



RELEVANT CONTRACT PROVISIONS:

ARTICLE III. EMPLOYER RIGHTS

Section 1. Scope

The parties recognize that this contract addresses the employer-employee relationship existing between the Hospital and its employees in the collective bargaining unit represented by the Union, and that the rights and duties between them in their relationship are those of employer and employee.

It is agreed that, except as otherwise expressly limited by this Agreement, the management of the Hospital and the direction of the work force including, by way of example and not by way of limitation, the right to select, hire and assign employees, promulgate and enforce reasonable rules and regulations it considers necessary or advisable for the safe, orderly and efficient operation of the Hospital, direct and assign work, determine work schedules, transfer employees between jobs or departments or sites, fairly evaluate relative skill, ability, performance or other job qualifications, introduce new work methods, equipment and processes, determine and establish fair and equitable work standards, select and implement the manner by which the Hospital's goals and objectives are to be attained, and to discharge employees for just cause or relieve employees from duty for lack of work or other legitimate reasons are vested exclusively with the Hospital, but this provision shall be construed to harmonize with and not to violate other provisions of this Agreement.

It is further understood that all functions of management not otherwise herein relinquished or limited shall remain vested in the Hospital.

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ARTICLE IV. JOB CLASSIFICATIONS AND JOB

## DESCRIPTIONS

### Section 1. Description Revisions and Establishing New Jobs

The jobs of Hospital employees are presently defined in existing job descriptions. It is agreed that in order to maintain the flexibility of the health care delivery function, such jobs may be revised by the Hospital to conform to current operating conditions. Such changes, however, will be discussed prior to implementation, with a representative of the union or the union segment president and one chief steward and at least one person selected by the union from the affected classification. Final approval of job descriptions rest with management. However, the right to final approval shall not be used to unilaterally develop job descriptions without conferring with the union.

The Union may also request that a new job description be prepared if substantive changes have occurred within the job during the term of this agreement. Union requests must be submitted in writing to the Personnel department, stating the reasons which, in the Union's opinion, warrant the change(s). Job descriptions prepared by the Hospital will be given to the Union. Job description revisions requested by the Union will be completed within thirty (30) calendar days. The classification for the accepted job description will be based on the systematic analysis used by the Hospital in the evaluation of such jobs. One employee from the affected job title may participate in presenting the revised job description to the Job Evaluation Committee. Jobs and classifications, when agreed upon by both parties, will be recognized as a part of the contract.

Job classifications that are not mutually agreed upon will be classified by the Hospital with the provision that any grievance with respect to their classification may be taken up through the regular grievance procedure

hereinafter established.

Wage grades for job classifications in effect upon completion of this agreement shall remain through the life of this contract subject to change only where significant alteration of duties warrants such grade change through the procedure outlined above.

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BACKGROUND:

The Patient Escort position has been in existence since 1986. The primary function of the position is to transport patients between areas within the Hospital and between the Hospital and the building known as 20 S. Park Street. Patients are transported to the 20 S. Park Street building via a skywalk. Additionally, each day one Patient Escort has the primary responsibility to escort discharged patients outside of the building.

Prior to 1986, patient transport was performed by employees in the Transporter position. The Transporter position was evaluated by the Employer's Job Evaluation Committee in 1981 and received a pay class of 56. When the patient transport function was centralized in 1986, the Transporter position was reclassified as the Patient Escort position, but was not re-evaluated by the Employer's classification team.

On March 27, 1992, Maureen Gaulrapp, Supervisor of Patient Escort/Transportation, prepared a SEIU Position Questionnaire on the position of Patient Escort. Gaulrapp consulted with employees in the Patient Escort position, as well as with Sandy Schreiber, the Patient Escort supervisor at the Employer's Capitol site, when she prepared this position questionnaire.

The position questionnaire was submitted to the Employer's Job Evaluation Committee. The Job Evaluation Committee met with Lynne Curning, a Patient Escort, and Mary Teppo, Director of the Department of Material Services and head of Patient Escort/Transportation services. During this meeting, Curning was able to comment upon the questionnaire and present the Patient Escort employees' position in the matter. Curning also responded to questions from the five individuals on the Job Evaluation Committee.

Relying upon the position questionnaire of March 27, 1992, as well as the remarks made by Curning and Teppo, the Employer's Job

Evaluation Committee evaluated the Patient Escort position, using the SEIU Job Rating Plan (commonly referred to as the Classification Tool) and determined that the position was a pay class 56. The Union was notified of this classification decision in a letter dated August 18, 1992. On August 21, 1992, the Union filed the instant grievance, alleging that the Patient Escort position should be a pay class 62 or higher. The grievance was denied at all steps and, thereafter, submitted to arbitration.

The Classification Tool rates the characteristics of Skill, Effort, Responsibility and Job Conditions. Skill is measured by the factors of Education, Experience and Mental Skills. Effort is measured by the factors of Physical Requirements and Mental and Visual Requirements. Responsibility is measured by the factors of Equipment or Process, Material or Product, Safety of Others and Work of Others. Job Conditions is measured by the factors of Working Conditions and Unavoidable Hazards. Recognizing that each factor is present in various levels, successive levels or "degrees" are defined for each factor and a weight, or rating "point" is assigned to each degree. The SEIU Position Questionnaire requests specific information on all of the eleven factors referenced in the Classification Tool.

The only factors in dispute between the parties are: Physical Requirements, Mental and Visual Requirements, Equipment or Process, Material or Product, Safety of Others, Working Conditions and Unavoidable Hazards. The positions of the parties with respect to the "degree" of these factors are as follows:

	Unions Contention	Employers Contention
Physical Requirements	4	3
Mental & Visual	3	2
Equipment or Process	3	2
Material or Product	5	3
Safety of Others	5	2
Working Conditions	4	2
Unavoidable Hazards	5	2

POSITION OF THE UNION

Physical Requirements

The position questionnaire lists the physical requirements of the Patient Escort as standing and walking, 90% to 100% of the time; pushing and pulling wheelchairs and carts, 90% to 100% of the time; and reaching, stooping, lifting in process, assisting

with transfer of patients to and from wheelchairs and carts, 90% to 100% of the time. The testimony of Lynne Curning, Jill Bemis, and their supervisor, Maureen Gaulrapp, supports these percentages. One-half of the transport time is spent exerting, pushing, pulling or lifting.

