

University of Washington – Washington State Nurses Association (WSNA) – UWMC Northwest

07/01/2025 – 06/30/2027 Collective Bargaining Agreement Summary

This summary is provided by the Employer in accordance with RCW 43.88.583. Please note that this is a summary only, and is not intended to be a substitute for reviewing the complete contract. This summary was drafted upon ratification, so please consult the main PDF contract on the LR website for the most up to date contract version.

Information Requested	Responsive Information
The term of the agreement	July 1, 2025 – June 30, 2027
The bargaining units covered by the agreement by state agency	UW Medical Center – Northwest Registered Nurses
Base compensation	<u>Article 8 – Compensation</u> <u>Article 9 – Premium Pay</u> <u>Appendix E – Pay Tables</u>
Provisions for and rate of overtime pay	<u>Article 7.5 – Hours of Work and Overtime</u>
Provisions for and rate of compensatory time	<u>Article 7.8 – Compensatory Time Off</u> <u>Article 10 – Holiday and Vacation Time Off</u> <u>Article 13 – Leaves of Absence</u>
Provisions for and rate of any other compensation including, but not limited to, shift premium pay, on-call pay, stand-by pay, assignment pay, special pay, or employer-provided housing or meals	<u>Article 9 – Premium Pay</u> <u>Article 22.7 – Nonpermanent and Intermittent (Formerly Per Diem) Nurses</u> <u>MOU – Voluntary Extra Shifts at UWMC-NW and Montlake Campuses</u> <u>MOU – Voluntary Float between UWMC-NW and Montlake Campuses</u>
Provisions for and rate of pay for each paid leave provision	<u>Article 10 – Holiday and Vacation Time Off</u> <u>Article 11 – Sick Time Off</u> <u>Article 13 – Leaves of Absence</u>

Information Requested	Responsive Information
	<p><u>Article 14 – Family Medical Leave Act and Parental Leave</u></p> <p><u>Article 16 – Staff Development</u></p> <p><u>Article 22 – Nonpermanent and Intermittent (Formerly Per Diem) Nurses</u></p>
Provisions for and rate of pay for any cash out provisions for compensatory time or paid leave	<p><u>Article 7.8 – Compensatory Time Off</u></p> <p><u>Article 10.1 – Holiday Credit Cash Out</u></p> <p><u>Article 10.5 – Vacation Time Off Cash Payment</u></p> <p><u>Article 11.5 – Sick Time Off Cash Out</u></p>
Temporary layoff provision	<u>Article 6 – Seniority</u>
Any impasse procedure subject to bargaining	N/A
Health care benefits provisions expressed as a percentage of cost or as a dollar amount, or in the case of contributions to a third-party benefit fund, the hourly contribution rate to the fund	<u>Article 12 – Medical and Insurance Benefits</u>
Any retirement benefit subject to bargaining, or in the case of contributions to a third-party benefit fund, the hourly contribution rate to the fund	N/A
For compensation or fringe benefits with an anticipated cost of fifty thousand dollars or more, a brief description of each component and its cost that comprises the amount funded by the legislature to implement in accordance with RCW 41.80.010(3)	<p><u>Attachment A</u> includes costing information for incremental cost of the collective bargaining agreement.</p> <p><u>General Wage Increases:</u> All WSNA-NW represented employees will receive a three percent (3%) across-the-board wage increase effective July 1, 2025 and a two percent (2%) across-the-board wage increase on July 1, 2026.</p> <p><u>Additional Wage Increases:</u> All WSNA-NW represented employees will receive a one</p>

Information Requested	Responsive Information
	<p>percent (1%) wage increase effective July 1, 2025 and a one percent (1%) wage increase on July 1, 2026.</p> <p><u>Pay Premiums:</u> The hourly premium rate for evening shift will be increased to \$3/hour, and night shift will be increased to \$5/hour. The hourly charge nurse premium rate will be increased to \$3/hour. The hourly preceptor premium rate will be increased to \$2/hour. The hourly premium rate for low census standby will be increased to \$7.00/hour. A new Sunday Night Premium will be created that will pay \$3.00/hour for any nurse who works Sunday nights (7:00pm Sun – 7:00am Mon). A new STAT nurse premium will be created that will pay \$4.00/hour for RN2s designated as a STAT nurse. Nonpermanent/intermittent employees are now eligible for the following hourly premiums: Charge Nurse, Preceptor, Float Pool, STAT Nurse, and Sunday Night.</p> <p><u>Side Letter A – U-PASS:</u> A fully subsidized UPASS will be provided to all eligible bargaining unit employees.</p> <p><u>Flexible Spending Arrangement:</u> As agreed upon during the State Coalition Healthcare bargaining, in January 2026 and again in January 2027, the Employer will make available three hundred (\$300) dollars in a medical flexible spending arrangement (FSA) account for each bargaining unit member with an annual full-time base salary of \$68,004 or less on November 1 of the year prior to the FSA funds disbursement.</p>
Number of bargaining unit members covered by the agreement as of the date submitted to the office of financial management	Approximately 950 employees
Content of any agency-specific supplemental agreements affecting (a) through (m) of this subsection	N/A

Information Requested	Responsive Information
Any contract provisions that allow the contract to be reopened during the contract term	N/A

PREAMBLE

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This Agreement is made and entered into by and between the University of Washington (hereinafter referred to as the "Employer") and the Washington State Nurses Association (hereinafter referred to as the "Association"). The purpose of this Agreement is to set forth the understanding reached between the parties with respect to wages, hours of work and conditions of employment.

Tentatively Agreed To:	
<p>For the Union:</p> <p>Signed by: <i>Robert H Lavitt</i></p> <hr/> <p>Robert Lavitt - 375DD6A502D445A...</p> <p>Date: 8/21/2025</p>	<p>For the Employer:</p> <p>DocuSigned by: <i>Jade Hersch</i></p> <hr/> <p>Jade Hersch - ED538CDB172F42B...</p> <p>Date: 8/21/2025</p>

ARTICLE 1 – RECOGNITION

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- 1.1 Bargaining Unit. The Employer recognizes WSNA as the sole and exclusive bargaining representative for all full-time, part-time, intermittent, and nonpermanent nurses employed as registered nurses by the Employer; excluding supervisory and administrative/management positions and all other employees.
- 1.2 New Positions. New registered nurse job classifications established during the term of this Agreement shall be covered by this Agreement unless they are bona fide supervisory or administrative/management positions. WSNA shall be notified of any new classifications established by the Employer.

Tentatively Agreed To:

<p>For the Union:</p> <p>Signed by: <i>Robert H Lavitt</i></p> <hr/> <p>Robert Lavitt 375DD6A502D445A...</p> <p>Date:9/2/2025</p>	<p>For the Employer:</p> <p>DocuSigned by: <i>Jade Hersch</i></p> <hr/> <p>Jade Hersch ED538CDB172F42B...</p> <p>Date:8/21/2025</p>
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**ARTICLE 2 – ASSOCIATION REPRESENTATIVES, MEMBERSHIP/DUES
DEDUCTION, ACTIVITIES**

2.1 Association Membership. The Employer agrees to remain neutral with respect to nurse’s decisions about union membership and payroll deduction. The Employer agrees to direct all communications from nurses regarding union membership or payroll deduction to WSNA or this agreement.

2.2 Dues Deduction. WSNA shall transmit to the Employer by the cut-off date, via a web based electronic reporting system, for each payroll period, the name and Employee ID number of nurses who have, since the previous payroll cut-off date, provided authorization for deduction of dues or have changed their authorization for deduction. The Employer will provide instructions and templates for the web based electronic reporting system and provide a calendar of required payroll cut-off dates.

During the term of this Agreement, the Employer shall deduct dues from the pay of each member of WSNA who voluntarily executes a wage assignment authorization form, and the authorization form will be honored in accordance with its terms. The amount deducted and a roster of all nurses using payroll deduction will be promptly transmitted to WSNA by check payable to its order. Upon issuance and transmission of a check to WSNA, the Employer’s responsibility shall cease with respect to such deductions. WSNA and each nurse authorizing the assignment of wages for the payment of WSNA dues hereby undertakes to indemnify and hold the Employer harmless from all claims, demands, suits or other forms of liability that may arise against the Employer for or on account of any deduction made from the wages of such nurse.

2.3 PAC. The Employer shall deduct the sum specified from the pay of each member of the Union who voluntarily executes a Washington State Nurses Association Political Action Committee (WSNA PAC) wage assignment form. When filed with the Employer, the authorization form will be honored in accordance with its terms. The amount deducted, and a roster of all nurses using payroll deduction for PAC contributions will be promptly transmitted to the Union by a check separate from the dues deduction check payable to its order. The Union will provide a monthly report of any changes to the fixed WSNA PAC amounts.

2.3 Revocation. The Employer will direct all questions about revocation to WSNA. A nurse may revoke their authorization for payroll deduction of payments to WSNA by written notice to the Employer and WSNA in accordance with the terms and conditions of their signed membership card. Every effort will be made to end the deduction effective on the first payroll, and not later than the second payroll, after receipt by the Employer of confirmation from WSNA that the terms of the nurse’s signed membership card regarding dues deduction revocation have been met.

46 2.4 Access to Premises. After notifying Nursing Administration, WSNA’s authorized
47 staff representatives shall have access to the Employer’s premises where nurses
48 covered by this Agreement are working, excluding patient care areas, for the
49 purpose of investigating grievances and contract compliance. Such visits shall
50 not interfere with or disturb nurses in the performance of their work during
51 working hours and shall not interfere with patient care.

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53 2.5 Local Unit Chairperson. WSNA shall have the right to select a local unit
54 chairperson(s) from among nurses in the unit. The local unit chairperson(s) shall
55 not be recognized by the Employer until WSNA has given the Employer written
56 notice of the selection. Unless otherwise agreed to by the Employer, the
57 investigation of grievances and other Association business shall be conducted
58 only during nonworking times, and shall not interfere with the work of other
59 nurses.

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61 2.6 Bulletin Boards. The Employer shall furnish bulletin boards in a prominent place
62 for the use of the local unit. Materials posted may only include meeting notices,
63 local unit newsletters, training and education information, and general matters
64 relating to professional nursing and health care.

65
66 2.6.1 E-mail. Authorized representatives of WSNA may transmit messages for
67 distribution to nurses to the System Administrator for posting on the
68 WSNA electronic bulletin board.

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70 2.7 Negotiations Compensation. The Employer will provide paid time or paid release
71 time for up to eight (8) total WSNA designated bargaining team members for up
72 to eight (8) hours per session (including caucus time) for at least up to eight (8)
73 sessions during negotiations for a new collective bargaining agreement. Neither
74 paid time nor paid release time shall be considered as hours worked for the
75 purposes of calculating overtime.

76
77 2.84 Bargaining Unit Rosters.
78 Each pay period the Employer will provide the Union with membership
79 information as set forth in Appendix XX. following four (4) reports electronically.

80
81 Total Compensation and deductions Employee Information
82 Name
83 Home Address
84 Home phone
85 Cell phone Primary phone
86 Work phone
87 Work location (building)
88 Work location (address)
89 Work station or office (suite and/or number)
90 Employee ID number
91 Personal Email

- 92 ~~UW email~~
- 93 ~~UW mailbox~~
- 94 ~~Employment status~~
- 95 ~~Employment status effective date~~ Current position effective date
- 96 ~~Job classification~~
- 97 ~~Department~~ Supervisory Org
- 98 ~~Pay grade~~
- 99 ~~Pay step~~
- 100 ~~Pay rate salary~~
- 101 ~~Hourly rate~~
- 102 ~~Supervisor~~
- 103 ~~Supervisor email~~
- 104 ~~Race~~
- 105 ~~Gender~~
- 106 ~~DOB~~
- 107 ~~Date of hire~~
- 108 ~~Job title~~
- 109 ~~Job class code~~
- 110 ~~Shift~~
- 111 ~~Deduction amount dues~~
- 112 ~~Deduction amount fees~~
- 113 ~~Deduction amount other~~
- 114 ~~Deduction amount cope~~
- 115 ~~Total wages for the pay period~~
- 116 ~~Total base pay for pay period~~
- 117 ~~Total overtime pay for pay period~~
- 118 ~~Total overtime hours per pay period~~
- 119 ~~Total hours worked in the pay period~~
- 120 ~~Days in the pay period~~
- 121 ~~Total hours for each class/type of differential and or/ premium pay for the pay~~
- 122 ~~period~~
- 123 ~~Total wages for each class/type of differential and or/ premium pay for the pay~~
- 124 ~~period~~ Premium pay and premium hours
- 125 ~~Total wages year to date~~
- 126 ~~Pension plan enrollment (which plan)~~
- 127 ~~Position number~~ Position ID
- 128 ~~Medical plan enrollment (which plan)~~
- 129 ~~Bargaining Unit~~
- 130 ~~Total FTE~~
- 131 ~~Anniversary date (step date)~~
- 132 ~~Employment status (regular fulltime, regular part time, hourly, fixed duration part~~
- 133 ~~time, fixed duration full time)~~
- 134
- 135 ~~All appointment list~~
- 136 ~~Appointment budget number(s)~~
- 137 ~~Beginning date~~

138 ~~End date~~
 139 ~~Department and/or hiring unit~~
 140 ~~College/Org name~~
 141 ~~Job Classification~~
 142 ~~Job Classification Code~~
 143 ~~Full time salary or hourly rate~~
 144 ~~Appointment/FTE Percentage~~
 145 ~~Appointment status~~
 146 ~~Appointment term Service Period~~
 147 ~~Distribution line information~~
 148 ~~Position number~~
 149 ~~Earnings in last pay cycle~~
 150 ~~Hours worked in last pay cycle~~
 151 ~~FTE in last pay cycle~~
 152 Leave of Absence Effective Date
 153 Nature of Leave of Absence

154
 155 Change Report ~~Staffing Events and Terminations~~

156 ~~Name~~
 157 ~~Job classification~~
 158 ~~Job classification code~~
 159 ~~Department~~
 160 ~~Employee id~~
 161 ~~Original hire date~~
 162 ~~Status change date~~
 163 ~~Termination/separation date if any~~
 164 ~~Reason for status change, nature of status change~~
 165 ~~Reason for termination/separation~~
 166 ~~LOA effective date~~
 167 ~~Nature of LOA~~
 168 ~~New hire date~~
 169 ~~New Hire~~

170
 171 Vacancy Report

172 ~~Position Number~~
 173 ~~Job Classification~~
 174 ~~Date of vacancy~~
 175 ~~Elimination date of vacancy~~
 176 ~~Reason for elimination (filled, deleted, transferred to a different~~
 177 ~~classification/status)~~

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 179 **2.95** Contract. The Employer will make available to the designated Local Unit
 180 Chairperson a list of all newly hired nurses within five (5) working days. Before
 181 the completion of the orientation process, the Employer shall provide the Local
 182 Unit Chairperson or designee with an opportunity on release time, to introduce
 183 this Agreement to newly hired nurses.

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2.106 Distribution of Agreement. Nurses newly hired during the life of this Agreement shall be given a copy of this Agreement by the Employer, as provided by WSNA. WSNA may attach a cover letter, membership application, and return envelope to the Agreement.

2.11 Information Requests. All requests for information regarding the bargaining unit by the Union will be submitted in writing to the Office of Labor Relations. Requests will clearly identify what information is being sought. ~~and include the reason for the request. Requests will not normally extend more than twenty-four (24) months prior to the date of the request.~~

Tentatively Agreed To:

For the Union: Signed by: <i>Robert H. Lavitt</i> _____ Robert Lavitt <small>375DD6A502D445A...</small> Date: 7/23/2025	For the Employer: DocuSigned by: <i>Jade Hersch</i> _____ Jade Hersch <small>ED538CDB172F42B...</small> Date: 7/1/2025
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ARTICLE 3 – ASSOCIATION REPRESENTATIVES

~~3.1 — Access to Premises. Access Provision. After notifying Nursing Administration, WSNA’s authorized staff representatives shall have access to the Employer’s premises where nurses covered by this Agreement are working, excluding patient care areas, for the purpose of investigating grievances and contract compliance. Such visits shall not interfere with or disturb nurses in the performance of their work during working hours and shall not interfere with patient care.~~

~~3.2 — Local Unit Chairperson. WSNA shall have the right to select a local unit chairperson(s) from among nurses in the unit. The local unit chairperson(s) shall not be recognized by the Employer until WSNA has given the Employer written notice of the selection. Unless otherwise agreed to by the Employer, the investigation of grievances and other Association business shall be conducted only during nonworking times, and shall not interfere with the work of other nurses.~~

~~3.3 — Bulletin Boards. The Employer shall furnish bulletin boards in a prominent place for the use of the local unit. Materials posted may only include meeting notices, local unit newsletters, training and education information, and general matters relating to professional nursing and health care.~~

~~3.3.1 — E-mail. Authorized representatives of WSNA may transmit messages for distribution to nurses to the System Administrator for posting on the WSNA electronic bulletin board.~~

~~3.4 — Negotiations Compensation. The Employer will provide paid time or paid release time for up to eight (8) total WSNA designated bargaining team members for up to eight (8) hours per session (including caucus time) for up to eight (8) sessions during negotiations for a new collective bargaining agreement. Neither paid time nor paid release time shall be considered as hours worked for the purposes of calculating overtime.~~

Tentatively Agreed To:	
For the Union:	For the Employer:
Signed by: <i>Robert H. Lavitt</i>	DocuSigned by: <i>Jade Hersch</i>
Robert Lavitt 375DD6A502D445A...	Jade Hersch ED538CDB172F42B...
Date: 8/26/2025	Date: 7/15/2025

ARTICLE 4 - DEFINITIONS

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 3 4.1 New Graduate/Returning Nurse. ~~New Graduate/Returning Nurse.~~ A registered
 4 nurse whose clinical experience after graduation is less than six (6) months, or a
 5 registered nurse who is returning to practice with no current clinical training or
 6 experience shall be assigned as a team member under the close and direct
 7 supervision of a qualified nurse and shall be responsible for the direct care of
 8 patients with increasing complexity as individual RN competency level increases.
 9 This status generally shall not exceed six (6) continuous months

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 11 4.2 Registered Nurse 2. A registered nurse who is responsible for the direct and
 12 indirect nursing care of the patient.

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 14 4.3 Charge Nurse/Lead Nurse. ~~An RN2-nurse~~ who on assignment by the Unit
 15 Manager is accountable on a shift basis to maintain organization on a unit such
 16 that nursing staff are able to provide patient care. All assigned hours in charge
 17 will be paid at the charge nurse/lead nurse premium rate. All nurses assigned as
 18 charge/lead or relief charge/lead nurse will receive orientation. In charge
 19 nurse/lead nurse assignments the Employer will consider the level of direct
 20 patient care along with other duties.

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 22 4.4 Preceptor. A preceptor is defined as an experienced RN2 specifically responsible
 23 for planning, organizing and evaluating the new skill development of an
 24 employee, traveler, or a senior student fulfilling their practicum, according to the
 25 unit's plan for orientation. They are responsible for specific, criteria based and
 26 goal directed education and training for a specific period. They function as a role
 27 model, teacher, evaluator and resource person.

28
 29 Preceptor pay is generally not paid to RNs who, as stated in the job description,
 30 participate in the general orientation and teaching of health care professionals
 31 and personnel including, but not limited to RN's temporarily assigned as
 32 supplemental staff to the unit on a shift-by-shift basis., RN's orienting to the
 33 Charge Nurse role, and non-RN personnel.an experienced RN2 proficient in
 34 clinical teaching who is specifically responsible for planning, organizing and
 35 evaluating the new skill development of a senior practicum nurse, traveler, or an
 36 employed nurse enrolled in a defined program, the parameters of which have
 37 been set forth in writing by the Employer. Inherent in the preceptor role is the
 38 responsibility for specific, criteria-based and goal directed education and training
 39 for a specific training period. Nursing management will determine the need for
 40 preceptor assignments. Each newly hired nurse, nurse transferring to a new unit,
 41 and a senior practicum nurse shall be assigned a preceptor. It is understood that
 42 RN2s in the ordinary course of their responsibilities will be expected to participate
 43 in the general orientation process of new nurses. This would include the
 44 providing of informational assistance, support and guidance to new nurses.

46 4.5 Full-Time Nurse. A registered nurse who works on a regularly scheduled basis at
47 least forty (40) hours in a seven (7) day period, per week or eight-eighty (8/80)
48 hours in a fourteen (14) day period.

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50 4.6 Part-Time Nurse. A registered nurse who has committed to regularly working and
51 who is assigned a scheduled FTE of less than forty (40) hours per week (less
52 than 1.0 FTE). Unless otherwise provided for herein, a part-time nurse shall be
53 compensated in the same manner as a full-time nurse except that ~~wages and~~
54 ~~benefits shall be reduced in proportion to the nurse's actual hours of worked.~~
55 This section does not apply to health benefits coverage, which is determined by
56 the state.

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58 4.7 Probationary Period. A nurse who has been hired by the Employer on a full-time
59 or part-time basis will attain permanent status in a job classification upon
60 successful completion of a probationary or trial service period. Every part-time
61 and full-time nurse who has been continuously employed by the Employer will
62 serve a probationary period of six (6) consecutive months. Any paid or unpaid
63 leave taken during the probationary period will extend the period for an amount of
64 time equal to the leave on a day per day basis. After successfully completing the
65 probationary period, the nurse shall attain regular status.

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67 During the probationary period, a nurse may be terminated without notice and
68 without recourse to the grievance procedure. Probationary nurses shall not be
69 required to give fourteen (14) days' notice of intention to terminate. ~~The Employer~~
70 ~~and employee may mutually agree to extend the employee's probationary period~~
71 ~~for an individual employee as long as the extension does not cause the total~~
72 ~~period to exceed twelve (12) months. Employees will be provided with a written~~
73 ~~explanation for the extension. If the extension is based on performance issues,~~
74 ~~the employee will receive a performance improvement plan. Extension of~~
75 ~~probationary periods shall not be a normal practice.~~

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77 4.8 Regular Rate of Pay. Unless otherwise required by the Fair Labor Standards Act,
78 the regular rate of pay shall be defined to include the nurse's hourly wage rate,
79 all premiums, and differentials.

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81 4.9 Certification Pay. The Employer recognizes a value to patient care when RNs are
82 certified in their area of specialty practice. Eligible Registered Nurses will be
83 compensated by an hourly certification premium of one dollar and twenty-five
84 cents (\$1.25) for all hours paid. All bargaining unit RNs who obtain and maintain
85 a current, nationally recognized renewable certification in a specialty that is
86 representative of the patient population to which they are primarily assigned,
87 based upon management approved Nursing Specialty Certification List, will be
88 eligible. Float RNs must be certified in a specialty to which they would reasonably
89 be expected to consistently float to be eligible for the certification premium. It is
90 the responsibility of the RN to provide evidence of the certification to Human
91 Resources. Once approved, the premium will be effective the day Human

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Resources receives the certificate. The premium is not retroactive to the date of recertification. Certified RNs will only be eligible for one (1) certification premium regardless of other certifications the nurse may have.

~~Registered nurses will be eligible to receive a nursing certification premium as follows:~~

- ~~1. All bargaining unit RNs who obtain and maintain a current, nationally recognized renewable certification in a specialty that is representative of the patient population to which they are primarily assigned, based upon management approved Nursing Specialty Certification List, will be eligible.~~
- ~~2. A list of approved certification programs will be kept in Human Resources.~~
- ~~3. Annually, the Conference Committee will review the current list of certifications.~~
- ~~4. The Conference Committee may consider adding new certification programs by reviewing the program description, including purpose, scope, term, pre-requisites, re-certification and any other pertinent information. All new certifications are subject to Employer budget review and approval for funding. The Conference Committee will determine the practice areas in which the certification will apply.~~
- ~~5. The nurse must document certification achievement and re-certification to Human Resources.~~
- ~~6.1. Only one (1) certification premium rate can be credited per nurse, regardless of other certifications a nurse may have.~~

Tentatively Agreed To:	
<p>For the Union:</p> <p style="text-align: right; font-size: small;">Signed by:</p> <p style="text-align: center;"><i>Robert H. Lavitt</i></p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p>Robert Lavitt - 375DD6A502D445A...</p> <p>Date: 9/2/2025</p>	<p>For the Employer:</p> <p style="text-align: right; font-size: small;">DocuSigned by:</p> <p style="text-align: center;"><i>Jade Hersch</i></p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p>Jade Hersch - ED538CDB172F42B...</p> <p>Date: 8/21/2025</p>

ARTICLE 5 – EMPLOYMENT PRACTICES

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 3 5.1 Equal Opportunity. The Employer and WSNA agree that conditions of
 4 employment shall be consistent with applicable state, federal, and municipal laws
 5 regarding nondiscrimination.
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7 5.2 Notice of Resignation. Nurses shall be required to give at least fourteen (14)
 8 calendar days’ written notice of resignation ~~presented in person~~ to the nurse’s
 9 manager or designee. The Employer will give consideration to situations that
 10 would make such notice by the nurse impossible. The notice period may not
 11 include vacation, unless approved. ~~Sick time off usage during the notice period~~
 12 ~~may require proof of illness pursuant to section 11.3.4 of this Agreement.~~
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14 5.2.1 Presumption of Resignation/Abandonment.

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 16 a. An employee who fails to appear for work and report absence to the
 17 supervisor, in accordance with departmental policy, on three (3)
 18 consecutive scheduled work shiftsdays, shall be deemed to have
 19 resigned. Notice of separation will be sent to the employee’s last known
 20 address on record with the UW Payroll Office via certified mail after the
 21 third (3rd) consecutive day of absence from a work shift. Prior to sending
 22 the notice, the Employer will attempt to contact the employee through
 23 current primary home telephone and emergency contact numbers on
 24 record. If unable to contact the nurse or emergency contact, the Employer
 25 will notify local authorities to conduct a wellness check.
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27 a.b. Within fourteen (14) calendar days of mailing the separation notice
 28 and upon proof that the failure to report absence could not reasonably
 29 have been avoided, an employee may submit to the supervisor a written
 30 petition for reinstatement.
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32 5.3 Discipline and Discharge/Corrective Action. The parties will follow the “Corrective
 33 Disciplinary Action Process” outlined below. No full-time or part-time nurse who
 34 has completed the probationary period shall be disciplined or discharged except
 35 for just cause. The principle of Corrective Action will be consistently applied. The
 36 process will be considered to incorporate the concept of progressive discipline
 37 while providing a positive method for improvement rather than punitive action.
 38 Within the context of consistent application of this Article, the Employer will
 39 determine the appropriate level of discipline-specific step at which the process
 40 begins based on the nature and severity of the problem. “Just cause” shall be
 41 defined to include the concept of progressive discipline (such as verbal and
 42 written reprimands and the possibility of suspension without pay). A copy of all
 43 written disciplinary actions shall be given to the nurse. Nurses shall not be
 44 required to sign the written disciplinary action except for the purpose of
 45 acknowledging receipt thereof. Progressive discipline shall not be applied when
 46 the nature of the offense requires immediate suspension or discharge. A nurse

47 ~~may request the attendance of an Association representative during any~~
48 ~~investigatory meeting which may lead to disciplinary action.~~

49
50 5.3.1 Verbal Counseling Session. Prior to implementing the Corrective
51 Disciplinary Action/Dismissal Process below, a supervisor and RN may
52 have informal discussions over concerns which do not rise to the level of
53 the formal Corrective Action/Dismissal process but which the supervisor
54 feels the RN should be made aware of. The discussions may include
55 suggestions for addressing those concerns.

