

Assignment Despite Objection

Instructions:

- Give a verbal protest about your assignment at the time you believe it is unsafe.
- Remain professional and courteous while interacting with your supervisor.
- If your supervisor does not adjust your assignment satisfactorily, complete this form as soon possible without interrupting patient care or your work.
- Fill out this form and take a picture with your phone. Give the form to your supervisor or manager. Then, send a copy to ado@seiu1000.org
- Alternatively, you can give a printed copy to your supervisor or manager, and then mail or fax a copy to Contract Department, SEIU Local 1000, 1808 14th St., Sacramento, CA. 95811 or fax to 916-554-1349.

IMPORTANT: Protect the confidentiality of your patients. Do not use their names or anything else that might identify them on this form.

Your name:					
Date:	Time of assignment and shift:				
Classification :	Cell phone:				
Facility and Unit:					
Supervisor or manager's work	email:				

To supervisor or manager:

As a patient advocate, in accordance with the California Nurse Practice Act and/or Vocational Nursing Practice Act, this is a written record of notification to you that today's assignment is unsafe and places my patient(s) at risk. As a result, the State is responsible for any adverse effects on patient care. Under protest, I will attempt to carry out the assignment to the best of my ability. In my professional opinion, this assignment is unsafe because (*Check all that apply*):

Asked to work as a consultant/educator and as a surveyor
Not given adequate PPE
Not trained or experienced in area assigned
Not given adequate staffing for acuity
Patient should be in a critical care or other appropriate unit
Unit staffed with untrained and/or unqualified personnel
Insufficient licensed personnel
Insufficient support staff
Given an assignment that posed a serious threat to my health or safety
Other

escribe briefly how assignment is unsafe:					