## **LEGISLATIVE FACT SHEET**

| DATE:  | 11/                           | 19/25                        | BT or RC No:   | N/A                               |  |
|--|-------------------------------|------------------------------|--|-----------------------------------|--|
|  |                               |                              | (Administration & City Council Bills)  |                                   |  |
|  |                               |                              |  |                                   |  |
| SPONSOF  | R: JEA                        |                              |  |                                   |  |
|  |                               |                              | (Department/Division/Agency/Council Member)  |                                   |  |
|  |                               |                              |  |                                   |  |
| Contact for  | r all inquiries and           | d presentations:             | Chief Human Resources Offic  | er                                |  |
| Provide Na   | ame:                          |                              | Diane Moser  |                                   |  |
|  | Contact Numb                  | er: 904-874-710              | 1  |                                   |  |
|  | Email Address                 | mosedf@jea.                  | com  |                                   |  |
|  |                               | 11105041(40)1041.            |  |                                   |  |
|  |                               |                              | cessary? Provide; Who, What, When, Where, How and the Impard the Administration is responsible for all other legislation.  | ct.) Council Research             |  |
|  |                               |                              | ·  |                                   |  |
|  | ral of the 10/1/2025 - 9/30/2 | 028 CBA between JEA and      | the Professional Employees' Association (PEA).   |                                   |  |
| BACKGROUND:  | colloctivo borgaining unit re | oroganting generalizately 2  | 177 IFA professional amplement and supervisors in Golden such as assessing   | and The                           |  |
|  |                               |                              | 177 JEA professional employees and supervisors in fields such as accounting, e<br>25. The parties met extensively to negotiate a new agreement, and recently con   |                                   |  |
|  |                               |                              | JEA's Board of Directors approved the Agreement on November 18, 2025.  | ripicted the process. I LAS       |  |
| DISCUSSION:  |                               |                              | orms and electronic or subsequent tell transferous seasons (see declaration seasons) in the contract seasons and continues   |                                   |  |
| Wage terms:  |                               |                              |  |                                   |  |
| General Increase   |                               |                              |  |                                   |  |
| Fiscal Years 1-  |                               |                              |  |                                   |  |
| Performance Page   |                               |                              |  |                                   |  |
| Fiscal Years 1-  |                               | - 0.50/ budget affective O   | Ashard and Carolina and State of the Carolin | 12-1                              |  |
|  |                               |                              | ctober 1 each fiscal year or when administratively feasible. A performance-base  | ed increase and/or lump sum       |  |
| Range Minimum  | ing the methodology outling.  | O IN EXHIBIT C.              |  |                                   |  |
| Fiscal Years 1   |                               |                              |  |                                   |  |
| Range Maximum  |                               |                              |  |                                   |  |
| Fiscal Years 1   |                               |                              |  |                                   |  |
| Overtime Pay:  |                               |                              |  |                                   |  |
| <ul> <li>Unused compen</li> </ul>  | satory time (overtime) earn   | ed, but not used by the last | pay period, paid out each year. Although not in the Agreement, employees wil   | Il have the ability to roll funds |  |
| into a 457(b) Deferred Compensation Plan and/or into an HSA Account, subject to IRS limitation.  |                               |                              |  |                                   |  |
| Leave Usage:   |                               |                              |  |                                   |  |
| Scheduling of annual leave clarified reflecting actual practices.  |                               |                              |  |                                   |  |
| Holidays:  |                               |                              |  |                                   |  |
| Added shift workers required to work on a holiday and shift containing built-in-overtime will be paid at 2.5 times the straight time hourly rate for all built-in-overtime holiday hours worked. |                               |                              |  |                                   |  |
| Rights of Employees:   |                               |                              |  |                                   |  |
| Removal of dues deduction language as no longer permitted by State statute.  |                               |                              |  |                                   |  |
| PEA Representation   |                               |                              |  |                                   |  |
| Increased JEA's union pool time match from 120 hours to 250 hours.   |                               |                              |  |                                   |  |
| Alcohol and Controlled Substance Abuse Testing   |                               |                              |  |                                   |  |
| Article includes new definitions, previously agreed upon MOU language on self-reporting and clarified when testing will be required and process for random drug testing.                         |                               |                              |  |                                   |  |
| Grievance Procedure  |                               |                              |  |                                   |  |
| Clarified employee's ability to appeal termination during original probationary period.     Clarified gripuses process when timelinese is an incur-  |                               |                              |  |                                   |  |
| Clarified grievance process when timeliness is an issue.  Safety and Training.   |                               |                              |  |                                   |  |
| Safety and Trainin Included addition   |                               | to start of storm assignmen  | ts   |                                   |  |