56
57 5.3.2 Corrective Disciplinary Action/Dismissal Process. The University will make
58 clear to the RN the specific step of the process being conducted. At all
59 steps of the process the reason for the action will be discussed with the
60 RN, the RN will be made aware of how the Nurse Manager learned of the
61 problem and the RN will be given opportunity to respond.

62
63 Formal Disciplinary Counseling. – Formal Disciplinary Counseling will
64 include drafting a written Formal Disciplinary Counseling action plan that
65 will identify specific problem areas, performance objectives and
66 suggestions for remedying the problem areas. The Formal Disciplinary
67 Counseling action plan will also include timelines for the initiation and
68 completion of actions to be taken by the RN and the Employer. The
69 Formal Disciplinary Counseling meeting will be between the RN, a WSNA
70 representative at the RN's discretion, the Nurse Manager and a Human
71 Resources Consultant. The primary role of the Nurse Manager will be to
72 address the performance problem and the primary role of the Human
73 Resource Consultant will be to guarantee that the meeting is conducted in
74 conformance with due process and this contract.

75
76 Final Disciplinary Counseling. – Final Disciplinary Counseling will include
77 individuals in the same capacity as those who attended the Formal
78 Disciplinary Counseling. Final Disciplinary Counseling will include the
79 drafting of a written Final Disciplinary Counseling action plan, which may
80 be identical to or a revision of the Formal Disciplinary Counseling action
81 plan.

82
83 Dismissal. – Prior to dismissal, a pre-determination meeting will be
84 scheduled to give the RN an opportunity to make their case before the
85 final decision is made. The RN has the right to be represented at the pre-
86 determination meeting. Prior to dismissal, absent extraordinary
87 circumstances (e.g. theft; workplace violence), the Employer shall give
88 written notice of the charges against the RN not less than five (5) days
89 prior to the pre-determination meeting.

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91 Demotion. – When mutually agreed, demotion to another position within
92 the bargaining unit may be considered at any step of the Process.

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5.3.3 Documentation of disciplinary action at the oral warning or written reprimand level of discipline will not be considered relevant to future discipline after two (2) years, provided there are no further similar occurrences in the intervening period.

5.4 Representation.

5.4.1. Investigatory Meetings. – A RN may request and be accompanied by a WSNA representative when a meeting is investigatory in nature and may reasonably be expected to result in Formal Disciplinary Counseling, Final Disciplinary Counseling or Dismissal. RN’s will be advised of any scheduled investigatory meeting when Formal Disciplinary Counseling, Final Disciplinary Counseling or Dismissal is a potential outcome so the RN’s may determine if they wish to have an Association Representative present at the investigatory meeting.

5.4.2. Formal Disciplinary Counseling, Final Disciplinary Counseling, Pre-determination Meetings. – RN’s will also be notified orally or in writing that they may bring WSNA representation to Formal Disciplinary Counseling, Final Disciplinary Counseling and pre-determination meetings.

5.4.3. Attendance of WSNA representatives at investigatory meetings or at Formal Disciplinary Counseling, Final Disciplinary Counseling and pre-determination meetings will not delay the process unduly. RN’s have a right to a meeting with management whenever the Corrective Action/Dismissal Process is being invoked.

5.4.4. Time spent by WSNA Representatives in Employer initiated meetings (i.e., investigatory meetings, formal and final disciplinary counseling, pre-determination meetings) shall be considered work time and will be paid at the regular rate of pay.

~~5.3.1—Just Cause Intermittent: Except as provided below, Intermittent Nurses shall not be terminated except for just cause. Newly hired Intermittent nurses must work a cumulative one thousand eight hundred and seventy-two (1,872) non-overtime hours or more from their date of hire in continuous employment with the Employer in intermittent positions. The parties agree to adhere to the grievance process as outlined in Article 17 of the WSNA UWMC-NW CBA. If a nurse is not meeting performance expectations, they will be given an action plan outlining the identified issues. The parties agree to start at Step Two for terminations.~~

~~5.3.2—Failure To Schedule: Notwithstanding the above, if an intermittent or nonpermanent nurse fails to provide dates to be scheduled as required by the applicable agreement, or to any lesser extent required by their unit, they shall be subject to a written warning if they thereafter fail to provide dates on a second occasion within a~~

139 ~~rolling year, their appointment may be ended. Appointments may also end due to a lack~~
140 ~~of work.~~

141
142 ~~5.3.3 Meeting Request: An intermittent or nonpermanent nurse who is separated may,~~
143 ~~within twenty-one (21) days of the action, request a meeting with a representative of~~
144 ~~WSNA, human resources, and the manager of the department or designee to discuss~~
145 ~~the action. A meeting will be promptly scheduled.~~

146
147 5.54 Personnel File. Personnel records will be maintained for each nurse in Human
148 Resources. Information contained in the personnel record will include:
149 employment application and supporting materials, performance appraisals,
150 records of payroll activity, licensure and training records, letters of commendation
151 and recognition, and records of disciplinary action. By appointment, nurses may
152 inspect their personnel records. Nurses will be given the opportunity to provide a
153 written response to any written evaluations or disciplinary actions to be included
154 in the personnel file. If no disciplinary action is required for a period of two (2)
155 years, evidence of such discipline shall be inadmissible in a grievance arbitration
156 and shall not be used for purposes of progressive discipline. Documentation
157 regarding conditions at date of hire (rate of pay, unit, shift, hours of work), reason
158 for termination, change in employment status, pay or shift and leaves of absence
159 shall be in writing with a copy given to the nurse.

160
161 5.65 Parking. WSNA agrees that during the life of this Agreement, the Employer may
162 apply changes in transportation policy, including adjusting parking fees and
163 criteria for assigning parking spots, to the bargaining unit without the obligation to
164 bargain with WSNA.

165
166 5.76 Floating. Nurses required to float within the hospital shall receive orientation
167 appropriate to the assignment. In the event floating is necessary, a reasonable
168 effort will be made to float a nurse within the specialty area; however, a nurse
169 may be floated outside their specialty area as staff helper, unless the nurse
170 agrees and is qualified to take a patient assignment. Orientation will be
171 dependent upon the nurse's previous experience and familiarity with the nursing
172 unit to which such nurse is assigned. Nurses will be expected to perform all basic
173 nursing functions but will not be required to perform tasks or procedures
174 specifically applicable to the nursing unit for which they are not qualified or
175 trained to perform. The Employer will not assign float nurses as charge nurse ~~or~~
176 ~~lead nurse~~ unless mutually agreeable. Probationary nurses will not be required to
177 float except in emergency situations where skill and competence to perform the
178 work required allow. The order of rotation will be on an equitable rotation to be
179 determined on each unit.

180
181 5.87 Evaluations. All nurses will be formally evaluated in writing prior to completion of
182 the probationary period and thereafter on a regular and periodic basis. Where the
183 nurse requests an evaluation, an evaluation will be given, provided that no more
184 than one evaluation will be given per year. Interim evaluations may be conducted

185 as may be required. The evaluation is a tool for assessing the professional skills
 186 of the nurse and for improving and recognizing the nurse's performance. The
 187 nurse's participation, including a self-evaluation, is an integral part of the
 188 evaluation process. The nurse will be given a copy of the evaluation, if
 189 requested. Nurses will sign the evaluation to acknowledge receipt thereof.
 190 Nurses will be given the opportunity to provide a written response to the
 191 evaluation which will be retained with the evaluation in the nurse's personnel file.
 192 A peer evaluation format may be developed in addition to supervisory evaluation
 193 on a unit-by-unit basis by mutual agreement between unit nurses and the
 194 manager.

195
 196 **5.98** Communication. Nurses who have concerns regarding their working conditions
 197 are encouraged to raise those concerns through the appropriate levels of
 198 supervision and the Conference Committee.
 199

200 **5.109** Nurse Staffing. Quality of care and the health and safety of patients and nurses
 201 are of paramount concern to the Hospital and the nursing staff who provide care
 202 for our patients. Accordingly, the Employer shall comply with applicable staffing
 203 laws and regulations. The hospital and staff RNs shall produce an annual staffing
 204 plan in accordance with law, RCW 70.41.420.
 205

206 **5.110** Staffing Concerns. The parties recognize that nurse staffing is an essential
 207 component of quality care delivery. It is also acknowledged that healthcare is a
 208 dynamic business. As needs change, both parties will comply with the law and
 209 work collaboratively through the Nurse-Hospital Staffing Committee to jointly
 210 assess and evaluate nurse staffing.
 211

212 Nurses, individually or as a group, believing there is an immediate
 213 workload/staffing problem should, as soon as possible, bring the problem to the
 214 attention of the nurses' Supervisors or Nurse Managers. If the situation is not
 215 remedied, nurses may file an Assignment Despite Objection (ADO) when safely
 216 able to do so. No nurse shall be retaliated against for filing an ADO. The ADOs
 217 will be reviewed in Staffing Committee.
 218

219 Nurses who raise staffing issues shall be free from restraint, interference,
 220 discrimination or reprisal.
 221

222 The matters discussed pursuant to this section shall not be subject to Article 17,
 223 Grievance Procedure.
 224

225 **5.124** Health and Safety
 226

227 **5.124.1** Healthy and Safe Workplace. The Employer will maintain reasonable
 228 conditions of health, safety and sanitation including compliance with
 229 Federal, State and Local laws applicable to the safety and health of its
 230 employees. Nurses shall not perform tasks that endanger their health or

231 safety if such work or tasks are not inherent to reasonably prudent nursing
 232 practice. All health and safety equipment that is deemed necessary for a
 233 particular job, as indicated in the job description or department protocols
 234 shall be furnished and, where feasible, utilized. The Employer will provide
 235 nurses with adequate training on the proper use of proper work methods
 236 and protective equipment required to perform hazardous duties. The
 237 Employer will continue its

238
 239 5.1~~24~~.2 Safety Committee. Employee Safety Committee in accordance with
 240 existing regulatory requirements including representation by bargaining
 241 unit RNs. The purpose of this Committee shall be to investigate safety and
 242 health issues and to advise the Employer on education and preventative
 243 health measures of the workplace and its employees. It is a nursing as
 244 well as a management responsibility to report unsafe conditions by using
 245 the QA Memo or other appropriate method. Where the nurse reports an
 246 unsafe condition, the Employer will inform the nurse and the Safety
 247 Committee of the planned remedy, if any, within a reasonable time.
 248

249 5.1~~24~~.3 Workplace Violence. The employer is committed to promoting a safe
 250 workplace that is free from violence or threats of violence. Prominent signs
 251 shall be posted in each unit and patient room of the Employer stating this
 252 policy.
 253

254 5.1~~24~~.4 Workplace Violence Prevention.

255
 256 a. To promote a safe workplace, the Employer has established a
 257 Workplace Violence Prevention Committee which is tasked with the
 258 development, implementation and monitoring of the WPVP plan.
 259 The WPVP Committee monitors WPV trends and makes necessary
 260 recommendations such as training needs, WPV awareness and
 261 reporting mechanism/s. The employer agrees to allow ~~one two (12)~~
 262 NW RNs selected by WSNA to participate in the Workplace
 263 Violence Prevention Committee. Such participation shall be on paid
 264 time. ~~Additional WSNA-NW members may be invited to attend~~
 265 ~~committee meetings on an ad hoc basis on unscheduled and~~
 266 ~~unpaid time, with prior advanced approval and must be approved in~~
 267 ~~advance by the committee co-chairs. In addition to participation on~~
 268 ~~the committee, RNs may request a separate JLM to discuss WPV~~
 269 ~~issues specific to UWMC-NW.~~

270 a.b. Additionally, the Employer agrees to convene a WPV-NW
 271 workgroup consisting of the 2 NW RNs serving on the WPVC,
 272 along with a NW campus security representative and plus two other
 273 management personnel as determined by the Employer. The
 274 workgroup shall determine how frequently to meet; such meetings

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~~will be on paid time. The members of the workgroup will determine the frequency of the meetings. Any actionable suggestions from the workgroup meetings will be presented to the WPV Committee for discussion. Additional WSNA-NW members may be invited to attend the WPV-NW workgroup on an ad hoc basis on unpaid time.~~

5.1~~32~~ Travel Pay. Any nurse required by the Employer to travel to a place of work other than their regular official duty station shall be reimbursed for travel costs if eligible, in accordance with the Administrative Policy Statement 70.2, General Travel Policies, dated January 27, 2014., www.washington.edu/admin/adminpro.

Tentatively Agreed To:	
For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H. Lavitt</i>	<small>DocuSigned by:</small> <i>Jade Hersch</i>
_____ Robert Lavitt <small>5DD6A502D445A...</small>	_____ Jade Hersch <small>ED538CDB172F42B...</small>
Date: 7/23/2025	Date: 7/15/2025

ARTICLE 6 - SENIORITY

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6.1 Seniority. Seniority shall be defined as continuous length of service from date of hire as a registered nurse in the bargaining unit. Part-time and full-time nurses shall accrue seniority at the same rate. In the event two (2) nurses are hired on the same day, relative seniority will be determined by the date the nurse formally accepted the position. The Employer will maintain a record of the date and time each nurse accepts a bargaining unit position. Seniority shall not apply to a nurse until completion of the required probationary period. Upon satisfactory completion of the probationary period, the nurse shall be credited with seniority from most recent date of hire. This definition of seniority applies to the entire Collective Bargaining Agreement except as modified in Article 21 Posting, Transfer, Promotions, Reallocation, which temporarily limits use of a nurse’s full seniority when a nurse transfers into a new department.

6.2 Clinical Cluster. A clinical cluster is a grouping of units within a specialty area in which skills and abilities are similar in nature (see Appendix D).

6.3 Layoff Definition. Layoff shall be defined as a reduction in the number of non-probationary nurses and/or a reduction to the FTE of nurses covered by this agreement that is intended to be permanent or prolonged.

6.4 Definition of Qualified

6.4.1 For Displacing A Less Senior Nurse. A qualified nurse is defined as a nurse who possesses the minimum qualifications, based on established criteria, of the position held by the nurse to be displaced, and is capable of performing the work needed at the level of a satisfactory non-probationary nurse within three months of assuming the position.

6.4.2 For placement into a vacant position open to new graduate recruitment, a qualified nurse will be defined as a nurse who possesses the minimum qualifications and is capable of performing the work needed at the level of a satisfactory non-probationary nurse following an orientation period equal to the average orientation period provided to new graduates hired into that position. Nurses agreeing to accept a vacant position open to new graduate recruitment may have to work a schedule that would have been required of the new graduate for up to a period of one year.

6.5 Prior to Layoff. Prior to implementing a layoff, the Employer, within the context of its determination as to the number of FTEs, shifts, and skill mix needed on the unit, will make a good faith effort to:

- a. Reduce overtime on the unit impacted;
- b. Reduce the use of agency and traveler nurses on the unit impacted;

- 46 c. Reduce reliance on intermittent or nonpermanent nurses on the unit
- 47 impacted;
- 48 d. Utilize low census as appropriate due to a decrease in patient census or
- 49 other business operations;
- 50 e. Seek volunteers on the unit impacted who are willing to be reassigned or
- 51 reduce their FTE but not go below .5 FTE; and
- 52 f. Freeze external hiring into vacant positions within the clinical cluster until
- 53 the process in section 6.7 is completed.

54

55 6.6 Layoff Notification. If there are insufficient volunteers the least senior nurse(s) on

56 the unit impacted will be identified for layoff. The employer will notify the nurse in

57 the position to be eliminated and WSNA at least thirty (30) calendar days in

58 advance of the date of the projected layoff. During the notice period the Employer

59 will do the following in the order below.

- 60
- 61 6.7 Vacant Positions Within the Clinical Cluster.
- 62 a. Before making vacant positions within a clinical cluster available to nurses
 - 63 identified for layoff, the Employer will post those positions in accordance with
 - 64 the Job Posting language of the contract. The Employer will identify and list
 - 65 all vacant positions within the clinical cluster that are .5FTE or higher that are
 - 66 available for nurses identified for layoff.
 - 67 b. In order of seniority, most senior nurse first, nurses identified for layoff who
 - 68 are qualified to perform the work needed in the vacant position(s) will be
 - 69 offered the choice of filling one of the positions listed provided the nurse is
 - 70 qualified (see section 6.3.1).
 - 71 c. If there is a vacant position available for a nurse identified for layoff that is on
 - 72 the same shift the nurse must either take the vacant position, resign or go on
 - 73 the rehire list.
 - 74 d. A nurse who accepts a funded vacant position will have the option to resign
 - 75 within six (6) weeks after accepting the position to be placed on the rehire list.
 - 76 This employment option will count as one (1) of the two (2) offers of
 - 77 placement under section 6.8.5.
 - 78 e. If there is no vacant position available that is on the same shift for a nurse
 - 79 identified for layoff the Employer will move to Displacing a Less Senior Nurse
 - 80 (section 6.8).

81

82 6.8 Displacing a Least Senior Nurse. RN3s will have the option of displacing RN2s in

83 accordance with this section. RN2s may only displace RN2s.

84

85 Nurses identified for layoff who have an opportunity to displace a less senior

86 nurse will be given up to one week to choose between displacing the less senior

87 nurse or being laid off and placed on the rehire list.

- 88
- 89 a. The opportunity to replace the least senior nurse in the affected job class
- 90 within the nurse's unit;

- 91 b. The opportunity to replace the least senior nurse in their clinical cluster (see
92 Appendix D);
93 c. When an RN 3 has more seniority according to section 6.1, the RN3 will have
94 the opportunity to replace the least senior RN2, within the same unit.
95

96 Nurses may request to be laid off and have the right to be placed on the rehire
97 list(s) instead of accepting an employment option above.
98

99 6.9 Rehire List. The rehire list is defined as the list on which a nurse who is laid off is
100 placed after it is determined that:

- 101 a. There are no vacant positions available or there are no vacant positions
102 available for which the nurse is qualified and option (c) below is not available;
103 b. There is a vacant position(s) available and on the same shift as the position
104 the nurse held for which the nurse is qualified but the nurse has chosen not to
105 fill the position;
106 c. Option (b) is not available and the nurse has chosen not to displace a less
107 senior nurse in the clinical cluster.
108

109 6.9.1 Prior to Referral from Rehire List. Prior to offering reemployment to nurses
110 on the rehire list, the Employer will post vacant positions according to the
111 job posting provisions of this contract. Nurses on the rehire list may apply
112 for posted vacant positions. Nurses laid off in accordance with this Article
113 will be placed on a rehire list for twenty- four (24) months from the date of
114 layoff.

115 6.9.2 Referral from the Rehire List. Nurses on the rehire list will be offered re-
116 employment in reverse order of seniority when vacant positions remain
117 unfilled after having been posted in accordance with the job posting
118 provisions of this contract. A nurse on the rehire list will be offered
119 reemployment to vacant positions prior to the Employer offering the
120 positions to non-bargaining unit members when:
121

122 6.9.3 Responding to Referral from Rehire List. A nurse offered reemployment
123 from the rehire list shall be given up to one (1) week to determine if they
124 want the position and, if accepted, up to an additional week to report to
125 work.
126

127 6.9.4 Re-employment Trial Service Period. Nurses reemployed from the rehire
128 list will serve a three (3) month rehire trial service period. During this
129 period either party, at its sole discretion and without resort to the
130 grievance procedure, may initiate return to the rehire list. Time spent in a
131 rehire trial period will not count toward the twenty-four (24) month rehire
132 list period. The three (3) month rehire trial period will be adjusted to reflect
133 any paid or unpaid leave taken during the period.
134

135 6.9.5 Removal from the Rehire List. A nurse will be removed from the rehire list
136 when any one of the following occurs:

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- a. The nurse has been on the list for twenty-four (24) months and has not been reemployed;
- b. The nurse has been successfully reemployed either from the rehire list or as a result of the nurse independently applying for and being selected for a position;
- c. The nurse has refused two (2) opportunities for reemployment from the rehire list for a position equal to the nurse’s FTE status at the time of layoff;
- d. The nurse has been placed two (2) times from the rehire list and has failed to complete the rehire trial service period.

6.9.6 Re-employment from the Rehire List. A nurse who is reemployed either from the rehire list or as a result of independently applying for and being selected for a position while being on the rehire list, will regain the seniority earned at the time of layoff.

6.9.7 Rights While on Rehire List. A nurse on the rehire list shall be eligible to participate in the Employer’s in-service programs and other Employer training programs on a space available basis and on the nurse’s own time.

6.9.8 Rehire List Nurses and Reserve Work. A nurse on the rehire list shall be given preference for intermittent or nonpermanent nurse work. Acceptance of such work will not affect the nurse’s rehire rights. Preference shall be handled in accordance with the following:

- a. The nurse must specifically request the work in advance and must follow all Employer policies and procedures regarding intermittent or nonpermanent nurse positions.
- b. Nurses on the rehire list who meet the requirements of (a) above and the requirements of the position will have preference for intermittent or nonpermanent positions when the schedules are developed.

6.10 Vacation – Laid off Nurses. Nurses who have been laid off will be entitled to be paid for all accrued and unused vacation time off at the time of layoff.

6.11 Vacant Positions Outside Clinical Cluster. Nurses identified for layoff will also be informed of vacant positions not in the clinical cluster in which the nurse identified for layoff worked. If a nurse expresses interest in one of these vacant positions and the nurse and nurse manager agree, the nurse may fill a vacant position not in the nurse’s clinical group. The Employer will not require a nurse identified for layoff to accept a vacant position out of the nurse’s clinical group and a decision by a nurse manager not to accept a nurse into a position out of the nurse’s clinical group shall not be grievable.

182 6.12 Re-employed Nurses. For purposes of accrual of benefits, re-employed nurses
 183 will be treated as newly hired except that a nurse who has been laid off because
 184 of lack of funds or curtailment of work and who is re-employed within twenty-four
 185 (24) months (plus a twelve (12) month extension if requested) shall be entitled to
 186 previously accrued benefits and placement on the salary schedule which they
 187 had at the time of layoff.

188
 189 6.13 Retention of Benefits While on the Rehire List. RNs on the rehire list will receive
 190 employer paid benefit coverage so long as they meet the eligibility requirements
 191 as determined by the State of Washington.

192
 193 6.14 Low Census. Low census is defined as a decline in patient care requirements
 194 resulting in a temporary staff decrease. If low census is required, the Employer
 195 will make a good faith effort to place employees on low census for an entire shift
 196 or for a single four-hour increment at the start or end of the nurse’s shift. If low
 197 census persists, the nurse will be offered standby in lieu of low census. If the
 198 nurse chooses not to accept the standby shift, they may be placed on low
 199 census. During temporary periods of low census, the Employer will:

- 200
- 201 1. Cancel Agency nurses.
- 202 2. Cancel Travelers.
- 203 3. Cancel Incentive shifts.
- 204 4. Cancel Overtime shifts.
- 205 ~~4.5. Ask for volunteers.~~
- 206 ~~5.6. Cancel intermittent or nonpermanent nurses.~~
- 207 ~~6.7. Cancel part-time nurses working above their assigned FTE.~~
- 208 ~~7. Ask for volunteers.~~
- 209 8. Rotate regular full-time and part-time nurses by seniority within the Low
 210 Census Grouping starting with the least senior nurse first, providing skills,
 211 competence and ability are not overriding factors.

212
 213 The Employer will take skill mix and shift length into consideration before
 214 cancelling nurses due to low census based on the above order. The Employer
 215 will not be required to cancel travelers due to low census if the cancellation would
 216 exceed what is permitted by their contract.

217
 218 If an individual volunteers to take a low census day off, that day off shall be
 219 counted for purposes of the rotation list. The rotation list will reflect all low census
 220 days taken whether or not the nurse chooses to use annual leave, and will be
 221 restarted each six (6) months, beginning with the least senior nurse. Nurses who
 222 are scheduled to work but are released from duty due to low census shall
 223 continue to receive medical and dental insurance coverage. Low census hours
 224 taken shall be considered hours paid for the accrual of all benefits and seniority.
 225 Low census is an appropriate subject for the Conference Committee.
 226

227 6.14.1 Additional Hours. Nurses desiring additional hours should notify the
228 Employer in writing, identifying their specific availability. The Employer will
229 first offer additional scheduled hours in the assigned unit to those nurses
230 who have made the request who have lost hours due to low census during
231 their current or prior posted work schedule.

232
233 6.14.2 Low Census Groups. The ~~seven-ten (7/10)~~ Low Census Groups are:
234 1. Medical, Surgical, Float Pool, ~~Adult Psych Services, ICU/SCU;~~
235 2. ICU/SCU;
236 3. Behavioral Health;
237 4. CBC;
238 5. Procedural Areas (including Endoscopy, Vascular, and
239 Neuromodulation);
240 6. Emergency Department;
241 7. Surgical Services (including operating room, post-anesthesia care
242 unit, pre-surgical admitting, pre-admit calling, Cardiac Procedure Unit and
243 OSC);
244 8. Electrophysiology lab, Interventional Radiology, Cardiac Cath Lab,.
245 9. Primary Care Clinics – nurses low censused on a per clinic basis or
246 temporarily reassigned to another area provided skills, competency, and
247 ability are considered equal as determined by the employer.
248 10. Ambulatory Specialty Clinics – nurses low censused on a per clinic
249 basis or temporarily reassigned to another area provided skills,
250 competency, and ability are considered equal as determined by the
251 employer.

252
253 6.14.3 Low Census Notification. As a general guide, the Employer will seek to
254 provide notice to nurses called off for low census not less than two (2) one
255 and one-half (1 1/2) hours prior to day-shift starting time for all shifts and
256 not less than two (2) hours prior to evening and night shift starting time.

257
258 6.14.4 Low Census Report Pay. Nurses who report for work as scheduled
259 (unless otherwise notified in advance) and who are released from duty by
260 the Employer because of low census shall receive a minimum of four (4)
261 hours' work or four (4) hours' pay at the regular rate of pay. Nurses who
262 are sent home after this four (4) hours and subsequently that day are
263 called and agree to work shall receive time and one-half (1½x) the regular
264 rate of pay for all hours worked on the callback.

