HEABC and Nurses' Bargaining Association

Nursing Job Classification Manual

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INTRODUCTION

This manual was developed jointly by the Nurses' Bargaining Association (NBA) and the Health Employers Association of BC (HEABC) to assist employers and bargaining unit members in applying the Provincial Collective Agreement (PCA) job classification system.

This manual contains the classification tools, user instructions and guidelines regarding various topics that affect the classification of nursing jobs under the PCA.

Nothing in these documents varies or alters the Provincial Collective Agreement, nor does it change the language, application or intent of the PCA, or the established job profiles.

This document exists without prejudice to any position either party may take with regard to the classification of any job in the bargaining unit.

This manual may be amended from time to time by mutual agreement between the parties.

Classifications Systems – General Background

A classification system is an assessment tool for determining where jobs fit in a pay hierarchy. It rationalizes how much jobs are paid either relative to each other, or relative to a defined standard.

Several kinds of classification systems exist. Ranking systems rank jobs by simply comparing them to each other. Qualitative (descriptive) systems rank jobs against a descriptive standard. Quantitative (numeric) systems rank jobs relative to each other by determining point values for jobs (job scores) and grouping them by point ranges.

The PCA classification system is a hybrid system. Currently the system uses qualitative criteria (the job profiles); quantitative criteria (the job questionnaire scores); and the ranking criteria (industry standard) for establishing where jobs fit in the pay hierarchy.

It is important to keep in mind that in any job classification system, it is the job that is evaluated, not the person's individual performance in the job.

Definition of a Nursing Job

Jobs that are required by statute to be performed by a nurse are by definition nursing jobs. However, there are some jobs where it is not so obvious, such as jobs that ask for a variety of different qualifications.

A job falls under the Nurses Provincial Collective Agreement (PCA) is the job requires credentialization as a Registered Nurse (RN) or a Registered Psychiatric Nurse (RPN). The British Columbia Labour Relations Board has issued a decision in the regard (BCLRB #B505/98). The conclusion reached by the LRB (at page five) is that:

> …if an employer asks for an RN and hires an individual because he or she is credentialized as an RN, that means that there is a requirement on behalf of the employer for an incumbent filling that job to be an RN, thus, the individual falls within the definition of Nurse under the Act.

Basic Principles of Classifying Jobs

The following principles apply whenever classifying jobs:

Job classifications are not watertight compartments.
Jobs functions overlap from one classification to the next.
It must be demonstrated which of the two classification is the better one for a job, either by reference to the “central core” or “distinctive character” of the job, or by reference to which job classification provides the “better fit.”

There are three (3) classification tools used to classify jobs under the Nurses’ Provincial Collective Agreement classification system. They are:

Job profiles
The Nurse Job Questionnaire
Industry Standards

It is important to remember that:

A classification system is an assessment tool. By definition, it must be general enough to encompass all areas and levels of nursing, but specific enough to differentiate between them.
Classification systems examine the level of work required by the job.
The job is evaluated, not the person in the job.
Classification systems do not measure how well a person is doing a job – it is not a performance measurement tool.

JOB CLASSIFICATION TOOLS

The PCA Classification System

The PCA classification system is a hybrid system. Currently the system uses qualitative criteria (the job profiles); quantitative criteria (the job questionnaire scores); and the ranking criteria (industry standards) for establishing where jobs fit in the pay hierarchy. Each of these elements should be considered when classifying a job and must be considered by arbitrators in classification matters before them.

How was the classification system constructed?

Some years ago, research was conducted across the province to canvass nurses about the various ingredients of their work. Focus groups were held throughout the province with a representative sample of nurse. All of the classification pay levels across the range of nursing areas were represented at these meetings.

The feedback resulted in the creation of job profiles for the DC (Direct Care), ED (Education), and PS (Program Services) classification. The information provided from these sessions also provided the framework for the questions on the HEABC/Nurse Job Questionnaire.

To Construct the Questionnaire…

To construct the Job Questionnaire, applicable information provided by the nurses through the focus groups was clustered under one of four factors of either skill, effort, responsibility, or working conditions. Each of these four factors was then further divided into applicable sub-factors, and a series of questions were then developed within each sub-factor. These factors and sub-factors formed the Job Questionnaire. This is the quantitative part of the system.

These four areas – skill, effort, responsibility and working conditions were deliberately chosen to form the questionnaire framework. Historically, job evaluation plans skewed results in favour of occupations which were male dominated by making important aspects of women's work invisible and therefore impossible to value. Research in a number of constituencies in North America showed that factors which could be inclusive of elements of women's work needed to be created. The areas of skill, effort, responsibility and working conditions were developed and have become almost universally used in equity studies. Legislation in other provinces cited those factors to be used in equity studies. The parties used them as the basis for the questionnaire because they are proven to be most inclusive.