| APPROPRIATION: Total Amo   | unt Appropriated: N/A                        | as follows:         |
|--|--|---------------------|
| List the source <u>name</u> and provi  | de Object and Subobject Numbers for each cat | egory listed below: |
| (Name of Fund as it will appear in title   | of legislation)                              |                     |
| Name of Federal Funding Source(s):   | From:  | Amount:             |
| The state of the s | То:  | Amount:             |
| Name of State Funding Source(s):   | From:  | Amount:             |
| trains of state funding source(s).   | То:  | Amount:             |
| Name of City of Jacksonville Funding   | From:  | Amount:             |
| Source(s):   | То:  | Amount:             |
|  |  |                     |
| Name of In-Kind Contribution(s):   | From:  | Amount:             |
| Traine of it talk of its budden(o).  | То:  | Amount:             |
| Name & Name of Bank & Association  | From:  | Amount:             |
| Name & Number of Bond Account(s):  | То:  | Amount:             |

## PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER:

| Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation costs.  (Minimum of 350 words - Maximum of 1 page.) |             |  |  |  |  |
|--|-------------|--|--|--|--|
|  |             |  |  |  |  |
| ACTION ITEMS: Purpose provisions for each.   | / Check Lis | et. If "Yes" please provide detail by attaching justification, and code  |  |  |  |
| ACTION ITEMS: Y  | res No      | Justification of Emergency: If yes, explanation must include detailed nature of emergency.   |  |  |  |
| Federal or State<br>Mandate?   | x           | Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.   |  |  |  |
| Fiscal Year Carryover?   | x           | Note: If yes, note must include explanation of all-year subfund carryover language.  |  |  |  |
| CIP Amendment?  Contract / Agreement Approval?   | x x         | Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.  Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted? |  |  |  |
| Related RC/BT? Waiver of Code?   | X<br>X      | Attachment: If yes, attach appropriate RC/BT form(s).  Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.  |  |  |  |
| Code Exception?  | X           | Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.  |  |  |  |
| Related Enacted Ordinances?  | x           | Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any changes necessary within white paper.  |  |  |  |
|  |             |  |  |  |  |

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ACTION ITEMS CONTINUED: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