265
266 6.15 Restructure/Rebid. A restructure/rebid is a redistribution of nursing positions
267 when deemed necessary by the Hospital. When the Hospital proceeds with a
268 restructure/rebid, the following procedures shall be followed:

269
270 6.15.1 Restructured Units. The Employer shall notify WSNA and nurses thirty
271 (30) days prior to the effective date of any restructure/rebid process.
272 WSNA may request a special meeting of the Conference Committee,

273 preferably before the positions are posted, to discuss the proposed
274 changes and evaluate any alternatives. Such meeting shall take place
275 within two (2) weeks following notification.
276

277 The employer shall determine the number of full-time and part-time
278 positions by FTE, shift and schedule line required for the new or
279 restructured unit. A listing of these positions on the new/restructured unit
280 shall be posted on the unit(s) for 10 days. The employer will also post a
281 department seniority list.
282

283 6.15.2 Nurse Rebid Process. To be considered in the rebid process, a nurse
284 within a restructured unit must submit a bid during the job posting period
285 to their Director/Manager on a form developed by the Employer. The
286 Employer may modify the form as it deems necessary to fit the rebid
287 situation. Such form shall include the newly created positions with shift
288 schedule lines, shift and FTE. The form shall also include a method for the
289 nurse to rank the positions in order of preference.
290

291 6.15.3 Rebid & Absent Nurses. The Director/Manager shall attempt to inform any
292 nurse in a restructured unit who during the entire time allocated for the
293 bidding process is on vacation, absent for an extended illness, or is on a
294 leave of absence about the rebid process by telephone and email.
295 Notification shall occur at least ten (10) days prior to the posting period. At
296 that time, the nurse shall receive the bid form and options via email or
297 phone call, or by other mutually agreed to method. Rebids from these
298 nurses must be submitted in writing via email or hand delivery prior to the
299 conclusion of the ten (10)-day posting period. If a nurse fails to submit a
300 bid sheet, management shall place the nurse into a position in order of
301 seniority after all nurses who submitted a bid sheet are placed.
302

303 6.15.4 Restructure/Rebids & Seniority. Seniority within the department, per
304 Article 21 Posting, Transfer, Promotion, Reallocation, shall be the
305 determining factor in making reallocation assignments.
306

307 6.15.5 Restructure/Rebid & Schedule Changes. At the conclusion of the bidding
308 period and within seven (7) calendar days, the hospital shall assign the
309 FTE, shift and schedule line by seniority, consistent with this Article. The
310 hospital shall notify the nurse in writing of the results. Once the nurses are
311 notified, there shall be at least a sixteen (16) day waiting period prior to
312 implementation of the new schedule. The hospital shall provide WSNA
313 with copies of the rebid forms and results of the rebid within five (5)
314 business days of notifying the nurses.
315

316 6.15.6 Restructure/Rebid & A Displaced Nurse. A displaced nurse who does not
317 receive an acceptable position, chooses not to submit a bid or

318 experiences a reduction in FTE, will have the option being laid off
319 pursuant to Section 6, Layoff.
320

321 Tentatively Agreed To:

322
323 For the Union:

Signed by:

Robert H. Lavitt

Robert Lavitt - 375DD6A502D445A...

Date: 9/2/2025

324 For the Employer:

DocuSigned by:

Jade Hersch

Jade Hersch - ED538CDB172F42B...

Date: 8/21/2025

325
326
327

ARTICLE 7 – HOURS OF WORK AND OVERTIME

1
 2
 3 7.1 Work Day. The normal work day shall consist of eight (8) hours ~~work to be~~
 4 ~~completed within eight and one-half (8-1/2) consecutive hours~~, ten (10) hours
 5 ~~work to be completed within ten and one-half (10-1/2) consecutive hours~~, or
 6 twelve (12) hours. ~~work to be completed within twelve and one-half (12-1/2)~~
 7 ~~consecutive hours. For ten (10) hour shifts, refer to Appendix B. For twelve (12)~~
 8 ~~hour shifts, refer to Appendix C.~~

9
 10 7.2 Work Period. The normal work period shall consist of forty (40) hours of work
 11 within a seven (7) day period or eight-eighty (8/80) hours of work within a
 12 fourteen (14) day period.

13
 14 7.3 Alternative Work Schedules. The Employer may post ten (10) hour positions and
 15 twelve (12) hour positions. The Employer may not require any nurse in an eight
 16 (8) hour position to work a ten (10) hour or twelve (12) hour position. When
 17 mutually agreeable to the supervisor, the nurse concerned and WSNA, the work
 18 schedule may consist of shifts other than eight (8), ten (10) or twelve (12) hours.
 19 Alternative work schedules may be established by agreement between an
 20 individual nurse or a group of nurses and their nurse manager within their unit.
 21 To the extent any of the terms and conditions of the alternative schedule would
 22 violate any of the provisions of this Agreement, the Employer will negotiate such
 23 schedules with WSNA prior to implementing the schedules. ~~For ten (10) hour~~
 24 ~~shifts, refer to Appendix B. For twelve (12) hour shifts, refer to Appendix C.~~

25
 26 Alternative schedules shall be in writing, identifying in detail the schedule to be
 27 worked. A copy of the schedule will be sent to the Local Unit Chairperson within
 28 fifteen (15) days of its implementation. Once the schedule is implemented, the
 29 Employer will not discontinue it with less than six (6) weeks' notice to the affected
 30 nurses, including one (1) complete schedule posting period.

31
 32 In the event a majority of the nurses involved in the alternative schedule desire to
 33 discontinue the schedule they will give their nurse manager written notice of their
 34 desire signed by each of the nurses desiring the change. On presentation of this
 35 request the nurse manager will discontinue the schedule after one (1) complete
 36 monthly work schedule under the alternative schedule has been worked after the
 37 notice.

38
 39 7.4 Work Schedules. It is recognized and understood that deviations from normal
 40 hours of work may occur from time to time, resulting from several causes, such
 41 as but not limited to vacations, leave of absence, weekend and holiday duty,
 42 absenteeism, employee requests, temporary shortage of personnel, low census
 43 and emergencies. The Employer retains the right to adjust work schedules to
 44 maintain an efficient and orderly operation. Monthly work schedules shall be
 45 posted sixteen (16) days prior to the beginning of the scheduled work period.
 46 Except for emergency conditions involving patient care, and low census

47 conditions, individual scheduled hours of work set forth on the posted work
48 schedules may be changed only by mutual consent.

49

50 7.4.1 Nurses are encouraged to work together to create a schedule.
51 Professionalism, flexibility and team work are key to a successful
52 scheduling program. The goal is for nurses to work together to create a
53 mutually acceptable schedule that meets the scheduling parameters as
54 defined by the Employer. Departments will maintain procedures that
55 define responsibilities and timeframes for each step within the scheduling
56 process, clarify procedures for scheduling requests (e.g. trades, use of
57 benefit time, professional leave, weekend coverage) and how scheduling
58 conflicts are resolved. The Employer retains ultimate responsibility for
59 schedule approval.

60

61 7.5 Overtime. Overtime shall be compensated for at the rate of one and one-half
62 (1½x) times the regular rate of pay for time worked beyond the nurse's normal
63 full-time work day or normal full-time work period. Double time (2x) the regular
64 rate of pay shall be paid for all consecutive hours worked by the nurse beyond
65 twelve (12) hours. ~~For purposes of computing overtime, the nurse's straight time
66 hourly rate of pay shall include shift differential.~~ Time paid for but not worked
67 shall not count as time worked for purposes of computing overtime pay.
68 Excluding emergency situations, the Employer as a matter of policy shall not
69 reschedule a nurse for extra work because of time off with pay.

70

71 7.5.1 Overtime Definition. All time which is compensated for at the rate of time
72 and one-half (1-½x) the rate of pay will be considered overtime whether or
73 not such compensation is characterized as overtime or premium pay.
74 ~~Except for work on a holiday, only time worked at straight time will count
75 toward calculation of daily or weekly overtime.~~

76

77 7.5.2 The Employer will not initiate requests for nurses to work their
78 administrative time before or after their scheduled shift.

79

80 RN3s that are approved to schedule administrative time before or after a
81 scheduled shift shall have that time considered time worked and shall be
82 paid at the regular rate of pay. Time worked for administrative time is
83 determined by the nurse and will not count towards work before or after
84 the standard shift (Section 7.5) or double time premium in excess of
85 twelve (12) hours per day (Section 7.5) This time will also not count
86 towards toward Rest Between Shifts (Section 7.10).

87

88 7.6 Prohibition of Mandatory Overtime. The acceptance of overtime by any nurse is
89 strictly voluntary, except that overtime may be assigned on a mandatory basis (a)
90 because of an unforeseeable emergent circumstance, (b) because of
91 prescheduled on-call time, (c) when the Employer documents that the employer
92 has used reasonable efforts to obtain staffing for reasons other than chronic staff

93 shortages, or (d) when a nurse is required to work overtime to complete a patient
94 care procedure already in progress where the absence of the nurse could have
95 an adverse effect on the patient.
96

97 **7.7 Overtime Approval.** All overtime must be pre-approved by a supervisor or
98 designee. The Employer and WSNA agree that overtime should be minimized.
99 Overtime shall be computed to the nearest quarter hour. There shall be no
100 pyramiding or duplication of overtime pay or premium pay paid at the rate of time
101 and one-half (1½x). When a nurse is eligible for two (2) or more forms of
102 premium pay and/or overtime pay, the nurse will receive the highest pay rate.
103 Every effort will be made to discuss changes made to time records with the
104 affected nurse prior to submission to payroll.
105

106 **7.8 Compensatory Time Off.** The Employer retains the right to grant compensatory
107 time in lieu of monetary payment if requested by the nurse. Compensatory time
108 shall be accrued hour for hour at the applicable rate of accrual. No more than
109 forty (40) hours of compensatory time may be accrued at a given time and the
110 time off must be scheduled in accordance with Department guidelines. Use of
111 compensatory time is requested by the Nurse and granted by the Employer at a
112 mutually acceptable time. All premiums and differentials applicable to the work
113 shall be included in the payment for compensatory time off. Compensatory time
114 must be used or paid for by June 30th of each fiscal year. The nurse's unused
115 compensatory time balance will be cashed out every June 30th or when the
116 nurse leaves University employment for any reason. The nurse's compensatory
117 time balance may also be cashed out when the nurse:

- 118 1. Transfers within their department to a position with different funding
119 sources, or
- 120 2. Transfers to a position in another department.

121
122 **7.98 Meal/Rest Periods.**

123
124 **7.9.1 Unpaid Meal Period.** All nurses shall receive an unpaid meal period of
125 thirty (30) minutes~~one-half (1/2) hour~~. No nurse shall be required to work
126 more than five (5) consecutive hours without a thirty (30) minute meal
127 period ~~unless there is an urgent patient care need.~~ Meal periods must be
128 uninterrupted, except under permissible circumstances as outlined in
129 7.9.3. Nurses working a twelve (12) hour shift are entitled to a second
130 thirty (30) minute meal period. ~~If the Nurse voluntarily chooses to waive~~
131 ~~their right to a second meal period they must do so in writing on the waiver~~
132 ~~form provided by the Employer.~~ Nurses required to remain on duty or
133 ~~required to remain on-call on the premises in the Hospital~~ during their
134 meal period shall be compensated for such time at the appropriate rate of
135 pay. Nurses should report missed meal periods to their unit leadership at
136 the time of the missed meal period whenever possible and enter and
137 record missed meal breaks via the Kronos timeclock. A missed meal
138 period that is not documented will be considered as taken.

139
140 7.9.2 Rest Period. All nurses shall receive one (1) paid ~~(4)~~ fifteen (15) minute
141 break for every four (4) hours of work. Rest periods must be uninterrupted,
142 except under permissible circumstances as outlined in 7.8.3. Nurses
143 required to remain on duty or required to remain on-call on the premises
144 during their rest period shall be compensated for such time at the
145 appropriate rate of pay. If a nurse requests their manager (or alternate) for
146 the time off to take a break and the manager is unable to provide
147 adequate coverage for the nurse the Employer will pay the break time at
148 the rate of time and one half (1½x) times the nurse's regular rate, if the
149 manager does not reschedule the break. Nurses should report missed
150 breaks to their unit leadership at the time of the missed break whenever
151 possible and enter and record missed rest periods via the Kronos
152 timeclock. A missed rest period not documented will be considered as
153 taken, and meal breaks on the time clock.

154
155 7.9.3 Permissible Interruptions. The Employer will provide nurses with
156 uninterrupted meal and rest breaks except in limited situations that may
157 require a nurse to remain on duty. Permissible interruptions include:

- 158
159 a. An unforeseeable emergent circumstance.
160 b. An unforeseeable clinical circumstance, as determined by the nurse,
161 that may lead to a significant adverse effect on the patient's condition,
162 unless the Employer determines that the patient may suffer life-
163 threatening adverse effects.
164 c. When a nurse's meal or rest break is permissibly interrupted, the
165 employee is entitled to the remainder of the break as soon as is
166 reasonably possible. If the break is not completed, it is considered a
167 missed break under this agreement.

168 7.9.4 Voluntary Waivers. Pursuant to RCW 49.12.187, the Employer and the
169 Union agree that staff may complete a voluntary waiver requesting the
170 right to:

- 171
172 a. Waive their second meal break during a 10 or 12-hour shift;
173 b. Waive the timing of meals and rest breaks;
174 c. Combine meal and rest breaks.

175 Voluntary waivers can be revoked by an employee at any time prior to
176 their scheduled meal or break time. Staff who wish to revoke their waiver
177 are required to email their manager and immediately notify the Charge
178 Nurse on duty. Management retains the right to determine whether
179 voluntary waiver requests can be approved.
180

181 7.9.5 The Union and the Employer agree to the above provisions pursuant to
182 RCW 49.12.187. The parties agree that employees of public employers
183 may enter into collective bargaining contracts, labor/management
184 agreements, or other mutually agreed employment agreements that
185 specifically vary from or supersede, in part or in total, rules adopted under
186 RCW Chapter 49 and WAC 296-126-092 regarding appropriate rest and
187 meal periods. Portions of this section vary from and supersede the RCW
188 and WAC. These provisions will follow the minimum standards for working
189 conditions of RCW 49.12 and WAC 296-126-092 unless such rights are
190 waived by the employee per this agreement.

191
192 7.109 Weekends. The weekend shall be defined for first (day) and second (evening)
193 shift personnel as Saturday and Sunday. For third (night) shift personnel, the
194 weekend shall be defined as Friday night and Saturday night.

195
196 For staff who work alternative shifts and/or twelve (12) hour shifts, the shift will
197 count as a weekend shift if the majority of the shift falls between 11pm Friday
198 and 11pm Sunday.

199
200 The Employer will make a good faith effort to schedule all regular full and part-
201 time nurses for every other weekend off. In the event a nurse works two
202 successive weekends, all time worked on the second weekend shall be paid at
203 the rate of time and one-half (1½x) the regular rate of pay. The third regularly
204 scheduled weekend shall be paid at the nurse's regular rate of pay. Every other
205 weekend off cycles may be altered with at least ten (10) days' notice prior to the
206 start date of the next posted work schedule. Subject to advance approval, nurses
207 may request the trading of weekends, providing the schedule change does not
208 place the Employer into an overtime pay condition. This time and one-half (1½x)
209 premium pay provision (and the double time (2x) premium referenced below)
210 shall not apply to nurses who voluntarily agree to work more, frequent weekend
211 duty, or to nurses who have agreed to trade weekend work. The availability of
212 weekend work shall be determined by the Employer.

213
214 Unscheduled weekend is defined as a shift that is in addition to the nurse's
215 posted scheduled shifts after the schedule is posted and when the nurse is
216 performing direct nursing care. Nurses that agree to work unscheduled weekend
217 shifts shall be paid at double time (2x) the regular rate of pay. This double time
218 (2x) the regular rate of pay cannot be stacked with the successive weekend
219 premium above.

220
221 This section does not apply to scheduled standby shifts. Paid time off taken on a
222 weekend does not count as a weekend shift worked for purposes of eligibility of
223 the double time (2x) premium.

224
225 7.110 Rest Between Shifts. Nurses who qualify for rest between shifts premium (1.5x)
226 will receive it for eight (8) hours.

227
228 Nurses will qualify to receive rest between shifts premium if they do not receive
229 eleven (11) hours rest between regularly scheduled shifts. This includes time
230 worked from call back or standby situations.
231

232 Nurses who are called back to work, whether or not the nurse was on standby,
233 will qualify for rest between shifts premium if the work performed from standby or
234 call back results in the nurse not receiving eleven (11) hours unbroken rest
235 before the start of the nurse's next regularly scheduled shift.
236

237 7.124 Shift Rotation. Should shift rotation be required on a temporary basis, volunteers
238 will be sought first. If there are insufficient volunteers, the Employer will assign
239 shift rotation on the basis of qualifications and reverse seniority on the affected
240 unit. A nurse is entitled to take up to ~~twenty-four~~forty-eight (2448) hours of rest
241 both before and after a shift rotation occurs if the change in start time from the
242 nurse's regular shift to the adjusted shift is greater than or equal to ten (10)
243 hours.
244

245 7.11.1 Limitations on Occurrence of Shift Rotation. The Employer will limit
246 required shift start changes, of more than eight (8) hours, to ~~two~~one (21)
247 per twenty-eight (28)-day work schedule. For example, if an RN is on day
248 shift and rotates to evening shift, this constitutes one ~~of the two allowable~~
249 shift rotations. ~~When the RN returns to day shift, this constitutes the~~
250 ~~second of two allowable shift rotations within the twenty-eight (28)-day~~
251 ~~work schedule.~~
252

253 7.11.2 Double Shifts. Any nurse who works a double shift of at least sixteen (16)
254 hours in combination, may request to have their next scheduled shift off, if
255 that shift is within twenty-four (24) hours of the end of their double shift.
256 Such requests must be tracked in the exception log. If the nurse requests,
257 they shall be entitled to draw on any accrued and unused annual leave to
258 cover the hours of the shift they have requested off. If the nurse has opted
259 for taking their shift off and patient demand cannot be covered by another
260 nurse and, therefore, the nurse is required to work their shift, the nurse will
261 receive payment at the overtime rate of time and one-half (1½x) for all
262 hours worked on that shift.
263

264 7.12 Donning and Doffing. Nurses at UWMC-Northwest performing work in areas
265 where they are required to change into and out of Employer-required, Employer-
266 provided and Employer-laundered scrub uniforms as a job expectation shall be
267 paid for the time spent changing into and out of required scrub uniforms. Nurses
268 will have a grace period of up to 10 minutes during their regularly scheduled shift
269 for donning and doffing at the beginning and end of their shift.
270

271
272

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Tentatively Agreed To:	
For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H. Lavitt</i>	<small>DocuSigned by:</small> <i>Jade Hersch</i>
Robert Lavitt <small>375DD6A502D445A...</small>	Jade Hersch <small>ED538CDB172F42B...</small>
Date: 9/2/2025	Date: 8/21/2025

ARTICLE 8 - COMPENSATION

1
 2
 3 8.1 Progression Start Dates. Annually the salary of nurses covered by the UWMC-
 4 NW bargaining units will be increased by one step on the nurse’s progression
 5 start date until the nurse has reached the top step of the appropriate salary
 6 range. For purposes of step increases, the progression start date will be
 7 determined as follows:

- 8
 9 a. The first of the current month for actions occurring between the first and
 10 the fifteenth of the month; or,
 11 b. The first of the following month for actions occurring between the sixteenth
 12 and the end of the month.

13
 14 ~~When unpaid time off exceeds ten (10) working days in any calendar month or~~
 15 ~~eighty (80) hours prorated for part-time employment, the progression start date~~
 16 ~~will be extended by one (1) month. Unpaid time off for Worker’s Compensation,~~
 17 ~~military service, or for the purpose of formal collective bargaining sessions, will~~
 18 ~~not alter the progression start date.~~

19
 20 When a nurse returns from layoff status, the progression start date will be
 21 reestablished and extended by an amount of time equal to the period of layoff to
 22 give credit for time served in a salary step prior to layoff.

23
 24 When a progression start date coincides with a promotional date, the
 25 appointment to a new salary range, and/or a market adjustment, the step
 26 increase will be applied first.

27
 28 8.2 Date of Implementation. Wage increases, longevity increments, and increases in
 29 other forms of compensation set forth in this Agreement shall become effective at
 30 the beginning of the first full payroll period on or after the calendar dates
 31 designated.

32
 33 8.3 Recognition for Past Experience. Full-time and part-time nurses hired during the
 34 term of this Agreement shall be compensated in accordance with the following
 35 plan:

- 36
 37 a. All nurses hired during the term of this Agreement shall be given full credit
 38 for continuous recent experience when placed on the wage scale.
 39 b. For purposes of this section, continuous recent experience as a registered
 40 nurse shall be defined as clinical nursing experience in an accredited
 41 hospital or skilled nursing facility (including temporary employment with an
 42 employer) without a break in nursing experience which would reduce the
 43 level of nursing skills in the opinion of the Employer.

44
 45 8.4 Wage Increases. Nurses covered by this Agreement shall be paid in accordance
 46 with the wage schedule as shown in Appendix E.

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The wage schedule in Appendix E reflects the following:

Effective July 1, 202~~5~~³, each classification represented by WSNA will continue to be assigned to the same Pay Table and Salary Range as it was assigned on June 30, 202~~5~~³. Effective July 1, 202~~5~~³, each nurse will continue to be assigned to the same Salary Range and Step that they were assigned on June 30, 202~~5~~³ unless otherwise agreed. Nurses who are paid above the maximum for their range on June 30, 202~~5~~³ will continue to be paid above the maximum range on July 1, 202~~5~~³ unless otherwise agreed.

- A. ~~Effective~~ Within 90 days of ratification and effective on the first available pay period after ratification as determined by the Employer July 1, 2023, all step values of Table BZ, Range 02 will be increased by an additional ~~three~~^{four} percent (~~3~~⁴%). This increase will be based upon the salary schedule in effect at the time of the increase on June 30, 2023.
- B. Effective July 1, 202~~6~~⁴, all step values of Table BZ, Range 02 will be increased by an additional ~~two~~^{three} percent (~~2~~³%). This increase will be based upon the salary schedule in effect on June 30, 202~~6~~⁴.
- C. The RN 3 scale shall be amended to reflect eight percent (8%) above the RN2 scale at each step of the wage scale throughout the life of this Agreement. Charge Nurse will remain ~~two~~^{three} dollars ~~and fifty cents~~ (~~\$3.00~~^{\$3.50}) above each step on the RN2 scale and Float Nurse will remain five dollars (\$5.00) above each step on the RN2 scale.
- D. Range increases on Table BZ will be calculated based off the full time monthly value and then converted to an hourly rate.

Tentatively Agreed To:	
<p>For the Union:</p> <p style="text-align: center;"><small>Signed by:</small> <i>Robert H. Lavitt</i></p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p>Robert Lavitt <small>375DD6A502D445A...</small> Date: 9/2/2025</p>	<p>For the Employer:</p> <p style="text-align: center;"><small>DocuSigned by:</small> <i>Jade Hersch</i></p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p>Jade Hersch <small>ED538CDB172F42B...</small> Date: 8/21/2025</p>

ARTICLE 9 – ~~PREMIUM PAY~~ OTHER COMPENSATION

9.1 Shift Differential. Nurses assigned to work the second (3-11 p.m.) shift shall be paid a shift differential of ~~two three~~ dollars ~~and fifty cents~~ (~~\$3.002.50~~)¹ over the ~~hourly regular contract~~ rate of pay. Nurses assigned to work the third (11 p. m. – 7 a. m.) shift shall be paid a shift differential of ~~four five~~ dollars ~~and fifty cents~~ (~~\$5.004.50~~)² over the ~~hourly regular~~ rate of pay. Nurses shall be paid shift differential on second or third shift if the majority of hours are worked during the designated shift. RNs who are assigned to work first shift shall receive second shift differential when they work four (4) or more hours after 1500.

An RN permanently assigned to second (evening) or third (night) shift will receive the shift ~~premium differential~~ assigned to that shift. An RN who is temporarily assigned, within the RN’s FTE, to another shift with a lower shift rate will receive the higher shift rate if the temporary assignment is not greater than five (5) consecutive working days.

An RN who is using paid time off will receive the shift ~~premium differential~~ if the RN has a permanent work shift designation of evening or night.

9.2 Low Census Standby Premium and Callback Pay When Called Back from Low Census. Where there is a low census, under section 6.14, nurses may be put on standby during the hours they are scheduled to work and will be compensated at the rate of ~~seven four~~ dollars (~~\$7.004.00~~)³ for each hour on standby. If the nurse is called in from standby, then the nurse will be guaranteed a minimum of three (3) hours’ pay at time and one-half (1 ½ X) the nurse’s regular rate of pay. The nurse will be paid at the nurse’s regular rate of pay for the remainder of the scheduled shift. In addition, the nurse shall receive standby pay for the entire shift. ~~Nurses who agree to be on standby shall continue to be considered on low census and all such hours shall count toward seniority and benefit accrual. If in any unit, voluntary standby is not routinely accepted by nurses on that unit, the Employer may give WSNA thirty (30) days’ written notice to apply standby in that unit according to the low census order of Article 6.14.~~

9.3 On Call Premium and Callback Pay. Nurses assigned to be on call during the hours outside of ~~the nurse’s their~~ regularly scheduled shift, shall be paid seven dollars (\$7.00) per hour for all standby hours.

If the nurse is called to work, they shall be guaranteed a minimum of three (3) hours’ pay at the rate of time and one-half (1½x) the nurse’s regular rate of pay in

¹ This increase will be implemented within 90 days of ratification and effective on the first available pay period after ratification as determined by the Employer.

² This increase will be implemented within 90 days of ratification and effective on the first available pay period after ratification as determined by the Employer.

³ This increase will be implemented within 90 days of ratification and effective on the first available pay period after ratification as determined by the Employer.

41 addition to on call pay. Nurses on call shall be ~~offered~~~~provided with~~ signal
42 devices. Travel to and from the Hospital shall not be considered time worked. ~~On~~
43 ~~call duty shall not count toward seniority and benefit accrual.~~ This section shall
44 not apply to nurses subject to low census.
45

46 9.54 Charge Nurse/Lead Nurse Pay. ~~Nurses RN2s~~ who are assigned as charge
47 nurse/~~lead nurse with a regular schedule of at least .8 FTE~~ will receive ~~two three~~
48 dollars ~~and fifty cents (\$3.002.50)~~⁴ per hour additional pay. Nurses who are
49 assigned relief charge ~~or relief lead~~ will receive a differential of ~~two three~~ dollars
50 ~~and fifty cents (\$3.002.50)~~ per hour for hours actually worked.
51

52 9.65 Preceptor Premium Pay. An ~~experienced RN2 who isy nurse~~ assigned ~~by the~~
53 ~~Manager or designee~~ as a preceptor shall receive ~~a Preceptor p~~ Premium Pay at
54 the rate of one two dollars ~~fifty cents (\$2.001.50)~~⁵ per hour.
55

56 9.76 Weekend Premium Pay. Any nurse who works on a weekend shall receive four
57 dollars (\$4.00) per hour premium pay for each hour worked on the weekend in
58 addition to the nurse's regular rate of pay. Weekend premium pay shall not be
59 included in the nurse's regular rate of pay for overtime pay calculations, unless
60 required by the Fair Labor Standards Act.
61

62 9.8 Sunday Night Premium⁶. Any nurse who works a Sunday night shall receive
63 three dollars (\$3.00) per hour premium pay for each hour worked on the Sunday
64 night shift in addition to the nurse's regular rate of pay. Sunday night shall be
65 defined as 7:00 p.m. on Sunday through 7:00 a.m. on Monday. RNs shall be paid
66 the Sunday Night premium if the majority of hours are worked during the
67 designated timeframe. This premium cannot be combined with any Weekend
68 Premium.
69

70 9.97 Work in Advance of Shift. When a nurse is required to report for work in advance
71 of the assigned shift and continues working during the scheduled shift, all hours
72 worked prior to the scheduled shift shall be paid at time and one-half (1½x) the
73 regular rate of pay. A nurse who reports to work in advance of the assigned shift
74 will not be released from duty prior to the completion of that scheduled shift,
75 except for low census, unless there is mutual consent.
76

77 9.108 Work on Day Off. Full-time nurses called in on their regularly scheduled day off
78 shall be paid at the rate of one and one-half (1½x) times the regular rate of pay
79 for the hours worked.
80

⁴ This increase will be implemented within 90 days of ratification and effective on the first available pay period after ratification as determined by the Employer.

