

### Define

IDENTIFY FACTS: DATE, TIME, WHO, WHAT, WHERE?

DEFINE CONCERNS: STANDARDS OF PRACTICE, HEALTH AND SAFETY, SAFE STAFFING, ETC.



### Communicate

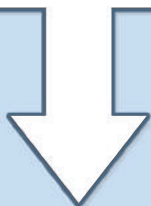
Effective communication with **Direct Supervisor** in an attempt to resolve the issue informally

NO

RESOLVED?

YES - END OF PROCESS

INFORM **LOCAL REPRESENTATIVE** OF ISSUES IDENTIFIED AND DISCUSSED WITH DIRECT SUPERVISOR



### Document

FILL **WORK SITUATION REPORTS** AS ISSUES OCCUR AND REOCCUR

**THREE COPIES** OF EACH WORK SITUATION REPORT FOR: YOURSELF, YOUR SUPERVISOR AND THE UNION REPRESENTATIVE AT THE PROFESSIONAL PRACTICE COMMITTEE