Large job evaluation plans are assessment tools designed to encompass thousands of positions and therefore cannot included everyone's specific job duties in one plan. They do, however, measure the level of the work which is central to job groups included in those plans.

When constructing an assessment tool, a way to include all duties and responsibilities of all jobs that need to be evaluated is to find and define the common ingredients to those duties and responsibilities. For example, one job may require a nurse to give injections. Another job may require a nurse to keyboard. A common denominator in that instance for both jobs would be fine motor skill. The questionnaire is constructed on this premise.

The questionnaire asks how much of an ingredient is present in a job by way of a group of questions within each sub-factor in one of the areas of either skill, effort, responsibility, or working conditions. Each ingredient (or question) is assigned a numeric value depending on whether an A, B, C, or D is chosen. The answers to each set of the questions together in all four factors, produce a total point score for a job. Just as there are a wide variety of nursing contexts, the questionnaire can accommodated thousands of combinations of responses, depending on the nursing context.

To Determine the Number of Pay Levels…

To determine the pay levels, the parties tabulated total point scores for all jobs and plotted each job on a scattergram correlating job points to pay. Four clusters of jobs were identified and therefore four pay levels were established.

To Construct the Job Profiles…

To construct the Job Profiles, the parties administered the questionnaire to a statistically representative sample of the bargaining unit. The parties then compiled responses for each question for every job, by percentage. For example, the data revealed that 99% of staff nurses responded to Question 4 as the most important responsibility under Responsibility for Patient/Client/Resident Care. Question 4 dealt with the delivery of direct client/patient/resident care.

The parties could therefore conclude that the main purpose of jobs at Level 1 is to provide direct nursing care to clients/patients/residents. That statement was therefore included in the job profile for Level 1.

Each profile statement was derived from the data that way. Using this method, the parties were able to identify the resulting streams of job groups and describe the common denominators of work at each of the levels within those 3 job groups (i.e. Direct Care (DC), Educational (ED), and Programs and Services (PS). This is the qualitative part of the system.

Again, within each stream or job group there are up to four levels of pay associated with the pertinent streams (i.e. DC1, DC2, DC3, DC4, etc.). The data, however, did not identify any jobs that would constitute a match to either the ED Level 1 (ED1) classification or the PS Level 4 (PS4) classification. Therefore, there were no profile statements developed for these levels.

A similar canvassing process to that described above was repeated several years later. That subsequent process accommodated a variety of community nurse jobs which were transferred to the health sector from the municipal and provincial governments in the mid-1990s. The information from those meetings resulted in both the creation of the additional job profiles for the CH (Community Health) classifications and in applicable wording changes to the Job Questionnaire.

Understanding the Job Profiles

As discussed, the job profiles are derived from the evidence-based research on nursing jobs across the provinces described in the previous section of this manual. They described the range and variety of jobs at various levels of nursing work within the health care industry.

In applying the job profiles, the principles of job classification described in the Introduction always apply. This means that there is sometimes a natural overlap between the classification levels, and that classifying jobs is a “better” fit exercise.

The profiles are divided into four job groups. These are:

Community Health Activities (CH)
Direct Care Activities (DC)
Educational Activities (ED)
Program and Services Activities (PS)

There are 14 classifications and 17 profiles. Some of the classifications have two profiles as there are two separate and distinct types of work that appear in these levels. The classifications are:

Community Care	**Direct Care**	**Education**	**Program Services**
CH1	DC1		PS1
CH2A or CH2B	DC2A or DC2B	ED2	PS2
CH3	DC3	ED3	PS3
CH4A or CH4B	DC4	ED4	

There are no profiles for ED1 or PS4 as there were no jobs in the industry that were found to be performing at those levels within those streams.

The first paragraph of each of the profiles contains a purpose statement/summary of what jobs at that level perform. In order for a job to be classified to a particular profile, the job must meet the definition of the first paragraph.

The second paragraph of the profiles fives further clarification of the types of functions performed by jobs at the level. The last paragraph describes the type of working conditions that jobs at that level frequently deal with.

It is important to remember that the profiles are not job descriptions. They illustrate the main differences in job characteristics between different classification levels. The following Profile Comparison Charts provide a without prejudice illustration of where the main job characteristics or central core of jobs at each level fall.