⁵ This increase will be implemented within 90 days of ratification and effective on the first available pay period after ratification as determined by the Employer.

⁶ This premium will be implemented within 90 days of ratification and effective on the first available pay period after ratification as determined by the Employer.

81 ~~9.8.1 Incentive Shifts. To avoid using agency, the employer may post incentive~~
82 ~~shifts paying an additional ten dollars (\$10.00) per hour. Incentive shifts~~
83 ~~will be posted in advance when possible. Regularly scheduled nurses will~~
84 ~~have priority over intermittent or nonpermanent nurses. Staff working at~~
85 ~~regular pay rate will have priority over overtime shifts. Nurse must work~~
86 ~~scheduled shifts during that pay period.~~

87
88 ~~9.8.1.1 Scheduling. Unit manager will designate and post incentive shifts as far in~~
89 ~~advance as they deem necessary. Nurse will schedule incentive shifts with~~
90 ~~the unit manager or designee.~~

91
92 ~~A nurse canceling an incentive shift will give twenty four (24) hour notice (except~~
93 ~~in case of illness). Failure to do so may result in ineligibility for future~~
94 ~~incentive shifts. Management reserves the right to cancel incentive shifts.~~
95 ~~Nurses calling in sick on incentive shifts will not receive sick pay.~~

96
97 9.11 Pre-Scheduled Voluntary Overtime. After the initial scheduled bid is incorporated
98 and posted, the Employer may offer pre-scheduled voluntary overtime shifts to
99 nurses, including intermittent and nonpermanent employees.

100
101 The shifts shall be compensated at the rate of time and one-half (1 ½ X) the
102 regular rate of pay plus an additional two (2) hours of extra pay for the shift. The
103 extra pay shall be compensated at the regular rate of pay. If the shift is cancelled
104 at least two (2) hours prior to the start of the shift, the premium will not be paid.
105 The nurse shall receive the premium pay (time and one-half (1 ½ X) the nurse's
106 regular rate) for a minimum work period of three (3) hours. This pay is in addition
107 to all compensation contained in the CBA except this compensation cannot be
108 bundled with call back.

109
110 9.129 Certification Pay. Nurses certified in a specialty area recognized by the
111 Employer, as defined in section 4.10, shall receive a premium of one dollar
112 twenty-five cents (\$1.25) per hour.

113
114 9.130 Float Pool Premium. Any full time or part time nurse with regularly scheduled
115 shifts and hours designated to the Float Pool or as nursing house supervisors,
116 shall receive a five dollar (\$5.00) per hour premium for all hours worked as a
117 Float Pool nurse as part of the nurse's regular rate of pay.

118
119 9.144 Temporary Floating Premium. Effective upon ratification, all nurses who are
120 assigned to float to a regular unit, other than their hired unit(s)/area(s), except for
121 Designated Float Nurses, shall receive one dollar fifty cents (\$1.50) per hour float
122 premium for all hours worked as a float to the other unit/area.

123
124 9.152 BSN Premium. A RN who holds a BSN or higher degree in nursing shall receive
125 one dollar (\$1.00) per hour premium pay.
126

127 9.1~~63~~ MSN/MN Premium. A RN who attains a Master of Science in Nursing (MSN) or a
128 Master of Nursing (MN) degree shall receive a one (1)-step pay increase with
129 proof of the degree.

131 9.17 STAT Nurse Premium⁷. RN2s designated as STAT nurses will receive four
132 dollars (\$4.00) per hour for every hour worked as a STAT nurse and in addition,
133 will receive the Charge Nurse premium of three dollars (\$3.00) per hour for every
134 hour worked as a STAT nurse. This premium cannot be combined with the Float
135 Pool Premium.

136
137 RN3s designated as STAT nurses will receive the four dollars (\$4.00) per hour
138 STAT nurse premium for every hour worked as a STAT nurse.

140 Tentatively Agreed To:

141 For the Union:

Signed by:

Robert H. Lavitt

Robert Lavitt 375DD6A502D445A...

Date: 9/2/2025

141 For the Employer:

DocuSigned by:

Jade Hersch

Jade Hersch ED538CDB172F42B...

Date: 8/21/2025

⁷ This increase will be implemented within 90 days of ratification and effective on the first available pay period after ratification as determined by the Employer.

ARTICLE 10 – HOLIDAY AND VACATION TIME OFF

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10.1 Holidays. Holidays for nurses in the bargaining unit shall be as designated by the Employer and approved by the State of Washington for classified nurses of the Employer including UWMC-NW. The designated holidays are observed as shown on the Employer’s staff holiday schedule:

- 1. New Year’s Day
- 2. Martin Luther King Jr.’s Birthday (3rd Mon Jan)
- 3. President’s Day (3rd Mon Feb)
- 4. Memorial Day
- 5. Juneteenth
- 6. Independence Day
- 7. Labor Day
- 8. Veteran’s Day
- 9. Thanksgiving Day
- 10. Native American Heritage Day
- 11. Christmas Day
- 12. Personal Holiday

The Employer may designate other days to be observed in lieu of the above holidays.

Holidays are prorated for part-time nurses. The Employer may designate other days or shifts to be observed in lieu of the above holidays.

To be paid for a holiday not worked, nurses must be in pay status for at least four (4) hours on the last scheduled work shift preceding the holiday.

Holiday Pay Rules. The following applies to the holidays listed in this Article:

Full Time Nurse:

- A. When the holiday falls on the full time nurse’s regularly scheduled work day and is worked, the nurse will be paid holiday premium pay (one and one half) for all hours worked. The nurse will also receive eight (8) hours of holiday credit.
- B. When the holiday falls on the full time nurse’s regularly scheduled work day and is not worked, the nurse will be paid eight (8) hours at the nurse’s regular rate of pay. If the nurses shift is more than eight (8) hours, the nurse will be allowed to use compensatory time, holiday credit, vacation time off, or unpaid time off to complete the regularly scheduled work hours for the day.
- C. When the holiday falls on the nurse’s regularly scheduled day off, the nurse will receive eight (8) hours of holiday credit.

Part Time Nurse:

- 47
- 48 A. When the holiday falls on the part time nurse’s regularly scheduled work day
- 49 and is worked, the nurse will be paid holiday premium pay (one and one half)
- 50 for all hours worked. The nurse will also receive the prorated to full time
- 51 number of hours of holiday credit.
- 52 B. When the holiday falls on the part time nurse’s regularly scheduled work day
- 53 and is not worked, the nurse will be paid the prorated to full time number of
- 54 hours at the nurse’s regular rate of pay.
- 55 C. When the holiday falls on the part time nurse’s regularly scheduled day off,
- 56 the nurse will be paid the prorated to full time number of hours at the nurse’s
- 57 regular rate of pay.
- 58

59 Night Shift Nurses. The holiday for night shift nurses whose work schedule
 60 begins on one calendar day and ends on the next will be the shift in which half or
 61 more of the hours fall on the calendar holiday. That shift will be treated as the
 62 holiday and paid in accordance with the above holiday pay rules.

63
 64 Holiday Credit.

- 65 A. Holiday credit will be used and scheduled by the nurse in the same
- 66 manner as vacation time off.
- 67 B. Holiday Credit Cash Out: All holiday credit must be used by June 30 of
- 68 each year. The nurse’s holiday credit balance will be cashed out every
- 69 June 30 or when the nurse leaves University employment for any reason.
- 70 The nurse’s holiday credit balance may be cashed out when the nurse:
- 71 1. Transfers to a position in their department with different funding
- 72 sources or,
- 73 2. Transfers to a position in another department.
- 74

75 Nurses must be in pay status for at least four (4) hours of their last scheduled
 76 work day preceding the holiday in order to be paid for the holiday.

77
 78 10.1.1 Personal Holiday.

- 79
- 80 a. Each nurse may request one personal holiday each calendar year and
- 81 the Manager must grant this day, provided:
- 82 i. The nurse has been continuously employed by the Employer for
- 83 more than four (4) months;
- 84 ii. The nurse has made the request in accordance with the
- 85 department scheduling guidelines; however, the nurse and the
- 86 supervisor may agree upon an earlier date; and
- 87 iii. The number of nurses selecting a particular day off does not
- 88 prevent providing continued public service.
- 89 b. Entitlement to the holiday will not lapse when denied under a.i. above.
- 90 c. Full-time nurses shall receive eight (8) hours of regular holiday pay for
- 91 the personal holiday. Any differences between the scheduled shift for
- 92 the day and eight (8) hours may be adjusted by use of vacation time

93 off, use or accumulation of compensatory time or holiday credit as
 94 appropriate, or unpaid time off.
 95 d. Part-time classified nurses shall be entitled to the number of paid hours
 96 on a personal holiday that are pro-rated to their FTE.
 97

98 10.2 Vacation Time Off. The vacation accrual schedule for 1.0 FTE nurses in the
 99 bargaining unit shall be as follows:

<u>During</u>	<u>Paid Vacation Days/ Hours Per Year</u>	<u>Per Month</u>
104 1st year _____	12 days/96 hours	8.00
105 2nd year _____	13 days/104 hours	8.67
106 3rd year _____	14 days/112 hours	9.33
107 4th year _____	15 days/120 hours	10.00
108 5th year _____	16 days/128 hours	10.67
109 6th year _____	17 days/136 hours	11.33
110 7th year _____	18 days/144 hours	12.00
111 8th year _____	19 days/152 hours	12.67
112 9th year _____	20 days/160 hours	13.33
113 10th year _____	21 days/168 hours	14.00
114 11th year _____	22 days/176 hours	14.67
115 12th – 19th year	23 days/184 hours	15.33
116 20th – 24th year	24 days/192 hours	16.00
117 25th year or more	25 days/200 hours	16.67

118
 119 10.3 Vacation Time Off—Use.

120
 121 10.3.1 All requests for vacation time off must be approved by the Employer in
 122 advance of the effective date unless used for emergency childcare.

123
 124 10.3.2 Vacation time off shall be scheduled by the Employer at a time most
 125 convenient to the work of the department, the determination of which
 126 shall rest with the employing official. As far as possible, time off will be
 127 scheduled in accordance with the wishes of the nurse in any amount up
 128 to the total of their accrued time off balance.

129
 130 10.3.3 Paid vacation time off may not be used in advance of its accrual.

131
 132 Scheduling of vacations shall be the responsibility of supervision. When a
 133 vacation request is submitted eight (8) weeks or more in advance of
 134 schedule posting, that request shall be responded to within two (2) weeks
 135 of that request. Nurses shall not be required to secure their own coverage
 136 for any properly requested time off. Scheduled weekends during approved
 137 vacation periods shall not be rescheduled. However, schedules may be
 138 adjusted to meet unit needs. The department shall receive input from the

139 local unit before making changes to established department policies on
 140 vacation time off. A signup sheet will be maintained for volunteers to cover
 141 vacation weekends. Such volunteers will be scheduled prior to requiring
 142 schedule adjustments and will be paid the appropriate weekend premium.
 143

144 10.3.4 Peak Vacation Periods: Peak vacation periods for the purposes of RN
 145 scheduling are June 16 through September 15 and Thanksgiving through
 146 January 1.
 147

- 148 a. From June 16 through September 15, vacations will be a maximum
 149 of two (2) calendar weeks, unless the clinical area or unit has a limit
 150 that exceeds two (2) calendar weeks or can accommodate more
 151 than two (2) calendar weeks. The two (2) calendar weeks may be
 152 taken consecutively if the RN requests two (2) consecutive weeks.
- 153 b. From Thanksgiving through January 1, vacations will be a
 154 maximum of one (1) calendar week and may be inclusive of one
 155 major holiday unless the clinical area or unit has a limit that
 156 exceeds one (1) calendar week or can accommodate more than
 157 one (1) calendar week.
- 158 c. Peak Period Vacation Scheduling: Peak period vacation requests
 159 will follow the schedule below unless the clinical area or unit has an
 160 existing procedure for vacation requests and responses:
 - 161 i. June 16 through September 15 requests must be submitted
 162 in writing by February 1 and will be approved or denied in
 163 writing by February 28.
 - 164 ii. Thanksgiving through January 1 vacation requests must be
 165 submitted in writing by July 1 and will be approved or denied
 166 in writing by July 31.
 167

168 The time frames for submission of requests contained in (a) and (b) above
 169 do not preclude nurses from submitting requests after the deadline;
 170 however, late requests will be considered after those that are timely
 171 submitted in accordance with the unit's scheduling guidelines.
 172

173 In the event multiple requests for the same period cannot be granted and
 174 cannot be resolved among the nurses involved, unit needs or seniority as
 175 calculated for transfer will be used as the determining factor.
 176

177 10.4 Vacation Time Off – Accumulation-Excess. A RN may accumulate a vacation
 178 balance that normally shall not exceed two hundred eighty (280) hours. A RN
 179 may elect to accrue in excess of two hundred eighty (280) hours provided:
 180

181 10.4.1 The excess accrued vacation time is used prior to the RN's anniversary
 182 date.
 183

184 10.4.2 The nurse has requested and received written approval of a plan from
185 their manager and Human Resources to use the excess accrued
186 vacation. It is the RN's responsibility to monitor and manage excess
187 accrued vacation. If the approvals outlined above are not met, the RN will
188 lose the accrued vacation in excess of two hundred eighty (280) hours on
189 their anniversary date.
190

191 10.4.3 If a RN's request for vacation time off is denied by the Employer, the
192 maximum of two hundred eighty (280) hours accrual shall be extended for
193 each month that the vacation time off is denied.
194

195 10.5 Vacation Time Off – Cash Payment. RNs who have completed six (6) continuous
196 months of employment and who separate from service by resignation, layoff,
197 dismissal, retirement or death are entitled to a lump sum cash payment for all
198 unused vacation time off. Vacation time off payable under section 10.2, 10.3, and
199 this section shall be computed at the RN's regular rate of pay. No contributions
200 are to be made to the Department of Retirement systems for lump sum payment
201 of excess vacation leave accumulated, nor shall such payment be reported to the
202 Department of Retirement Systems as compensation.
203

204 10.6 Vacation Time Off Donation. In accord with state law and Employer policy, RNs
205 may donate vacation time off as shared leave to any nurse eligible to receive
206 such donations.
207

208 Tentatively Agreed To:
209
210 For the Union: Signed by: Robert H Lavitt
211 *Robert H Lavitt*
212 _____
213 Robert Lavitt 375DD6A502D445A...
214 Date: 8/19/2025

For the Employer: DocuSigned by: Jade Hersch
Jade Hersch

Jade Hersch ED538CDB172F42B...
Date: 6/30/2025

ARTICLE 11 – SICK TIME OFF

1
2
3 11.1 Sick Time Off — Accrual.
4

5 11.1.1 Full-time RNs shall accrue eight hours of sick time off for each month of
6 completed classified service. Paid sick time off may not be used in
7 advance of accrual.
8

9 11.1.2 RNs working less than a full-time schedule shall accrue sick time off on
10 the same pro-rata basis that their employment schedule bears to a full-
11 time schedule.
12

13 11.1.3 Employees with leave without pay exceeding 80 hours in a month
14 (prorated for part-time) will earn a monthly accrual proportionate to the
15 number of hours in pay status, in the month to that required for full-time
16 employment. Sick leave accruals must not exceed eight hours in a month.
17

18 11.2 Family Members. The RN's spouse or state registered domestic partner (any
19 sex), child, child's spouse, parent, grandparent, grandchild, sibling. Family
20 member also includes individuals in the following relationships with the RN's
21 spouse or domestic partner: child, grandchild, parent and grandparent. "Child"
22 also includes a child of a legal guardian or de facto parent, regardless of age or
23 dependency status and those to whom the nurse is "in loco parentis" or "de facto"
24 parent as well as a child of a legal guardian or de facto parent. Parent and
25 Parent-in-law also includes de facto parent, foster parent, stepparent, or legal
26 guardian. Family member also includes any individual who regularly resides in
27 the employee's home or where the relationship creates an expectation that the
28 employee care for the person, and that individual depends on the employee for
29 care. Family member does not include an individual who simply resides in the
30 same home with no expectation that the employee care for the individual.
31

32 11.3 Sick Time Off—Use.
33

34 11.3.1 Sick time off shall be allowed a nurse under the following conditions:
35

- 36 a. Because of and during mental or physical illness, disability or injury which
37 has incapacitated the nurse from performing required duties.
38 b. By reason of exposure of the nurse to a contagious disease during such
39 period as attendance on duty would jeopardize the health of fellow
40 employees or the public.
41 c. When an employee's child's school or place of care has been closed for a
42 health-related reason or after the declaration of an emergency by a local
43 or state government or agency, or by the federal government.
44 d. Because of emergencies caused by serious illness or injury of a family
45 member fifteen years of age and over that require the presence of the
46 nurse to provide immediate necessary care of the patient or to make

- 47 arrangements for extended care. The Employer may authorize sick time
 48 off use as provided in this subsection for other than family members.
 49 e. To care for a child under the age of eighteen (18) with a health condition
 50 that requires treatment or supervision, or to make arrangements for
 51 extended care.
 52 f. Because of illness or injury of a family member who is a person of
 53 disability and requires the nurse’s presence to provide short-term care or
 54 to make arrangements for extended care.
 55 g. To provide emergency child care for the nurse’s child.
 56 h. Because of a family member’s death that requires the assistance of the
 57 nurse in making arrangements for interment of the deceased.
 58 i. For personal medical, dental, or optical appointments or for family
 59 members’ appointments when the presence of the nurse is required, if
 60 arranged in advance with the employing official or designee.
 61 j. If the employee or the employee’s family member is a victim of domestic
 62 violence, sexual assault, or stalking as defined in RCW 49.76.020. The
 63 Employer may require the request for leave for this purpose be supported
 64 by verification per Administrative Policy Statement 46.8.
 65 i.k. To allow the employee to prepare for, or participate in, any judicial or
 66 administrative immigration proceeding involving the employee or
 67 employee’s family member.¹

68 11.3.2 Sick time off may be granted for condolence or bereavement.

69
 70 11.3.3 In accordance with the Washington Family Care Act, RCW 49.12, RNs
 71 shall be allowed to use any or all of their choice of sick time off or other
 72 paid time off to care for their

- 73
 74 a. child with a health condition that requires treatment or supervision or
 75 b. spouse, parent, parent-in-law or grandparent who has a serious health
 76 condition or an emergency condition.

77
 78 Nurses shall not be disciplined or otherwise discriminated against because
 79 of the exercise of these rights.

80
 81 11.3.4 Sick Time Off Verification. The Employer may only request verification if
 82 you use or request to use paid sick time off after absences on (3)
 83 consecutive work days. Such verification or proof may be given to the
 84 supervisor/manager or Human Resources according to departmental
 85 policy.
 86

87 11.3.5 Any discrimination or retaliation against a nurse for lawful exercise of paid
 88 sick time off rights is not allowed. Corrective action may not be taken for
 89 the lawful use of paid sick time off.

¹ This provision will become effective on July 27, 2025 pursuant to Engrossed Substitute House Bill 1875.

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11.4 Bereavement Time Off. ~~Three-Five (35)~~ days of bereavement time off shall be granted for each death of a family member including loss of pregnancy. A qualifying pregnancy for the purpose of bereavement is defined as the pregnancy of the employee, including as a surrogate, or employee parent-to-be, including through surrogacy or adoption, where the employee would have been the parent. Family member is ~~defined as the RN's spouse or state registered domestic partner (any sex), child, parent, grandparent, grandchild, sibling.~~ Family member also includes individuals in the following relationships with the RN's spouse or domestic partner: ~~child, parent and grandparent.~~ "Child" also includes ~~a child of a legal guardian or de facto parent, regardless of age or dependency status and those to whom the nurse is "in loco parentis" or "de facto" parent as well as a child of a legal guardian or de facto parent. Parent and Parent-in-law also includes de facto parent, foster parent, stepparent, or legal guardian in~~ Section 11.2 (above).

~~Sick time off~~ In addition to the ~~three-five (35)~~ days of bereavement time off, sick time off may be used for the purpose of bereavement with the approval of the nurse manager.

11.5 Sick Time Off Cash Out.

1. Nurses shall be eligible to receive monetary compensation for accrued sick time off as follows:
 - a. In January of each year, and at no other time a nurse whose year-end sick time off balance exceeds four hundred and eighty (480) hours may choose to convert sick time off hours earned in the previous calendar year minus those used during the year to monetary compensation.
 - i. No sick time off hours may be converted which would reduce the calendar year-end balance below four hundred and eighty (480) hours.
 - ii. Monetary compensation for converted hours shall be paid at the rate of twenty-five percent (25%) and shall be based upon the nurse's current salary.
 - iii. All converted hours will be deducted from the nurse's sick time off balance.
 - b. Nurses who separate from state service due to retirement or death shall be compensated for their unused sick time off balance at the rate of twenty-five percent (25%). Compensation shall be based upon the nurse's salary at the time of separation. For the purpose of this subsection, retirement shall not include "vested out-of-service" nurses who leave funds on deposit with the retirement system.
2. Compensation for unused sick time off shall not be used in computing the retirement allowance; therefore, no contributions are to be made to the retirement system for such payments, nor shall such payments be reported as compensation.

- 136 3. A nurse who separates from the classified service for any reason other than
137 retirement or death shall not be paid for accrued sick time off.
138
- 139 11.6 Sick Time Off Donation. In accord with state law and Employer policy, RN's may
140 donate sick time off as shared leave to any nurse eligible to receive such
141 donations under the Employer's Shared Leave Programs under APS 45.10 and
142 45.9.
143
- 144 11.7 Advance Notification. All nurses working any shift shall notify the Employer at
145 least two (2) hours in advance of the nurse's scheduled shift if unable to report
146 for duty as scheduled.
147
- 148 11.8 Voluntary Employee Beneficiary Association (VEBA). ~~RNs who separate from~~
149 ~~state service due to retirement or death must be compensated for their total~~
150 ~~unused sick time off accumulation at the rate of twenty five percent (25%). The~~
151 ~~employer will deposit the equivalent funds into a Health Reimbursement Account~~
152 ~~(HRA) through Voluntary Employee's Beneficiary Associate (VEBA) which~~
153 ~~complies with WAC 357-31-375. Compensation will be based on the employee's~~
154 ~~salary at the time of separation. For the purpose of this subsection, retirement~~
155 ~~does not include "vested out-of-service" employees who leave funds on deposit~~
156 ~~with the Department of Retirement Systems (DRS). Furthermore, no~~
157 ~~contributions will be made to the DRS, nor any other retirement system, for~~
158 ~~payments under this subsection, nor are such payments reported as~~
159 ~~compensation for retirement purposes. RNs who retire from the University of~~
160 ~~Washington may participate in the Employer's VEBA program in accord with the~~
161 ~~terms and conditions of the program at the time of the RN's retirement. Such~~
162 ~~terms and conditions may be found on the HR website at:~~
163 ~~[https://hr.uw.edu/benefits/retirement-plans/nearing-retirement/veba-sick-leave-](https://hr.uw.edu/benefits/retirement-plans/nearing-retirement/veba-sick-leave-cash-out-at-retirement/)~~
164 ~~[cash-out-at-retirement/](https://hr.uw.edu/benefits/retirement-plans/nearing-retirement/veba-sick-leave-cash-out-at-retirement/)~~
165
- 166 11.9 Northwest Hospital Carryover. NWH Carryover cannot be cashed out at
167 retirement, will not be considered in the Annual Attendance Incentive Program,
168 does not transfer outside of any UWMC-NW/UWMC-Montlake WSNA covered
169 positions and will not transfer if the nurse takes a job with another state agency.
170 Nurses who have this leave will be encouraged to use it to cover absences when
171 appropriate before using UW Sick Time Off.
172
- 173 11.10 UWMC-NW WSNA sick time off can be used for the illness, injury, and medical
174 appointments of the individual nurse and their family member, and for other
175 reasons as outlined in the current CBA. It can also be placed into a VEBA Health
176 Reimbursement account at twenty-five percent (25%) of the cash value at
177 retirement or paid at twenty-five percent (25%) of the cash value as part of the
178 Annual Attendance Incentive Program (RCW 41.04.340) if certain conditions are
179 met.
180

181 NWH Carryover can be used when the nurse is sick or under various other
182 circumstances. However, it cannot be cashed out at retirement or as part of an
183 annual incentive program.
184
185
186

187 Tentatively Agreed To:
188
189 For the Union: Signed by: *Robert H. Lavitt*
190 _____
191 Robert Lavitt - 375DD6A502D445A...
192 Date: 8/26/2025
193

For the Employer: DocuSigned by: *Jade Hersch*

Jade Hersch - ED538CDB172F42B...
Date: 7/15/2025

ARTICLE 12 – MEDICAL AND INSURANCE BENEFITS

12.1 State Benefits. Nurses in the UWMC-NW Bargaining Unit will be included in the same Public Employees Benefit Board authorized state-employee benefits and the same wellness plans as nurses at UWMC-Montlake in analogous employee types. Nurses will no longer receive a premium or credit for waiving any elements of coverage.

12.2 Health Care Premiums. For the 202~~5~~⁴-202~~7~~³ biennium, the Employer Medical Contribution will ~~be~~^{contribute} an amount equal to eighty-five percent (85%) of the monthly premium for the self-insured Uniform Medical Plan (UMP) Classic total weighted average of the projected health care premium for each bargaining unit nurse eligible for insurance each month, as determined by the Public Employees Benefits Board. In no instance will the employee contribution be less than two percent (2%) of the EMC per month.~~The projected health care premium is the weighted average across all plans, across all tiers.~~

12.3 Medical Plans. The point-of-service costs of the Classic Uniform Medical Plan (deductible, out-of-pocket maximums and co-insurance/co-payment) may not be changed for the purpose of shifting health care costs to plan participants, but may be changed from the 2014 plan under two (2) circumstances:

- a. In ways to support value-based benefits designs; and
- b. To comply with or manage the impacts of federal mandates.

Value-based benefits designs will:

- a. Be designed to achieve higher quality, lower aggregate health care services cost (as opposed to plan costs);
- b. Use clinical evidence; and
- c. Be the decision of the PEB Board.

12.4 Medical Plan Expiration. Article 12.3 will expire June 30, 202~~7~~³.

12.5 Plan Information. The PEBB Program shall provide information on the Employer Sponsored Insurance Premium Payment Program on its website and in an open enrollment publication annually.

12.6 Life, Disability And Dental Plans. The Employer will pay the entire premium costs for each bargaining unit nurse for dental, stand-alone vision, basic life, and any offered basic long-term disability insurance coverage. If changes to the long-term disability benefit structure occur during the life of this agreement, the Employer recognizes its obligation to bargain with the Coalition over impacts of those changes within the scope of bargaining.

12.7 Wellness.

47 12.7.1 To support the statewide goal for a healthy and productive workforce,
48 nurses are encouraged to participate in a Well-Being Assessment survey.
49 Nurses will be granted work time and may use a state computer to
50 complete the survey.

51
52 12.7.2 The Coalition of Unions agrees to partner with the Employer to educate
53 their members on the wellness program and encourage participation.
54 Eligible, enrolled shall have the option to earn an annual one hundred
55 twenty-five dollars (\$125.00) or more wellness incentive in the form of
56 reduction in deductible or deposit into the Health Savings Account upon
57 successful completion of required Smart Health Program activities. During
58 the term of this Agreement, the Steering Committee created by Executive
59 Order 13-06 shall make recommendations to the PEBB regarding changes
60 to the wellness incentive or the elements of the Smart Health Program.

