

**Memorandum of Agreement
By and Between
King County
and
Washington State Nurses Association
Staff and Supervisor Units**

Subject: Critical Shift Incentive Pay

Background

The COVID-19 pandemic has caused temporary disruptions, and increased burdens on nurse staffing in King County correctional facilities. The purpose of this Agreement is to provide a temporary pay incentive designed to improve voluntary nurse staffing coverage, and to ensure mandated and required healthcare activities are covered in correctional facilities.

The County and the Washington State Nurses Association (WSNA) mutually agree to temporarily modify the “callback provision” in Section 6.9 of the parties Collective Bargaining Agreements as described below in circumstances when the County initiates a “Critical Shift” designation.

Agreement

1. Critical Shift Designation. The County may designate a “*Critical Shift*” on the schedule as needed per Department Nursing Critical Shift Guidelines established and updated by the County. Should the Guidelines require an update, such update will be shared with WSNA prior to implementation, and WSNA may request to discuss any proposed change in Guidelines before they occur. The County reserves the ability to develop or modify Critical Shift Guidelines at any of its correctional facilities (e.g., KCCF, RJC, CFJC).

2. Critical Shift Guidelines. The County may periodically update its Guideline(s) for Critical Shifts if circumstances change or operational issues arise. The County may have different Critical Shift Guidelines by facility (e.g., KCCF versus CFJC may have different scheduling issues or operational needs).

3. Employees Eligible to Work Critical Shift. Career Service, Short-Term-Temporary, and Term-Limited Temporary Nurses and Supervisors (FLSA non-exempt) are eligible to be approved to work *Critical Shifts* and receive Critical Shift Pay.

4. Critical Shift Pay. County designated *Critical Shifts* shall be paid at time and one-half (1-1/2) for all hours worked. For *Critical Shift* time entry purposes, nurses shall use the “Call Back/Call Out @ 1.5 – 185” TRC payroll code, and must include the “Critical Shift” reason code for all *Critical Shift* work hours. No standby pay shall be provided due to a Critical Shift designation.

Washington State Nurses Association - Staff Nurses - Departments: Public Health, Adult and Juvenile Detention (Juvenile Detention) [310]

*Washington State Nurses Association - Supervisors and Managers - Department of Public Health [320]
310,320U0121*

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5. Section 6.9. The County may continue to use “standby” and “callback” per Section 6.9 per current collective bargaining agreement terms. Only when a shift is designated a “Critical Shift” will the terms of this Agreement apply.

6. No FLSA offset. Critical Shift Pay shall not be used to offset FLSA overtime pay in circumstances when a nurse also works hours over (40) hours in the same FLSA workweek as a *Critical Shift*.

7. Grievance. WSNA will withdraw its grievance filed on January 15, 2021.

8. Duration. The terms of this Agreement are temporary in response to existing nurse staffing challenges. The County may terminate or suspend the terms of this Agreement at any time effective on the next Monthly Schedule (or work schedule) that does not have any *Critical Shifts* designated and approved. Notice of such termination or suspension, and the effective date will be provided to WSNA.

9. Effective date. This Agreement shall be effective after signatures by all parties to this Agreement.

King County

BY Andre Chevalier
Andre Chevalier

Jun 16, 2021
DATED _____

WSNA (STAFF UNIT)

BY Michelle Moore, BSN, RN
Michelle Moore, BSN, RN, IBCLC

Jun 16, 2021
DATED _____

WSNA (SUPERVISOR UNIT)

BY Sydne James, BSN, RN
Sydne James, BSN, RN (Jun 16, 2021 08:08 PDT)
Sydne James

Jun 16, 2021
DATED _____

Call Back/Call Out 1.5 overtime is available for shifts that are deemed critical in order to manage staffing levels during the COVID-19 pandemic.

Definitions:

Critical shift - A shift which needs additional staffing (one or more nurses) to bring the number of staff working on that day and shift up to the level of the house view. Shifts can be identified as critical no more than 48 hours before they occur.

House views: – House views represent the number of staff needed to carry out all mandated and required healthcare activities on any given day and shift. Staffing levels are based on several factors: population levels, special projects or initiatives, or patients with special needs. These factors are routinely evaluated by JHS Nursing Leadership (NLT) in consultation with JHS Finance Manager and incorporated into the house view levels.

Guidelines:

1. Working a critical shift is voluntary.
2. Career Service, Short Term Temporary, and Term-Limited Temporary Registered Nurses and Licensed Practical Nurses are eligible to request and work critical shifts. Short Term Temporary staff requesting to work a critical shift must first be pre-scheduled to work a minimum of 6 shifts for the month in which the critical shift falls.
3. Alerts are sent from Nursing Supervisors or designee 24 to 48 hours prior to critical shift need, via email and text.
4. Staff must have updated contact number or email on file.
5. Shifts are assigned in the order the replies are received (first come, first served).
6. Scheduled critical shifts are paid at 1.5 times the employee's base hourly rate. Report time using the PeopleSoft Time Reporting Code of Call Back/Call Out @ 1.5 – 185.
7. Standby pay does not apply to these prescheduled, voluntary critical shifts.
8. Critical shifts count towards the 16-hour threshold of no more than 16 hours worked in a day. Only hours worked in a jail facility count toward this threshold.
9. In the event a scheduled staff member is ill and unable to work an assigned critical shift, he/she must provide notification via the sick call line at least two hours prior to the beginning of the awarded shift. The staff member is responsible for finding a replacement if he/she cannot work the critical shift that he/she has been awarded.