



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? _____

Patient
Census

Your Ratio

Current Staffing Condition:

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

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

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?_____

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.**



Is your unit following the ratios established in the Local 1991 RN contract, Article XXXII (page 66)?

If you answered NO, 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 helping the union monitor compliance of the contract, showing nurse solidarity and most importantly, advocating for your patients!

Nursing Staffing Ratios

UNITS	Max Ratio
Adult Medical, Surgical, Rehab, Pallative Care	1: up to 6
Pediatric Medical, Surgical	1: up to 5
Telemetry Units	1: up to 5
Adult & Pediatric Medical/Surgical Specialty Units (Medical Oncology & GYN/GYO)	1: up to 5
Geriatric Psychiatric patients	1: up to 8
Acute & Emergency Mental Health	1: up to 9
Transplant and Intermediate Care	1: up to 3-4
Emergency Services (based on acuity)	1: up to 4-5
Critical Care Units	1: up to 2
Newborn Intermediate Care Unit	1: up to 4
Newborn Intensive Care Unit	NEO A 1: up to 2 NEO B 1: up to 2-3 NEO C 1: up to 2
*In blended units, staffing will be based on the acuity of the patient(s).	
For areas not listed above, ratios will continue to be set by national professional nursing organizations and external regulatory agencies. For instance, OR/Peri Op units governed by AORN (Association of Peri-Operative Registered Nurses). Labor & Delivery governed by AWHONN (Association of Women's Health, Obstetric and Neonatal).	