61

62 12.8 Flexible Spending Arrangement

63

64 A. During January 2026 and again in January 2027, the Employer will make available
65 three hundred dollars (\$300) in a Flexible Spending Arrangement (FSA) account
66 for each bargaining unit member represented by a Union in the Coalition described
67 in RCW 41.80.020(3), who meets the criteria in Subsection 12.8(B) below.

68

69 B. In accordance with IRS regulations and guidance, the Employer FSA funds will be
70 made available for a Coalition bargaining unit employee who:

71

72 1. Is occupying a position that has an annual full-time equivalent base salary
73 of sixty-eight thousand and four dollars (\$68,004.00) or less on November
74 1 of the year prior to the year the Employer FSA funds are being made
75 available; and

76

77 2. Meets PEBB program eligibility requirements to receive the employer
78 contribution for PEBB medical benefits on January 1 of the plan year in
79 which the Employer FSA funds are made available, is not enrolled in a high-
80 deductible health plan, and does not waive enrollment in a PEBB medical
81 plan except to be covered as a dependent on another PEBB non-high
82 deductible health plan.

83

84 3. Hourly employees' annual base salary shall be the base hourly rate
85 multiplied by two thousand eighty-eight (2088).

86

87 4. Base salary excludes overtime, shift differential and all other premiums or
88 payments.

89

90 C. An FSA will be established for all employees eligible under this Section who do not
91 otherwise have one. An employee who is eligible for Employer FSA funds may
decline this benefit but cannot receive cash in lieu of this benefit.

92

93 D. The provisions of the State's salary reduction plan will apply. In the event that a
federal tax that takes into account contributions to a FSA is imposed on PEBB

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health plans, this provision will automatically terminate. The parties agree to meet and negotiate over the termination of this benefit.

Tentatively Agreed To:	
For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H Lavitt</i>	<small>DocuSigned by:</small> <i>Jade Hersch</i>
_____ Robert Lavitt <small>375DD6A502D445A...</small>	_____ Jade Hersch <small>ED538CDB172F42B...</small>
Date: 8/26/2025	Date: 8/22/2025

ARTICLE 13 – LEAVES OF ABSENCE

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13.1 In General. All leaves of absence are to be requested from the Employer in writing as far in advance as possible, stating the reason for the leave and the amount of time requested. A written reply to grant or deny the request shall be given by the Employer within thirty (30) days.

13.2 Parental Leave. A parental leave of absence shall be granted upon the request of the nurse for a period of up to six (6) months after the birth of a child to the nurse, spouse or domestic partner, or because of the placement of a child with the nurse or domestic partner through adoption or foster care, without loss of benefits accrued to the date such leave commences. Such leave shall be in addition to maternity leave granted for the temporary disability period resulting from pregnancy or childbirth. If the nurse’s absence from work for family reasons does not exceed twelve (12) weeks, the nurse shall return to work on the same unit, shift and former full-time or part-time status. ~~Thereafter for~~After the duration of the six (6) month leave, upon requesting return to work, the nurse shall be offered the first available opening for which the nurse is qualified. Leave may be taken in a single block or by mutual agreement on an intermittent or reduced schedule basis. During the period of disability, the nurse may use previously accrued sick time off, vacation time off, personal holiday, holiday credit, or compensatory time, the combination of which may be determined by the nurse. During the parental leave portion, the nurse may take previously accrued vacation time off, personal holiday, holiday credit, compensatory time and up to eight (18) weeks (720) hours of sick time off, a combination of which may be determined by the nurse. Nurses must use all applicable accrued time off prior to going on unpaid time off unless it runs concurrently with Washington Paid Family and Medical Leave (PFML). Prior to the nurse returning from a leave of absence, the Employer may require a statement from a licensed medical practitioner verifying the period of physical disability and attesting to the nurse’s capability to perform the work required of the position.

13.3 Family and Medical Leave Act. In the event the Family and Medical Leave Act (FMLA) provides a better benefit than those provided in sections 13.2 and 13.3, the appropriate provisions of the FMLA shall prevail.

13.4 Military Spouse Leave. Up to fifteen (15) days of unpaid time off will be granted to an eligible nurse (nurse who averages twenty (20) or more hours of work per week) whose spouse or state-registered domestic partner is on leave from deployment or before and up to deployment during a period of military conflict. The nurse must provide their supervisor with notice of the nurse’s intention to take leave within five (5) business days of receiving official notice that the nurse’s spouse will be on leave or of an impending call to active duty. This provision shall be administered in accordance with RCW 49.77.

13.5 Military Leave With Pay.

- 47
- 48 A. Nurses shall be entitled to military leave with pay not to exceed twenty-one
49 (21) working days during each year, beginning October 1 and ending the
50 following September 30, in order to report for active duty, when called, or to
51 take part in active training duty in such manner and at such time as they may
52 be ordered to active duty or active training duty in the Washington National
53 Guard or of the Army, Navy, Air Force, Coast Guard, or Marine Corps reserve
54 of the United States or of any organized reserve or armed forces of the United
55 States.
- 56 B. Such leave shall be in addition to any vacation and sick time off to which a
57 nurse is entitled and shall not result in any reduction of benefits, performance
58 ratings, privileges or pay.
- 59 C. During military leave with pay, the RN shall receive the RN's normal rate of
60 pay.
- 61 D. Nurses required to appear during working hours for a physical examination to
62 determine physical fitness for military service shall receive full pay for the time
63 required to complete the examination.
- 64
- 65 13.6 Military Leave Without Pay. A Registered Nurse shall be entitled to military leave
66 of absence without pay for service in the uniformed services of the United States
67 or the state, and to reinstatement as provided in chapter 73.16 RCW. No
68 adjustments shall be made to the seniority date, months of service toward their
69 vacation accrual rate, progression start date and time off service date
70 (anniversary date) while a nurse is on military leave.
- 71
- 72 13.7 Leave with Pay. Leave with pay shall not affect a nurse's compensation, accrued
73 hours, benefits or status with the Employer.
- 74
- 75 13.8 Return from Leave. Nurses who return to work on a timely basis in accordance
76 with an approved leave of absence agreement shall be entitled to the first
77 available opening for which the nurse is qualified.
- 78
- 79 13.9 Civil Duty Time Off. All full-time and part-time nurses who are required to serve
80 on jury duty or who are called to be a witness on behalf of the Employer in any
81 judicial proceeding, shall be compensated by the Employer for the difference
82 between their jury duty/witness fee pay and their regular rate of pay. Nurses
83 subpoenaed for proceedings not involving the Employer will be given unpaid
84 release time.
- 85
- 86 13.10 Leave Without Pay for Reason of Faith or Conscience. In accordance with RCW
87 1.16.050, nurses will have the option to take up to two unpaid holidays per
88 calendar year for a reason of faith or conscience, or for an organized activity
89 conducted under the auspices of a religious denomination, church, or religious
90 organization.
- 91

92 To take unpaid time off under the statute, nurses must consult with their
93 supervisor or administrator and use their unit's procedure for making advance
94 leave requests. The nurse will need to inform their unit that the requested unpaid
95 day(s) is for a reason of faith or conscience or for an organized activity
96 conducted under the auspices of a religious denomination, church, or religious
97 organization.

98
99 The Employer can only deny a nurse's requested day(s) off if the employer
100 determines that the requested time off would impose an undue hardship on the
101 employer, or the nurse's presence is necessary to maintain public safety. Undue
102 hardship is defined in Washington Administrative Code (WAC) 82-56-020.
103 Nurses may be asked to provide verification for their unpaid leave request.

104
105 Requests to use unpaid personal holiday leave will follow normal departmental
106 leave request processes.

107 108 109 13.11 Leave of Absence Without Pay.

- 110
111 1. Leave of absence without pay may be allowed for any of the following
112 reasons:
- 113 a. Conditions applicable for leave with pay;
 - 114 b. Disability leave;
 - 115 c. Educational leave;
 - 116 d. Leave for government service in the public interest;
 - 117 e. Parental leave;
 - 118 f. Child care emergencies;
 - 119 g. To accommodate annual work schedules of nurses occupying cyclic
120 year positions;
 - 121 h. Serious health condition of an eligible nurse's child, spouse, domestic
122 partner (same sex or opposite sex) or parent.
- 123 2. Requests for leave of absence without pay must be submitted in writing to the
124 Employer and must receive the approval of both the employing official and the
125 personnel officer.
- 126 3. Leave of absence without pay extends from the time a nurse's leave
127 commences until ~~he/shethey~~ is-are scheduled to return to continuous service,
128 unless at the nurse's request the employing official and the personnel officer
129 agree to an earlier date.
- 130 4. Vacation time off and sick time credits will not accrue during a leave of
131 absence without pay which exceeds ten (10) working days in any calendar
132 month.

133 134 13.12 Bereavement Time Off. ~~Three-Five~~ (35) days of paid bereavement time off leave 135 shall be granted for each death of a family member or loss of pregnancy. See 136 Article as defined in section 11.4.

137

138 ~~Sick leave~~ In addition to the ~~three-five~~ (35) days of bereavement leave, sick time
139 off may be used for the purpose of bereavement with the approval of the nurse
140 manager.
141

142 13.13 Domestic Violence Leave. Eligible nurses shall be entitled to take leave for
143 domestic violence, sexual assault or stalking that the nurse has experienced, or
144 to assist a qualifying family member who has experienced domestic violence,
145 sexual assault or stalking. Leave under this provision shall be administered in
146 accordance with RCW 49.76.
147

148 For purposes of this section, "family member" includes a nurse's child, spouse,
149 parent, parent-in-law, grandparent, domestic partner or a person who the nurse
150 is dating. The RN must provide advance notice of the need for such leave,
151 whenever possible and may be required to provide verification of need and
152 familial relationship (e.g. a birth certificate, police report).
153

154 A RN may elect to use any combination of their accrued time off or unpaid time
155 off. The Employer shall maintain health insurance coverage for the duration of
156 the leave.
157

158 The Employer shall maintain the confidentiality of all information provided by the
159 RN including the fact that the RN is a victim of domestic violence, sexual assault
160 or stalking, and that the RN has requested leave.
161

162 13.14 Disability Leave.
163

164 13.14.1 Disability leave shall be granted for a reasonable period to a permanent
165 nurse who is precluded from performing their job duties because of a
166 disability (including those related to pregnancy or childbirth). Disability
167 leave includes a serious health condition of the nurse as provided in the
168 federal Family and Medical Leave Act of 1993. (FMLA) Leave for
169 disability due to pregnancy or childbirth is in addition to twelve (12)
170 weeks under the FMLA.
171

172 13.14.2 In any case in which the necessity for leave is foreseeable based on
173 planned medical treatment, the nurse shall provide not less than thirty
174 (30) days' notice, except that if the treatment requires leave to begin in
175 less than thirty (30) days, the nurse shall provide such notice as is
176 practicable.
177

178 13.14.3 The disability and recovery period shall be as defined and certified by the
179 nurse's licensed health care provider. The nurse shall provide, in a
180 timely manner, a copy of such certification to the employer.
181

182 13.14.4 Certification provided under this section shall be sufficient if it states:
183 a. The date on which the condition commenced;

- 184 b. The probable duration of the condition;
- 185 c. The appropriate medical facts within the knowledge of the health care
- 186 provider regarding the condition;
- 187 d. A statement that the nurse is unable to perform the essential functions
- 188 of their position.

189
190 13.14.5 The employer may require, at its expense that the nurse obtain the
191 opinion of a second health care provider designated or approved by the
192 employer. The health care provider shall not be employed on a regular
193 basis by the employer.

194
195 13.14.6 In any case in which the second opinion differs from the original
196 certification, the employer may require, at its expense that the nurse
197 obtain the opinion of a third health care provider designated or approved
198 jointly by the employer and the nurse. The opinion of the third health
199 care provider shall be final and binding.

200
201 13.14.7 The employer may require that the nurse obtain subsequent re-
202 certifications on a reasonable basis.

203
204 13.14.8 Disability leave may be a combination of sick time off, vacation time off,
205 personal holiday, holiday credit, compensatory time, and unpaid time off
206 and shall be granted at the written request of the nurse. The combination
207 and use of paid and unpaid time off during a disability leave shall be per
208 the choice of the nurse.

209
210 13.14.9 The Employer shall maintain health care coverage during disability leave
211 granted here, in accordance with the requirements of the Public
212 Employee's Benefits Board (PEBB), FMLA, and PFML. As specified in
213 the FMLA and PFML, the Employer may recover the premium for
214 maintaining coverage during the period of unpaid disability leave if the
215 nurse does not return to work.

216
217 13.14.10 If necessary due to continued disability, the nurse shall be allowed to
218 use eight (8) hours of accrued paid time off per month for the duration
219 of the leave to provide for continuation of benefits as provided by the
220 PEBB. The employer shall designate on which day of each month the
221 eight (8) hours paid time off will be used.

222
223 13.15 Workers Compensation Leave: Nurses who suffer a work related injury or illness
224 that is compensable under the state worker's compensation law may select time
225 loss compensation exclusively or a combination of time loss compensation and
226 accrued paid time off.

227

228 The policy for the Employer's "Return to Work Program" can be located at the
229 following link:

230 <https://uwmc.uwmedicine.org/sites/PoliciesProcedures/apop/Pages/default.aspx>

231

232 **13.16 Leave Due to Family Care Emergencies.**

233

234 1. Absence due to family care emergencies as defined shall be charged
235 to one of the following:

236 a. Compensatory time off;

237 b. Vacation time off;

238 c. Sick time off;

239 d. Personal holiday;

240 e. Unpaid time off.

241 2. Use of any of the above time off type is dependent upon the nurse's
242 eligibility to use such time off. Accrued compensatory time shall be
243 used before any other time off is used.

244 3. Use of vacation time off, sick time off, and unpaid time off for
245 emergency family care is limited to six (6) days total per calendar year.

246 4. The nurse upon returning from such time off shall designate in writing
247 to which time off type the absence will be charged. For the purpose of
248 this section, advance approval or written advance notice of time off use
249 shall not be required.

250 There are two (2) types of family care emergencies:

251 1. Child care emergency is defined as a situation causing a
252 nurse's inability to report for or continue scheduled work
253 because of emergency child care requirements ("child" as
254 identified in section 15.2), such as unexpected absence of
255 regular care provider, unexpected closure of child's school,
256 or unexpected need to pick up child at school earlier than
257 normal.

258 2. An elder care emergency occurs when you are unable to
259 report for or continue scheduled work because of emergency
260 elder care requirements such as the unexpected absence of
261 a regular care provider or unexpected closure of an assisted
262 living facility.

263 5. Accrued sick time off in excess of six (6) days may be used when the
264 nurse's child's school or day care has been closed by a public official
265 for any health-related reason or after the declaration of an emergency
266 by a local or state government or agency, or by the federal
267 government.

268

269 **13.17 Suspended Operations.**

270

271 **1. If a suspension of operations has been declared in accordance with the UW**
272 **Administrative Order No. 11, the following will govern regular nurses:**

- 273 a. When prior notification has not been given, nurses released until
- 274 further notice after reporting to work, shall receive pay for their
- 275 scheduled shift on the first day. The following options shall be made
- 276 available to affected nurses not required to work for the balance of the
- 277 closure:
 - 278 i. Vacation time off, personal holiday; or
 - 279 ii. Accrued compensatory time (where applicable) or holiday credit;
 - 280 or
 - 281 iii. Sick time off if all other paid time off is exhausted; or
 - 282 iv. Unpaid time off
- 283 b. Nurses required to work shall receive their regular rate of pay for work
- 284 performed during the period of suspended operation. Overtime worked
- 285 during the closure will be compensated. The Employer may offer
- 286 hazard pay.
- 287 2. Each institution/related board, together with the appropriate exclusive
- 288 representative(s) shall develop and file with the director, subject to approval, a
- 289 procedure to provide for staffing during periods of suspended operation. The
- 290 procedure shall include identification of the manner in which nurses will be
- 291 notified of the suspension of operations.
- 292 3. The provisions of this rule may be utilized only when an institutional
- 293 procedure has been approved by the director and an official declaration of
- 294 suspended operation has been made.
- 295 4. The provisions of this section and institutional procedures adopted hereunder
- 296 may not be in effect in excess of fifteen (15) calendar days unless within the
- 297 fifteen (15) days the personnel officer requests the director's or designee's
- 298 approval of an extension. Such approval is subject to confirmation by the
- 299 board.
- 300 4.5. Public Health Suspended Operations. Accrued sick leave may be used for
- 301 the suspension of operations when the nurse's workplace has been closed by
- 302 a public health official for any health related reason or after the declaration of
- 303 an emergency by a local or state government or agency, or by the federal
- 304 government. If sick time off is not available to the nurse, the time off use and
- 305 compensation provisions above apply.

Tentatively Agreed To:

<p>For the Union:</p> <p>Signed by:</p> <p><i>Robert H. Lavitt</i></p> <p>Robert Lavitt 375DD6A502D445A...</p> <p>Date: 9/2/2025</p>	<p>For the Employer:</p> <p>DocuSigned by:</p> <p><i>Jade Hersch</i></p> <p>Jade Hersch ED538CDB172F42B...</p> <p>Date: 8/21/2025</p>
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ARTICLE 14 – FAMILY MEDICAL LEAVE ACT AND PARENTAL LEAVE

14.1 Leave Procedure. All leaves as delineated in sections 13.1 through 13.16 above are to be requested from the Employer in writing as far in advance as possible, stating all pertinent details and the amount of time requested. A written reply to grant or deny the request shall be given by Human Resources within thirty (30) days except as otherwise provided in this Article.

14.2 Federal Family and Medical Leave Act. Benefits provided through state laws and this contract shall not be diminished or withheld in complying with the Family and Medical Leave Act of 1993.

Consistent with the federal Family and Medical Leave Act of 1993, a nurse who has worked for the state for at least twelve (12) months and for at least one thousand two hundred and fifty (1250) hours during the twelve (12) months prior to the requested leave is entitled to up to twelve work weeks of leave per year for any combination of the following:

- a. parental leave to care for a newborn or newly placed adopted or foster child; or
- b. personal medical leave due to the nurse’s own serious medical condition that requires the nurse’s absence from work; or
- c. family medical leave to care for a family member who suffers from a serious medical condition that requires care or supervision by the nurse.

Family Member is defined as: the nurse’s spouse or same or opposite sex domestic partner, child, parent, grandparent, grandchild, sister, or brother. It also includes individuals in the following relationships with the nurse’s spouse or domestic partner: child, parent, and grandparent. “Child” also includes any child residing in the nurse’s home through foster care, legal guardianship or custody. Family members include those persons in a “step” relationship.

14.3 Family Medical Leave Eligibility. The amount of family medical leave available to a nurse is determined by using a rolling twelve (12) month period. The rolling twelve (12) month period measures FMLA leave availability by “looking backward” from the date a nurse begins FMLA leave, adding up any FMLA leave used in the previous twelve (12) months, and subtracting that amount from the nurse’s twelve (12) workweek FMLA leave entitlement. The remaining amount is available to the nurse.

14.4 Family Medical Use with Other Benefits. The nurse shall use appropriate accrued paid time off (for example, sick time off, compensatory time, shared leave, personal holiday, holiday credit, vacation time off) before unpaid time off for absences is granted in accordance with the Family and Medical Leave Act unless it runs concurrently with Washington Paid Family and Medical Leave (PFML).

- 47 A nurse may choose to retain up to eighty (80) hours of vacation or sick time off
48 while on leave. Vacation and sick time off that have been requested and
49 approved prior to the request for the use of FMLA will not be considered when
50 requiring nurses to use leave during FMLA-covered leave. Requiring nurses to
51 use leave during an FMLA-covered leave does not apply during an absence
52 covered by the Washington Paid Family and Medical Leave Program (PFML).
53
- 54 14.5 FMLA Medical Insurance. The Employer will continue the nurse's existing
55 employer-paid health insurance benefits during the period of leave covered by
56 FMLA. If necessary, due to continued personal medical or parental leave
57 approved beyond the FMLA period, or if the nurse is not eligible for FMLA, the
58 nurse may elect to use eight (8) hours of accrued applicable paid leave for
59 continuation of employer paid health insurance benefits while on approved
60 personal medical or parental leave.
61
- 62 14.6 FMLA Use. FMLA leave may be taken intermittently or as part of a reduced work
63 schedule when medically necessary.
64
- 65 14.7 FMLA Return to Work. Following an absence granted for FMLA leave, the nurse
66 shall return to the same or equivalent position held prior to the absence.
67
- 68 14.8 Family and Medical Leave Act – Leave to Care for an Injured Service Member.
69 An eligible nurse is entitled to up to twenty-six (26) weeks of unpaid leave during
70 any single twelve (12)-month period to care for a spouse, state-registered
71 domestic partner, son, daughter, parent or next of kin with a serious injury or
72 illness when the injury or illness is incurred by an active duty member of the
73 military while in the line of duty. A covered service member is a member of the
74 Armed Forces, including a member of the National Guard or Reserves, who is
75 undergoing medical treatment, recuperation or therapy, is otherwise in outpatient
76 status, or is otherwise on the temporary disability retired list for a serious injury or
77 illness. The single twelve (12) month period begins on the first day the nurse
78 takes leave for this reason and ends twelve (12) months later. An eligible nurse is
79 limited to a combined total of twenty-six (26) weeks of leave for any FMLA-
80 qualifying reason during the single twelve (12) month period. Only twelve (12) of
81 the twenty-six (26) week total may be used for an FMLA-qualifying reason other
82 than to care for a covered service member. This provision shall be administered
83 in accordance with U.S. Department of Labor regulations.
84
- 85 14.9 Family and Medical Leave Act – Qualifying Exigency Leave. An eligible nurse is
86 entitled to up to a total of twelve (12) weeks of unpaid leave during a rolling
87 twelve (12)-month period because of any qualifying exigency as defined by the
88 Department of Labor arising out of the fact that the spouse, state-registered
89 domestic partner, son, daughter or parent of the nurse is on active duty, or has
90 been notified of an impending call or order to active duty of a contingency
91 operation. Exigency leave under the FMLA is available to a family member of a
92 service member in the National Guard or Reserves; it does not extend to family

93 members of service members in the Regular Armed Forces. This provision shall
94 be administered in accordance with U.S. Department of Labor regulations.
95

96 Tentatively Agreed To:

97 For the Union:

Signed by:

Robert H Lavitt

98 Robert Lavitt 375DD6A502D445A...

99 Date: 9/2/2025

100 For the Employer:

DocuSigned by:

Jade Hersch

101 Jade Hersch ED538CDB172F42B...

102 Date: 8/21/2025

ARTICLE 15 - COMMITTEES

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3 15.1 Conference Committee. The Employer, jointly with the elected representatives of
4 the nurses, shall establish a Conference Committee to assist with personnel and
5 other mutual problems. The purpose of the Conference Committee shall be to
6 foster improved communications between the Employer and the nursing staff.
7 The function of the committee shall be limited to an advisory rather than a
8 decision-making capacity. The committee shall be established on a permanent
9 basis and shall consist of four (4) representatives of the Employer and four (4)
10 representatives of WSNA. One of the Employer representatives shall be the
11 Director of Clinical Service. All members of the committee shall be nurses of the
12 Hospital. Representatives on the Conference Committee may request meetings
13 of the Committee to discuss nurse staffing issues and suggestions for
14 constructive improvement relating to utilization of nursing personnel. Agenda
15 items will be provided at least one week in advance of the meeting.
16

17 15.2 Nurse-Hospital Staffing Committee.
18

- 19 1. Effective January 1, 2024, the Employer created the Hospital Staffing
20 Committee ("HSC"). The HSC shall assume all responsibilities and
21 activities required of it under RCW 70.41, et seq. and its successors. This
22 includes, but is not limited to, producing the Employer's staffing plan and
23 addressing complaints raised by nursing staff about staffing variances.
24 WSNA recognizes that the membership of the committee will be expanded
25 to accommodate the addition of non-RN "nursing staff" members
26 represented by SEIU 1199NW (e.g., CNAs, LPNs, and/or unlicensed
27 assisted nursing personnel providing direct patient care).
28 2. The composition of the HSC will be as follows:
29 a. At least fifty percent of the voting members of the HSC will be "nursing
30 staff" (as defined in RCW 70.41.410(5)), who are nonsupervisory and
31 nonmanagerial. WSNA shall select all of the RN "nursing staff" voting
32 members.
33 b. The remaining fifty percent of voting members will be selected by the
34 hospital administration, in accordance with the requirements of RCW
35 70.41.420(2)(b).
36 3. Voting members will be provided with paid time or paid release time for
37 participation on the HSC. HSC members shall be relieved of all other work
38 duties during meetings of the HSC. Additional staffing relief must be
39 provided if necessary to ensure HSC members are able to attend HSC
40 meetings.
41 4. HSC members will receive at least 30 days' notice of all meetings,
42 including but not limited to meetings in which staffing plans or revised
43 staffing plans are voted on.

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5. The HSC shall approve all staffing plans, including revised staffing plans, only by a 50% plus 1 (or more) majority vote of all voting members present.

6. The Employer will give staff representatives from WSNA at least thirty (30) days' notice of any scheduled HSC meeting and will permit those representatives to attend and participate in all HSC meetings as non-voting attendees.

~~1. The purpose of the Nurse Staffing Committee is to ensure quality patient care, support greater retention of registered nurses and promote evidence based nurse staffing. This Committee establishes a mechanism whereby direct care nurses and hospital management can participate in a joint process regarding decisions about nurse staffing to include fulfillment of the requirements of RCW 70.41.420 et seq. In addition, the Nurse Staffing Committee will respond to nurse staffing complaints in accordance with RCW 70.41.20 et seq. The Nurse Staffing Committee will consist of ten (10) registered nurses currently providing direct patient care (one half of the committee) and a minimum of five (5) hospital administrative staff (up to one half (1/2) of the total membership). All units are encouraged to have representation.~~

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15.3 Compensation. All time spent by nurses on Employer established committees (including ad hoc or subcommittees) where attendance is required, and all time spent by members of the Conference Committee, Workplace Violence Prevention Committee, Nurse-Hospital Staffing Committee, and Employee Safety Committee will be considered time worked and will be paid at the appropriate contract rate. Time which is spent by the nurse outside of the regular work day on non-contract, Employer established committees will be compensated time when authorized by Nursing Administration.

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Tentatively Agreed To:	
For the Union:	For the Employer:
Signed by: <i>Robert H. Lavitt</i>	DocuSigned by: <i>Jade Hersch</i>
Robert Lavitt 375DD6A502D445A...	Jade Hersch ED538CDB172F42B...
Date: 7/23/2025	Date: 7/15/2025

ARTICLE 16 – STAFF DEVELOPMENT

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3 16.1 Staff Development. The purpose of orientation is to provide an introduction to the
4 philosophy, standards and systems of the Hospital and nursing department.
5 Orientation also provides an opportunity for newly hired nurses to socialize into
6 their role through development of working relationships with peers and other
7 colleagues. Orientation will consist of a combination of classroom, clinical and
8 self-directed learning experiences designed to assist the newly hired registered
9 nurse to function independently in their role as bargaining unit nurses. Each unit
10 has a unit specific skills list that is used in the orientation process

11
12 16.2 Continuing Education. A regular and ongoing continuing education program shall
13 be maintained and made available to all shifts and to all personnel with programs
14 posted in advance. The posting will state whether or not attendance is mandatory
15 or voluntary. If the program is voluntary, time for continuing education shall be
16 considered as release from shift, not time worked beyond a shift. If mandatory,
17 and the nurse is not released, the time will be treated as time worked beyond a
18 shift and paid accordingly.

