## **ONA LOCAL 80 ENVIROSCAN**

NURSE REP:	UNIT:	DATE:	

## PLEASE RETURN FORM BY MON, <u>OCT 7, 2022</u> TO: ROOM H214, SCAN OR FAX 9-416-480-6867 FROM INSIDE SUNNYBROOK OR 416-480-6868 FROM AN OUTSIDE FAX.

PROBLEMS	INFORMATION
1. Scheduling Concerns     - e.g. are schedules posted on time     - Are STAT and vacation requests being granted     - How many vacant positions (mat leaves, sick leaves, unfilled FT lines     - Are overtime shifts distributed correctly	PLEASE PROVIDE DETAILS (NAMES, DATES)
<ul> <li>2. Workload Issues</li> <li>- Have there been workload complaints in the past 3 months?</li> <li>- Is there a common cause?</li> <li>- Are there problems which nurses have not filled out Workload Complaints for?</li> </ul>	

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<ul> <li>3. Health and Safety</li> <li>- Have there been injuries?</li> <li>- Any equipment concerns?</li> <li>- Do you have staff on accommodated or modified work? Is it impacting other staff?</li> <li>- Any violence issues?</li> </ul>	
<ul> <li>4. Professional Issues</li> <li>- Availability of in-service, access for all staff</li> <li>- Unit nursing practice council – are issues being discussed?</li> </ul>	
<ul><li>5. Human Rights</li><li>- Harassment issues</li><li>- Interpersonal conflicts</li><li>- Bullying</li></ul>	
6. Miscellaneous     - Have you nursed patients in the hallway lately?     - Did you fill out a workload complaint?	

## IF ADDITIONAL SPACE IS REQUIRED, ATTACH EXTRA PAGES AS NEEDED