The record demonstrates that the average weight of the patients transferred is 171 pounds. Weight transported also includes the bed, cart or wheelchair; heart monitors; oximeters; PCA monitors; IMED's; oxygen tanks; and free-standing IV poles. Twenty to twenty-five percent of the time this equipment is attached to the patient. Curning, Jill Bemis and their supervisor, Gaulrapp, agree that Patient Escorts regularly handle over 40 pounds. The Escorts may have 2 to 3 hours of their 8 hour day in which they are not exerting, such as waiting for elevators or being in the office.

Lifting from a wheelchair can require the lifting of the entire weight of the patient. Lifting may also occur when transferring patients from the bed to a cart. The sliding board does not reduce the weight of the patient, just the drag or friction.

The awkwardness of pushing and/or pulling IV poles and similar equipment is aggravated by the fact that the casters and/or wheels do not roll properly and by the fact that the equipment is often transported over carpeted areas and inclines, which increases the drag. Exertion required to push beds and carts is over 40 pounds and Escorts only have assistance during their transport duties 5 to 10% of the time.

The Escorts regularly handle heavy materials as defined by the tool; their work includes physical strain from awkward positions; and the duties require considerable physical effort and vigorous exertion for a major part of the work time. The arbitrator should award the Fourth Degree to this category, resulting in the addition of 40 points to the total.

#### Mental and Visual Requirements

The position questionnaire lists the mental and visual requirements of the Patient Escort as keeping accurate records of patients escorted on a daily basis 100% of the time and constantly observe patient for any changes in physical or mental state which should be reported to appropriate persons. The Escort has the responsibility to estimate the time it takes to perform a transport; sign for patients; maintain log sheets; and deliver patients records, test results and film to the appropriate nurse or technician.

Frequently, transporters are asked to monitor for certain precautions or changes in the patient's status. Escorts need to be constantly alert for signs of respiratory arrest, cardiac arrest, choking, seizures, combative behavior, psychotic behavior and confusion. Gaulrapp has confirmed that Escorts may have to assess whether or not there is something wrong with the patient and to pass on observations to nurses. Other observations include checking cart patients to ensure that they are strapped in and ensuring that all lines and tubing are away from wheels and not being pulled out by the patient. At times, Escorts have the responsibility to notify appropriate employees of the oxygen tank status.

When transporting a patient, the Escort must observe the traveled path, maneuver around obstructions, observe patient for signs of visible discomfort, and monitor read-outs on PCA monitor and IMED pump for signs of malfunction. If a patient isn't ready when the Escort arrives, the Escort must determine if the patient is able to use a wheelchair, or needs a cart. The Patient Escort must also remain alert to the environment to decrease the likelihood of contact with contaminants.

The record demonstrates that constant alertness or a combination of continuous applications of mental and visual attention is required. There are short cycle repetitive operations requiring continuous attention and use of coordination. Additionally, a moderate amount of planning is required. It is appropriate to assign the Third Degree to this category, resulting in 15 points being added to the total.

#### Equipment or Process

The position questionnaire lists the ability to recognize problems or defects in transport vehicles, i.e., wheelchairs and carts, that would cause patient injury; to safely operate wheelchairs and carts; to ensure safe handling of oxygen tanks and equipment such as IMEDs and PCAs and to protect patients from injury and damage to elevators.

Escorts are responsible for carts, beds, wheelchairs, heart monitors, respirators, PCA monitors, IMEDs, crash carts, beepers and the phone. The transport of patients attached to machinery has increased, and due to wheels that don't roll well, a greater amount of care must be practiced to avoid damaging the IMEDs and PCA monitors.

Probable damage can surpass the \$140 level, which caps the second degree. The arbitrator should assign the Third Degree to this category, resulting in 15 points being added to the total.

### Material or Product

The position questionnaire lists the maintenance of equipment on a daily basis as being used, cleaning carts on a weekly basis, and monitoring yearly preventative maintenance. Escorts are responsible for carts, beds, wheelchairs, heart monitors, respirators, PCA monitors, IMEDs, crash carts, beepers and the phone.

When transporting, the Escort must be careful to protect the well being of the patient and ensure that breathing tubes are not disconnected if the patient becomes combative and that the patient does not unbuckle restraints. Escorts are required to be certified in performing CPR. Curing has assisted a choking patient to clear the patient's airway. The Escort must follow appropriate procedures to diminish the likelihood of needle sticks and exposure to infectious diseases.

The record demonstrates that the Escort must exercise care in preventing crippling or death to the patients. The arbitrator should assign the Fifth Degree to this factor, resulting in 25 points being added to the total.

### Safety of Others

The position questionnaire lists concern for the patient when transporting and for persons and items in the pathway when transporting. Additionally, there is the threat of needle sticks and exposure to contaminants.

Carelessness or inattention may result in a fatal injury to others in instances in which they will have little opportunity to avoid the injury. The arbitrator should assign the Fifth Degree to this category, resulting in the addition of 25 points.

### Working Conditions

At times, patients are combative which can result in injury to Escorts. Frequently, there is contact with blood and body fluids which may result in death. Discharge duties involve exposure to winter weather. Escorts are also exposed to cleaning chemicals. Curing has been injured performing the same duties as escorts perform today.

Patients may suffer physical damage as a result of patient care. Patients are exposed to several disagreeable elements to a considerable degree. The arbitrator should award the Fourth Degree to this category, resulting in 40 points being added to the total.



### Unavoidable Hazards

Escorts have frequent contact with blood and bodily fluids. Exposure to HIV and Hepatitis B may result in death. Universal precautions are not a guarantee against this threat. Articulate masks used to contain exposure to TB protect down to 3 microns and the virus is less than 3 microns.

The record demonstrates that the work involves exposure to accident or health hazards which may result in permanent total disability or death. It is appropriate to assign the Fifth Degree to this category, resulting in 25 points being added to the total.

### Summary

The Employer's Evaluation Committee engaged in selective listening. The questionnaire is not sufficient to encompass the information required to appropriately classify the job. The grievance should be sustained.

The award sought by the Union would result in the Patient Escort having a total of 268 points. The Union is asking for a minimum pay class of 62.

### POSITION OF THE EMPLOYER

The contract does not provide the arbitrator with jurisdiction to function as an "interest arbitrator." Rather, the arbitrator's role is to review the classification to ensure that the Hospital has not acted arbitrarily or capriciously. The Union bears the burden of proof to show that management's decision was incorrect.

### Physical Requirements

This is one of the two factors used to measure the amount of effort one expends in performing a job. The factor measures the amount and continuity of physical effort that is required to perform the job. The Hospital has rated the Patient Escort position as a Third Degree for physical requirements. This is the degree for jobs that require the manual handling of light or medium weight. It includes duties that involve ". . . continuity of effort of handling heavy material (40 pounds or more) with assistance or mechanical devices which reduce the manual exertion required." It also includes the occasional exertion of considerable effort such as manually lifting heavy material.