PROFILE COMPARISON CHARTS

LEVEL 1 AND LEVEL 2

Jobs at Level 1 are mainly accountable to the employer for their own practice.

Jobs at Level 2 are mainly accountable to the employer for the practice of others by either first-line supervision of others by organizing their work and ensuring the work is done properly; or functional supervision of the practice of others by formally intervening in their practice with a role in formal assessment of the skills of other nurses or acting as educators; or assisting in the development and monitoring of a program or services with accountability for the development and effectiveness of policies, procedures and standards for an organization-wide support program.

So, although jobs at Level 1 may teach patients/clients, demonstrate techniques or otherwise impart knowledge to others, and may have some input into how work is done by contributing to procedure, protocols, policies and resources utilization when asked, they are not accountable to the employer for the practice of others nor are they accountable for how those others function in the work place.

LEVEL 1	LEVEL 2A	LEVEL 2B
Planning, implementing, evaluating care and/or facilitating services for won patients/clients; or Participating in the delivery of a program or delivering a service in support of those jobs which provide patient/resident/client care; Liaising with a range of health care and social service professionals and organizations.	First-line supervision of those who deliver care/programs/services, and accountable for the work of others.	Formally intervening in care provided by nurses/care givers and accountable for ensuring competence of the practice of others, or deliver nursing education to staff.
Teaching patients/clients/residents but not accountable for practice of others.	Identifying and recommending training/skill enhancement for subordinate staff.	Formal teaching/educating of others through lecture and demonstration and accountable for ensuring competence of others.

LEVEL 1	LEVEL 2A	LEVEL 2B
Demonstrating techniques and/or providing guidance to other care givers but not accountable for their practice; collegially shares information.		
Reassigning tasks of others where necessary, but not responsible for follow-up of work of others.	Making/adjusting patient/client assignments, coordinating care, accountable for follow-up and patient outcomes.	
Collecting and providing information for policies/procedures, if required, participating in developing policies/procedures/standards but not accountable for their effectiveness.	Participating in developing policies/procedures/standards and shares accountability for their effectiveness; of In the Programs and Services stream, if no supervisory responsibility, assists in the development and monitoring of a program or services with accountability for the development and effectiveness of policies, procedures and standards for an organization-wide support program.	Participating in developing policies/procedures/standards and shares accountability for their effectiveness or compiling course content and modifying educational programs with shared accountability for achieving program objectives.
Provides information regarding required resources, when asked.	Accountable for scheduling/coordinating staff, equipment, other resources and giving input to budget	
Providing guidance to others on tasks and giving incidental/ad hoc information on performance if asked	Active/ongoing monitoring of care/follow-up of work of others and accountable for outcomes of care given by others; providing critical input into the evaluation of care given by subordinates.	Formal skills assessment of nurses/other care givers and accountable for quality of practice of others.

LEVEL 2 AND LEVEL 3

Jobs at Level 2 are mainly accountable to the employer for the practice of others by either first-line supervision of others by organizing their work and ensuring the work is done properly; or functional supervision of the practice of others by formally intervening in their practice with a role in formal assessment of the skill of other nurses or acting as educators; or assisting in the development and monitoring of a program or service with accountability for the development and effectiveness of policies, procedures and standards for an organization-wide support program.

Jobs at Level 3 are mainly accountable to the employer for the overall effectiveness of program(s)/care in their designated area including overall responsibility for supervision, responsibility for selecting staff, responsibility for administering the sue of resources, responsibility for interpreting/monitoring/charging policies, procedures and standards; responsible for conducting performance evaluations, and line responsibility for making training/staff development decisions for staff.

So, although jobs at Level 2 may give critical input into performance evaluations, budget, policies/procedures/protocols/standards, may contribute to the administration of a program or area, and may make recommendations for training or deliver training/skill enhancement programs, they are not accountable to the employer for the overall effectiveness of the care or services.

LEVEL 2A	LEVEL 2B	LEVEL3
First-line supervision of those who deliver care/programs/services, and accountable for work of others.	Formally intervening in care provided by nurses/care givers and accountable for ensuring competence of the practice of others, or deliver nursing education to staff.	Administering/overseeing the provision of care/program/service and accountable for the overall effectiveness of care/program/service with overall supervisory responsibility.
Identifying and recommending training/skill enhancement for subordinate staff.	Formal teaching/educating of others through lecture and demonstration and accountable for ensuring competence of others.	Making training/staff development decisions for meeting overall educational needs of subordinate staff; or overall responsibility for successful implementation and delivery of educational programs and conducting final evaluation of staff or nursing students.
Making/adjusting patient/client/assignments, coordinating care, accountable for follow-up and patient outcomes.		Making the selection decisions of staff and delegating work.

