

The purpose of this form is to notify administration that in your professional opinion this assignment is unsafe. When you have been given an assignment that you believe is unsafe, you should immediately verbally notify your supervisor of your concerns, then complete this form, (during a break, or after your shift) but without interrupting your work or interfering with patient care. You should also file a formal incident report with your employer.

Please circle which job title best suites your position: Professionals Healthcare Other
Name of Supervisor Notified
Data
Date
Time Reported:AM:PM
Date Supervisor RespondedTime::
Hospital/FacilityUnit
Agency
I am concerned this assignment is unsafe because (Check all that apply):
Assignment poses threat to health/safety of Staff
Assignment poses threat to health/safety of Patient
☐ Patient/Individual/Inmate is confirmed COVID-19+
☐ Patient/Individual/Inmate is PUI/Symptomatic COVID
 Assignment requires direct care and contact within less than 6 feet
☐ Don't have adequate PPE (Gloves)
 Don't have adequate PPE (Masks – specify N-95, Surgical, PAPR)
☐ Don't have adequate PPE (Face shields)
☐ Don't have adequate PPE (Gowns)
 Don't have resources I need such as supplies (Cleaning, sanitizing)
$\ \square$ Assignment could be achieved through technology (Telecommuting, Video Conference)
 Assignment violates Social Distances protocols and procedures
☐ Not adequately trained for this assignment

Please provide a brief description of the event including your official job duties at the time of exposure. Please include the names/titles of any witnesses at the time of exposure. In order to protect patient/client confidentially, DO NOT use patient names(s) or identify patient(s) in any way:	:
Name and Civil Service title of PEF member completing form (Please print):	
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Keep a file copy and give a copy to your:

- 1. Immediate supervisor
- 2. Local PEF Council Leader and Field Representative/ or Regional office
- 3. Email to: POA@pef.org

Mail to: NYS Public Employees Federation Field Services/Organizing: PO Box 12414, 1168-70 Troy-Schenectady Road, Albany, NY 12212-2414

Fax to: 518-785-1814 • Phone to: 1-800-342-4306 x809