Doug Rentschler, a member of the Job Classification Committee, testified that the primary difference between the Third Degree and the Fourth Degree is that the Fourth Degree requires

the manual handling of medium or heavy weights for a major part of the work time, and that the Committee considers carts, wheelchairs and beds to be mechanical devices which reduce the amount of manual exertion required. According to Rentschler, there was no evidence presented before the Committee that Patient Escorts are required to lift more than 40 pounds on a regular basis without either mechanical assistant or assistance from others, and that no other position in the bargaining unit is rated higher than a Third Degree under this category.

The decision of the Committee was not unreasonable. The only heavy weight (defined by the tool as objects weighing 40 or more pounds) handled by the Patient Escort is with assistance or the use of mechanical devices. The Fourth Degree, which the Union contends more accurately describes the position, is not reflective of the Patient Escort position. This degree requires the manual handling of medium or heavy weights or materials and does not mention the use of mechanical devices or other assistance. Since heavy weights are not regularly handled without assistance or assistant devices, the Third Degree more accurately reflects the position.

#### Mental and Visual Requirements

This factor evaluates the requirement of the application of mental and visual skills as measured in terms of both duration and intensity. The Hospital maintains that the Second Degree is the degree which is most appropriate for the Patient Escort position.

The primary difference between the Second Degree and the Third Degree is the extent of the mental and visual requirement.

It is the Employer's position that the issue of patient assessment is not relevant under the factor in question, but rather is part and parcel of the factor "mental skills" which is not in dispute. This is because mental skills address independent decision making as opposed to the duration and intensity of mental attention.

The job requires continuous visual requirements, but little mental application. While the Patient Escort must keep his or her eyes on things when pushing carts, wheelchairs or beds, the amount of mental application of concentration is minimal. Curning agreed that it could be likened to driving a car. According to Rentschler, there was nothing presented to the Committee which led it to believe that there was a great deal of mental concentration required in the performance of the job.

The classification of a Second Degree for mental and visual requirements is not unreasonable. There is no evidence of

continuous mental and visual attention. In fact, there is not a requirement to check quality of work, either visually or with the use of gauges or equipment. It does not require continuous alertness to carry out the tasks. There is a great deal of down time where patients are not being actively transported.

#### Equipment or Process

This factor assesses the Patient Escort's responsibility for equipment or process ". . . through which his skill is applied to the things he does." The measurement is the amount of damage normally expected from a mishap in the use of the equipment or processes specified for the job.

The only equipment the Patient Escorts operate in order to perform their jobs are carts, beds, wheelchairs and hoier lifts. The only damage caused by Curning is tearing a rubber bumper off a cart. The only damage she observed involving equipment or process is one of the pads on the arm of a wheelchair being torn off and the accidental ripping of the veneer of the footboard of the bed.

There is absolutely no evidence in the record that the likely damage to equipment or process by Patient Escorts when they are performing their job would exceed \$140. The Union has not demonstrated that the rating of a Second Degree is unreasonable.

#### Material or Product

This factor assesses the amount of damage likely to things transported, handled, processed, assembled, inspected, tested or maintained by Patient Escorts as a result of their failure to exercise care. The amount of loss likely is measured either monetarily or in discomfort to the patient. The amount of damages is the repair cost of the item.

The greatest amount of damage Curning has done in her nine years as a Patient Escort was to run a patient's foot into a nurse who was coming around a corner, which resulted in some discomfort to the patient. The Union appears to argue that the Patient Escort has some direct patient care responsibilities. Supervisor Gaulrapp, however, affirmed that there are no direct patient care responsibilities for a Patient Escort and no assessment or diagnosis of patients are to be performed.

Gaulrapp's testimony demonstrates that many of the codes that she instituted, such as MNLU (must not leave unattended) were designed to relieve Patient Escorts from having the responsibility to make assessments about patient conditions.

According to Gaulrapp, if a Patient Escort is not careful, the carts can be run into an elevator door or wall and the patient will be jolted. Gaulrapp has not heard of any accident where a Patient Escort has damaged an IMED or a PCA monitor. The record does not establish the frequency with which Patient Escorts use portable heart monitors, which is the only piece of equipment for which average repair costs exceed the \$500 hallmark of the Third Degree.

The Union has not demonstrated that the probable loss due to damage (based upon frequency of use) would exceed \$500. While any job could conceivably result in permanent damage to a patient, there is absolutely no evidence that the likely damager would be moderate discomfort to the patient.

The Committee determined that the likely damage to products or materials handled by the Patient Escorts would seldom exceed \$500. Moreover, the Committee determined that the discomfort of a patient in the event of an accident would be moderate. These findings are supported by the record. The Committee acted reasonably when it assigned this factor at the Third Degree.

#### Responsibility for Safety of Others

This factor evaluates the degree of an employee's responsibility for exercising care in performing his or her work in order to prevent physical harm to others. Rentschler, the Hospital's job classification expert, provided uncontroverted testimony that the term "others" includes coworkers and members of the public. The primary inquiry under this factor is the degree of care required and the probable extent of injury to others as a result of carelessness or inattention on the part of the person performing the job.

The Hospital maintains that the Patient Escorts are properly in the Second Degree, rather than in the Fifth Degree sought by the Union. The primary difference between the Second and Fifth Degrees are extent of responsibility, extent of injuries, and the opportunity for other individuals to avoid injury.

The Fifth Degree requires considerable and direct responsibility for the lives of others. Much of the evidence at hearing focused on injury to patients rather than to coworkers or members of the public. Patient Escorts are not, however, directly responsible for the lives of the patients. Moreover, it is undisputed that potential damage to patients is not relevant under this factor.

The classification system provides that the probability of injury should be considered. The record was devoid of any

substantial evidence that either a coworker or a member of the public has ever been injured as a direct result of carelessness or inattention of Patient Escorts in the performance of their job duties. The equipment handled by the Patient Escorts is not inherently dangerous.

The Hospital submits that the Second Degree, which includes injuries which are generally minor in nature, such as cuts, abrasions, bruises and minor burns, or strains, is more applicable to Patient Escorts than is the Fifth Degree, in which fatal injury may occur and there is little opportunity for others to intervene to avoid injury. It is true that carelessness could conceivably result in death. However, the probability of such injury is extremely low.

During the evaluation process, no one produced any evidence that co-employees had received injuries from Patient Escorts which were more severe than cuts, abrasions, bruises, minor burns or strains. Moreover, the information received by the Committee did not suggest that more severe injury was likely. The Hospital's assignment of Second Degree is reasonable.