- 19
20 1. The purpose of continuing education shall be:
21 2. to promote the safe and intelligent care of the patient;
22 3. to develop staff potential; and
23 4. to create an environment that stimulates learning, creativity, and personal
24 satisfaction. Topics to be offered will be determined by discussions
25 between nurses and the education department. The objectives of
26 continuing education shall be: to review the philosophy, objectives and
27 functions of continuing education in light of needs of personnel, nursing
28 department and nursing care; to provide ongoing education programs
29 which will enhance patient care; to review current nursing care trends.
30 Continuing education programs will be scheduled in an effort to
31 accommodate varying work schedules. Nurses required by the Employer
32 to attend continuing education during off -duty hours will be paid at the
33 applicable rate of pay. The Employer will make a good faith effort to
34 provide contact hours for continuing education/educational programs.
35

36 16.3 Job Related Study. After one (1) year of continuous employment, permission
37 may be granted for leave of absence without pay for job related study, without
38 loss of accrued benefits, providing such leave does not jeopardize UWMC-NW
39 service.
40

41 16.4 Approved Expenses. When the Employer requires the nurse to participate in an
42 educational program (which shall exclude programs for maintaining licensure and
43 specialty certification), the Employer will pay approved expenses that are directly
44 related to the program.
45

46 16.5 Education Professional Leave. The Employer will grant forty (40) hours of
 47 educational professional leave within the fiscal year (currently July 1 – June 30)
 48 to nurses requesting such leave. Such leave may be used if staffing permits and
 49 shall be prorated for part-time nurses. For purposes of sections 16.5 and 16.6
 50 only, .9 FTE and above shall be considered full time. For purposes of this Article,
 51 educational and professional leave shall be defined as

- 52
- 53 a. short-term conferences or programs for educational, leadership and
- 54 professional growth and development in nursing;
- 55 b. enhancement and expansion of clinical skills for RN positions at UWMC-
- 56 NW;
- 57 c. meetings and committee activities of the nurses’ respective professional
- 58 associations which are designed to develop and promote programs to
- 59 improve the quality and availability of nursing service and health care;
- 60 d. those in-service educational programs attended on a voluntary basis; and
- 61 e. educational programs necessary to maintain licensure or certification.
- 62

63 [Nurses may use educational and professional leave to participate in King County](#)
 64 [Nurses Association educational and professional development events and](#)
 65 [Community Partnership volunteer experiences in accordance with the UWMC](#)
 66 [Nurse Community Partnership Committee intranet page.](#)
 67

68 In accordance with the unit’s scheduling guidelines, requests for educational and
 69 professional leave shall be submitted and responded to in writing including the
 70 reason for any denial. Responses will be issued as soon as possible but no later
 71 than two weeks prior to the posting of the final schedule. Any prior year requests
 72 that were denied because of resource limitations will be taken into consideration
 73 in reviewing subsequent requests for educational/professional leave.

74

75 Nurses may apply in advance for educational and professional leave granted for
 76 on-line or other self-study (CEARP approved educational offering). The nurse
 77 manager may approve either time off or time worked at the applicable rate of
 78 straight time pay, exclusive of additional premiums. The number of hours shall
 79 not exceed the contact hours awarded by the accrediting body.

80

81 16.6 Education Support Funds. In support of the Employer’s commitment to continuing
 82 professional nursing education and development, the Employer will establish
 83 continuing education funds to assist permanent nurses with continuing education
 84 expenses including but not limited to certification fees, re-certification fees,
 85 books, magazines, seminars, tuition for college courses, audio or video cassette
 86 courses, and conference registration. Such assistance will be subject to Nurse
 87 Manager’s approval of the subject matter and the nurse’s successful completion
 88 of the coursework.

89

90 16.6.1 The Employer will provide two-three hundred and fifty dollars
 91 (\$350250.00) per bargaining unit nurse FTE at the beginning of each fiscal

92 year. From the beginning of the fiscal year through the end of February of
93 the following year, each nurse shall be guaranteed up to the ~~two-three~~
94 hundred and fifty dollars (\$~~350250.00~~) (pro-rated for part-time nurses) to
95 pay for continuing education expenses. Nurses who prior to the end of
96 February, have a request approved for the use of guaranteed education
97 support money after the end of February shall have that money set aside
98 for such use and it will not be pooled as outlined below.
99

100 16.6.2 Effective March 1 the unspent portion of the ~~two-three~~ hundred and fifty
101 dollars (\$~~350250.00~~) per bargaining unit FTE shall be pooled on a
102 Employer-wide basis. From March 1 through the end of the fiscal year
103 (June 30), the fund shall be allocated on an equitable basis.
104

105 There shall be an annual maximum usage of ~~five-six~~ hundred dollars
106 (\$~~6500.00~~) per nurse, pro-rated for part-time nurses (which includes that
107 portion of the ~~two-three~~ hundred and fifty dollars (\$~~350250.00~~) per
108 bargaining unit FTE used by the nurse). Nurses may request to be
109 reimbursed for continuing education expenses incurred prior to March 1
110 which exceeded the nurses' guaranteed allocation.
111

112 If WSNA believes the appropriation of the pooled funds occurs in an unfair
113 or unreasonable manner, it will be discussed in Conference Committee.
114

115 16.9 Education Funds Tracking. The Employer shall track, by Unit, the following:
116

- 117 1. The amount of educational funds requested;
- 118 2. The number of education leave hours requested;
- 119 3. The number of education leave hours granted;
- 120 4. The amount of educational funds granted;
- 121

122 The Employer shall present the data from (1)–(4) above to the bargaining unit in
123 Conference Committee on a semi-yearly basis.
124

125 16.10 Tuition Exemption Program. Nurses will be eligible to participate in the
126 Employer's tuition exemption program in accordance with applicable law.
127 Information about the program will be available at the Employer's Human
128 Resources Office.
129

130 Tentatively Agreed To:
131
132 For the Union: Signed by: Robert H. Lavitt
133 *Robert H. Lavitt*
134 _____
135 Robert Lavitt 375DD6A502D445A...
136 Date: 7/23/2025

For the Employer: DocuSigned by: Jade Hersch
137 *Jade Hersch*
138 _____
139 Jade Hersch ED538CDB172F42B...
140 Date: 7/1/2025

ARTICLE 17 – GRIEVANCE PROCEDURE

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17.1 Grievance Defined. A grievance is defined as an alleged breach of the terms and conditions of this Agreement. It is the desire of the parties to this Agreement that grievances be adjusted informally wherever possible and at the first level of supervision.

17.2 Time Limits. Time limits set forth in the following steps may only be extended by mutual written consent of the parties hereto. A time limit which ends on a Saturday, Sunday or a holiday designated in paragraph 10.1 hereof shall be deemed to end at 4:30 p.m. on the next following business day. Failure of a nurse to file a grievance on a timely basis or to timely advance a grievance in accordance with the time limits set forth below will constitute withdrawal of the grievance. Failure of the Employer to comply with the time limits set forth below shall result in the grievance being automatically elevated to the next step without any action necessary on the part of the nurse.

17.3 Grievance Procedure. It is the desire of both the Employer and WSNA that grievances be adjusted informally whenever possible and at the lowest possible level of supervision. However, all grievances involving Final Disciplinary Counseling, Demotion, and Dismissal shall begin at the third step of the grievance process. A grievance shall be submitted to the following grievance procedure:

Step One. If any nurse has any claim or complaint, it is recommended that they first talk it over with the supervisor and, if necessary, with the Department Manager. The grievance must be identified as such and presented to the Department Manager within thirty (30) calendar days from the date the nurse is aware that a grievance exists. The written grievance shall contain a complete description of the alleged grievance, the date it occurred, and what corrective action the grievant is requesting. The Manager will then meet with the grievant and, if the grievant chooses, an Association representative. Management shall respond to the grievance within fourteen (14) calendar days of presentation.

Step Two. If a satisfactory settlement is not reached within fourteen (14) calendar days following the date of presentation to supervision in Step One, and the grievant wishes to pursue the matter further, said grievance shall be put into writing. The written grievance shall contain a complete description of the alleged grievance, the date it occurred, and what corrective action the grievant is requesting. The grievance shall be given to the Nursing Director or equivalent within fourteen (14) calendar days after the decision at Step 1. The parties shall meet and attempt to resolve the grievance and the Nursing Director or equivalent will respond within fourteen (14) calendar days of the meeting. At this step WSNA or the

46 nurse designee agree to cite the sections of the Agreement that allegedly
 47 have been violated.
 48

49 Step Three. WSNA may submit the written grievance to the Chief Nursing
 50 Executive within fourteen (14) calendar days after the decision at Step 2.
 51 The third step meeting shall include the grievant, the representative, Chief
 52 Nursing Executive, or designee, and the Director of Labor Relations, or
 53 designee.
 54

55 If the grievance is not resolved within fourteen (14) calendar days, the
 56 grievance may proceed to Step 4.
 57

58 Step Four. Mediation. Within fourteen (14) calendar days after the Step
 59 Three response, either party may request mediation. If mediation is
 60 agreed to, the requesting party will contact the PERC for the assignment
 61 of a mediator.
 62

63 Step Five. Arbitration. Within thirty (30) calendar days following a
 64 mediation impasse or a written declination of mediation, WSNA may
 65 submit the grievance to arbitration by submitting a written request to the
 66 Director of Labor Relations. If the parties fail to agree on an arbitrator, a
 67 list of a minimum of seven (7) arbitrators shall be requested from either
 68 the Public Employment Relations Commission (PERC) or the Federal
 69 Mediation and Conciliation Service. The parties shall thereupon alternate
 70 in striking a name from the list until one name remains. The Union and the
 71 University must contact the Employer to begin the arbitration scheduling
 72 process and provide availability to the arbitrator within thirty (30) calendar
 73 days of the Parties selecting an arbitrator. Union advancing the grievance
 74 to arbitration, and t The Parties will use best efforts to schedule the
 75 arbitration hearing date must be scheduled for a date that is within six
 76 months (180 calendar days) of the date the arbitrator was selected.
 77 grievance was advanced to arbitration. If the Union does not do either of
 78 the above, the grievance will be considered withdrawn.
 79

80 The arbitrator shall have no power to render a decision that adds to,
 81 subtracts from alters or modifies in any way the terms and conditions of
 82 the Agreement. The decision of the arbitrator shall be final and binding.
 83 The cost of the arbitration shall be borne equally and each party shall bear
 84 the full cost of presenting its own case. The arbitrator's decision will be
 85 made in writing and the arbitrator will be encouraged to render a decision
 86 within thirty (30) calendar days of the close of the arbitration.
 87

88 17.4 Association Grievance. WSNA may initiate a grievance if the grievance involves
 89 a group of nurses and if the grievance is submitted in writing within twenty-one
 90 (21) calendar days from the date the nurses became aware of the facts giving
 91 rise to the grievance.

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Tentatively Agreed To:	
For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H. Lavitt</i>	<small>Signed by:</small> <i>Jade Hersch</i>
Robert Lavitt -375DD6A502D445A...	Jade Hersch -ED538CDB172F42B...
Date: 7/23/2025	Date: 7/15/2025

ARTICLE 18 – MANAGEMENT RESPONSIBILITIES

18.1 Management Rights. WSNA recognizes that the Employer has the obligation of serving the public with the highest quality of medical care, efficiently, and economically, and/or meeting medical emergencies. WSNA further recognizes the right of the Employer to operate and manage the hospital including but not limited to the right to require standards of performance and to maintain order and efficiency; to direct nurses 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 nurses; to promote and transfer nurses; to discipline, demote or discharge nurses for just cause, provided however, the Employer reserves the right to discharge any nurse deemed to be incompetent based upon reasonably related established job criteria and exercised in good faith; to layoff nurses for lack of work; to recall nurses; to require reasonable overtime work of nurses; 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. The parties recognize that the above statement of management responsibilities is for illustrative purposes only and should not be construed as restrictive or interpreted so as to exclude those prerogatives not mentioned which are inherent to the management function. All matters not covered by the language of this Agreement shall be administered by the Employer on a unilateral basis in accordance with such policies and procedures as it from time to time shall determine.


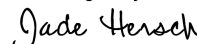
Tentatively Agreed To:

<p>For the Union:</p> <p>Signed by:</p> <p><i>Robert H Lavitt</i></p> <hr/> <p>Robert Lavitt 375DD6A502D445A...</p> <p>Date: 9/2/2025</p>	<p>For the Employer:</p> <p>DocuSigned by:</p> <p><i>Jade Hersch</i></p> <hr/> <p>Jade Hersch ED538CDB172F42B...</p> <p>Date: 8/21/2025</p>
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ARTICLE 19 – UNINTERRUPTED PATIENT CARE

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It is recognized that the Hospital is engaged in a public service requiring continuous operation and it is agreed that recognition of such obligation of continuous service is imposed upon both the nurse and WSNA. During the term of this Agreement, neither WSNA nor its members, agents, representatives, nurses or persons acting in concert with them shall incite, encourage or participate in any strike, sympathy strike, picketing, walkout, slowdown, sick out or other work stoppage of any nature whatsoever. In the event of any such activity, or a threat thereof, WSNA and its officers will do everything within their power to end or avert same. Any nurse participating in any such activity will be subject to immediate dismissal.

Tentatively Agreed To:	
For the Union: Signed by:  <hr/> Robert Lavitt <small>375DD6A502D445A...</small> Date: 9/2/2025	For the Employer: DocuSigned by:  <hr/> Jade Hersch <small>ED538CDB172F42B...</small> Date: 8/21/2025

ARTICLE 20 – GENERAL PROVISIONS

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20.1 State and Federal Laws. 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 Association shall enter into immediate negotiations for the purpose, and solely for the purpose, of arriving at a mutually satisfactory replacement for such provision.

20.2 Amendments. Any change or amendments to this Agreement shall be in writing and duly executed by the parties hereto.

20.3 Complete Understanding. Any and all agreements, written and verbal, previously entered into between the parties hereto are mutually cancelled and superseded by this Agreement. 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 WSNA, 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 discussed during negotiations 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.

20.4 Successors. This Agreement shall be binding upon any successor Employer. The Employer shall have the affirmative duty to call this provision to the attention of any successor organization.

20.5 Frivolous Reporting. The Employer shall not report or cause a report to be made which involves an action by a registered nurse covered by this Agreement to the Board of Health, or Nursing Commission which is not reasonably required by law.

20.6 Past Practices. Any and all agreements, written and verbal, previously entered into by the parties hereto are in all things mutually cancelled and superseded by this Agreement. Certain benefits and practices presently exist which are not specified in this Agreement, and it is understood that their continuation for the term of this Agreement is not required or guaranteed. Unless specifically

46 provided herein to the contrary, prior benefits and past practices shall not be
47 binding on the Employer.
48

49 Tentatively Agreed To:

51 For the Union:

Signed by:

Robert H Lavitt

52 Robert Lavitt 375DD6A502D445A...

53 Date: 9/2/2025
54
55

For the Employer:

DocuSigned by:

Jade Hersch

Jade Hersch ED538CDB172F42B...

Date: 8/21/2025

ARTICLE 21 – POSTING, TRANSFER, PROMOTIONS, REALLOCATION

Definitions. For the purpose of this Article the following definitions apply:

Promotion – Movement ~~from RN2 to RN3 to a position in a job class with a higher~~
~~salary range.~~

Transfer – Movement to a position in the same classification.

Voluntary Demotion – Movement to a position with a lower salary maximum, where the position is attained through the employment process. This section does not apply to nurses who demote as part of corrective action.

Bargaining Unit Seniority – Continuous length of service from the date of hire as a registered nurse in the bargaining unit.

Use of seniority within a Department – Bargaining unit seniority may be exercised within a department as follows:

- Seniority, when used within a department, will be computed and exercised consistently within the RN2 and RN3 job classifications. Nurses who transfer to another department will be granted fifty percent (50%) of their bargaining unit seniority not to exceed the median number of years of employment on the unit.
- Nurses who transfer units recoup one hundred percent (100%) of their pre-transfer bargaining unit seniority after eighteen (18) months on the new unit.
- Bargaining unit nurses who accept management roles and then return to their former bargaining unit position recoup one hundred percent (100%) of their pre-management bargaining unit seniority. Nurse Managers moving to bargaining unit positions for the first time have no accumulated seniority.

Bargaining unit nurses who move between RN2 and RN3 classifications retain one hundred percent (100%) of their bargaining unit seniority.

21.1 Posting. When a job opening occurs on a department, it will be posted in the department for seven days per agreed upon department procedures, e.g. e-mail, posting notebook, bulletin board. After seven (7) days, the position will be posted house-wide in addition to being posted externally.

21.2 Internal Department Transfer. Nurses who are regularly assigned to a specific department will be given preferential consideration for transfer to other shifts or positions in that department before other nurses except more senior nurses returning from layoff status to a previous department and shift.

Department nurses shall request in writing to the Nurse Manager transfer to the vacant position. Applicants will be notified in writing of the status of their application in a timely manner. The Nurse Manager will consider the RN's

47 request for the position. Appointments shall be made on the basis of the
48 requirements of the position and the applicant's qualifications. All other factors
49 relevant to the position being equal, seniority will be the determinant in such
50 decisions.

51
52 21.3 Transfer To Another Department. ~~Requests-Applications~~ for transfer to another
53 department should be submitted to an open job requisition during the period of
54 official posting in UWHIRES on-line. Transfer ~~applicationsrequests~~ will be
55 forwarded to the Nurse Manager for review prior to filling the vacant position
56 through the transfer or promotional process. A good faith effort will be made to
57 facilitate lateral transfers from one department to another. All other factors
58 relevant to the position being equal, seniority will be the determinant in such
59 decisions.

60
61 21.4 Promotions. Applications for promotions should be submitted to an open job
62 requisition in UWHIRES on-line during the period of official posting. Promotional
63 openings will be posted online for a minimum of seven calendar days ~~in the~~
64 ~~department, Nursing Personnel, the Nursing and Outpatient administrative office~~
65 ~~and the Personnel Department.~~

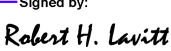
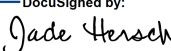
66
67 21.5 Reallocation. Upon reclassification the new progression start date shall be the
68 first of the current month for effective dates falling between the first and fifteenth
69 of the month and the first of the following month for effective dates falling
70 between the sixteenth and the end of the month.

71
72 21.6 Trial Service for Movement Within the Bargaining Unit. Nurses who transfer,
73 promote, or voluntarily demote within the bargaining unit shall serve a trial
74 service period. Paid or unpaid time off taken during the six (6) month trial service
75 period shall extend the length of the trial service period by the amount of paid or
76 unpaid time off taken on a day-for-day basis. Either the Employer or the nurse
77 may end the appointment by providing notice. A nurse serving a trial service
78 period may voluntarily revert to their former permanent position within six (6)
79 weeks of the appointment, provided that the position has not been filled by a
80 bargaining unit nurse or an offer has not been made to an applicant. After six (6)
81 weeks nurses may revert to their former position with Employer approval. In the
82 event the former position has been filled with a permanent nurse, the nurse will
83 be placed on the rehire list.

84
85 21.7 Trial Service for Movement Outside the Bargaining Unit. Nurses who transfer,
86 promote, or voluntarily demote to a position outside the bargaining unit, but within
87 UW Medicine, shall serve a six (6) month trial service period. Paid or unpaid time
88 off taken during the six (6) month trial service period shall extend the length of
89 the trial service period by the amount of paid or unpaid time off taken on a day-
90 for-day basis. Either the Employer or the nurse may end the appointment by
91 providing notice. A nurse serving a trial service period may voluntarily revert to
92 their former permanent position within six (6) weeks of the appointment, provided

93 that the position has not been filled by a classified staff nurse or an offer to an
94 applicant who will fill that classified staff position has not been made. After six (6)
95 weeks nurses may revert to their former position with Employer approval. If their
96 previous position is no longer available, they will revert to the rehire list for the
97 bargaining unit in which they held permanent status immediately prior to taking
98 the new position.
99

100 21.~~87~~ Temporary Assignment to a Higher Position. Whenever a nurse is temporarily
101 assigned in writing by the Employer to regularly perform the principal duties of a
102 higher-level position, they shall be paid a temporary hourly increase (THI) of at
103 least five percent (5%) over the present salary but not to exceed the maximum of
104 the range for the higher classification. Said increase shall be paid beginning with
105 the first day and to include the days working such assignment. Such assignments
106 must be by mutual agreement.
107

108 Tentatively Agreed To:
109
110 For the Union: For the Employer:
111 Signed by: Robert H. Lavitt DocuSigned by: Jade Hersch
112  
113 Robert Lavitt 375DD6A502D445A... Jade Hersch ED538CDB172F42B...
114 Date: 7/23/2025 Date: 7/1/2025

ARTICLE 22 – NONPERMANENT AND INTERMITTENT (FORMERLY PER DIEM) NURSES

Only the language in this article applies to the Nonpermanent and Intermittent Registered Nurses at UWMC-NW and shall constitute the whole agreement between WSNA and the Employer regarding these nurses, with the exceptions noted within this article with the exceptions noted within this article.

22.1 Definition. A Nonpermanent position can be created when any of the following conditions are met:

- A. The UW is recruiting to fill a vacant position with a permanent position;
- B. The UW needs to address a short-term immediate workload peak or other short-term needs;
- C. The UW is not filling a position with a permanent position due to the impending or actual layoff of a permanent employee(s);
- D. The UW is filling positions when a worker is on a leave-of-absence; or
- E. Temporary project.

Intermittent Positions. An Intermittent position exists when the nature of the work is sporadic and does not fit a particular pattern.

22.1.1 Types of Nonpermanent Positions:

- A. There are two types of Nonpermanent positions: (i) Nonpermanent Hourly, and (ii) Nonpermanent Fixed Duration.
- B. The initial duration of a Nonpermanent Hourly and Nonpermanent Fixed Duration appointment cannot exceed twelve (12) months from the hire date but may be extended to no more than twenty-four (24) months if *any* of the conditions in 22.1.1 (A-E) still exist. Individuals may receive consecutive Nonpermanent Fixed Duration or Hourly appointments as long as:
 - i. Any subsequent appointment is to a different position; or
 - ii. The multiple positions are cyclical in nature but last fewer than nine (9) months during any consecutive twelve (12) month period.

22.2 Nonpermanent and Intermittent Registered Nurses.

- A. Job Class: Registered Nurse Bargaining Unit:
 - (22940) Registered Nurse 2 (NE H NI WSNA UWMC Northwest)
 - (23052) Registered Nurse 3 (NE H NI WSNA UWMC Northwest)
 - (22941) Charge Nurse (NE H NI WSNA UWMC Northwest)

22.3 Hiring Practices for Nonpermanent Nurses

- A. New nonpermanent positions will be posted when business need exists.

- 47 B. Orientation time will be individually determined based on the unit and the
- 48 nonpermanent nurse's experience.
- 49 C. A written notification will be used to specify initial conditions of hiring
- 50 (including rate of pay, unit and shift if applicable).
- 51 D. Conclusion of the appointment will be at the discretion of the University,
- 52 including termination of appointment prior to its originally intended expiration
- 53 date, and will not be subject to Articles 17 (Grievance Procedure) and Article
- 54 6 (Seniority) of the contract.
- 55 E. If the employee is not a permanent state employee, the employer must give
- 56 one work days' notice prior to conclusion of the appointment. A
- 57 Nonpermanent appointment may be terminated immediately with pay in lieu
- 58 of the one work day of notice required for Nonpermanent Employees.
- 59 F. If at any time during a Nonpermanent appointment, a short-term workload
- 60 peak or other short term need becomes ongoing and permanent in nature, the
- 61 Employer must take action to fill the position on a permanent basis.

62
 63 22.4 Probationary Period Upon Movement from Nonpermanent or Intermittent to
 64 Regular.

- 66 A. A Nonpermanent or Intermittent Employee hired into a regular bargaining unit
- 67 position is required to serve a probationary period.
- 68 B. A Nonpermanent or Intermittent Employee who is hired into a regular position
- 69 in the same job classification in the same unit without a break in service
- 70 through open recruitment will have their Nonpermanent or Intermittent hours
- 71 of service apply toward their probationary period up to a maximum of three (3)
- 72 of the six (6) month probationary period.
- 73 C. The Employer may convert a Nonpermanent or Intermittent position into a
- 74 permanent position if the Employer used a competitive process to fill the
- 75 Nonpermanent or Intermittent position or if the Nonpermanent or Intermittent
- 76 position was filled using a veteran placement program. In such
- 77 circumstances the employee will serve a probationary or trial service period,
- 78 whichever is applicable.

79
 80 22.5 Hours of Work and Overtime

- 82 A. Work Shift. Shift length will be determined by the unit's needs. The normal
- 83 work shift shall consist of eight (8) hours ~~work to be completed within eight~~
- 84 ~~and one-half (8 ½) consecutive hours~~, ten (10) hours ~~to be completed within~~
- 85 ~~ten and one-half (10 ½) consecutive hours~~, or twelve (12) hours ~~to be~~
- 86 ~~completed within twelve and one-half (12 ½) consecutive hours. All work~~
- 87 ~~shifts shall include at least a thirty (30) minute meal period to be taken on the~~
- 88 ~~nurse's own time if relieved of their duties during this period.~~
- 89 1. Nonpermanent and Intermittent staff will follow unit scheduling
- 90 guidelines.

