When In Doubt, Just Fill It Out!

What Is An SRDF?
SRDF stands for Staffing Request Documentation Form. This form is a contractually agreed upon form between ONA and PPMC. Often this form is correctly used to report an unsafe staffing event. However, “Unsafe Staffing Form” is a misnomer because a SRDF is more than a report of unsafe staffing (more on this later). Unsafe staffing, most importantly, needs to be reported to the Oregon Health Authority (OHA), which you can report anonymously or confidentially. The form for filing an unsafe staffing complaint is found by following the route from the home page of the OHA: Public Health Division > Provider and Partner Resources > Health Care Facilities and Providers > Health Care Regulation and Quality Improvement > File a Complaint or Request.

Who Receives the SRDF?
First you, then your manager, then ONA and the PPMC’s Hospital Nurse Staffing Committee. If you know where to look, you can find all submitted SRDFs on the Hospital Nurse Staffing Committee (HNSC) SharePoint site. Here is the fastest way to find the HNSC SharePoint. Log in to your PPMC Microsoft account (you can do this by logging into your email). Click on the tic-tac-toe icon on left-upper corner. You’ll see a selection of Microsoft Teams apps appear. Click on the “SharePoint” app. In the search field, type “Staffing Committee.”

Among the results, you will see the PPMC staffing committee SharePoint site. Bookmark or star it. It will show on your frequently-used-sites toolbar on the left of the SharePoint main page. Once inside the HNSC SharePoint, look for the file titled “SRDFs.” From there it is organized by year and unit.

Browse around. Currently there are many documents from the old site that are hidden within the new SharePoint site. Your HNSC is aware and concerned about this and has identified this issue that needs to be resolved by PPMC administration.

Where Do I Go To Fill Out An SRDF?
NEW PROCESS ALERT:
• In a browser type: ONA SRDF. The link to SRDF start page shows up. It has a big blue box which, when you click on it, takes you to page 1 of the form.
• Put your work email in the email text box. Go through and answer each question as best as you can. There is about 4 pages that are very short (nothing like a datix). It has never been easier to fill out an SRDF. Give it a try. Just put “test” in any field so that ONA knows to throw it out.
• AFTER you submit your SRDF, you have one more step. Go to your Outlook inbox and you will see an email from ONA. This email has an attachment of the printable version of the SRDF you filled out. Forward that email to PPMCSRDFShared.Mailbox@providence.org. Alternately, you can type “SRDF” in the “To:” box and it will auto-populate with this email.
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**What Happens To My Submitted SRDF?**

Once the SRDF has been confirmed and verified, it will automatically be sent to the PPMCSRDFShared.Mailbox@providence.org inbox. A PPMC administrative assistant will forward it to the manager of the unit for which you filed the SRDF, they will post it in the appropriate folder for your unit on the committee’s SharePoint site. (Yes, this means you don’t need to print one out for your manager, your staffing committee co-chair, nor PNCC anymore.) Anyone can obtain access of any SRDF filed at PPMC. Also, if in doubt, you can get all the SRDFs from ONA that were filed for your unit. Call ONA using the phone number published in google and they will punch you through to the right people.

**What Is The When and Why Of Filling Out An SRDF?**

Unsafe, inadequate, and insufficient staffing is your responsibility to address as a nurse. Use an SRDF to document that you escalated your staffing concerns and needs to your charge nurse, manager, house supervisor, Director of Nursing and ultimately to the CNO (depending on which role you have). Use the HRO language when escalating your staffing needs. Sometimes, when we ask, we get what we need quickly, eventually, or not at all. You can appropriately document that you requested more staff, regardless of their arrival, using the SRDF.

Often, we find that when staff does arrive, it is after running short for a few or more hours. Nursing already had delayed completion of orders, turns, hallway ambulation, pain reassessments, hygiene, patient education, breaks and lunches. So, though staff DID arrive, it still felt like staffing was short for the remainder of the shift. So, document your request for staff by submitting a SRDF. If staffing felt better, or even if staff did arrive quickly, still document the request with the SRDF.

I have seen SRDFs written when, despite high acuity and being short staffed, a charge nurse felt compelled to admit or transfer in a patient. As nurses we already know the lived consequences of these decisions: how safely we practice the physical aspects of our work, taking all our breaks, and ultimately meeting the needs of the people in our care and the expectations of our license.

You can fill out an SRDF if you are the only one that has an inappropriate assignment on a particular shift, based on your nursing judgment. Also use this document when patient acuity is low enough that your nursing team determines that less nursing staff is needed than what the minimum staffing guidelines call for. It is documentation that shows that you escalated a staffing concern and it can be used in litigation.

In addition, ONA uses these forms to inform their legislative efforts to promote safe, nurse-driven staffing processes for all of Oregon. It is ideal to fill it out on the day that the staffing event occurred. However, there is no hard nor fast rule about this. You can fill it out six months down the road. When in doubt, just fill it out!

**Please note:** It is very normal for your manager to ask to meet with you to debrief a submitted SRDF while you are managing a patient care assignment. You can decline to be removed from your assignment and have a meeting scheduled. This is very normal too. These debriefs normally do not lead to disciplinary action, and they never should (that would be called retaliation).

