day which is 30 miles from their home address.

- They will be compensated for the 10 miles each way for a total round trip difference of 20 miles (30 miles to Clinic B – 20 commute miles = 10 reimbursable miles each direction).

Example 2: Three clinics, A, B, C. Employee's assigned work location is A, which is 20 miles from their home address. They are asked to work at location B to begin their day which is 30 miles from their home address. During the day the employee is asked to go to clinic C which is 40 miles from their home address and 10 miles from clinic B.

- Total miles: 30 (home to B) + 10 (B to C) + 40 (C to Home) = 80
- Commute miles: 20 (home to A) + 20 (A to home) = 40
- Total reimbursable miles: 80 (total miles) – 40 (commute miles) = 40

Reference: *Business Expense Reporting and Reimbursement - Travel and Entertainment Expenses*
NATL.FIN.FSO.001 Policy.

KFHPW will agree to meet on or before June 30, 2018 with union leaders in order to assess the potential impact of this change.

Signed and dated this 8th day of May, 2018.

For the Employer:



Joe Killinger
Sr. Manager, Employee & Labor Relations
KFHPW

For the Union:



Phoebe Rounds
Lead Organizer
SEIU Healthcare 1199 NW

**Addendum
Regarding Columbia Medical Associates (CMA)
Integration into KFHPWA Eastern Washington Operations
By and Between
Kaiser Foundation Health Plan of Washington (KFHPWA)
and SEIU Healthcare 1199NW (SEIU)**

Except as specified below, the entirety of the respective SEIU Collective Bargaining Agreements (CBA's) apply to the transitioning former CMA Medical Assistants, Licensed Practical Nurses, Registered Nurses, Nurse Practitioners, and Social Workers.

SEIU and KFHPWA agree to the following:

First Date of Employment:
January 1, 2019.

Seniority:
Former CMA employees who become employees of KFHPWA on January 1, 2019, upon closure of CMA, will have a seniority date of January 1, 2019.

Seniority Tiebreaker:
In order to tiebreak former CMA employees' seniority dates, their most recent hire date at CMA will be applied. In the event two or more former CMA employees' CMA hire dates are the same, then the last four (4) digits of the employees Social Security Number will be added up with the highest number receiving first priority and so on.

Probationary Period:
All former CMA employees will service a three (3) month probationary period. KFHPWA agrees to not extend probation for CMA employees past three (3) months.

Initial Wage Schedule Placement:
Former CMA employees will be placed on the appropriate wage schedule at the closest step which provides for at least a 1.8% increase from their current hourly wage at CMA as of October 25, 2018. This will be executed in the following manner:

- First, calculate the current CMA hourly wage plus 1.8%;
- Then place on the next closest step on the appropriate wage schedule that does not result in a pay decrease

Experience Audit:
In July through August of 2019, KFHPWA will conduct an experience audit. This experience audit will be conducted for staff employed by KFHPWA on January 1, 2019. KFHPWA reserves the right to determine what constitutes continuous and relevant experience and the final outcomes of the audit. Following the audit, KFHPWA will meet with each audited employee to discuss outcomes. Each step on the wage schedule represents one (1) year of experience. If the initial placement of former CMA employees on the wage schedule does not commensurately reflect their years of continuous and relevant experience, they will receive step placement credits, beginning the first pay period on or after the following dates:

- January 1, 2020 – 1 additional step
- January 1, 2021 – full credit

Next Step Date:

Former CMA employees will advance steps on the wage schedule, if applicable, the first day of the first full pay period on or after January 1, 2020, and each year thereafter in accordance with their respective CBA.

Health Benefits:

Former CMA employees will have access to health benefits on their first day of employment, January 1, 2019. The normal wait periods associated with new hires will not apply to former CMA employees.

PTO Accrual:

Former CMA employees will receive credit for years of service at CMA for purposes of determining their PTO accrual rates as defined by the respective CBA.

Holiday Pay:

Former CMA employees will be eligible for Holiday Pay on their first day of employment January 1, 2019.

Floating Holiday:

Former CMA employees will have immediate access to using their Floating Holiday. The normal six (6) month waiting period for new hires will not apply.