Participating in developing policies/procedures/standards and shares accountability for their effectiveness; or In the program and Services stream, if no supervisory responsibility assists in the development and monitoring of a program or services with accountability for the development and effectiveness of policies, procedures and standards for an organization-wide support program.	Participating in developing policies/procedures/standards and shards accountability for their effectiveness, or compiling course content and modifying educational programs with shared accountability for achieving program objectives.	Overseeing the development of policies/procedures and standards and accountable for their effectiveness.
Accountable for scheduling/coordinating staff, equipment, other resources and giving input to budget.		Accountable for administering the budget and accountable for financial resources for care/program/service.
Active/ongoing monitoring of care/follow-up of work of others and accountable for outcomes of care given by others; providing critical input into the evaluation of care given by subordinates.	Formal skills assessment of nurses/other care givers and accountable for quality of practice of others.	Conducting performance appraisals and accountable for overall effectiveness of unit(s)/program/service.

LEVEL 3 AND LEVEL 4

Jobs at Level 3 are mainly accountable to the employer for the overall effectiveness of program(s)/care in their designated area including overall responsibility for supervision, responsibility for selecting staff, responsibility for administering the use of resources, responsibility for interpreting/monitoring/changing policies, procedures and standards; responsible for conducting performance evaluations, and line responsibility for making training/staff development decisions for staff.

Jobs at Level 4 are accountable to the employer for the administration of a range of programs for a region including supervision of unit/district program supervisors/coordinators (community only) or acting as the authority in a specialized area of nursing practice and conducting specialized research to develop nursing practice for the industry.

LEVEL 3	LEVEL 4A (Community Only)	LEVEL 4 or 4B
Administering/overseeing the provision of care/program/service and accountable for overall effectiveness of care/program/service with overall supervisory responsibility.	Administrating/overseeing a full range of community health services for a region and overall accountability for nursing services and nursing practice within a region.	Functioning as the most advanced practitioner and nursing authority, developing or modifying nursing practice which impacts nursing standards.
Making training/staff development decisions for meeting overall educational needs of subordinate staff; or overall responsibility for successful implementation and delivery of educational programs and conducting final evaluation of staff or nursing students.		Acting as highest level educator, researcher and specialized resource using comprehensive knowledge in one or more specialties.
Making the selection decision of staff and delegating work.	Delegating responsibility to unit/district/program supervisors and coordinators.	
Overseeing the development of policies/procedures and standards and accountable for their effectiveness.	Overseeing and responsible for the development of policies/procedures/standards for all programs, formulating short and long term planning for total community heal care within region.	Accountable for developing/modifying nursing practice that impacts industry standards.

Accountable for administering the budget and accountable for financial resources for care/program/service.	Considerable influence allocation and utilization of regional community health care resources.	In the Educational Activities stream, formulating and ensuring the effective delivery of an educational program or range of courses associated with a post-secondary institution with accountability for evaluation of program standards and successful program outcomes.
Conducting performance appraisals and accountable for overall effectiveness of unit(s)/program/service.	Evaluating overall effectiveness of programs/services making required changes.	Accountability for development of new nursing practice for industry.

Understanding the Job Questionnaire

The job questionnaire is a tool used to examine nursing jobs in more detail. The questionnaire is used in conjunction with the job profiles and industry practice to determine an appropriate classification for a position. The questionnaire is also completed as part of the Job Classification Review Procedure under Article 22.02(B) of the collective agreement. In those instances, it is completed by the nurse(s) in the job and the non-bargaining unit supervisor.

The questionnaire is used to gather information on four aspects of work – Responsibility, Skills, Work Conditions, and Effort. Each of those areas is identified as a separate section in the questionnaire. These four areas have been utilized in equity studies across North America and are considered to be the most reliable factors for analyzing work in general and women's work in particular. Each of these factors are further subdivided into more detailed sections. The questions in each of these sections are crafted so that respondents can apply the questions to their area of nursing. For example, one job may require a nurse to give injections. Another job may require a nurse to keyboard. The questions which cover these skills are in the fine motor requirements section.

The questionnaire is set up so that the questions are on the right page. On the left page opposite each set of questions there are often guidelines that further clarify the questions. The guidelines are used to assist the user to determine the appropriate answer to each of the questions.