| ACTION ITEMS:  | Yes     | No       |   |  |
|--|---------|----------|---|--|
| Continuation of Grant?   |         | х        | Explanation: How will the funds be used? Does the funding require a match? Is the funding for a specific time frame and/or multi-year? If multi-year, note year of grant? Are there long-term implications for the General Fund?              |  |
|  |         |          |   |  |
| Surplus Property<br>Certification?   |         | х        | Attachment: If yes, attach appropriate form(s).   |  |
| Reporting Requirements?  |         | х        | Explanation: List agencies (including City Council / Auditor) to receive reports and frequency of reports, including when reports are due. Provide Department (include contact name and telephone number) responsible for generating reports. |  |
|  |         |          |   |  |
|  |         | В        | USINESS IMPACT ESTIMATE   |  |
| Pursuant to Section 166. ordinances that are <u>NOT</u>  | 221 200 |          | he City is required to prepare a Business Impact Estimate for this requirement.   |  |
|  |         |          | vided below. Please check all exemption boxes that apply to this e, a Business Impact Estimate IS NOT required.   |  |
| The propose  | d ordin | ance is  | required for compliance with Federal or State law or regulation;  |  |
| The proposed ordinance relates to the issuance or refinancing of debt;   |         |          |   |  |
| The proposed ordinance relates to the adoption of budgets or budget amendments, including revenue sources necessary to fund the budget;  |         |          |   |  |
| The proposed ordinance is required to implement a contract or an agreement, including, but not limited to, any Federal, State, local, or private grant or other financial assistance accepted by the municipal government; |         |          |   |  |
| The proposed ordinance is an emergency ordinance;  |         |          |   |  |
| The ordinance relates to procurement;  |         |          |   |  |
| The proposed ordinance is enacted to implement <u>any</u> of the following:  |         |          |   |  |
|  | oment r | egulatio | lorida Statutes, relating to growth policy, county and municipal planning, and on, including zoning, development orders, development agreements and   |  |
|  |         |          | 90.046, Florida Statutes, regarding community development districts;<br>Statutes, relating to the Florida Building Code;  |  |

If none of the boxes above are checked, then a Business Impact Estimate <u>IS REQUIRED</u> to be prepared by the using agency/office/department and submitted in the MBRC filing packet along with the memorandum request, legislative fact sheet, etc. A Business Impact Estimate form can be found at:

d. Section 633.202, Florida Statutes, relating to the Florida Fire Prevention Code.

https://www.coj.net/departments/finance/budget/mayor-s-budget-review-committee

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| Division Chief: (signature)   | Date: _ | 11/19/28 |  |  |  |  |
|---|---------|----------|--|--|--|--|
| Prepared By: (signature)  | Date: _ | 11/19/25 |  |  |  |  |
| ADMINISTRATIVE TRANSMITTAL  |         |          |  |  |  |  |
| MBRC, c/o the Budget Office, St. James Suite 325                            |         |          |  |  |  |  |
| Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor |         |          |  |  |  |  |

Thru:

Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor

(Name, Job Title, Department)

Phone: 904-255-5000 E-mail: BNorris@coj.net

From: Diane Moser, Chief Human Resources Officer, JEA

Initiating Department Representative (Name, Job Title, Department)

Phone: 904-874-7101 E-mail: mosedf@jea.com

Kurt Wilson, Chief of Staff, JEA

(Name, Job Title, Department)

To:

Contact (Name, Job Title, Department)

Phone: 904-760-7679 E-mail: wilskrjea.com

CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor

Phone: 904-255-5000 E-mail: <u>BNorris@coj.net</u>

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## COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

| 10:   | Mary Staffopoulos, Office of General Counsel, St. James Suite 480           |                    |         |  |  |  |
|---|---|--------------------|---------|--|--|--|
|   | Phone:  | 904-255-5062       | E-mail: | mstaff@coj.net   |  |  |
| From:   | Vickie Cavey, Managing Director/CEO, JEA                                    |                    |         |  |  |  |
|   | Initiating Council Member / Independent Agency / Constitutional Officer     |                    |         |  |  |  |
|   | Phone:  | 904-832-2244       | E-mail: | cavevp@jea.com   |  |  |
| Primary   | Diane Moser, Chief Human Resources Officer, JEA                             |                    |         |  |  |  |
| Contact   | (Name, Job  | Title, Department) |         |  |  |  |
|   | Phone:  | 904-874-7101       | E-mail: | moserdf@jea.com  |  |  |
| CC:   | Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor |                    |         |  |  |  |
|   | Phone:  | 904-255-5000       | E-mail: | BNorris@coj.net  |  |  |
| Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.  Independent Agency Action Item:  Yes No |   |                    |         |  |  |  |
| E   | Boards Ac   | tion / Resolution? |         | Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled? |  |  |

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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