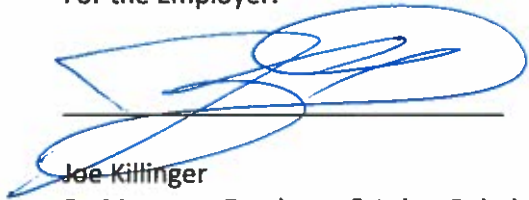
Retirement:

Former CMA employees will receive credit for years of service at CMA for purposes of determining their vesting towards KFHPWA's retirement plan, and retirement notice and service awards.

This is a one-time non-precedent setting agreement.

Signed and dated this 25th day of October 2018.

For the Employer:



Joe Killinger
Sr. Manager, Employee & Labor Relations
KFHPWA

For the Union:



Monica Livingston
Lead Organizer
SEIU Healthcare 1199 NW

**Memorandum of Understanding
By and Between
Kaiser Foundation Health Plan of Washington (KFHPWA)
And
OPEIU Local 8, SEIU 1199NW and UFCW Local 21**

Washington Paid Family Medical Leave Act (WPFMLA)

May 1, 2019

Washington Paid Family Medical Leave (WPFML). Employees shall be eligible for Washington Paid Family Medical Leave, including paid leave and job protection, as per the eligibility requirements set forth in RCW Ch. 50A.04.

Implementation of premiums for WPFML. KFHPWA shall withhold from the gross wages of each employee in Washington such amounts as are permitted or required to be deducted from employee wages pursuant to the Washington State Family and Medical Leave Program, Ch. 50A.04 RCW and regulations issued thereunder, and shall remit such amounts to the Washington State Employment Security Department in accordance with law. The applicable employee deductions will commence on the following dates:

- OPEIU – 01/01/2020
- SEIU (All CBAs) – 01/01/2020
- UFCW Protech/Optical – 01/01/2020
- UFCW Pharmacy – 11/01/2020

In-Service Cash Out. Effective with the election for cash out on or after January 1, 2021, employees may elect to cash out up to one hundred sixty (160) hours of PTO per year of their future annual accrual as provided in the Kaiser Permanente "In-Service Cash Out" (ISCO) benefit provisions. Such election must be made during Open Enrollment of the calendar year preceding the calendar year the cash out will occur. Such election is irrevocable.

Supplementation. The parties agree that in accordance with the WPFMLA, employees may choose to use PTO, EIB and/or STD to supplement paid leave benefits effective January 1, 2020.

No reduction in benefits. There shall be no reduction in the level of current leave benefits, including PTO, EIB, and Short-Term Disability, in conjunction with the implementation of this agreement regarding WPFML.

Signed by:



Joe Killinger on behalf of KFHPWA

07/17/2019

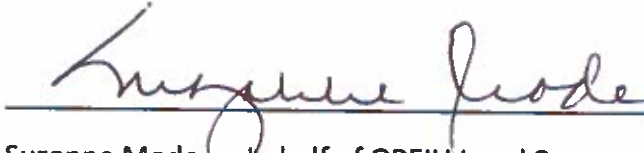
Date



Phoebe Rounds on behalf of SEIU 1199NW

7/17/19

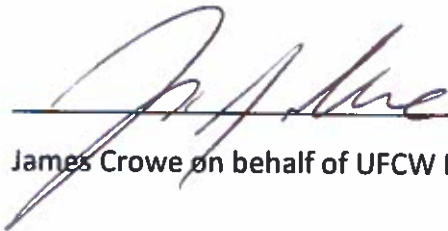
Date



Suzanne Mode on behalf of OPEIU Local 8

7/23/19

Date



James Crowe on behalf of UFCW Local 21

9-11-2019

Date

**Memorandum of Understanding
By and Between
KPWA and SEIU Healthcare 1199NW**

Regarding ARNP/RN Low Census/Low Need

In areas not covered by the SEIU Low Census Fund:

During a period of temporary low census or low need, the Employer will seek out volunteers to take time off or float to other areas if the need exists before determining and implementing the reduced staffing schedule required within a job classification.