Responsibility

In the Responsibility portion of the questionnaire, there are four different sections. These are:

Responsibility for Client/Patient/Resident Care
Responsibility for Supervision of Others
Responsibility for Budgets and Standards
Responsibility for Standards/Programs/Projects

These sections include questions 4-26. When completing the questionnaire, for questions 4-50 only, one of the questions in each section (<u>and only one</u>) must be indicated as the "D" response (as the most important responsibility of the job in that regard). If not "D" response is indicated or more than one "D' response in indicated in a particular section, the scoring mechanism for the questionnaire will not work.

There can be only one response circled for each question.

Skills

In the Skills portion of the questionnaire, there are also four different sections. These are:

Human Relations Skills
Communication Skills
Problem Solving – Fact Finding and Analysis
Decision Making

These sections include questions 27-50. Again, when completing the questionnaire, for questions 4-50 only, one of the question in each section (and only one) must be indicated as the “D” response (as the most important responsibility of the job in that regard). If not “D” response is indicated or more than one “D’ response in indicated in a particular section, the scoring mechanism for the questionnaire will not work.

There can be only one response circled for each question.

Working Conditions

In the Working Conditions portion, there are two sections. These are:

Physical Environment/Hazards
Organizational Working Conditions

These sections include questions 51-74. While only one response can be provided for each questions, there is no limit on the number of “D” or other responses that can be provided.

Effort

In the Effort portion, there are five sections. These are:

Physical Effort – Gross Motor Requirements
Physical Effort – Fine Motor Requirements
Sensory Demands – Visual Effort
Sensory Demands – Auditory Effort
Sensory Demands – Tactile Effort

These sections include questions 75-100. While only one response can be provided for each questions, there is no limit on the number of “D” or other responses that can be provided.

Understanding the Industry Standard

The industry standard is currently used as a criterion in the Job Classification Review Procedure to obtain and maintain consistent classification results in the province. Basically, if a job is performing the same work and has the same level of responsibility and accountability as like jobs in the industry, it should be classified at the same level as like jobs in the industry.

The use of the industry standard is not meant to be a title match that replaces the classification process. Industry standard is one of three factors, along with the job profiles and the questionnaire, which is utilized by the Parties to determine the appropriate classification of the job based on the work performed.

If the parties are not successful in resolving a disputed classification, the industry standard will be one of three factors (the job profiles and questionnaire are the others0 that will be looked at by an arbitrator to determine the appropriate classification.

CLASSIFYING A NURSING JOB

1. Consider the Work Performed in a Job and Examine the Job Description

The job description should be examined carefully to ensure it is an accurate description of the duties and responsibilities performed in the job. If while reading the job description, it becomes apparent that it does not accurately reflect the work being performed, the description should be amended (or the appropriate non-bargaining unit personnel should be contacted to let them know that the job description should be amended).

If no job description exists for the job in question then the Employer must develop one. See Article 23 of the PCA, and page 22 of this manual, for details about what must be included in the job description and the steps that must be taken prior to implementing a new job description.

2. Read the Job Profiles to Determine Job Group

The job will slot into one of the four groups: Community Health Activities (CH), Direct Care Activities (DC), Educational Activities (ED) or Program and Services Activities (PS). When the job group is determined, read the profiles in that group to get an understanding of the various levels of work in the Job Group.

Generally speaking, the profiles apply as follows:

Level 1 **(Includes CH1, DC1, PS1)**	The main purpose of jobs is to deliver direct care, or to facilitate community health services in collaboration with others, or to participate in the delivery of a program or service supporting the provision of care;
Level 2 **(Includes CH2A, CH2B, DC2A, DC2B, ED2, PS2)**	The main purpose of the jobs in the 2A category is responsibility for the coordination and supervision of others (or assisting in the development and monitoring of a program or service with accountability for development and effectiveness of policies/procedures), or in the 2B category, responsibility for intervening in the practice of other staff based on specialized theory and practice (including formal assessments), or responsibility for formally delivering nursing training/education to staff including compiling course content;
Level 3 **(Includes CH3, DC3, ED3, PS3)**	The main purpose of the jobs is administrating, overseeing and coordinating the delivery of health services for a unit or district, including responsibility for administering resources, responsibility for interpreting, monitoring, changing policies/procedures/standards related to patient care activities and overall responsibility for supervision of staff including selecting staff, evaluating staff, line responsibility for making training/staff development decisions for subordinate staff);
Level 4 **(Includes CH2A, CH4B, DC4, ED4)**	The main purpose of the jobs is functioning as the most advanced practitioner to act as an authority on nursing practice, developing and modifying nursing practice which impacts industry standards, or in the CH4 category, administrating, overseeing, coordinating a full range of community health programs/services for a region, with overall accountability for nursing services/practice within a region.