#### Working Conditions

This factor and the eleventh factor, unavoidable hazards, are easily confused. Working conditions takes into consideration the physical conditions in which the workers perform their work, including the amount and continuity of exposure to the unpleasant conditions in the work area and the extent to which the exposure makes the job disagreeable. The Hospital maintains that the Second Degree appropriately describes the working conditions of the Patient Escort.

The record demonstrates that any disagreeable elements are present in moderate degree and exposure to them is intermittent at best. Except for the discharge person, everyone works within the Hospital, which is a controlled environment. Except during the construction season, there is no excessive noise. While Curning has testified that she has been exposed to vomit, urine and stool, such exposure has occurred no more than three to five times within the last ten months, and nor more than ten to eighteen times from 1986 to the present. One to three isolation cases are transported in a week.

In explaining the reasons why the Evaluation Committee rated this position as Second Degree, Rentschler noted that the Patient Escorts do have some exposure to cleaning chemicals and infectious disease, but that no evidence was provided to suggest that there was any continuous exposure to infectious disease or chemicals.

The Fourth Degree requires continuous exposure to one disagreeable element in an extreme degree and continuous exposure to several disagreeable elements in considerable degree. The record does not establish that any of the disagreeable elements relied upon the Union were continuously present in any degree.

#### Unavoidable Hazards

Unavoidable hazards are those which remain even though all safety precautions are observed and all safety devices are fully operative. Hazards are evaluated based upon the probable extent of injury and probability of injury. The Hospital has classified this factor as the Second Degree.

Apparently, the Union is concerned that there is a significant exposure to Aids (HIV), Hepatitis (HBV) or tuberculosis (TB) due to presence of needles or other sharp objects and contact with or blood and body fluids. Additionally, the Union raises a concern that there could be exposure to chicken pox and spinal meningitis. Based upon the frequency of exposure to these diseases, however, and the very remote possibility of contracting them, the Fifth Degree is clearly not applicable.

#### Summary

The Classification Committee met with not only the Employer's representative regarding the position, but also with Ms. Curning, a Patient Escort represented by the Union. The Committee also reviewed the job description of the position. It is not appropriate for the Union to raise issues which were never raised before the Committee.

The record demonstrates that the Committee takes a conservative approach and slots the position in the degree that it clearly fits, rather than the degree that it might fit. By doing this with all factors and all jobs, the Committee ensures parity with and equality among all positions.

The Union has failed to demonstrate, by tangible and convincing evidence, that the Hospital was unreasonable when it classified the Patient Escort position at a pay class 56. In fact, the Union has not met the threshold requirement of proving that there has been a significant alteration of duties as required by Article IV, Section 1, of the collective bargaining agreement. The grievance must be denied.

#### DISCUSSION:

The Hospital's Job Evaluation Committee agreed to evaluate the position of Patient Escort during the term of the parties'

1992-1994 collective bargaining agreement. Article IV, Section 1, recognizes that the Job Evaluation Committee has the right to make such evaluations during the term of the agreement. Article IV, Section 1, also recognizes that classifications not mutually agreed upon by the parties are subject to the grievance procedure.

When the Job Evaluation Committee evaluated the position of Patient Escort, it determined that the position should remain at pay class 56, the pay class contained in the parties' 1992-94 collective bargaining agreement. The Union disagreed with and grieved this determination. The issue to be determined herein, as stipulated by the parties, is whether the classification of pay class 56 is unreasonable.

Under the terms of Article IV, Section 1, the Job Evaluation Committee is to base its evaluation "on the systematic analysis used by the Hospital in the evaluation of such jobs." This section further provides that "one employee from the affected job title may participate in presenting the revised job description to the Job Evaluation Committee". The contract does not provide any other limitation upon the processes used by the Job Evaluation Committee.

The "systematic analysis" used by the Hospital in evaluating the position of Patient Escort was to apply the criteria of the Classification Tool, utilizing information contained in the SEIU Position Questionnaire, as well as information provided by an employe in the position to be evaluated and by a management employe from the department containing the position to be evaluated. Since this was the "systematic analysis" which was in effect at the time that the parties entered into the current collective bargaining agreement, the undersigned is persuaded that this is the "systematic analysis" which is required by Article IV, Section 1, of the agreement.

Doug Rentschler, the Employer's Compensation Manager, has been a member of the Job Evaluation Committee since 1988. According to Rentschler, in evaluating the position of Patient Escort, the Committee interpreted the Classification Tool in the same manner as in all of the previous evaluations. The record does not demonstrate otherwise.

The undersigned is satisfied that the process of the "systematic analysis" used by the Job Evaluation Committee in evaluating the position of Patient Escort conforms to the requirements of Article IV, Section 1 and, thus, was reasonable. Having reached this conclusion, the undersigned turns to the question of whether or not the Job Evaluation Committee acted reasonably in its assignment of degrees to the factors in dispute, i.e., Physical Requirements, Mental and

Visual Requirements, Equipment or Process, Material or Product, Safety of Others, Working Conditions, and Unavoidable Hazards.

### Physical Requirements

As set forth in the Classification Tool, this factor appraises the amount and continuity of physical effort required. This factor was assigned a Third Degree and the Union argues that it should be assigned a Fourth Degree. The Third Degree is defined by the Classification Tool as follows:

This degree includes duties requiring moderate physical effort for sustained periods in the manual handling of light and medium weights or the operation of equipment or tools.

It includes duties which require lifting, carrying, pushing, or hauling small parts in quantities without mechanical assistance or involve continuity of effort handling heavy material with assistance or mechanical devices which reduce the manual exertion required.

It includes short cycle work requiring energetic action without intervening time for rest, such as jobs in which the flow of work or paced productions require constant handling of a large volume of light weight parts.

It includes the preparation, and/or operation of machines handling of medium or heavy parts and tools when the exertion required offsets a long cycle machine operation; or the operation of several machines when the total handling time is equivalent to or exceeds the total machine time.

It includes continuity of effort in exerting substantial force or pressure in the use of hand tools or equipment, or in holding objects which are generally light in weight for extended periods.

The degree includes some muscular strain to hold equipment steady while completing exacting work or to work intermittently in an awkward position. The occasional exertion of considerable effort which would be involved in using heavy tools or in manually lifting heavy material may also be included. It includes



situations where continuous standing, walking, carrying are required with little chance for sitting.

The Fourth Degree is defined by the Classification Tool as follows:

This degree includes duties requiring considerable physical effort and vigorous exertion for a major part of the work time in the manual handling of medium or heavy weights, or the operation of equipment or tools. It also includes duties involving continuous strain from a difficult work position.

