

# TENTATIVE AGREEMENT

Part of Package Supposal for Tentative Agreements to Articles 1, 12, 14, 16, 24, and Appendix C

## ARTICLE 12 - FLOATING, CALL OFFS


### A. DEFINITION

Floating is defined as the temporary reassignment of a Registered Nurse to a clinical area outside of his/her assigned patient care unit. A Registered Nurse may be assigned to float to a patient care unit other than his/her own, subject to the limitations within this Article.

### B. FLOATING CONDITIONS

Floating will be subject to the following conditions and limitations:

1. Registered Nurses may be floated to a different department or unit provided the Registered Nurse has received orientation in that department or unit and has demonstrated competence in providing care to patients in that department or unit unless the Registered Nurse expressly objects to the decision maker and can establish that he/she does not have the necessary knowledge, judgment, skills, and ability to provide the required care. Registered Nurses floated to another department or unit to assist other qualified Registered Nurses will be expected to perform those skills they are qualified to perform. Float assignment shall be equitably shared among Registered Nurses within the same department or unit.
2. Compliance with Law: Floating of Registered Nurses will be in compliance with all federal and state laws and regulations, including Title XXII of the California Administrative Code.
3. As an alternative to an on unit assignment, Float Pool Registered Nurses may be given break relief and/or transport assignments for patients within their clusters for all or part of their shift. Prior to assuming the primary care of a patient, Registered Nurses floated into a hospital/location/building for the first time will receive appropriate orientation to the applicable operations, procedures, and nursing practices, and they will be provided a refresher orientation upon request.
4. ~~The Peri-Op Float Pools are departments where the is a float pool to which~~ Registered Nurses are assigned ~~to~~, in accordance with the terms and provisions of Article 5 or as agreed to in writing by the Employer and the Union. Subject to the limitations of this Article, Registered Nurses in any established the Peri-Op Float Pool will work in the units or areas applicable to their Float Pool clusters (i.e., ICU Float Pool, Perioperative Float Pool, Telemetry Float Pool), as designated by the Employer, and consistent with their validated competencies. It is understood that Registered Nurses in Peri-Op Float Pool may only be floated to perioperative units located at Keck Hospital of USC, USC/Norris Cancer Hospital, HC1, HC2, HC3, and HC4. Prior to floating a ~~Peri-Op~~ Float Pool Registered Nurse to any ~~perioperative~~ unit, the Registered Nurse must be oriented and validated as competent for the procedures, patient populations, and units to which they are floated. Additionally, they will be provided refresher orientation and validation upon request.
5. Except as provided in this Article, Registered Nurses will not be required to work outside their facility.

  
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## **C. FLOATING ORDER**

1. Registered Nurses shall float in the following order, on a rotational basis, within each of the categories of Registered Nurses listed below. Floating decisions will be based on the needs of the patients on the sending and receiving units and the floating conditions and provisions in this Article:
  - a. Volunteers
  - b. Outside Registry
  - c. Travelers
  - d. Float Pool Nurses
  - e. Registered Nurses working a premium shift (Subject to #3 below)
  - f. Per Diem
  - g. Part Time and Full Time Registered Nurses
2. No Registered Nurse will be required to float more than once in any given shift, however, returning to his/her home unit will not be considered floating. Float Pool Nurses may be assigned to work on and/or float between two different units on any given shift, including being asked to return to any previous unit worked on that shift.
3. A Registered Nurse who is working or scheduled to work a premium shift may be requested to float and if requested, will be required to float to those units the Registered Nurse indicated they would work at the time of signing up for the premium shift. If the request is to float to any other unit within the cluster, the Nurse may choose not to float. When possible, if the Nurse chooses not to float, that Nurse will be cancelled or flexed.

## **D. FLOATING RECORDS**

The Employer will maintain competency validation, float orientation, and other such relevant float documentation. Float rotation lists will be available for inspection by affected Registered Nurses.

## **E. FLOATING CLUSTERS**

Except for Registered Nurses assigned to the Peri-Op Float Pool, floating outside the below clusters or to a building other than the one the Registered Nurse is regularly assigned will be on a voluntary basis. Other than Registered Nurses assigned to the Peri-Op Float Pool, Registered Nurses may be assigned to float within the same building according to the clusters below. Floating inconsistent with the clusters below will be voluntary, except in the event of an emergency.