Please note that jobs such as General Duty Nurses are typically classified at Level 1.

3. Select Job Profile that is the Best Fit for the Job

Read the profiles carefully to try to understand the key distinctions between the profiles that could potentially describe the job.

Compare the level of work being performed by the job and pick the profile that best describes the level of work being performed.

In order to match to b profile, the job must meet the central core of the profile. The central core of the profile is described in the first paragraph of the profile (note: some profiles, such as PS2, have two core functions).

The second paragraph of the profile describes functions that jobs at that level perform. These functions help to clarify the level of work that is being performed at that level.

Performing one of these listed functions is not sufficient to warrant reclassification to that level but it would be an indication that the first paragraph of the profile(s) should be examined closely to determine if the profile in question is the best fit for the job. If a function is not listed on the profile that does not mean that the job cannot be matched to that profile but it is an indication that the first paragraph of the profile(s) should be examined closely to determine if the profile in question is the best fit for the job.

Arbitrator Swan in the *Municipality of Toronto*, 1984, L.A.C. (d) 248, states:

> This approach recognized that…job classifications cannot be considered as watertight compartments into which jobs may be fitted. Rather, the approach recognizes that there will be some overlap from one classification to the next and that it is not sufficient for an employee seeking a higher classification merely to identify aspects of the higher classification which he or she performs, in addition, the employee must demonstrate that the higher classification is the right classification and that the classification assigned is wrong. But that does not require, with respect, a two-stage demonstration, nor would it be possible in most job classification cases for such a demonstration to be made.
>
> Once it is recognized that some duties and functions will overlap from classification to classification, it becomes a matter of demonstrating rightness and wrongness by showing on the balance of probabilities, which of the two classifications under discussion is the better one for the disputed job. This may be determined by reference to the ‘central core’ or ‘distinctive character’ of the job, or by reference to which of the two job classifications provide the ‘better fit’, however, one describes the process, it may be achieve in only one stage, simply by demonstrating that the job should not have been placed in the classification to which it has been assigned but in the higher classification, which is sought. Particularly in borderline cases, the best that could be expected of any grievor would be to demonstrate that the higher classification is the ‘better’. It follows from such a demonstration that the lower classification is ‘wrong’, and it is not necessary for a grievor to prove that negative proposition in any other way except by demonstration that the higher classification is ‘right’.

4. Match the Chosen Job Profile to the Wage Schedule

Wage Schedule

The classifications can be easily translated into the wage schedule. The number at the end of the classification determines the level of the job on the wage schedule. For instance, the wage rate of a CH1 job is Level 1.

Article 62 of the PCA contains a table that shows the relationship between the classifications and the wage schedule.

	CH	**DC**	**ED**	**PS**
Level 1	CH1	DC1		PS1
Level 2	CH2	DC2	ED2	PS2
Level 3	CH3	DC3	ED3	PS3
Level 4	CH4	DC4	ED4	

For the purposes of the wage schedule, there is no meaning attached to an “A” or “b” designation in the classification. Therefore, both CH2A and CH2B are CH2 classifications and are at Level 2 on the wage schedule.

The wage schedule lists the wages for each of the four levels in hourly and monthly rates. The rates listed are based upon a 36-hour work week. The monthly rates can be translated into annual rates by multiplying the hourly rate by 1879.2 hours.

For the most up to date wage schedule, please look at Article 62 – Wage Schedules in the PCA.

Note: The PCA contains separately negotiated wage schedules at a rate between Level 1 and Level 2 for Long Term Care Case Managers and Pine Free Clinic Nurses.

THE COLLECTIVE AGREEMENT

Creation of New Position – Article 21

Article 21 deals with the creation of new positions. For the purpose of Article 21, a new position is one that does not currently exist. This does not refer to the addition of extra Full Time Equivalents (FTEs) to an existing position. For example, if a Clinical Resource Nurse position is created and it had never previously existed in the organization, then Article 21 would apply. If an additional FTE is added to the General Duty Nurse job that is currently in place, the Article 21 would not apply.

When the Employer establishes a new position, it classifies that job on the classification system and sends notification to the Union of the assigned classification. The Union has 45 days to consider the classification assignment and to object in writing. If the Union does object, written reasons must be provided.

If the Union does not object in writing within the 45 days, then the classification and wage level are considered established. If the Union objects in writing, then the Job Classification Review Procedure is initiated (see the Job Classification Review Procedure section on pages 21 and 22 of this manual and Article 22.02(B) of the PCA).