In the event there are no volunteers, the Employer will implement low census, in the order specified below, providing skill, competence, and ability are considered equal as determined by the Employer and patient care needs requiring specific skill level are retained:

1. Agency
2. Employees working in or subject to any overtime or double time pay condition
3. Temporary part-time employees (TPT)
4. Extra shifts at regular time (employees who have offered to pick up the shift in addition to their regular schedule)
5. Regular full-time and part-time employees, starting with the least senior employee and continuing through the roster in an equitable rotation until the roster starts over.

In areas covered by the SEIU Low Census Fund:

When unanticipated low census occurs in: (1) departments governed by the Capitol Hill Inpatient Hospital License, including CHIPS; (2) ambulatory surgery departments, including Capitol Hill, Bellevue, and Tacoma; (3) Shared Procedures departments, including Capitol Hill and Bellevue; (4) Home Health and Hospice; and (5) inpatient hospital settings where liaison nurses work (i.e. Overlake, St. Joseph Medical Center, etc.), the following steps will be taken in the order below:

1. Floating where there is patient care need;
2. Voluntary low census;
3. Other nursing related work assignments or skill development consistent with organizational and patient care needs as determined by the Employer. These activities will be funded up to a maximum amount of one hundred thousand dollars (\$100,000) per calendar year. (One fund for all SEIU units.)

During periods of low census in: (1) departments governed by the Capitol Hill Inpatient Hospital License, including CHIPS; (2) ambulatory surgery departments, including Capitol Hill, Bellevue, and Tacoma; (3) Shared Procedures departments, including Capitol Hill and Bellevue; (4) Home Health and Hospice; and (5) inpatient hospital settings where liaison nurses work (i.e. Overlake, St. Joseph Medical Center, etc.), employees within a job classification on a unit and shift will be released from work in the following order, unless specific skills are needed:

1. Agency
2. Employees working in or subject to any overtime or double time pay condition
3. Temporary part-time employees (TPT)
4. Extra shifts at regular time (employees who have offered to pick up the shift in addition to their regular schedule)
5. Regular full-time and part-time employees, starting with the least senior employee and continuing through the roster in an equitable rotation until the roster starts over.

Signed and dated this 19th day of November, 2020.

For the Employer:

A handwritten signature in dark ink, appearing to read 'Shauna Straight', with a long horizontal flourish extending to the right.

Shauna Straight
Manager, Employee & Labor Relations

For the Union:

Memorandum of Understanding between SEIU Healthcare 1199NW and Kaiser Permanente

Regarding ARNP Continuing Education Funds

The parties have reached the following understanding in order to best address our mutual interest in providing relevant, comprehensive support for the education and licensure of ARNPs:

Effective January 1, 2021, Kaiser shall cease contributing 0.5 percent of payroll to the SEIU Healthcare 1199NW Training Fund on behalf of the ARNPs in the SEIU Healthcare 1199NW RN/ARNP bargaining unit.

From the effective date of this memorandum through December 31, 2020, ARNPs can continue to access benefits from the Training Fund for which they qualify based on the eligibility requirements and processes of the Training Fund. Starting January 1, 2021 ARNPs will no longer be able to access the benefits of the SEIU Healthcare 1199NW Training Fund.

In lieu of the Training Fund contribution, Kaiser will establish the following education benefits for ARNPs each calendar year funded not to exceed 0.5 percent of the ARNP payroll. This is in addition to the \$3000 Tuition Reimbursement Program that is available through the National Agreement.

- (1) Kaiser will pay for the DEA license renewal of all ARNPs (regular and temporary employees)
- (2) As part of the ARNP Workgroup, ideas for trainings/certification preparation courses will be solicited and KP will coordinate Continuing Education Training to be offered to all ARNP's on a quarterly basis.

Unused funds will not rollover into the following calendar year. Effective as of January 1, 2021 currently employed ARNPs will be eligible to submit for reimbursement for eligible expenses in category (1) one incurred in 2020. The expense for those reimbursements will come from the budgeted amount for 2021.

This agreement is non-precedent setting. Kaiser will continue its contributions to the Training Fund for all other eligible job classifications in full force.