It includes the continuous manual handling of medium weight equipment or material. It also includes the regular manual handling of heavy material or the exertion of considerable force in the use of heavy materials and equipment when intervals of lighter effort or rest are provided during the work cycle.

It includes physical strain caused by a cramped or awkward work position which is required in order to perform the work and must be continued for long stretches without rest or relaxation.

The Classification Tool defines light weight as up to 15 pounds; medium weight as 16-40 pounds; and heavy weight as over 40 pounds.

The primary work activity of the Patient Escort is to push patients in wheel chairs, carts and beds. Frequently, but not always, the Patient Escort will also be pushing or pulling the patient's IV pole, oxygen tank, or similar life support equipment. The Patient Escort is generally standing or walking when performing this work.

While patient weight varies, it is obvious that, by transporting patients in a cart or wheel chair, the Patient Escort regularly moves heavy weights, as defined by the Classification Tool. However, as Compensation Manager Rentschler stated at hearing, these heavy weights are not moved manually, but rather, are moved with the assistance of wheels. The wheels provide mechanical assistance which reduces the manual exertion required and, thus, it was reasonable for the Job Evaluation Committee to consider this work to fall within the Third Degree.

To be sure, not all of the wheels on the IV and IMED poles work properly; there are inclines in some of the work areas; and much of the work area is carpeted, all of which cause the Patient Escort to use more physical effort than otherwise would be required. Additionally, the Patient Escort may be called upon to assist in lifting patients in and out of wheel chairs and to assist in transferring patients from beds onto carts. When performing such assists, the Patient Escort may be lifting over forty pounds. 1/ This work, however, does not involve the use of "considerable physical effort and vigorous exertion for a major part of the work time", as required by the Fourth Degree. Rather, at most, this work involves the "occasional exertion of considerable effort", and, as such, is recognized as falling within the Third Degree.

When assisting in patient lifts and transfers between carts and beds, the Patient Escort may stoop and/or reach. The Patient Escort may push a wheel chair or cart with one hand and push another piece of equipment with the other hand; maneuver in and out of elevators; and maneuver around obstructions in hallways. However, neither this work, nor any other work of the Patient Escort, involves "physical strain caused by a cramped or awkward position which is required to perform the work and must be continued for long stretches without rest or relaxation", as required by the Fourth Degree. Rather, this work involves, at most, intermittent work in an awkward position.

Comparing the duties of the Patient Escort with the requirements of the Third and Fourth degrees, the undersigned is satisfied that the Job Evaluation Committee acted reasonably when it assigned the Third Degree to the factor of Physical Requirements.

#### Mental and Visual Requirements

The Classification Tool provides as follows:

This factor appraises the requirements of the work for the application of mental and visual attention in terms of the duration and intensity of such application. It does not measure the degree of mental development or skill, but rather the extent of the mental and visual application or attention required.

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1/ It is true that the Patient Escort lifts medical equipment like oxygen tanks and heart monitors. It is not evident, however, that this equipment weighs over forty pounds.

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Consideration is given to both the intensity and duration of the mental aspect of this factor. The intensity of such application varies in different jobs depending upon the work requirements. For example, simple work with few variations becomes practically automatic through repetition requiring little thought, while complicated work may require mental concentration in solving complex problems or meeting changing situations. Similarly, consideration is given to the duration and continuity of alertness, attention, or thought required. The visual aspect of the factor varies chiefly with regard to the duration of elements on jobs requiring unusually close and exacting visual attention and the exercise of a high degree of manual dexterity in performing fine and delicate work.

This factor was assigned a Second Degree and the Union contends that it should be assigned a Third Degree.

The Second Degree is described as follows:

This degree covers duties which require frequent focusing of mental and visual attention or which require continuous visual attention with little mental application. It includes duties involving an intermittent flow of work, or relatively short work assignments with frequent intervals between assignments, or work in which the employee is intermittently required to perform service duties, issue or receive materials or tools. It also includes the operation of a machine or process which requires attention at the beginning and toward the end of the operation cycle, but during which there is a substantial waiting period requiring watchfulness only at intervals.

It includes simple tasks such as walking, cleaning, handling materials, using simple tools for rough work in which the visual requirements may be continuous but because of the simplicity of the work itself, little

mental application is required.

The Third Degree is described as follows:

This degree covers duties which requires constant alertness or continuous application of mental and visual attention.

It includes short cycle repetitive operations requiring continuous attention and the use of coordination to operate office machines and other equipment or to perform manual operations involving the use of various types of equipment.

It also includes longer cycle operations during which continuous mental and visual attention is required for the entire work cycle or constant alertness is necessary to take prompt action in the event of certain contingencies or to properly time and carry out the various steps in the operation sequence.

It includes duties requiring continuous mental and visual attention to check quality of work, both visually and through the use of various types of gauges and equipment or to perform various clerical activities such as posting, checking, and filing records.

It includes diversified work which requires continuous attention to carry out various tasks and may require a moderate amount of planning before performing the details of the work.

It includes work in which mental and visual concentration on complex operations or problems is occasionally required, but the majority of the duties require only continuous alertness or attention.

The Patient Escort logs trips, but does not maintain any other records. When transporting patients in carts, wheel chairs, and beds, the Patient Escort must be sufficiently alert to avoid objects in the hallway and to avoid bumping into walls and elevator doors. As Patient Escort Lynne Curning acknowledged at hearing, this duty is akin to driving a car. These duties, which involve the vast majority of the Patient Escort's work time, may

be reasonably described as requiring continuous visual attention, but little mental application.

Patients who have respirators and/or medical conditions which require constant monitoring by a health professional are not supposed to be transported without the assistance of a member of the nursing staff. When transporting such patients, it is the nursing staff who is responsible for monitoring the patients condition.

Prior to transporting a patient, the Patient Escort must ensure that wheel chair patients are secure in the wheel chair and that cart patients are strapped in. At times, nursing staff may ask a Patient Escort to watch out for and report certain behaviors or changes in condition and the Patient Escort must also be alert to signs of physical discomfort, such as choking or seizures. If a patient is confused or combative, the Patient Escort has to watch the patient to ensure that the patient does not undo the straps or pull out tubing. When transporting patients who are attached to oxygen tanks, heart monitors, and IMEDS, etc., Patient Escorts must be alert for equipment malfunctions, see that the equipment does not become unattached, and keep all lines free from entanglement. 2/ One may reasonably conclude that these types of duties do not require the "constant alertness or continuous application of mental and visual attention" which is the hallmark of the Third Degree, but rather, require "frequent focusing of mental and visual attention", which falls within the definition of the Second Degree.