Change in Classification – Article 22

If an Employer makes a significant change to the job content of an existing position then it should examine the job in relation to the classification level to determine if the change is sufficient to warrant reclassification. If the change is sufficient to warrant reclassification the Employer should reclassify the job and provide written notice to the Union as to the revised classification.

The Union has 45 days to consider the classification assignment and to object in writing. If the Union does object, written reasons must be provided.

If the Union does not object in writing within the 45 days, then the classification and wage level are considered to be established. If the Union objects in writing, then the Job Classification Review Procedure is initiated (see the Job Classification Review Procedure section below).

Articles 22.03 and 22.02 (B)

If an employee considers there has been a significant change to their job, the employee can initiate a discussion with their immediate supervisor about reclassification under Article 22.03pf the PCA. In that case, Article 22.0-3 directs the employee to use Step 1 of the Grievance Procedure (discussion).

Step 1 of the Grievance Procedure (as per Article 9.02 of the PCA) reads as follows:

> Within fourteen (14) calendar days of the occurrence of the difference, or within fourteen (14) calendar days of when the employee first became aware of the matter giving rise to the difference, the employee with or without the stewards (at the employee's choice) shall discuss the difference in a meeting with the immediate supervisor…

If this discussion phase does not result in a resolution, the process converts over to the Job Classification Review Procedure process of Article 22.02(b) of the PCA described below.

Job Classification Review Procedure (JCRP) – Articles 21.02(B) and 22.02(B)

The Job Classification Review Procedure (JCRP) is to be utilized if the Employer and the Union do not agree on the classification level of the job. The process can be triggered in one of two circumstances – when the Union objects to a new or changed job classification assignment under Article 21 or Article 22 of the PCA, or when the employee considers there has been a significant change to their job and the issue is not resolved at Step 1 pursuant to Article 22.03 of the PCA.

The steps of the JCRP are as follows:

1) Employer provides a copy of the job questionnaire, answer sheets and a copy of the jobs profiles to the incumbent and the non-bargaining unit supervisor. This must be done within three months of the notification of the objection or Step 1 meeting.

Within a further fourteen days, the employee and supervisor each:

- complete their respective questionnaires
- indicate which profile best matches the job.

The answer sheet and profile match are forwarded by the employee to the respective Union representative or by the excluded manager to the respective Employer representative.

2) Representatives of the Union and HEABC attempt to resolve the matter through negotiations. The parties must consider the following:
   - Profile which best describes the core function of the job
   - Results of the completed job questionnaires
   - How the job fits into the industry standard for like jobs

3) If the parties cannot resolve the issue, the matter may be referred to arbitration to:
   - John Kinzie or Joan Gordon
   - Other mutually agreed arbitrator

   The arbitrators use the same three criteria as described in point 2 above:
   - Profile which best describes the core function of the job
   - Results of the completed job questionnaires
   - How the job fits into the industry standard for like jobs

4) Classification arbitrations follow these processes:
   - Each party is limited to four hours to present case
   - Staff representatives of HEABC and the Union present the cases
   - The decision is limited to determining the appropriate classification/wage level of the job
   - The decision is to be rendered within thirty days of the hearing

