PROCESS FOR FLOATING

Permanent Designated Floats:

- Pursuant to Paragraphs 783-784, all new employees hired on or after June 24, 2013 will select another unit other than their home unit to float to in times of low census. After orientation to the selected float unit, the employee will be assigned to float according to Paragraph 164A. Employees hired before June 24, 2013 may voluntarily elect to be a permanent designated float, and such an election shall be irrevocable once made. All elections to be a permanent designated float made by employees hired prior to June 24, 2013 must be documented on a jointly developed form and signed by the employee to be valid. Copies of the executed form shall be sent to the local UMPNC office and retained in the unit file.
- 2. The manager needs to ensure that all new employees are aware of the requirement of mandatory floating upon hiring.
- 3. To implement this process, all new employees hired on or after June 24, 2013 will meet with their manager, after the completion of their probationary period (4-6 months), to identify a designated float unit and to develop an orientation plan. The manager may determine that the nurse is not ready to "float" at this time and reassessment will be done at regular intervals. However, a designated unit must be selected no later than one year from the date of hire in a nursing position.
- 4. Designated float units should be of similar patient population and skill set; for example: medicine to medicine, surgical to surgical, pediatric general care to pediatric general care, ICU to ICU, telemetry to telemetry, etc. Exceptions may be made where the designated float unit is to a unit on which the employee has prior experience. The designated float units will be determined using the jointly developed guidelines, found in Addendum D, for "like" and "unlike" units.
- 5. The manager and the designated float employee will discuss a plan to send the employee to their designated float unit to maintain their skills when:
 - a. The need to float does not occur for an extended period of time (ex., 4-6 months)
 - b. The incidence of low census is rare on the home unit
- 6. Floating will be requested of nurses subject to this requirement only in times of low census on the nurse's home unit, and not based on needs in the designated float unit. Floating is not an appropriate use for "fixing" long-term scheduling issues.

- 7. A log shall be created by the WRC and maintained to ensure the appropriate rotation of designated floats using the principles of occurrence and seniority.
- 8. An employee who is floated will have the Float Payment Voucher completed on the float unit, which will then be provided to their home unit's payroll person for payment. The Float Payment Voucher will be available on the JIT website.
- 9. Employees who float will not be assigned to be in charge. Orientation will include the full range of activities that the employee will be expected to perform, and will be based on existing competencies used in any new employee's orientation.
- 10. An employee who is floating has the right to refuse a particular assignment, based on competency. The supervisor and the employee will meet to resolve the issue. No discipline can be initiated against the employee who is floating until a meeting between the employee, supervisor, and the Association is held to review the issues.
- An employee's designated float unit may be re-evaluated at annual intervals. Employees may request to change their designated float unit after one year. Any changes to a designated float unit will be subject to mutual agreement by the manager and the nurse.
- 12. If an employee transfers units after having a designated float unit, the employee and the initial home unit manager will have a conversation concerning the desire to maintain a staffing relationship; if all agree that this is desired, the employee may consider this original home unit their designated float unit. If there is no desire or agreement to stay with the original home unit as the designated float unit post-transfer, then the employee will need to designate a unit in which to float to in times of low census after having a discussion with the new manager. Any needed orientation plan for this new designated unit will be discussed with the managers.
- 13. Designated floats will be eligible for the \$8/hr. float bonus.

Voluntary committed floats (any staff currently on the list with CSR to float or any current employee who wishes to volunteer to float):

- 1. Managers will need to reconfirm current employees who have volunteered to float. CSR will request confirmation of commitment from all voluntary float list participants each 4-week scheduling period, during the schedule request period, and send this list to the managers. The managers will need to post this list on the unit (charge nurse book, report room, etc.).
- 2. Process to become a volunteer float will continue to be facilitated through CSR.
- 3. Employees must commit to a 4-week scheduling period.

- Committed voluntary floats will have the option of using a float occurrence as a 4. future exemption to mandatory Assigned Time Off (only one exemption can be on hold/banked at a time).
- 5. A log will be created by the WRC and maintained for the exemption option.
- 6. Competency will be assessed by the accepting unit.
- 7. Voluntary committed floats will be eligible for the \$8/hr float bonus.

(Day to Day) Voluntary floats:

- The current process of volunteering to be a day-to-day float will continue 1. through CSR.
- Day-to-day floats are those staff who do not commit to floating for a 4-week 2. scheduling period, and will need to be asked each shift if they are willing to float for that shift.
- Day-to-day floats will be eligible for the \$8/hr. float bonus. 3.

For the University:

For the UMPNC:

Director of Labor Relations

Lori^{*}Pelham Nursing Director for Nursing Negotiations

Katie Oppenheim **UMPNC** Chair

Date Steven Strakle Date

UMPNC Representative

For the MNA:

5-2013 Chiodini Jim **MNA** Representative

Mark Kempto Human Resources Manager

Target Audience: UMHS Nursing | Author/Contact: Mark Kempton | Last reviewed: 7/2013