Comparing the duties of the Patient Escort with the requirements of the Second and Third degrees, the undersigned is satisfied that the Job Evaluation Committee acted reasonably when it assigned the Second Degree to the factor of Mental and Visual Requirements.

#### Responsibility for Equipment or Process

The Classification Tool provides as follows:

This factor appraises the employee's responsibility to exercise care in preventing damage to the tools,

equipment, and processes through which his skill is applied to the things he does. The

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2/ While the Patient Escort may check the oxygen tank or IV bag to see if it needs to be changed before transporting, it is not clear that this is a Patient Escort, rather than a nursing function.

damage considered is restricted to the items worked with and does not include secondary losses. Secondary losses are those which might conceivably occur as a result of a chain of events that started from the error but which are virtually impossible to evaluate.

The factor evaluates the damage normally expected from a mishap occurring through failure to observe prescribed standards of care in the use of equipment or processes specified for the job. The cost of the labor and/or material and parts necessary to restore the items of damaged to working order is considered rather than complete replacement value, unless salvage or repair is impractical.

The factor does not include periodic maintenance or replacement costs resulting from ordinary wear or deterioration.

The Job Evaluation Committee assigned the Second Degree to this factor and the Union contends that it should be assigned the Third Degree. The Second Degree is applicable when the probable damage to equipment or process is seldom over \$140 and the Third Degree is seldom over \$4,000.

The primary equipment used by the Patient Escorts is carts, wheelchairs, and beds. This equipment is fairly indestructible and the types of accidents normally expected to occur, i.e., bumping into walls and elevator doors, do not generally result in any damage. Patient Escort Curning, who has performed patient transport duties for over nine years has been involved in only one incident in which she damaged any transporter equipment, i.e., she hit a door with a cart and tore off a rubber bumper. The most serious damage to equipment observed by Curning involved a Patient Escort who pulled up on a footboard and pulled off the veneer. There is no evidence that any Patient Escort caused any damage to a bed, wheel chair, or cart which exceeded \$140.

Patient Escorts do not use IV poles, IMEDs, PCA's, respirators, etc. to perform their job, but they do transport this equipment. It is not evident that any Patient Escort has ever damaged an IV pole, IMED, PCA's or any of the other medical equipment which is normally transported by the Patient Escort.

To be sure, it is possible for a Patient Escort to cause damage to equipment which would exceed \$140. The record, however, does not demonstrate that such damage is "normally expected from a

mishap occurring through the failure to observe prescribed standards of care in the use of the equipment or processes specified for the job". Accordingly, it was not unreasonable for the Job Evaluation Committee to assign the Second Degree to this factor.

Responsibility for Material or Product

The Classification Tool provides as follows:

This factor appraises the employee's responsibility to exercise care in preventing damage to items which are transported, handled, processed, assembled, inspected, tested, or maintained, in avoiding loss from clerical errors, or in care affecting patients' health or welfare. Secondary losses are not included in the estimate when prescribed quality control, shop practices, clerical procedures or regular practice would normally furnish adequate provision for detection or errors or prevention of damage. The monetary value assigned comprises the loss normally expected from an error, giving consideration to such items as the value of the typical material handled or worked on, the probable extent of the damage, the possibility of salvage and/or repair involved. The amount is based on the value of the purchased parts, material, and/or labor required to repair or replace a specific item or items to the point of damage, or to rectify clerical errors, omitting any additional indirect charges which may be assigned for costing purposes.

. . .

THIRD DEGREE (15): Probable loss due to damage or scrapping of material or product is seldom over \$ 500 or where patient may experience discomfort of a moderate degree.

. . .

FIFTH DEGREE (25): Probable loss of material which may be damaged or scrapped is very high, up to several thousand dollars, or where action may cause permanent damage such as crippling or death and may result in patient taking legal action.

In evaluating this factor, the Job Evaluation Committee identified the product as being the patient. The Job Evaluation Committee concluded that the failure of a Patient Escort to exercise care could result in a cart, wheelchair, or bed, being bumped into a wall, an elevator door, or some other object. The Job Evaluation Committee further concluded that it was not likely that such an error would cause the patient to experience anything more than discomfort of a moderate degree. Supervisor Maureen Gallup agrees that the most likely injury to occur to a patient while being transported by a Patient Escort is that the patient is jarred by having a wheel chair or cart bumped into a wall or elevator door.

The testimony of Patient Escort Lynne Curning demonstrates that the nursing unit generally advises the dispatcher of the type of transport needed, i.e., wheelchair, cart or bed. Additionally, Transport Services has developed and is instituting a series of codes, such as MNLU (Must Not Leave Unattended) or FPP (Fall Precaution Patient) to alert Patient Escort employees to the fact that a patient requires special precautions.

Patient Escort Jill Bemis recalls that, on one occasion, a sloppy transfer caused a central line to be pulled away from a patient's neck. Bemis further recalls that the patient became upset. Neither Bemis' testimony, nor any other record evidence, indicates that the patient experienced more than discomfort of a moderate degree.

In nearly ten years of employment in patient transport, Curning was involved in only one accident in which a patient was injured. This accident occurred when a nurse came around a corner and ran into the foot of a patient who was being transported by Curning. The patient was in a wheel chair and the foot had been elevated because it was being treated. Curning did not know what, if any, damage was suffered by the patient as a result of the collision.

The Fifth Degree being claimed by the Union involves action which may cause permanent damage such as crippling or death. According to Rentschler, the Job Evaluation Committee did not consider that such damage was the likely result of Patient Escort error. The record does not demonstrate otherwise.

When considering the monetary losses involving material or product which would be normally expected from Patient Escort error, the Job Evaluation Committee considered the equipment which was considered in Responsibility for Equipment or Process. Using the analysis that it had used in Responsibility for Equipment or



Process, the Job Evaluation Committee concluded that the probable loss due to damage or scrapping of material or product seldom would be over \$500. For the reasons discussed in Responsibility for Equipment or Process discussed above, it was not unreasonable for the Job Evaluation Committee to have reached such a conclusion. The Job Evaluation Committee acted reasonably when it assigned the Third Degree to the factor of Responsibility for Material or Product.