For the Employer:

For the Union:

Signed and dated this 15th of December 2020



For the Employer:
Kerry Bollman
Sr. Employee and Labor Relations Consultant



For the Union:
Phoebe R. Rounds
SEIU Member Program Director

Memorandum of Understanding

By and Between

Kaiser Foundation Health Plan of Washington and

SEIU Healthcare 1199NW, OPEIU Local 8 and UFCW Local 21

Re: Steward Education & Union Leaves of Absence under the National Agreements

Kaiser Foundation Health Plan of Washington, SEIU Healthcare 1199NW, OPEIU Local 8 and UFCW Local 21 mutually agree to the following regarding the application and administration of provisions 1.E.3 (Steward Education and Development) and 1.K.1 (Union Leaves of Absence) of the National Agreements. This MOU does not amend, alter or change such provisions in any manner.

1. General Guardrails and Parameters for Steward/Delegate Training

- Out of Scope:
 - CE (continuing education) hours
 - Trainings that are not sponsored or promoted by National or Local labor or management
- In Scope:
 - Local Delegate/Steward trainings (provided by SEIU 1199NW, OPEIU Local 8, and UFCW Local 21)
 - Leadership development for Delegates/Stewards, sponsored locally or nationally
 - Introductory Delegate/Steward Training
 - Delegate/Steward Assemblies (Annual Workshops)
 - Coalition FSDI (Front-line Skills Development Institute)
 - Alliance/Coalition Leadership Conference
 - Any trainings related to the implementation or enforcement of the local or National collective bargaining agreements (e.g., those listed in the National Agreement)
 - Trainings focused on representation development (e.g., issue resolution, grievances, investigations and Just Cause, contract adherence)
 - Other trainings as outlined in the National Agreements

2. Training Hours

- The Steward/Delegate training in the National Agreements language is meant to be eight (8) hours bi-monthly in-person, and it is not intended to be accrued
 - The parties agree training may be divided into four (4) hours monthly if training is virtual
 - Exceptions by mutual agreement (ex: national conferences with Alliance/Coalition)

3. Notice to Management

When Stewards/Delegates are planning to attend a training, Stewards/Delegates will make every effort to notify management in writing 30 calendar days' in advance to ensure coverage. Managers will make every effort to provide coverage if notice is provided less than 30 days in advance, however it may be more difficult to cover for patient care needs.

- Exceptions upon mutual agreement

4. Active Steward/Delegate Rosters

- The Unions commit to send an active Stewards/Delegates roster to KFHPWA at least **on a quarterly basis**, or more often as new Stewards/Delegates are added. Labor will add the date the roster was reviewed/updated and send such notifications to KFHPWA Employee & Labor Relations at asklabor@kp.org

5. Stewards/Delegates Training Time Coding:

Managers will code time for Steward/Delegate Education & Union Leaves of Absence by following the required procedures as delineated in HR Connect. As HR Connect and related HR systems may change, KFHPWA will notify the Unions of such requirements.

- Non-Exempt (hourly) employees who attend approved Steward/Delegate training:
 - If on a regularly scheduled day of work (shift replacement), the code in HRconnect is Absence Paid, reason code: Union Activities. This time accrues benefits.
 - If attend training on a day they do not normally work, the code in HRconnect is Absence Education Day, reason code: Training. This time does not accrue benefits because we assume they are already working their normally scheduled shifts / FTE.
- Exempt (salaried) employees who attend approved Steward/Delegate training:
 - If on a regularly scheduled day of work (shift replacement), the code in HRconnect is Absence Paid, reason code: Union Activities. This time accrues benefits.
 - If attend on a day they do not normally work, the HRconnect code is Absence Education Day, reason code: Exempt Additional Hours.
 - The coding for time away from work to engage in Steward/Delegate education/training in HRconnect is Absence Education Day and the reason code is Additional Hours .
- Such time is not included in the calculation of daily or weekly overtime.
- Exempt employees who are Stewards/Delegates will receive additional pay for training that was conducted on their normal day off.