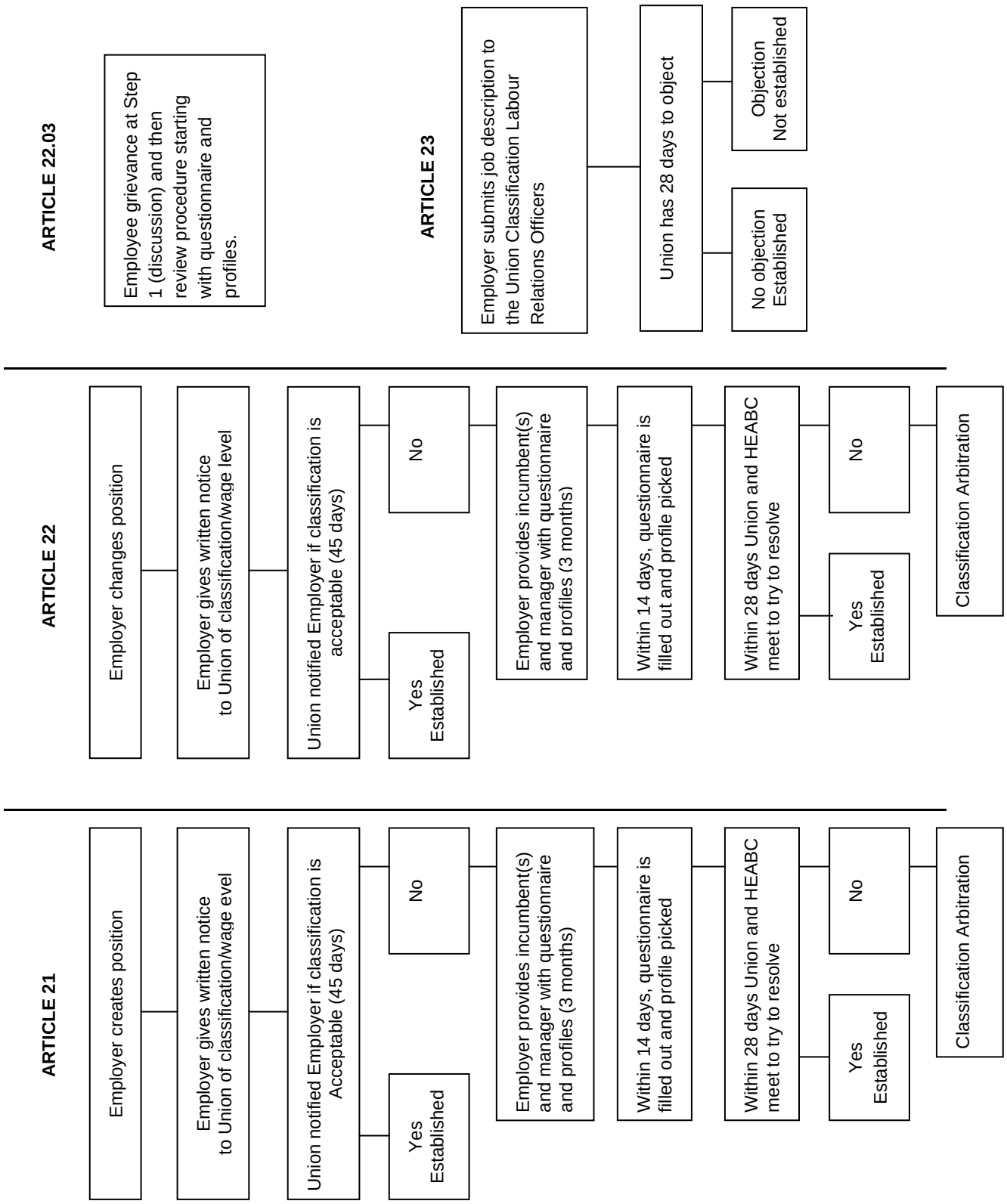
Job Descriptions – Article 23

Article 23 requires that all Nursing jobs under the PCA have a job description. It also states that Employees shall have access to the current job descriptions.

There are also certain features that must be contained in each job description. Article 23 sets out that the job descriptions should contain the following:

Job title
Name of the department
Title of the immediate supervisor
Classification and wage level of the job
A summary statement of the job
A list of the duties and the date prepared

Article 23 also requires that the job descriptions be presented in writing to the Union. The union has 28 days to accept of object to the job description. If the Union does not object in writing to the job description within 28 days then the job description is considered established.


ARTICLE 21
Employer creates position
Employer gives written notice to Union of classification/wage evel
Union notified Employer if classification is Acceptable (45 days)
Yes Established
No
Employer provides incumbent(s) and manager with questionnaire and profiles (3 months)
Within 14 days, questionnaire is filled out and profile picked
Within 28 days Union and HEABC meet to try to resolve
Yes Established
No
Classification Arbitration
ARTICLE 22
Employer changes position
Employer gives written notice to Union of classification/wage level
Union notified Employer if classification is acceptable (45 days)
Yes Established
No
Employer provides incumbent(s) and manager with questionnaire and profiles (3 months)
Within 14 days, questionnaire is filled out and profile picked
Within 28 days Union and HEABC meet to try to resolve
Yes Established
No
Classification Arbitration
ARTICLE 22.03
Employee grievance at Step 1 (discussion) and then review procedure starting with questionnaire and profiles.
ARTICLE 23
Employer submits job description to the Union Classification Labour Relations Officers
Union has 28 days to object
No objection Established
Objection Not established

The parties agree that his document represents the final, mutually agreed to Nursing Job Classification Manual.

Signed on behalf of the
Nurses' Bargaining Association

This 13 day of December 2005.

LESLEY BURKE
COORDINATOR, NEGOTIATIONS + SERVICING TEAM 1
Printed Name and Job Title of Signatory

Signed on behalf of the Health Employers
Association of BC (HEABC)

This 13 day of December, 2005.

MARNO MCINNES DIR, CONSULTING/COMP
Printed Name and Job Title of Signatory