1. **Med/Surg and Rehab:** Med/Surg and Rehab floats to Med/Surg, Telemetry (Med/Surg assignments only), Same Day (Pre-op only), Out Patient Surgery (Pre-op only), Rehab

  
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2. Telemetry: Telemetry floats to Telemetry, Med/Surg, Step Down (Telemetry or Med/Surg assignment only), Same Day Surgery (Pre-Op only), Outpatient Surgery (Pre-Op Only), Infusion Centers (non-chemo therapy assignments only, unless chemo certified).
3. Step Down: Step Down floats to Step Down, Telemetry, Med/Surg, Same Day Surgery (Pre-Op Only), Outpatient Surgery (Pre-Op Only).
4. ICU: ICU floats to ICU, Step Down, PACU (In-patient and out-patient surgery). For moderate sedation only to Interventional Radiology, Imaging, Bronch Lab, ~~GI Lab~~Endoscopy, Gamma Knife, Cardiac Cath Lab.
5. Interventional: Interventional Radiology, Imaging, ~~GI Lab~~Endoscopy, Bronch Lab, Non-Invasive Cardiology, Cardiac Cath Lab floats to each other and to any procedural area to provide moderate sedation care and/or patient monitoring.
6. PACU: PACU floats to ICU (for recovery of patients only), same day surgery, in-patient and out-patient PACU. For moderate sedation only to Interventional Radiology, Imaging, Bronch Lab, ~~GI Lab~~Endoscopy.
7. Peri-Op: Provided the Registered Nurse has applicable certifications and competencies for the population in the unit as follows:
  - a. Same day surgery to Pre-Op,
  - b. Pre-PACU to Same day surgery, Pre-Op or PACU,
  - c. Pre-Op to Same day surgery/Pre-Op,
  - d. Intra-Op to Intra-Op.
8. Ambulatory and Infusion Areas: Ambulatory Clinics and Infusion Areas float to Ambulatory Clinics and Infusion Areas, provided the Registered Nurse has applicable certifications and competencies for the patient assignments.
9. ETC: ~~Floats with an ETC patient~~ During a Code ETC admission, ~~and ETC nurse~~ will stay with ~~such ETC~~ patient until relieved. ETC nurse may care for additional CODE ETC patient when admitted to the same unit. ~~ETC nurse~~ but will not be utilized as part of the unit's core staffing plan.
10. Endoscopy: Advanced Endoscopy to Advanced Endoscopy and Endoscopy; Endoscopy to Endoscopy ~~GI Lab/Esophageal Lab to GI Lab/Esophageal Lab~~.

The parties agree to negotiate in good faith over inclusion of any units created after the execution of this Agreement.

  
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## F. FLOATING OUTSIDE OF CLUSTERS OR FACILITY

Registered Nurses who volunteer to float outside of their assigned cluster or facility will receive a \$4.00 per hour floating differential for all hours worked during core shifts and additional shifts, but not during premium shifts.

## G. PROLONGED LOW CENSUS

In units/departments that have an anticipated prolonged low census, the parties agree to meet and talk about alternatives. In the event the Employer decides to temporarily close a unit/department, it may temporarily reassign the Registered Nurses from that unit/department to another unit/department within their float cluster, with all Registered Nurses on both units maintaining their published schedules and with both units being temporarily treated as one unit for the purpose of rotation for call off, flex off, floating etc. Additionally, in such circumstances, if there are more than one (1) Nurse Leads scheduled during the same shift, the Nurse Lead will not float but will be given a patient care assignment in rotation with all other Nurse Leads in the unit. Upon the reopening of the temporarily closed unit the Registered Nurses will return to their prior unit.

During prolonged periods of extreme ongoing low census for more than one week, upon request from the Union, the parties agree to meet and confer to discuss equitable scheduling of the impacted Registered Nurses.



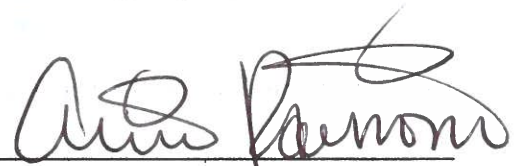
For The Employer

PATRICK ZVARA

By

10/3/25

Date



For California Nurses Association

ALAN PARNON

By

10/3/25

Date