#### Responsibility for Safety of Others

The Classification Tool provides as follows:

This factor appraises the employee's responsibility for exercising care in the performance of his work to prevent physical injury to others. This responsibility is measured by the degree of care required and by the probable extent of injury to others as a direct result of inattention or carelessness on the part of the person performing the job, taking into account the nature of the work, the work position, the equipment and material used, the proximity of other employees, the extent to which they are protected by safety measures or may act to safeguard themselves, and the frequency of exposure and probability of injury. Consideration is given to the type of accident which may occur through such carelessness or inattention and the probable injury resulting therefrom. It is assumed that the other workers are observing the safety rules and that all safety devices for which the employee is not directly responsible are fully operative. The factor does not include possible injuries to others as a result of actions not directly connected with the performance of the job or contrary to general shop rules such as smoking in unauthorized areas, "horseplay," or running.

Any assigned responsibility for instructing others in the safety way to do the work is included in this factor. This factor does not include injury to the employee performing the job which is considered under Unavoidable Hazards.

. . .

SECOND DEGREE (10): This degree covers work which requires the exercise of reasonable care to prevent injuries to others. If they should occur, injuries would generally be minor in nature, such as cuts, abrasions, bruises, and minor burns or sprains.

. . .

FIFTH DEGREE (25): This degree covers work which involves considerable and direct responsibility for the lives of others and this responsibility depends entirely on the correct action of the employee performing the work. Inattention or carelessness in carrying out the duties may result in fatal injury to others with little opportunity for the other individuals to act to avoid injury.

As Rentschler stated at hearing, this category is not intended to give consideration to the patient because the patient's safety is addressed in Responsibility for Material or Product. In assessing this factor, the Job Evaluation Committee considered only the likelihood of injury to co-workers.

On its face, this portion of the Classification Tool would appear to also cover injury to visitors. However, given Rentschler's testimony that the Job Evaluation Committee evaluated the factors contained in the Classification Tool in the same manner as in previous evaluations, it must be concluded that this factor was not intended to assess injury to visitors.

In assessing this factor, the Job Evaluation Committee assumed that the employe was performing duties at a competent level and was taking safety measures to eliminate the frequency of exposure or probability of injury to others. According to Rentschler, the Job Evaluation Committee did not receive any information which indicated that any co-worker had received any injury which was more severe than cuts, abrasions, minor burns or sprains.

Supervisor Gaulrapp is not aware that any Patient Escort has run into anyone while transporting a patient. Gaulrapp acknowledges, however, that there is the opportunity to run over feet or pinch a finger. Neither Curning, nor Bemis, alleged that any Patient Escort had injured a co-worker during the performance of Patient Escort duties.

According to Rentschler, the Job Evaluation Committee did not believe that the Patient Escort would be likely to injure any co-

worker to the extent required by the Fifth Degree. The record does not establish that such a conclusion was unreasonable.

The record does not demonstrate that the Job Evaluation Committee acted unreasonably when it determined that the work of the Patient Escort requires the exercise of reasonable care to prevent physical injury to co-workers or determined that, if such injury should occur, the injury would generally be minor in nature, such as cuts, abrasions, bruises, and minor burns or sprains. The Job Evaluation Committee acted reasonably when it assigned the Second Degree to the factor of Responsibility for Safety of Others.

### Working Conditions

The Classification Tool provides as follows:

This factor appraises the physical conditions under which the work must be performed in terms of the relative amount and continuity of exposure to the unpleasant conditions ordinarily present in the work or work area and the extent to which this exposure makes the job disagreeable.

Consideration is given to the types of elements involved including atmospheric contaminants, temperature conditions, vibration, noise, and the substances with which the employee is in contact such as oil, grease, paint, chemicals, infectious disease, taking into account the effect of any protective equipment or clothing which the employee is required to wear. The intensity and duration of exposure to these elements, and whether they are present simultaneously or alternately, are included in the appraisal.

. . .

SECOND DEGREE (20): This degree covers work which is performed under usual shop conditions involving continuous exposure of the employee to various disagreeable elements in minor degree or intermittent exposure to such elements in moderate degree.

It includes work which involves continuous exposure to the elements typically associated with shop work such as usual shop noise and

vibration, detectable presence of atmospheric contaminants such as dust, fumes, and smoke, some soiling of hands and work clothes, heat in summer, and lack of uniformity in heating and ventilation in winter.

It includes work which involves intermittent exposure to various shop elements such as some oil on hands and forearms from operations, noise and vibration.

It includes intermittent exposure to harmful chemicals, radiation, infectious disease, steam or other conditions. It also includes infrequent or occasional exposure to one or more disagreeable elements in considerable degree.

It includes duties which require the employee to travel about or work in various parts of the hospital and thereby involve exposure to usual hospital working conditions, provided that the duties do not in themselves involve considerable exposure to one or more disagreeable elements. It also includes intermittent outdoor work with occasional exposure to inclement weather conditions.

It includes work in which some of the duties involve a more marked exposure to one or more disagreeable elements but other duties require little exposure to such elements, and the combination of conditions is equivalent to that defined above.

. . .

FOURTH DEGREE (40): This degree covers work which involves continuous exposure of the employee to one disagreeable element which is present in an extreme degree or to several such elements which are present in considerable degree.

It includes various types of work in which the employee is continuously exposed to several disagreeable elements such as the heat, fumes, and necessity of wearing heavy protective equipment.

Included is work where an employee may suffer physical damage as a result of patient care.

The Employer assigned the Second Degree to this factor and the Union claims that it should be assigned the Fourth Degree.

Occasionally, the Patient Escort must transport patients with infectious diseases. Normally, the Patient Escort is aware of this fact and follows the precautions which are posted by the nursing staff, e.g., the use of gowns, masks, goggles, gloves, etc. At times, however, Hospital staff is not aware that the patient is infectious and, thus, precautions are not used.

At times, when transporting patients, the Patient Escort will be exposed to mucous, vomit, urine, blood, and stool. At times, the Patient Escort finds uncapped needles, or other "sharps" on the cart or bed. In some cases, the vomit, urine, blood, stool and "sharps" can be a source of infectious disease.

The Patient Escort responsible for patient discharges is exposed to the vagaries of Wisconsin weather on a daily basis. While the other Patient Escorts may occasionally assist with discharges, the majority of their work time is spent in the controlled environment of the Hospital or 20 S. Park Street.

During the construction season, the Patient Escort is subject to the noise and vibration resulting from the construction. The Patient Escort may clean carts and wheel chairs several times a day, or once a week. When cleaning carts and wheel chairs, the Patient Escort is exposed to cleaning chemicals.

Rentschler denies that the Job Evaluation Committee was provided with any information to indicate that a Patient Escort has any continuous exposure to one disagreeable element which is present in an extreme degree or to several elements which is present in considerable degree, as required by the Fourth Degree. The record does not demonstrate otherwise.