Sometimes, however, especially if you are the only one submitting the SRDFs, it is easy for management to conclude that you have a practice issue. Because of this, if your manager asks you to debrief, it can be helpful to have a second pair of ears from your department sitting with you during the debrief. Safety is in the numbers.

Your unit stewards receive training to be your support person when meeting with your manager for any reason. This is your first line of support, and you can simply inform your manager that you are happy to debrief the SRDF, but that you want a union steward to be your second in the meeting. Your second-in-line resource at your disposal is your HNSC division representative. You can ask them to attend the debrief with you.

Some HNSC members have gone through the ONA stewards training, but some have not. The function of having HNSC members present during a debrief is for benefiting their knowledge of your department’s staffing processes so that they can better represent your department’s needs at the committee level. Some
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Show trends in staffing processes that need fixing or a total redoing.

Written by: Kristin Harman, 2R nursing.
Your HSNC co-chair

Hospital Nurse Staffing Committee Nominations

Our yearly election of half of our Staffing Committee is coming this month.

Your Hospital Nurse Staffing Committee (HNSC) is looking for candidates to run for the following eight openings for both primary and alternate seats.

Those currently holding these seats must resubmit an intent to serve form to continue on the committee.

- Position 1: Medical Division (4K, 4L, 5G, 5R)
- Position 3: Cardiology (2G, 2R, 5K)
- Position 5: Behavioral Health
- Position 7: Emergency
- Position 9: CNA

This meeting takes place on the fourth Monday of the month from 7 to 11 a.m. (0700-1100). We are half direct care nurses and half nurse managers.

In 2019, the Oregon Health Authority (OHA) audited our hospital's nurse staffing committee and plans. We are currently shoring up the deficiencies the OHA found at the committee level and compiling a report of hospital staffing for the CNO.

In the coming year, we will be preparing for the next round of OHA audits, addressing the concerns brought to our attention through SRDFs and word of mouth from departments across the hospital. What we have heard is that patients are thankful for our great care, though coming at great emotional and physical cost to some nurses working short, missing breaks, leaving late, and taking shortcuts.

Direct care representatives hear and listen to direct care nurses and what they need related to staffing, give input on agenda items, vote at meetings, and learn Oregon's Hospital Nurse Staffing Law.

Our ONA/PPMC contract specifies in Article 11 some more information on our hospital's nurse staffing. In addition, we have our own SharePoint site and charter. You will be paid for time spent doing staffing committee work.

Please fill out the intent to serve form if you want to be elected to serve on this committee. You can fill it out in Word or print and fill it out by hand and scan-email to Kristin.Harman@Providence.org. Alternately, you may fill it out on the ONA website here: www.oregonrn.org/PPMC-StaffingCommittee-Nom

The following positions are looking for off cycle appointments (no election needed) appointed by ONA executive committee:

Please fill out the intent to serve form attached and linked to above:

- Position 2: Surgical (primary & alternate)
- Position 6: Surgical Services (alternate)
- Position 7: Emergency (primary)
- Position 8: Maternity (primary)

Please reach out to Kristin or any nurse staffing representative if you have further questions and want to chat with us.

Kristin Harman RN, BSN, PCCN direct care nurse co-chair. (Kristin.Harman@Providence.org)
Bargaining Unit Leadership Conference, June 25

This year’s Bargaining Unit Leadership Conference will look at the concept of Bargaining for the Common Good (BCG), how it impacts bargaining in health care, how it impacts our communities we care for, and how ONA might utilize these concepts to further our commitment to diversity, equity and inclusion (DEI) in the future.

Bargaining for the Common Good is a return to the roots of unionism – the basic idea of advancing shared interests. We are not just nurses, we are community members, parents, users of public transportation, social justice advocates and renters too! Our employers are required by law to negotiate employment contracts with us, but that only addresses one part of our lives and largely ignores the community members we live with and care for.

Join us virtually for ONA’s 2021 Bargaining Unit Leadership Conference, Friday, June 25 to learn more about the BCG framework and how negotiations can achieve win-win results both for ONA members and our communities.

Continuing Education

Limited continuing nursing education contact hours will be available.

Oregon Nurses Association is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center’s Commission on Accreditation.

Registration is open through May 26. Visit www.oregonrn.org/event/2021BULC to register.

ONA Election Voting Closes May 10

Voting in the 2021 ONA Statewide Elections is open. This is an opportunity for every ONA member to have a voice in the future of nursing in Oregon.

This election features contested races for Vice-President, Directors, Cabinet on Health Policy, ANA delegates and more. Vote today and let your voice be heard.

The candidate slates are posted on the ONA elections webpage and you can read the candidate bios in the ONA Statewide Election Voter Guide. Get to know the candidates before you cast your ballot.

ONA is using Election-America as the service provider for our 2021 ONA Statewide Election. All members will receive an email or postcard from Elections-America with your verification information: an election code and voting PIN.

The election closes at 11:59 p.m. on May 10, 2021.

www.OregonRN.org/Elections