For Kaiser Foundation Health Plan of Washington:

For SEIU 1199NW:

Shauna Straight

Shauna Straight (Jan 20, 2022 16:40 PST)

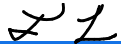
Jake Horowitz

Jake Horowitz (Jan 20, 2022 13:49 PST)

Date: Jan 20, 2022

Date: Jan 20, 2022

For OPEIU Local 8:



LESLIE LIDDLE (Jan 20, 2022 13:40 PST)

Date: Jan 20, 2022

For UFCW Local 21:



Ralph W Stumbo Jr (Jan 20, 2022 16:34 PST)

Date: Jan 20, 2022

KAISER FOUNDATION HEALTH PLAN OF WASHINGTON

AND

OPEIU LOCAL 8

AND

SEIU HEALTHCARE 1199NW

MEMORANDUM OF UNDERSTANDING (MOU) RE: QUALIFIED BILINGUAL STAFF (QBS) PILOT

In partnership, Kaiser Foundation Health Plan of Washington (KFHPWA), SEIU Healthcare 1199NW and OPEIU Local 8 reached an agreement on July 6, 2022 to implement a pilot Qualified Bilingual Staff (QBS) program at KPWA to be revisited with labor no later than two (2) years from launch date.

The agreement is to launch the QBS pilot program, which is an important EID initiative for KPWA, labor, employees and patients alike, at four (4) pilot sites which have been analyzed and assessed to take on the first language-concordant care teams comprised of a WPMG provider, RN, MA / LPN, and a PAR:

- Factoria Medical Center
- Rainier Medical Center
- Burien Medical Center
- Centralized Population Health Management (under Quality)

With the additional responsibility of being qualified by the vendor at Level 1 or 2 as bilingual in a specific language and using their bilingual skills with patients paneled in the same language, we agreed upon the following premiums:

- PAR
 - \$1.00 per hour
 - Level 1 qualified
- MA / LPN
 - \$1.50 per hour
 - Level 2 qualified
- RN
 - \$1.75 per hour
 - Level 2 qualified

The Level 1 and 2 are how KP's vendor, Language Line, qualifies staff for this work – at Level 1, it's conversational whereas Level 2 includes medical terminology. Employees will be hired into their jobs with a Qualified Bilingual Staff (QBS) addendum and will receive this hourly premium for all compensable hours. Language Line will be qualifying employees in the QBS program at KPWA for the following languages: Cantonese, Korean, Mandarin, Russian, Spanish, Tagalog and Vietnamese. Employees must complete the language line process successfully before they can be hired into the

position. Per local CBA transfer and job posting provisions, internal candidates will be given priority when filling these positions prior to new KPWA hires.

In the event that this QBS pilot at KPWA loses funding to operate for the duration of this pilot program, Unions and Management will meet to go through the appropriate process for layoffs as defined by the applicable CBA. Management's intent is to retain these employees. For OPEIU Local 8, the parties will follow the initiative process under Section 8.05.

FOR THE EMPLOYER



[Shauna Straight \(Nov 7, 2022 12:02 PST\)](#)

Shauna Straight
Manager, Employee & Labor Relations
KFHPWA

FOR SEIU



[Jake Horowitz \(Nov 7, 2022 13:11 PST\)](#)

Jake Horowitz
Union Representative
SEIU Healthcare 1199NW

FOR OPEIU



[LESLIE LIDDLE \(Nov 7, 2022 12:04 PST\)](#)

Leslie Liddle
Union Representative
OPEIU Local 8



[jane hopkin s \(Nov 14, 2022 08:39 PST\)](#)

Jane Hopkins
President
SEIU Healthcare 1199NW

**2023 Collective Bargaining
Memorandums of Understanding
By and between
KFHPWA
And
SEIU Healthcare 1199NW
RN/ARNP Unit**

Staffing.

The Employer shall staff in service-line defined ratios in outpatient departments. The service line ratios may be available by department and sent to the union upon request. Providing information will be at the Employer's discretion, except where required under the law. Departments covered by the Washington State safe staffing law will use the process outlined by the law to develop and meet their staffing plans.

In cases where staffing is not meeting service-line defined ratios, management will partner with Unit-Based Teams (UBTs) to evaluate actions including but not limited to evaluating standard work and adjusting workloads for the specific clinic, specialty, or service line or may add posted vacancies at the Employer's discretion. Employees on units without UBTs can meet for this discussion with management upon request and utilize the partnership principles.

The Employer shall evaluate float pool staffing yearly to help cover expected absences, leaves, and vacancies. The Employer will share its findings with the union at a combined JLMC meeting of the impacted groups where the parties also discuss vacancies and traveler use per the national agreement.