The Job Evaluation Committee could reasonably conclude that the Patient Escort's exposure to noise and vibration, bodily fluids, cleaning fluids, and inclement weather involved intermittent exposure to unpleasant elements of a moderate degree and that the Patient Escort's exposure to infectious diseases involved occasional exposure of a disagreeable element in a considerable degree. The Job Evaluation Committee acted reasonably when it assigned the Second Degree to this factor.

#### Unavoidable Hazards

The Classification Tool provides as follows:

This factor appraises the unavoidable hazards to which the employee is subjected in the performance of his work. These hazards are evaluated in terms of the probable extent of injury resulting from accidents or from health hazards associated with the work or work area, taking into account the nature of the work, the work position, the equipment and material used, the hazards arising from the work being performed by other employees in the adjacent area, the extent to which the employee is protected, the frequency of exposure to the hazards, and the probability of injury. Consideration is given to the type of accident which may occur and to the health hazards which remain even though all safety precautions are observed by the employee and all safety devices are fully operative. The factor does not include possible injuries or health hazards resulting from actions not required in the performance of assigned work or contrary to general hospital rules, such as smoking in unauthorized area, "horseplay," or running.

. . .

SECOND DEGREE (10): This degree covers work which involves exposure to minor accident hazards and no more than negligible health hazards. Injuries resulting from accidents would generally be minor in nature such as cuts, abrasions, punctures, bruises, and minor burns or sprains.

. . .

FIFTH DEGREE (25): This degree covers work involving exposure to accident and/or health hazards which may result in permanent total disability or death.

The Employer assigned the Second Degree to this factor and the Union claims that it should be the Fifth Degree.

Patient Escort Bemis finds uncapped IV needles at least two times a week, but has never been stuck by a needle. Bemis maintains that she has frequent contact with urine due to incontinent patients and, on occasion, she has contact with

patient stool.

According to Patient Escort Curning, uncapped "sharps" are found occasionally and, when found, are reported to nursing staff for disposal. 3/ Curning did not claim to have been stuck by any "sharp". Curning claims to have frequent contact with sputum and, occasional exposure to stool, urine, blood and vomit. 4/ Since 1986, Curning estimates that she has made ten to thirteen transports involving HIV patients.

While performing Patient Escort duties, Curning has had pulled muscles, strains, and a shoulder injury which requires surgery. In 1985, Curning prepared three incident reports: one involved a possible muscle strain to the left foot; one involved a complaint of mild low back pain; and one involved a complaint of pulled muscle on left side of back under scapula. In 1991, while helping with a patient discharge, a member of the patient's family closed a door on Curning's hand. The incident report indicated that Curning had contusions to some of her fingers.

Supervisor Gaulrapp estimates that Patient Escort services is involved with two to three isolation cases per week. Gaulrapp recalls only one incident in which a Patient Escort was stuck with a needle, or any other "sharp", and is not aware of any other injury to Patient Escort personnel other than back injuries. 5/

The testimony of Ellen Brown, the Employer's Infection Control Practitioner, demonstrates that (1) unless blood is present, vomit, urine, stool, etc., are not considered to be potentially infectious with respect to either HIV or hepatitis, the two infectious diseases of most concern to health care workers; (2) saliva is not considered a bodily fluid for the purpose of universal precautions, except in the practice of dentistry; (3) the Hospital has not seen an increase in incidents of TB, that a non-nurse must have one hour of shared air space to be at risk for TB, and that most people have the ability to fight off TB; (4) the Center for Disease Control has calculated that

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- 3/ During the ten months preceding the hearing, there were two occasions when Curning found needles used to infuse IV's hanging in patient's rooms.
  - 4/ Curning estimates that during the ten month period preceding the hearing, she was exposed to vomit, urine, stool, or emesis three to five times. Since 1986, she had such exposures between ten and eighteen times.
  - 5/ With the exception of Curning's incident reports, the record fails to establish the extent of such back injuries.

there is a three one-hundredths of a per-cent risk of being stuck by a needle which has been used in the treatment of an HIV patient; (5) in the three years that she has worked at the Hospital, the Hospital has not had an HIV seroconversion; and (6) that if a Patient Escort with an open wound were exposed to Hepatitis B, the Patient Escort would have a six to ten per-cent chance of developing chronic hepatitis.

The SEIU Position Questionnaire presented to the Job Evaluation Committee indicates that there is a (1) possibility of back/shoulder injuries from pushing and pulling wheelchairs and carts and in assisting in patient transfers; (2) possibility of exposure to infectious materials inadvertently; (3) possibility of sprains/bruises due to wet floors, items on floor, and objects in path; and (4) exposure to detergents used in cleaning wheelchairs and carts.

The testimony of Curning and Bemis demonstrates that there are needles in the work place which may stick the Patient Escorts and that Patient Escorts may be exposed to patient blood, urine, stool, vomit, etc. However, the evidence fails to demonstrate that the probable result of the needle stick or exposure to body fluids would be either permanent, total disability or death.

As set forth in the Classification Tool, this factor assesses the "probable" extent of injury resulting from accidents or from health hazards associated with the work place. The Job Evaluation Committee did not act unreasonably when it determined that there was little probability that the unavoidable hazards of the Patient Escort workplace would cause either a permanent total disability or death, as required by the Fifth Degree.

In assessing this factor, the Job Evaluation Committee gave consideration to the probable extent, frequency of exposure, and probability of injury. It was reasonable for the Job Evaluation Committee to conclude that the work of the Patient Escort involves exposure to minor accident hazards and not more than negligible health hazards and that injuries resulting from accidents would generally be minor in nature, such as cuts, abrasions, punctures, bruises, and minor burns or sprains. The Job Evaluation Committee acted reasonably when it assigned a Second Degree to this factor.

#### Summary

For the reasons discussed above, the undersigned has concluded that the Employer's classification of the Patient Escort position at pay class 56 is reasonable. Accordingly, the grievance has been denied.

Pursuant to Article XXIV, Grievance and Complaint Procedure,



Section 3(B), "the fees and expenses for the arbitrator and the transcript of the arbitration hearing shall be borne by the party who loses the arbitration case. Each party shall bear the cost of its own witnesses, exhibits and counsel".

Based upon the above and foregoing, and the record as a whole, the undersigned issues the following

AWARD

1. The Employer's classification of the Patient Escort position as pay class 56 is reasonable.
2. The grievance is denied and dismissed.

Dated at Madison, Wisconsin this 25th day of May, 1993

By Coleen A. Burns /s/  
Coleen A. Burns, Arbitrator