- 91 B. Scheduled shifts are counted in the staffing parameters and cannot be
92 removed once the schedule is posted, unless by trade or due to illness or
93 pursuant to local, state and federal law.
- 94 C. For units that utilize call, an on-call shift counts as a worked
95 occurrence/availability for purposes of the availability requirements.
- 96 D. Overtime: Hours of work for nurses shall be established by the employing
97 official. Overtime hours will be compensated at a rate of one-and-one-half (1-
98 1/2) times the nurse's regular rate of pay.
- 99 E. Minimum Work Availability. The minimum work availability for Nonpermanent
100 and Intermittent Nurses is four (4) shifts per four (4) week period. If a Nurse
101 withdraws availability, the shift does not count towards the minimum
102 requirement. All hourly staff, once scheduled, are expected to honor the
103 commitment, with the exception lawful use of sick time off.
- 104 F. Weekend Availability Minimum. Unit Nonpermanent and Intermittent nurses
105 must provide availability for one (1) weekend shifts per four (4) week
106 schedule. Weekend requirements are contingent upon unit staffing needs for
107 weekend scheduling; weekday shifts may be substituted if that meets unit
108 needs.
- 109 G. The Employer shall determine and post Nonpermanent and Intermittent
110 schedules at least ten (10) days prior to the scheduled work period.
- 111 H. Open shifts are posted after the monthly schedule is posted. Once a
112 Nonpermanent and Intermittent nurse signs up for an open shift, the nurse will
113 be notified of approval or denial within seventy-two (72) hours.
- 114 I. Holiday Availability. The requirements for holiday availability will be
115 determined at the unit level by the manager. Unit Nonpermanent and
116 Intermittent nurses will be notified of the holiday requirements for the unit they
117 are assigned to. Nonpermanent and Intermittent nurses shall be required to
118 be available for one holiday per year.
- 119 J. Each year, the Nonpermanent and Intermittent nurse appointment will be
120 reviewed and renewed as applicable. Nurses out of compliance with the
121 above minimums may have their Nonpermanent and Intermittent appointment
122 terminated. Notwithstanding the above, if a Nonpermanent and Intermittent
123 nurse fails to provide dates to be scheduled as required by the applicable
124 agreement, or to any lesser extent required by their unit, they shall be subject
125 to a written warning. If they thereafter fail to provide dates on a second
126 occasion within a rolling year, their appointment may be ended. Appointments
127 may also end due to a lack of work.
- 128 1. Meeting Request: An intermittent or nonpermanent nurse who is
129 separated may, within twenty-one (21) days of the action, request a
130 meeting with a representative of WSNA, Human Resources, and the
131 manager of the department or designee to discuss the action. A
132 meeting will be promptly scheduled.
- 133 J.K. Except as provided below, Nonpermanent and Intermittent nurses shall
134 not be terminated except for just cause. Nonpermanent and Intermittent
135 nurses must work a cumulative 1,872 non-overtime hours or more from their
136 date of hire in continuous employment with the University for the just cause

137 requirement to apply. The parties agree to adhere to the grievance process
 138 as outlined in Article 17 of the WSNA UWMC-NW CBA. If a nurse is not
 139 meeting performance expectations, they will be given an action plan outlining
 140 the identified issues. The parties agree to start at Step Two for terminations.
 141

142 22.6 Cancellation

- 143
- 144 A. Nonpermanent and Intermittent nurse cancellation will follow the contract
- 145 language in Section 6.142 of the WSNA – UW NW CBA.
- 146 B. Once the schedule is posted or an extra shift is approved, the Nonpermanent
- 147 and Intermittent nurse shall not self-cancel.
- 148 C. A Nonpermanent and Intermittent nurse that is placed on low census under
- 149 Section 6.142 of the WSNA – UW NW CBA shall be not placed on standby
- 150 except by mutual consent. A shift where low census occurs still counts
- 151 towards minimum shift availability.
- 152

153 22.7 Compensation and Premium Pay. Nonpermanent and Intermittent nurses shall
 154 receive longevity increments and shall be eligible for standby pay, callback pay,
 155 shift differentials, weekend premium pay, certification pay, BSN premium and
 156 incentive shift premium. Nonpermanent and Intermittent nurses are not eligible
 157 for other premiums outlined in this contract. A full-time or part-time nurse who
 158 changes to Nonpermanent and Intermittent status shall retain seniority and
 159 benefits pending return to regular status. Seniority shall not apply while on
 160 Nonpermanent and Intermittent status. After return to full-time or part-time status,
 161 previously accrued seniority and benefit accruals shall be reinstated for wage
 162 and benefit eligibility purposes.

- 163
- 164 A. The rate of pay for employees under this Article must be placed on a salary
- 165 step within the range for the classified title that best fits the work.
- 166 B. The progression start date shall be established as follows:
- 167 a. The first of the current month for actions occurring between the first
- 168 and the fifteenth of the month; or,
- 169 b. The first of the following month for actions occurring between the
- 170 sixteenth and the end of the month.
- 171 C. Annual Salary Adjustment. Annual salary adjustments up to the top automatic
- 172 step will be administered the same as regular positions in the same
- 173 classification.
- 174

175 Intermittent and Nonpermanent Nurses hired or offered a position in writing prior
 176 to October 1, 2022 will continue to receive the 6% recruitment and retention
 177 premium until the nurse leaves employment or is hired into a position that is not
 178 eligible for the premium.

- 179
- 180 D. Shift Differential. Employees assigned to work the second (3:00 pm – 11:00 pm)
- 181 shift shall be paid a shift premium of two dollars and fifty cents (\$2.50) over the
- 182 hourly contract rates of pay. Employees assigned to work the third shift (11:00

183 pm – 7:00 am) shall be paid a shift differential of four dollars and fifty cents
 184 (\$4.50) over the regular rate of pay. Employees shall be paid shift differential on
 185 second or third shift if the majority of hours are worked during the designated
 186 shift.

187 E. Standby Premium. Employees placed on standby status off the premises shall be
 188 compensated at the rate of four dollars (~~\$7.00~~~~4.00~~) per hour. When called in from
 189 standby status, the nurse shall receive premium pay of time and one-half (1 ½ X)
 190 the nurse’s regular rate for a minimum work period of ~~two-three~~ (23) hours.

191 F. Training. Employees that are required to schedule and participate in mandatory
 192 education by their department and will be compensated at the appropriate rate of
 193 pay. Tuition for required education will be provided by the Employer. Attendance
 194 at staff education days and mandatory staff meetings is required. If an employee
 195 falls out of compliance with competencies or testing requirements (e.g., TB
 196 testing, CPR, NRP), they will not be scheduled until the deficiency is corrected.

197 G. Premiums.

<u>Evening shift differential</u>	<u>\$3.00</u>
<u>Night shift differential</u>	<u>\$5.00</u>
<u>Standby Pay</u>	<u>\$7.00</u>
<u>Weekend</u>	<u>\$4.00</u>
<u>Sunday Night</u>	<u>\$3.00</u>
<u>Certification</u>	<u>\$1.25</u>
<u>BSN</u>	<u>\$1.00</u>
<u>Low Census Standby</u>	<u>\$7.00</u>
<u>Cross Entity Float</u>	<u>\$4.00</u>
<u>Charge</u>	<u>\$3.00</u>
<u>Preceptor</u>	<u>\$2.00</u>
<u>Float Pool</u>	<u>\$5.00</u>
<u>STAT RN</u>	<u>\$4.00</u>

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200 **22.8 Holidays and Holiday Credit**

- 202 A. Employees in Nonpermanent Fixed Duration positions will be paid for
 203 holidays and receive holiday credit per Article 10 Holiday and Vacation Time
 204 Off.
 205 B. Holiday credit is a balance of time off that is received in lieu of holiday
 206 compensation for employees in Nonpermanent Hourly and Intermittent
 207 positions. Holiday credit accrual is proportionate to the number of hours in
 208 pay status (excluding overtime hours) in the same month of the holiday to that
 209 required for full-time (1.0 FTE) employment, excluding all holiday hours.
 210 Holiday credit accrual will be calculated at the end of the month. Employees
 211 in Nonpermanent Hourly and Intermittent positions hired during the month of
 212 the holiday will not receive credit for holidays that occur prior to their hire
 213 date.

214 C. Employees in Nonpermanent Hourly and Intermittent positions shall be paid
215 for holiday credit in accordance with Article 10 Holiday and Vacation Time Off.
216

217 22.9 Holiday Premium. If an employee works one of the following holidays, they will
218 receive time and one half (1 ½) for all hours worked on that holiday: New Year's
219 Day, Martin Luther King Jr. Day, Presidents' Day, Memorial Day, Juneteenth,
220 Independence Day, Labor Day, Veterans' Day, Thanksgiving Day, Native
221 American Heritage Day, and Christmas Day.
222

223 The holiday for night shift nurses whose work schedule begins on one calendar
224 day and ends on the next will be the shift in which half or more of the hours fall
225 on the calendar holiday. That shift will be treated as the holiday and the premium
226 will be paid in accordance with the above holiday pay rules.
227

228 22.10 Personal Holiday

229
230 A. Employees in Nonpermanent Fixed Duration positions will receive a personal
231 holiday per Article 10.1.1 Personal Holiday.
232

233
234 Employees in Nonpermanent Hourly and Intermittent positions earn a personal
235 holiday at a rate proportionate to the number of hours in pay status (excluding
236 overtime hours) in the same month when the personal holiday is requested to
237 that required for full-time (1.0 FTE) employment, excluding all holiday hours. The
238 value of the Personal Holiday cannot exceed eight (8) hours.
239

240 22.11 Ending Employment.

241
242 A. Nurses planning to resign shall make a good faith effort to give at least thirty
243 (30) calendar days' notice of intention to terminate. All resignations shall be
244 final unless the Employer agrees to rescind the resignation.
245 B. A nonpermanent or intermittent nurse who is separated may, within twenty-
246 one (21) days of the action, request a meeting with a representative of
247 WSNA, human resources, and the manager of the department or designee to
248 discuss the action. A meeting will be promptly scheduled.
249

250 22.12 Sick Time Off.

251
252 A. Employees in Nonpermanent Fixed Duration positions will accrue sick time off
253 per Article 11 Sick Time Off.
254 B. Employees in Nonpermanent Hourly and Intermittent positions will earn a
255 monthly sick time off accrual proportionate to the number of hours in pay
256 status (excluding overtime hours) in the month to that required for full-time
257 (1.0 FTE) employment. Sick time off accruals cannot exceed eight (8) hours
258 in a month.
259 C. Accrued sick time off may be used

- 260 1. in accordance with Article 11.2, 11.3, and 11.7;
- 261 2. for the suspension of operations when the nurse's workplace has been
- 262 closed by a public health official for any health-related reason or after
- 263 the declaration of an emergency by a local or state government or
- 264 agency, or by the federal government; and
- 265 3. when the nurse's child's school or day care has been closed by a
- 266 public health official for any health-related reason or after the
- 267 declaration of an emergency by a local or state government or agency,
- 268 or by the federal government.
- 269 D. Paid sick time off will not count as work hours for the purpose of calculating
- 270 overtime.
- 271 E. When calling in ill, the reserve nurse will follow the contract language.
- 272

273 22.13 Vacation Time Off

- 274
- 275 A. Employees in Nonpermanent Fixed Duration positions will accrue and use
- 276 vacation time off per Article 10 Holiday and Vacation Time Off.
- 277 B. Employees in Nonpermanent Hourly and Intermittent positions will earn a
- 278 monthly vacation time off accrual proportionate to the number of hours in pay
- 279 status (excluding overtime hours) in the month to that required for full-time
- 280 (1.0 FTE) employment.
- 281 C. Employees in Intermittent positions will receive vacation time off accrual rate
- 282 increases in accordance with the accrual schedule in Article 10 Holiday and
- 283 Vacation Time Off.
- 284 D. Employees in Nonpermanent and Intermittent positions are subject to the
- 285 maximum vacation time off accrual rules as outlined in RCW 43.01.044 for
- 286 classified employment.
- 287

288 22.14 Miscellaneous Leave. If eligible, the Employer will continue to provide Family

289 Medical Leave, Domestic Violence Leave, Civil Duty Leave (unpaid release

290 time), Leave Without Pay for Reason of Faith or Conscience, and Military Leave

291 in accordance with Employer Policy, Article 13, and Article 14.

292

293 22.15 Expectations

- 294
- 295 A. Unit nonpermanent or intermittent nurses are expected to be competent to
- 296 care for all appropriate patient populations as defined by individual units
- 297 B. Nonpermanent or intermittent nurses must complete mandatory
- 298 competencies and testing in the required timeframe:
- 299 1. If nonpermanent or intermittent nurses fall out of compliance with
- 300 competencies or testing requirements (e.g., TB testing, CPR, NRP),
- 301 they will not be scheduled until the deficiency is corrected.
- 302 C. Attendance at staff education days and mandatory staff meetings is required.
- 303 Staff education days, required education and/or staff meetings count toward
- 304 the required minimum work availability shifts.
- 305 D. Per diem nurses may trade shifts per unit guidelines.

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22.16 ~~Other Provisions Applicable to Per Diems Recognition, Dues Deduction, Definitions (except Probationary Period), Rest periods/breaks, Wages, Employment Practices (except 5.7 Performance Evaluations and 5.6 Floating), Grievance Procedure (non-corrective action only), and Workers Compensation Leave. MOU Salary Overpayment and Recovery. The following Articles in this Agreement apply to Nonpermanent and Intermittent Registered Nurses:~~

- Article 1 Recognition
- Article 2 Association Representatives/Dues Deduction/Activities
- Article 4 Definitions (except Probationary Period)
- Article 5 Employment Practices (except 5.7 Performance Evaluations and 5.6 Floating)
- Article 7.9 Meal/Rest Periods
- Article 8 Compensation
- Article 13.15 Workers Compensation Leave
- Article 17 Grievance Procedure (non-corrective action only)
- Article 18 Management Responsibilities
- Article 24 Duration
- Article XX Salary Overpayment and Recovery
- MOU Voluntary Float Between ML and NW Campuses

Tentatively Agreed To:

For the Union:

Signed by:

Robert H. Lavitt

Robert Lavitt - 375DD6A502D445A...

Date: 9/2/2025

For the Employer:

DocuSigned by:

Jade Hersch

Jade Hersch - ED538CDB172F42B...

Date: 8/21/2025

ARTICLE 23 – RELEASE TIME

The Employer will make a good faith effort to release WSNA members to participate in negotiations when release time is requested in accordance with normal leave policies.

- a. If nurses are scheduled on the dayshift of the negotiations, they can request release for all or part of their shift. If hours spent bargaining are less than the scheduled hours, nurses may request to use benefit time, trade hours to meet FTE, or return to the unit after negotiations to fulfill the scheduled hours with management approval.
- b. If the nurse is scheduled on the night shift, the nurse may request release from the shift immediately before or immediately after negotiations. If hours spent bargaining are less than the scheduled hours, nurses may request to include use benefit time, trade hours to meet FTE, or return to the unit after negotiations to fulfill the scheduled hours with management approval.
- c. With management approval, nurses will be paid at their appropriate rate of pay for hours in bargaining over their designated FTE.
- d. The WSNA Nurse Representatives will request release for nurses who will be on the negotiation team to Labor Relations at least seven (7) days in advance of the meeting date unless the meeting is scheduled sooner, in which case WSNA will notify the Employer as far in advance as possible. WSNA will supply the Employer with the names of the nurses who have participated in negotiations, along with the number of hours spent in negotiations and caucus.
- e. Unless agreed otherwise, the parties agree to begin bargaining within thirty (30) calendar days of receipt of the request to bargain. A valid request to bargain must include at least three (3) available dates and times to meet.
- e.f. Time spent in bargaining on paid release time will not result in missed meal or rest breaks or rest between shifts premium.
- f.g. Release time is contingent on approval by the nurse’s manager or designee.
- h. For demand to bargains during the administration of the collective bargaining agreement, no more than four (4) nurses will be paid per bargaining session.
- g.i. Nothing in this Article supersedes any other Article of this collective bargaining agreement.

Tentatively Agreed To:	
For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H Lavitt</i>	<small>DocuSigned by:</small> <i>Jade Hersch</i>
Robert Lavitt Date: 8/19/2025	Jade Hersch Date: 6/30/2025

ARTICLE 24 – DURATION

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2
3 24.1 Term. This Agreement shall become effective July 1, 202~~5~~³ and shall remain in
4 full force and effect to and including June 30, 202~~7~~⁵, unless changed by mutual
5 consent. Should WSNA desire to change, modify or renew the Agreement upon
6 the expiration date, written notice must be given to the Employer at least ninety
7 (90) days prior to the expiration date. Upon receipt of such notice, negotiations
8 shall commence. In the event negotiations do not result in a new Agreement on
9 or before the expiration date, this Agreement shall terminate unless the parties
10 mutually agree to extend the Contract.

11
12 Tentatively Agreed To:

13
14 For the Union:

For the Employer:

15
16 _____
17 Robert Lavitt

18 Date:

Date:

NEW ARTICLE XX – SALARY OVERPAYMENT RECOVERY

Salary Overpayment Recovery

A. When an Employer has determined that a nurse has been overpaid wages, the Employer may recoup the overpayment. The Employer will provide written notice to the nurse that will include the following items:

1. The amount of the overpayment,
2. The basis for the claim,
3. A demand for payment, and
4. The rights of the nurse under the terms of this Agreement.

Nurses may request a meeting with the Employer and an interpreter to have the overpayment notification explained.

B. Method of Payback

1. Active employees

~~a.~~ The nurse must choose one (1) of the following options for paying back the overpayment:

~~A.~~ Voluntary wage deduction, or

~~Cash, or~~

~~Check (separated nurse).~~

~~B.~~ Vacation (if under 280 hours only) or Compensatory time balances

2. Separated employees

a. The nurse must choose one (1) of the following options for paying back the overpayment:

A. Cash, or

B. Check

~~3.~~ The nurse may propose a payment schedule to repay the overpayment to the Employer. If the nurse’s proposal is accepted by the Employer, the deductions shall continue until the overpayment is fully recouped. Nothing in the section prevents the Employer and nurse from agreeing to a different overpayment amount than specified in the overpayment notice or to a method other than a deduction from wages for repayment of the overpayment amount.

~~4.~~ If the nurse fails to choose one (1) of the four (4) options described above, within thirty (30) days of written notice of overpayment, the Employer will deduct the overpayment owed from the nurse’s wages or the amount due may be placed with a collection agency for nurses who have separated from UW service. This overpayment recovery will not be more than five percent (5%) of the nurse’s disposable earnings in a pay period. Disposable earnings will be calculated in accordance with the Attorney General of Washington’s guidelines for Wage Assignments.

~~5.~~ Any overpayment amount still outstanding at separation of employment will be deducted from their final pay. No interest will be

47 charged for active UW nurses or separated nurses who enter into a
48 repayment arrangement.
49

50 C. Neither A nor B above are required for nurse reported overpayments and/or
51 nurse corrected time including leave submittal corrections. All nurse initiated
52 overpayment corrections may be collected from the next available pay check.
53

54 D. Appeal Rights: Any dispute concerning the occurrence or amount of the
55 overpayment will be resolved through the grievance procedure in Article 6 of this
56 Agreement. The Employer will suspend attempts to collect an alleged
57 overpayment until thirty (30) days after the grievance process has concluded.
58

59 Tentatively Agreed To:

60
61 For the Union:
62 Signed by:
63 *Robert H Lavitt*
64 _____
65 Robert Lavitt 375DD6A502D445A...
Date: 8/19/2025

For the Employer:
DocuSigned by:
Jade Hersch

Jade Hersch ED538CDB172F42B...
Date: 6/30/2025

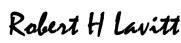
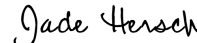
APPENDIX A – TRAINING AGREEMENT

UWMC-NW wishes to promote professional growth and development by providing residency and specialty training for nurses. This agreement is an understanding that considers a service commitment in return for such training programs.

Training Program Understanding:

1. Commencing with the end of the residency program, the nurse agrees to work for a period of one (1) year at a minimum of 0.8 FTE in the practice area for which training was provided (service commitment). Commencing with the end of a specialty training program, the nurse agrees to work for a period of eighteen (18) months at a minimum of 0.8 FTE in the practice area for which training was provided (service commitment).
 - a. The service commitment will start from the date the nurse satisfactorily completes the training program and is counted as part of the regular staffing of the unit.
 - b. This date shall be extended to reflect any leave of absence that may occur during the time period.
2. If the nurse resigns prior to completing the training program, the nurse agrees to reimburse the Employer one hundred dollars (\$100.00) for each week of completed training up to a maximum of six hundred dollars (\$600.00).
3. If the nurse transfers or resigns from the designated position prior to fulfilling the service commitment in Childbirth Center (CBC) or Perioperative (Periop) Services, the nurse agrees to reimburse the Employer one hundred fifty dollars (\$150.00) for each month of service not completed.
4. If the nurse transfers or resigns from the designated position prior to fulfilling residency or specialty training service commitment in all other areas, the nurse agrees to reimburse the Employer one hundred twenty-five dollars (\$125.00) for each month of service not completed.
5. Exclusions to this reimbursement agreement include discharge for cause, transfer by mutual agreement, and personal hardship. The personal hardship exception will be submitted to the Conference Committee for resolution.

Prior to entering the training program, the nurse will sign a letter confirming voluntary acceptance of the training, service and reimbursement obligations.

Tentatively Agreed To:	
For the Union: Signed by:  Robert Lavitt Date: 9/2/2025	For the Employer: DocuSigned by:  Jade Hersch Date: 8/21/2025

APPENDIX B – TEN HOUR WORK SCHEDULE

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- ~~1. A “ten (10) hour” work schedule shall refer to any nurse who has voluntarily signed a ten (10) hour innovative schedule agreement and is regularly scheduled to work one (1) or more ten (10) hour shifts per week.~~
- ~~2. Ten (10) hour nurses required to work on a holiday shall be paid one and one-half (1 1/2) times the regular rate of pay.~~
- ~~3. Ten (10) hour nurses shall accumulate paid annual leave and sick leave based upon hours worked. Sick leave benefits shall accumulate from date of hire. Eligibility for use of sick leave and paid annual leave shall commence after completion of the probationary period. For purposes of sick leave and vacation, ten (10) hours constitutes one (1) work day.~~
- ~~4. Ten (10) hour nurses working four (4) or more hours between the hours of 15:00 and 23:00 on the evening shift shall be paid evening shift differential for those hours worked on the second shift. Nurses assigned to work four (4) or more hours between the hours of 23:00 and 07:00 on the night shift shall be paid a night shift differential for those hours worked on the third shift.~~
- ~~5. Ten (10) hour nurses shall be paid overtime compensation in accordance with section 7.5 of the Employment Agreement for all time worked beyond ten (10) consecutive hours per day or any hours worked beyond forty (40) hours in the designated seven (7) day period.~~
- ~~6. In scheduling work assignments, the Employer will make a good faith effort to provide each nurse with at least ten (10) hours off duty between shifts. This section shall not apply to standby and callback assignments performed pursuant to Article 9.~~
- ~~7. The Employer retains the right to discontinue this innovative schedule and to revert back to a normal eight (8) hour or twelve (12) per day schedule after at least forty-five (45) days’ advance notice to the nurse. Ten (10) hour nurses who would like to discontinue working an established ten (10) hour work schedule and whose performance has been satisfactory shall be guaranteed the first available eight (8) or twelve (12) hour position for which the nurse is qualified, provided that a more senior, qualified nurse has not requested the position.~~
- ~~8. The ten (10) hour staffing pattern may be utilized within the Hospital with the consent of the individual nurse and unit manager affected.~~
- ~~9.1. _____ Provisions of the Employment Agreement inconsistent with the foregoing are hereby superseded with respect to nurses working the ten (10) hour work schedule. All other benefits and provisions not inconsistent with the foregoing shall apply to ten (10) hour nurses.~~

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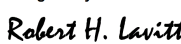
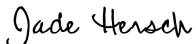
Tentatively Agreed To:	
For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H. Lavitt</i>	<small>Signed by:</small> <i>Jade Hersch</i>
Robert Lavitt <small>-375DD6A502D445A...</small>	Jade Hersch <small>-ED538CDB172F42B...</small>
Date: 7/23/2025	Date: 7/15/2025

APPENDIX C – TWELVE HOUR SHIFTS

~~In accordance with Section 7.3 of the Agreement between the Employer and WSNA, nurses may, on an individual basis, agree to work a twelve (12) hour shift schedule. All existing contractual provisions shall apply unless otherwise provided for herein.~~

~~Work Day. The twelve (12) hour shift schedule shall provide for a twelve (12) hour work day consisting of twelve and one half (12-1/2) hours to include one (1) thirty (30) minute unpaid lunch period. Rest periods shall be permitted in accordance with state law, with fifteen (15) minutes in each four (4) hours of work.~~

~~Time Off Between Shifts. In scheduling work assignments, the Employer will provide each nurse with at least eleven (11) hours off duty between shifts, unless otherwise requested by the nurse, or pay the nurse one and one half times (1-1/2x) the nurse's regular rate for all time worked within this eleven (11) hour period.~~

Tentatively Agreed To:	
For the Union: Signed by:  <hr/> Robert Lavitt - 375DD6A502D445A... Date: 7/23/2025	For the Employer: Signed by:  <hr/> Jade Hersch - ED538CDB172F42B... Date: 7/15/2025

APPENDIX D – CLINICAL CLUSTERS PERTAINING TO ARTICLE 6 - SENIORITY

Clinical Clusters are as follows:

Cluster One (Inpatient Units). ~~5~~ Med Tele, ~~4~~ Med Surg, ~~MSE~~, ~~2BE~~, Vascular Access Team, Outpatient Infusion, SCN, CBC, Inpatient Float Pool, ~~In-patient psych~~, ~~PSA~~, Oncology, 2D/3D

Cluster Two (Critical Care Units). SCU, ICU, ED, PACU (Main and OSC), CPU, ENDO, IR, STAT team, Critical Care float pool, Cath/EP

Cluster Three. Operating Room, Outpatient Surgical Services

Cluster Four. Primary Care Clinics, UWMPC Ambulatory Nursing (excluding OB/GYN) and Population Health: ~~Internal Medicine at UW Medical Center – Northwest, Primary Care at Fremont , Primary Care at Lake Forest Park, Primary Care at Northwest Outpatient Medical Center, UW Neighborhood Clinics.~~

Cluster Five: Medical/Surgical Specialty Clinics (including UWMPC OB/GYN) UWMC Ambulatory Care : ~~Advanced Manual Therapy – Ballard, Breast Clinic at UW Medical Center – Northwest, Endocrinology Clinic at UW Medical Center – Northwest, Heart Institute at UW Medical Center – Northwest, Hepatology Clinic at UW Medical Center – Northwest, Hip & Knee Center at UW Medical Center – Northwest, Hand & Elbow Center at UW Medical Center – Northwest, Infectious Disease Clinic at UW Medical Center – Northwest, Kidney Stone Center at UW Medical Center – Northwest, Midwives Clinic at Northwest Outpatient Medical Center, Neurology Clinic at UW Medical Center – Northwest, Neurosurgery & Spine Clinic at UW Medical Center – Northwest, Otolaryngology Clinic at UW Medical Center – Northwest, Plastic and Aesthetic Surgery Clinic at UW Medical Center – Northwest, Pre-Anesthesia Medicine Consult Clinic, Respiratory Clinic at UW Medical Center – Northwest, Rheumatology & Arthritis Clinic at UW Medical Center – Northwest, Rheumatology & Arthritis Clinic at UW Medical Center – Northwest (Infusion), Sports Medicine Clinic at Ballard, Sports Medicine Clinic at Northwest Outpatient Medical Center, Surgical Services and Hernia Center at UW Medical Center – Northwest, Travel Medicine Clinic at UW Medical Center – Northwest, Urology Clinic at UW Medical Center – Northwest, Vascular Center at UW Medical Center Northwest, Women’s Cancer Care Clinic at UW Medical Center – Northwest, Women’s Health at Ballard, Women’s Health at Northwest Outpatient Medical Center, Women’s Health at UW Medical Center – Northwest, Women’s Health Clinic at Mill Creek, Anticoagulation Clinic at Northwest Outpatient Medical Center, Cardiac Rehabilitation at UW Medical Center – Northwest, Digestive Health Clinic at UW Medical Center – Northwest, Heart Institute at Mill Creek, Supportive Care Clinic at UW Medical Center – Northwest.~~

46 Cluster Six (Behavioral Health): Long Term Civil Commitment Unit, Gero-
47 psychiatry Unit, Behavioral Health Intake Evaluation Unit, and Behavioral Health
48 Float Pool

50 The Employer shall negotiate with WSNA over the appropriate cluster designation of
51 any Unit not listed above, including but not limited to newly created Units.