The Employer and Labor will meet twice yearly to share information regarding staffing models as part of an expanded direct care SEIU Steering Committee meeting. This meeting would be to share information and data including established nursing practice organizations' staffing recommendations.

Float Pool Pods.

Within 60 days of ratification, the Employer will provide the Union with a listing of all float pool/travel group employees, their assigned work location, and which pod they will be assigned to going forward based on the new pod structures for various Travel Groups. The Employer will assign employees to pods that most closely match their recent work location history. The Union and Employer will meet to attempt to resolve any disagreements about pod assignments. The Union may use the grievance procedure for any unresolved disagreements about changed pod assignments.

Home Infusion Therapy (HIT) Travel Group.

Within 120 days of ratification, the parties shall meet to determine updated appropriate pods and work units for the Home Infusion Travel Group, based on where these services are currently provided. RNs assigned to the HIT Travel Group will be paid the additional float pool pay as outlined in 8.17 of SEIU/RN contract.

Occupational Health Float Pod.

Within 120 days of ratification, the parties shall meet to determine updated appropriate

Pods and work units for the Occupational Health Float Pool, based on where these services are currently provided.

Breaks.

All nonexempt employees are entitled to meal and rest period breaks according to the collective bargaining agreement. The Employer commits to include this topic on the agenda for the first JLMCs held in 2024 and utilize UBT's to come up with solutions at the clinic level.

Inclement Weather.

The parties recognize that natural disasters and inclement weather are likely events which require planning and shared understandings. Managers will work with staff to understand the best way to communicate about work and work schedules during events of inclement weather or other natural disasters.

In a weather or disaster event:

- Staff should follow inclement weather processes in receiving information on the status of the medical center.
- Distribute all available information per the process agreed to with staff.
- Employer will evaluate if patient care should continue as scheduled, convert to a virtual appointment or reschedule for another day.

Employee safety is a top priority. The employer will consider closing in the event that a severe weather emergency or other natural disaster is issued by the WA State governor, WA State Department of Transportation, WA State Patrol or county/city equivalent. If a decision is made by the employer to close, the employee will be paid out of the low census fund (available to all impacted staff of any department, job class or bargaining unit). If an employee is unable to report to work, the employee can take the time as Leave No Pay or PTO and the employee will not be disciplined. If an employee makes a good faith effort to arrive on premises on time but arrives within 2 hours of their scheduled start time, they will be granted an exception and will not be disciplined for the inclement weather absence.

Loan Forgiveness.

For purposes of responding to requests related to the Federal government's Public Service Loan Forgiveness (PSLF) plan, the employer will follow government's description of full time status under this program.

Experience Audit for current ARNPs and Service Unit Employees.

On January 2, 2024, the employer will notify employees that an experience audit will commence to determine year for year credit for experience based on the new contract language. Included in this communication will be information regarding the audit, what is required and the mechanism in which information will need to be submitted. Audit submissions will be required to be submitted during the month of February 2024. Any information received after February of 2024 will not be considered. By September 1, 2025, staff will be notified of the outcomes of the audit and there will not be an appeal process. The Employer's decisions are subject to the grievance procedure. Any changes to an employee's step placement will be made the first of the pay period following October 1, 2025 and there will be no retro pay. There will be no adjustment to a lower step for any employee. There will be no adjustment to anniversary dates for the purpose of future step

increases. Employees eligible for this audit are those that were hired before November 1, 2023.

Telecommuting Agreement & Appendix A.

Within 90 days of ratification, the parties will convene a workgroup of up to five (5) union participants and five (5) management to review the current telecommuting agreement. The intent of the workgroup is to modernize the current telecommuting agreement to align with the current telecommuting environment for all remote workers. Any changes to the existing agreement and Appendix A will only be done by mutual agreement.

O-TPT Transition.

Within 90 days of ratification, the Employer will review the pattern of past work and expected future need for all incumbent Temporary Employees and determine whether each should be classified as Durational or Ongoing. Ongoing TPTs will be assigned a regular shift that most closely matches their prior work as a Temporary Employee. The Employer and Union will meet to review the determinations and attempt to resolve any disagreements. The Union may utilize the grievance process regarding the reclassification of any TPTs and Durational or Ongoing on which the parties cannot reach agreement.

