



PATIENT SAFETY & STAFFING DISCREPANCY REPORT

Unit _____ Shift _____ Date _____ Facility: JN ___ JS ___ Main ___ Other _____

Name _____ Job Classification _____

Work Phone _____ Cell Phone _____ Email _____

Incident Report Completed: YES ___ NO ___ Incident Report # _____

DID YOU CALL YOUR MANAGER? Y ___ N ___ AIC? Y ___ N ___ DON/CNO? Y ___ N ___

Name(s) of those who were called? _____

Current Staffing Condition:

RNs on Duty _____ Charge RN on Duty _____ LPNs on Duty _____

CNAs _____ # Sitters _____ # Clerk on duty _____ Others on duty _____

Your Ratio

Patient Censur

Concerns/Violations of Policy:

- In my professional judgment, this assignment is unsafe and puts patient(s) at risk; however, because I could be disciplined for refusal of unsafe assignment, I will perform the assigned work to the best of my ability
- This assignment violates the JHS nurse staffing ratios policy #414 and/or does not permit me to execute my care according to the standard of excellence promoted by Jackson Health System.
- Lack of training, orientation or experience in the area assigned
- Reduction in support staff, i.e. NAs, Clerks, Transport, EVs, RT, techs, other _____
- Lack of equipment/supplies causing inadequate or delayed patient care
- Patients were admitted/transferred without the provision of additional staff
- Inadequate nurse coverage during breaks or missed breaks. Missed: Break ___ Meal ___ OT ___
- Late administration of meds/procedure, delayed response to call lights or patient care
- Charge nurse is assigned patients. How many? _____
- High acuity patient(s)

Describe, in detail, the impact on patient(s) and staff. Include any other events that adversely affected patients and/or staff. Was there potential or actual negative patient outcome?

Take Action for Safe Staffing! Instructions:

1. Report the unsafe situation to your immediate supervisor when it is assigned. If not fixed, report the issue to your supervisors up the chain of command and **record who you spoke with on this form.**
2. Complete an Incident Report in Quantros and record number on form above.
3. Complete this form at beginning of shift or when unsafe assignment is made and fax to **SEIU at 305-620-1429.**



In your professional opinion, is your assignment unsafe?

Does your assignment violate Hospital Policy 414?

Are you personally unable to provide safe, quality patient care?

If you answered YES to any of the above, fill out a Patient Safety and Staffing Discrepancy Report on the reverse side and fax it to the Union office at 305-620-1429.

By filling out this form, you are protecting your license, showing nurse solidarity and most importantly, advocating for your patients!

Nursing Staffing Ratio Policy Number 414

UNITS	Ratio
Adult Medical, Surgical, Rehab, Pallative Care	1: up to 7
Pediatric Medical, Surgical	1: up to 5
Pediatric Unit Jackson North	1: up to 6
Adult & Pediatric Medical/Surgical Specialty Units (Medical Oncology & GYN/GYO)	1: up to 5
Transplant and Intermediate Care	1: up to 4
Acute & Emergency Mental Health	1: up to 9
Emergency Services	1: up to 5
Critical Care Units	1:2
Holtz Children Hospital Policy 107 Newborn Intermediate Care Unit	1:4
Holtz Children Hospital Policy 106 Newborn Intensive Care Unit	NEO A 1:2 NEO B 1:2-3 NEO C 1:2
Holtz Children Hospital Policy 103 PICU	1:1, 1:2, 1:3