52

53 Tentatively Agreed To:

For the Union:	For the Employer:
Signed by:	DocuSigned by:
<i>Robert H. Lavitt</i>	<i>Jade Hersch</i>
Robert Lavitt 375DD6A502D445A...	Jade Hersch ED538CDB172F42B...
Date:7/23/2025	Date:7/15/2025

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APPENDIX E – PAY TABLE

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[Payscale Table BJ](#)

Tentatively Agreed To:	
For the Union:	For the Employer:
Signed by:	DocuSigned by:
<i>Robert H Lavitt</i>	<i>Jade Hersch</i>
Robert Lavitt 375DD6A502D445A...	Jade Hersch ED538CDB172F42B...
Date: 9/2/2025	Date: 8/21/2025

APPENDIX XX – UNION ROSTER REPORTS

Each pay period the Employer will provide the following union membership information~~four (4) reports~~ electronically.

1. ~~Total Compensation and deductions~~ Employee Information

Name

Home Address

~~Home phone~~

~~Cell phone~~ Primary phone

Work phone

~~Work location (building)~~

Work location (address)

~~Work station or office (suite and/or number)~~

Employee ID number

Personal Email

UW email

UW mailbox

Employment status

~~Employment status effective date~~ Current position effective date

Job classification

~~Department~~ Supervisory Org

Pay grade

Pay step

Pay rate salary

Hourly rate

Supervisor

Supervisor email

Race

Gender

DOB

Date of hire

Job title

Job class code

Shift

Deduction amount dues

Deduction amount fees

~~Deduction amount other~~

~~Deduction amount cope~~

Total wages for the pay period

Total base pay for pay period

Total overtime pay for pay period

Total overtime hours per pay period

Total hours worked in the pay period

Days in the pay period

~~Total hours for each class/type of differential and or/ premium pay for the pay~~

47 ~~period~~
 48 ~~Total wages for each class/type of differential and or/ premium pay for the pay~~
 49 ~~period Premium pay and premium hours~~
 50 Total wages year to date
 51 Pension plan enrollment (which plan)
 52 ~~Position number Position ID~~
 53 Medical plan enrollment (which plan)
 54 Bargaining Unit
 55 Total FTE
 56 Anniversary date (step date)
 57 Employment status (regular fulltime, regular part time, hourly, fixed duration part
 58 time, fixed duration full time)

59
 60 ~~All appointment list~~
 61 ~~Appointment budget number(s)~~
 62 ~~Beginning date~~
 63 ~~End date~~
 64 ~~Department and/or hiring unit~~
 65 College/Org name
 66 ~~Job Classification~~
 67 ~~Job Classification Code~~
 68 Full time salary or hourly rate
 69 Appointment/FTE Percentage
 70 Appointment status
 71 ~~Appointment term Service Period~~
 72 ~~Distribution line information~~
 73 ~~Position number~~
 74 Earnings in last pay cycle
 75 Hours worked in last pay cycle
 76 FTE in last pay cycle
 77 ~~Leave of Absence Effective Date~~
 78 ~~Nature of Leave of Absence~~

2. ~~Change Report Staffing Events and Terminations~~

81 Name
 82 Job classification
 83 Job classification code
 84 Department
 85 Employee id
 86 Original hire date
 87 Status change date
 88 Termination/separation date if any
 89 Reason for status change, nature of status change
 90 Reason for termination/separation
 91 ~~LOA effective date~~
 92 ~~Nature of LOA~~

93 New hire date
94 New Hire

95
96 3. ~~Vacancy Report~~
97 ~~Position Number~~
98 ~~Job Classification~~
99 ~~Date of vacancy~~
100 ~~Elimination date of vacancy~~
101 ~~Reason for elimination (filled, deleted, transferred to a different~~
102 ~~classification/status)~~
103

Tentatively Agreed To:	
<p>104</p> <p>105</p> <p>106 For the Union:</p> <p>107 Signed by:</p> <p>108 <i>Robert H Lavitt</i></p> <p>109 _____</p> <p>110 Robert Lavitt 375DD6A502D445A...</p> <p>Date: 9/2/2025</p>	<p>106 For the Employer:</p> <p>107 DocuSigned by:</p> <p>108 <i>Jade Hersch</i></p> <p>109 _____</p> <p>110 Jade Hersch ED538CDB172F42B...</p> <p>Date: 8/21/2025</p>

1 **MEMORANDUM OF UNDERSTANDING**
2 **BETWEEN**
3 **THE UNIVERSITY OF WASHINGTON (UNIVERSITY)**
4 **AND**
5 **THE WASHINGTON STATE NURSES ASSOCIATION (UNION)**
6
7 **MOU – BSN SCHOLARSHIP PROGRAM**

8
9 BSN Scholarship Program. If the hospital offers a BSN scholarship program, the
10 hospital will discuss the parameters of the program in Conference Committee.
11

12 Tentatively Agreed To:
13
14 For the Union: For the Employer:
15 DocuSigned by:
16 *Jade Hersch*
17 ED538CDB172F42B...
18 Robert Lavitt Jade Hersch
Date: 8/19/2025 Date: 6/30/2025

**MEMORANDUM OF UNDERSTANDING
BETWEEN
THE UNIVERSITY OF WASHINGTON (UNIVERSITY)
AND
THE WASHINGTON STATE NURSES ASSOCIATION (UNION)**

MOU – EARLY RECRUITMENT AND RETENTION WAGE INCREASES

During negotiations for the 2023-2025 successor agreement, the parties agreed to the following recruitment and retention wage increases for health care classifications:

- 1. Effective beginning of the pay period following 90 days after ratification January 1, 2023, all step values of table BZ range 02 will be increased by three four percent (43%). This increase will be based upon the salary schedule in effect on October 1, 2022.
- 2. Effective July 1, 2023, all step values of table BZ range 02 will be increased by two five percent (52%). This increase will be based upon the pay table values in effect on June 30, 2023.
- 3.1. Progression start dates are not impacted by these increases.

Tentatively Agreed To:

For the Union:

Signed by:

Robert H Lavitt

Robert Lavitt

375DD6A502D445A...

Date: 8/19/2025

For the Employer:

DocuSigned by:

Jade Hersch

Jade Hersch

ED538CDB172F42B...

Date: 6/30/2025

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Tentatively Agreed To:

For the Union:	For the Employer:
Signed by: <i>Robert H. Lavitt</i>	DocuSigned by: <i>Jade Hersch</i>
_____ Robert Lavitt <small>375DD6A502D445A...</small>	_____ Jade Hersch <small>ED538CDB172F42B...</small>
Date: 8/26/2025	Date: 7/15/2025

**MEMORANDUM OF UNDERSTANDING
BETWEEN
THE UNIVERSITY OF WASHINGTON (UNIVERSITY)
AND
THE WASHINGTON STATE NURSES ASSOCIATION (UNION)
MOU – MEAL AND REST BREAKS FOR UWMC-NW**

~~The Union and the Employer agree to the following provisions pursuant to RCW 49.12.187. The parties agree that employees of public employers may enter collective bargaining contracts, labor/management agreements, or other mutually agreed employment agreements that specifically vary from or supersede, in part or total, rules adopted under RCW Chapter 49 and WAC 296-126-092 regarding appropriate rest and meal periods. Portions of this MOU vary from and supersede the RCW and WAC. These provisions will follow the minimum standards for working conditions of RCW 49.12 and WAC 296-126-092 unless such rights are waived by the employee per this agreement.~~

~~Staff will be paid for the whole meal or rest period if missed or not taken within the specified time constraints unless the timing is voluntarily waived.~~

~~Staff will receive a voluntary waiver that allows them to waive their right to a second meal break during a 10 or 12-hour shift, allows them to waive the timing of meals and breaks, and allows them to combine meals and breaks. There will be an understanding that this waiver can be revoked at any time prior to their scheduled meal or break time; however, management retains the right to determine whether staff are approved to waive and/or combine meal and rest breaks. Staff may revoke their waiver by emailing their manager and notifying the charge nurse.~~

Tentatively Agreed To:

For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H Lavitt</i>	<small>DocuSigned by:</small> <i>Jade Hersch</i>
Robert Lavitt Date: 8/19/2025	Jade Hersch Date: 6/30/2025

1 **MEMORANDUM OF UNDERSTANDING**
2 **BETWEEN**
3 **THE UNIVERSITY OF WASHINGTON (UNIVERSITY)**
4 **AND**
5 **THE WASHINGTON STATE NURSES ASSOCIATION (UNION)**

6
7 **MOU – OPEN SHIFTS**
8

9 Nurses will be notified of open shifts prior to the posting of work schedules. Part-time
10 nurses will be given the opportunity to sign up for open shifts before intermittent and
11 nonpermanent nurses are scheduled, provided the nurse has the requisite skills and
12 abilities, and provided further that the nurse is available to work the full shift without
13 incurring overtime.
14

15 It is the goal of the Employer and WSNA for the Employer to implement a website-
16 based process for the purposes of signing up for open shifts and for volunteering for low
17 census. To this end, the Conference Committee will set as an agenda item for a
18 Conference Committee subcommittee the issue of the timeframe for the implementation
19 of a website-based process and the immediate implementation of an interim process.
20 The Conference Committee subcommittee shall consist of representatives of WSNA
21 and representatives of the Employer and shall meet within thirty (30) days of the date of
22 ratification of the Agreement.
23

24 Tentatively Agreed To:

25 For the Union:

Signed by:

Robert H Lavitt

Robert Lavitt 375DD6A502D445A...

Date: 9/2/2025

26 For the Employer:

DocuSigned by:

Jade Hersch

Jade Hersch ED538CDB172F42B...

Date: 8/21/2025

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**MEMORANDUM OF UNDERSTANDING
BETWEEN
THE UNIVERSITY OF WASHINGTON (UNIVERSITY)
AND
WASHINGTON STATE NURSES ASSOCIATION-NW**

MOU – PACU STANDBY SHIFTS

1
2 The parties agree to the following with respect to the Post Anesthesia Care Unit (PACU)
3 at UWMC Northwest:

- 4
- 5 1. Nurses will be permitted to schedule mandatory standby shifts immediately prior
- 6 to their regularly scheduled shift.
- 7
- 8 2. Nurses will be permitted to schedule mandatory standby shifts immediately
- 9 following their regularly scheduled shift.
- 10
- 11 3. If the nurse’s regularly scheduled shift is extended, the start time for their standby
- 12 shift will be adjusted to align with the end of their regular shift.
- 13
- 14 4. In a situation where the nurse works into their standby shift, they will be
- 15 guaranteed a minimum of three (3) hours’ pay at the rate of time and one half (1
- 16 ½) the nurse’s regular rate of pay.
- 17
- 18 5. Nurses will receive the on call premium outlined in Article 9.3 for all standby
- 19 hours.
- 20
- 21 6. Nurses will be paid at the rate of time and one half (1 ½) for all hours worked on
- 22 standby.
- 23
- 24 7. This agreement shall apply only to the PACU at UWMC-NW and is non-
- 25 precedent setting.
- 26
- 27

28 Tentatively Agreed To:

29

<p>30 For the Union:</p> <p>31 <small>Signed by:</small></p> <p>32 <i>Robert H. Lavitt</i></p> <p>33 _____</p> <p>34 Robert Lavitt - 375DD6A502D445A... Date: 8/26/2025</p>	<p>For the Employer:</p> <p><small>DocuSigned by:</small></p> <p><i>Jade Hersch</i></p> <p>_____</p> <p>Jade Hersch - ED538CDB172F42B... Date: 7/15/2025</p>
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**MEMORANDUM OF UNDERSTANDING
BETWEEN
THE UNIVERSITY OF WASHINGTON (UNIVERSITY)
AND
THE WASHINGTON STATE NURSES ASSOCIATION (UNION)
MOU – PAY RANGES FOR REGISTERED NURSES**

~~During negotiations for the 2023-25 successor agreement, the parties reached agreement on the following recruitment and retention increases effective January 1, 2023.~~

~~Steps A to E of Pay Table BZ Range 02 will be increased by two percent (2%). This increase will be based upon the salary schedule in effect August 31, 2022.~~

~~The values on Pay Table BZ, Range 03 will be increased to reflect eight percent (8%) above Table BZ, Range 02 at each step of the wage scale.~~

~~This MOU will expire upon implementation.~~

Tentatively Agreed To:

<p>For the Union:</p> <p>Signed by: <i>Robert H Lavitt</i></p> <p>Robert Lavitt <small>375DD6A502D445A...</small></p> <p>Date: 8/19/2025</p>	<p>For the Employer:</p> <p>DocuSigned by: <i>Jade Hersch</i></p> <p>Jade Hersch <small>ED538CDB172F42B...</small></p> <p>Date: 6/30/2025</p>
--	---

**~~MEMORANDUM OF UNDERSTANDING
BETWEEN
THE UNIVERSITY OF WASHINGTON (UNIVERSITY)
AND
THE WASHINGTON STATE NURSES ASSOCIATION (UNION)~~**

~~MOU – SALARY OVERPAYMENT RECOVERY~~

~~During negotiations for the 2021-2023 successor agreement, the parties agreed to the following regarding Salary Overpayment Recovery.~~

~~Salary Overpayment Recovery~~

~~A. When an Employer has determined that a nurse has been overpaid wages, the Employer may recoup the overpayment. The Employer will provide written notice to the nurse that will include the following items:~~

- ~~1. The amount of the overpayment,~~
- ~~2. The basis for the claim,~~
- ~~3. A demand for payment, and~~
- ~~4. The rights of the nurse under the terms of this Agreement.~~

~~Nurses may request a meeting with the Employer and an interpreter to have the overpayment notification explained.~~

~~B. Method of Payback~~

- ~~1. The nurse must choose one (1) of the following options for paying back the overpayment:

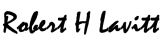
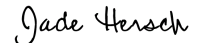
 - ~~a. Voluntary wage deduction,~~
 - ~~b. Cash, or~~
 - ~~c. Check (separated nurse).~~
 - ~~d. Vacation (if under 280 hours only) or Compensatory time balances~~~~
- ~~2. The nurse may propose a payment schedule to repay the overpayment to the Employer. If the nurse’s proposal is accepted by the Employer, the deductions shall continue until the overpayment is fully recouped. Nothing in the section prevents the Employer and nurse from agreeing to a different overpayment amount than specified in the overpayment notice or to a method other than a deduction from wages for repayment of the overpayment amount.~~
- ~~3. If the nurse fails to choose one (1) of the four (4) options described above, within thirty (30) days of written notice of overpayment, the Employer will deduct the overpayment owed from the nurse’s wages or the amount due may be placed with a collection agency for nurses who have separated from UW service. This overpayment recovery will not be more than five percent (5%) of the nurse’s disposable earnings in a pay period. Disposable earnings will be calculated in accordance with the Attorney General of Washington’s guidelines for Wage Assignments.~~

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~~4. Any overpayment amount still outstanding at separation of employment will be deducted from their final pay. No interest will be charged for active UW nurses or separated nurses who enter into a repayment arrangement.~~

~~C. Neither A nor B above are required for nurse reported overpayments and/or nurse corrected time including leave submittal corrections. All nurse initiated overpayment corrections may be collected from the next available pay check.~~

~~D. Appeal Rights: Any dispute concerning the occurrence or amount of the overpayment will be resolved through the grievance procedure in Article 6 of this Agreement. The Employer will suspend attempts to collect an alleged overpayment until thirty (30) days after the grievance process has concluded.~~

Tentatively Agreed To:	
For the Union:	For the Employer:
Signed by:  _____ Robert Lavitt <small>375DD6A502D445A...</small> Date: 8/19/2025	DocuSigned by:  _____ Jade Hersch <small>ED538CDB172F42B...</small> Date: 6/30/2025

1 **MEMORANDUM OF UNDERSTANDING**
2 **BETWEEN**
3 **THE UNIVERSITY OF WASHINGTON (UNIVERSITY)**
4 **AND**
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6

7 **MOU – UW MEDICINE PRE-SCHEDULED VOLUNTARY DOUBLE-TIME SHIFT**
8 **INCENTIVE FOR CRITICAL STAFFING NEEDS**
9

10 ~~During negotiations for the 2023-2025 successor agreement, the parties reached~~
11 ~~agreement on the following regarding Pre-Scheduled Voluntary Double-Time at UWMC-~~
12 ~~Montlake and UWMC-Northwest.~~

13
14 ~~After the initial scheduled bid is incorporated and posted, and the employer has sent out~~
15 ~~notice for staff, including Nonpermanent and Intermittent nurses, the Employer may~~
16 ~~offer pre-scheduled voluntary double-time shifts for nurses. The determination of critical~~
17 ~~staffing needs and the double-time shift incentive is at the sole discretion of the~~
18 ~~Employer.~~

19
20 ~~The extra shifts shall be compensated at the rate of two times (2X) the regular rate of~~
21 ~~pay for all hours worked. Pre-scheduled double-time shifts will be considered Extra~~
22 ~~Shifts and will not be guaranteed, but once scheduled are expected to be worked unless~~
23 ~~it is determined that they are not needed. Nurses calling in sick on voluntary double-~~
24 ~~time shifts will not receive sick pay.~~

25
26 ~~Permanent FTE nurses will be eligible to volunteer for pre-scheduled double-time shifts~~
27 ~~when they are scheduled to meet their permanent FTE within the pay period. Their FTE~~
28 ~~is fulfilled by actual hours worked, approved and pre-scheduled vacation, mandatory or~~
29 ~~pre-scheduled continuing education, and accrued paid sick leave.~~

30
31 ~~Nonpermanent and Intermittent (Per Diem) nurses will not be eligible to volunteer for~~
32 ~~pre-scheduled double-time shifts until they have scheduled up to thirty six (36) hours in~~
33 ~~the week of the pre-scheduled double-time shift. Nonpermanent and Intermittent nurses~~
34 ~~must also work all scheduled hours in the week of the pre-scheduled double time shift in~~
35 ~~order to be compensated at double time for the shift(s). If they do not, they will be~~
36 ~~compensated at the appropriate rate of pay in accordance with the Nonpermanent and~~
37 ~~Intermittent Article.~~

38
39 ~~All nurses, once scheduled, are expected to honor the commitment, with the exception~~
40 ~~of illness or serious emergency. Notification of absence is required at least two (2)~~
41 ~~hours before the beginning of all shifts. Pre-scheduled double-time shifts cannot be~~
42 ~~stacked with standby or callback pay.~~

43
44 ~~Failure by the Employer to notify or attempt to notify staff of cancellation at least two (2)~~
45 ~~hours in advance of the shift will result in the employee being assigned to a unit for two~~
46 ~~(2) hours.~~

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~~This MOU will be effective October 1, 2022, and will expire on June 30, 2025.~~

!

Tentatively Agreed To:	
For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H. Lavitt</i>	<small>DocuSigned by:</small> <i>Jade Hersch</i>
_____ Robert Lavitt <small>375DD6A502D445A...</small>	_____ Jade Hersch <small>ED538CDB172F42B...</small>
Date: 9/2/2025	Date: 8/21/2025

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Tentatively Agreed To:	
For the Union:	For the Employer:
<small>Signed by:</small> <i>Robert H Lavitt</i>	<small>DocuSigned by:</small> <i>Jade Hersch</i>
_____ Robert Lavitt <small>375DD6A502D445A...</small>	_____ Jade Hersch <small>ED538CDB172F42B...</small>
Date: 8/19/2025	Date: 6/30/2025

**MEMORANDUM OF UNDERSTANDING
BETWEEN
THE UNIVERSITY OF WASHINGTON (UNIVERSITY)
AND
THE WASHINGTON STATE NURSES ASSOCIATION (UNION)**

MOU: FACILITATED MEDIATION RE: SYSTEM WIDE FLOAT POOL

During negotiations for the 2025-2027 collective bargaining agreement, the parties agreed to the following:

To address census fluctuations while supporting a healthy work environment for our staff, increase recruitment and retention through growth opportunities, and ensure quality patient care, the parties agree to request facilitated mediation from PERC within 90 days of ratification to develop a tiered system wide float pool for clinical staff. The goal would be to create an equitable and effective method of responding to changes in staffing needs across HMC and UWMC (ML and NW). The parties commit to meeting at least monthly with the facilitator/mediator, for up to 12 months, to fully discuss and work together to develop a process. Up to 5 employees at each campus would be provided paid time to attend each session.

Goals of the floating tool:

- Provide UW Medicine staff with development opportunities to increase recruitment and retention. Enable staff to see growth opportunities within UW Medicine instead of seeking those elsewhere.
- Build a tiered system wide float pool that compensates staff depending on availability, competency, assigned location, clinical groupings, and level of support needed.
- Ability to address high/low census and unexpected leaves and resignations across UW Medicine and ensure adequate staffing to comply with the Staffing Law.
- Ability to have coverage in areas where we traditionally have relied on call or overtime for high/low census periods.
- Increase staff satisfaction and patient care across UW Medicine.

Tentatively Agreed To:	
For the Union:	For the Employer:
_____	_____
Robert Lavitt	Jade Hersch
Date:	Date:

1 **MEMORANDUM OF UNDERSTANDING**
2 **BETWEEN**
3 **THE UNIVERSITY OF WASHINGTON (UNIVERSITY)**
4 **AND**
5 **THE WASHINGTON STATE NURSES ASSOCIATION (UNION)**

6
7 **MOU: HOUSE BILL 1879**
8

9 During negotiations for the 2025-2027 successor agreement, the parties reached
10 agreement on the following regarding House Bill 1879:
11

12 A. In order to comply with RCW 49.12.480, the parties agree that effective January
13 1, 2026, the Employer will modify meal and rest break processes to ensure
14 compliance with House Bill 1879 and will make any required changes to
15 language in Article 7.9.4 the following language will take effect and supersede
16 Article 7.9.4 Voluntary Waivers contained in the body of the Parties' collective
17 bargaining agreement:-

18
19 7.9.4 Voluntary Waivers. Pursuant to RCW 49.12.187, the Employer and
20 the Union agree that staff may complete a voluntary waiver requesting the
21 right to:

- 22
23 a. Waive their second meal break during a 10 or 12-hour shift;
24 b. Waive the timing of meals and rest breaks;
25 c. Combine meal and rest breaks.

26 The employee may also voluntarily waive their meal period for shifts less
27 than 8 hours.

28
29 Voluntary waivers can be revoked by an employee at any time prior to
30 their scheduled meal or break time. Staff who wish to revoke their waiver
31 are required to email their manager and immediately notify the Charge
32 Nurse on duty. Management retains the right to determine whether
33 voluntary waiver requests can be approved.

34
35
36 A.B. The Employer agrees to provide WSNA with notice and an opportunity to
37 bargain over the will provide WSNA with a copy of the waiver form in order to
38 satisfy RCW 49.12.480's requirement that the waiver be submitted on a form
39 agreed to by the Parties to ensure the parties' agreement prior to January 1,
40 2026.

41
42 This MOU will expire upon implementation.

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Tentatively Agreed To:

For the Union:	Signed by:	For the Employer:	DocuSigned by:
	<i>Robert H. Lavitt</i>		<i>Jade Hersch</i>
Robert Lavitt	375DD6A502D445A...	Jade Hersch	ED538CDB172F42B...
Date: 9/2/2025		Date: 8/21/2025	

MOU: Top Step

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During negotiations for the 2025-2027 successor agreement, the parties reached agreement on the following regarding Step AE:

Within 90 days of ratification and effective on the first pay period after ratification as determined by the Employer, the Employer will add Step AE for the RN 3 scale on pay table BZ. The new top step AE will be eight percent (8%) higher than top step AE of the RN2 pay scale.

Employees in the RN 3 classification who have been on Step AD for at least a year by the effective date will be placed on Step AE. Their PSDs will reset according to Article 8.1.

Tentatively Agreed To:

For the Union:

Signed by:

Robert H. Lavitt

Robert Lavitt 375DD6A502D445A...

Date: 9/2/2025

For the Employer:

DocuSigned by:

Jade Hersch

Jade Hersch ED538CDB172F42B...

Date: 8/21/2025

MOU: Non-Monetary Steps

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During negotiations for the 2025-2027 successor agreement, the parties reached agreement on the following regarding Non-Monetary Steps:

Within 90 days of ratification and effective on the first pay period after ratification as determined by the Employer, the Employer will eliminate all non-monetary steps for all pay ranges on pay table BZ. Where there is a non-monetary step, the Employer will increase the value of the non-monetary step by half the difference between the step below and the step above the non-monetary. The RN 3 scale shall be amended to reflect eight percent (8%) above the RN 2 scale at each of the previously non-monetary steps of the wage scale.

Tentatively Agreed To:	
<p>For the Union:</p> <p>Signed by:</p> <p><i>Robert H. Lavitt</i></p> <p>Robert Lavitt — 375DD6A502D445A...</p> <p>Date: 9/2/2025</p>	<p>For the Employer:</p> <p>DocuSigned by:</p> <p><i>Jade Hersch</i></p> <p>Jade Hersch — ED538CDB172F42B...</p> <p>Date: 8/21/2025</p>

**MEMORANDUM OF UNDERSTANDING
BETWEEN
THE UNIVERSITY OF WASHINGTON (UNIVERSITY)
AND
WASHINGTON STATE NURSES ASSOCIATION (WSNA)**

MOU – ~~RECRUITMENT AND RETENTION~~ ADDITIONAL WAGE INCREASES

1
2 During negotiations for the 2025-2027 successor agreement, the parties reached
3 agreement on the following regarding ~~Recruitment and Retention~~ Additional Wage
4 Increases:

- 5
- 6 1. Within 90 days of ratification and effective on the first pay period after ratification
7 as determined by the Employer, all step values of table BZ range 02 will be
8 increased by one percent (1%). This increase will be based upon the salary
9 schedule in effect at the time of the increase.
- 10
- 11 2. Effective July 1, 2026, all step values of table BZ range 02 will be increased by
12 one percent (1%). This increase will be based upon the salary schedule in effect
13 on June 30, 2026.
- 14
- 15 3. The RN 3 scale shall be amended to reflect eight percent (8%) above the RN 2
16 scale at each step of the wage scale throughout the life of this Agreement.
- 17
- 18 4. Charge Nurse will remain three dollars (\$3.00) above each step on the RN2
19 scale and Float Nurse will remain five dollars (\$5.00) above each step on the
20 RN2 scale.
- 21 5. Progression start dates are not impacted by these increases.
- 22

23 Tentatively Agreed To:

<p>24 For the Union:</p> <p>25 Signed by:</p> <p>26 <i>Robert H. Lavitt</i></p> <p>27 _____</p> <p>28 Robert Lavitt – 375DD6A502D445A...</p> <p>29 Date: 9/2/2025</p>	<p>For the Employer:</p> <p>DocuSigned by:</p> <p><i>Jade Hersch</i></p> <p>_____</p> <p>Jade Hersch – ED538CDB172F42B...</p> <p>Date: 8/21/2025</p>
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SIDE LETTER A – U-PASS

UWMC-NW bargaining unit nurses with an active permanent appointment with greater than a .5 FTE will not be charged a fee for a U-PASS.

This Side Letter expires on June 30, 2027~~3~~.

Tentatively Agreed To:

For the Union:

Signed by:

Robert H Lavitt

Robert Lavitt

375DD6A502D445A...

Date: 8/19/2025

For the Employer:

DocuSigned by:

Jade Hersch

Jade Hersch

ED538CDB172F42B...

Date: 6/30/2025