Nurses are patient advocates and have a duty to report unsafe conditions.

Instructions: You must first verbally protest your assignment to your supervisor when at any time you believe it is suboptimal or unsafe. This can be at any time during the shift. If your supervisor does not make a satisfactory adjustment to the assignment, then:

1. Complete all sections of this form.  2. Ask Supervisor to sign the form (regardless of outcome, continue).  3. Fax a copy to (240) 235-2019 or email photo of form to MWHCPPC@gmail.com.  4. Give a copy to your manager or place in their mailbox.

As a patient advocate, in accordance with the DC Nurse Practice Act, this is to confirm that I/we notified you that, in my/our professional judgment, today’s assignment is unsafe and places patients at risk. As a result, MedStar Washington Hospital Center is responsible for any adverse effects on patient care. I/We will, under protest, attempt to carry out the assignment to the best of my/our ability.

<table>
<thead>
<tr>
<th>Date: ____________</th>
<th>Time: ____________</th>
<th>Unit: ____________</th>
<th>Shift: ____________</th>
<th>Census: ____________</th>
</tr>
</thead>
</table>

# of RNs per staffing matrix: ______ Actual # of RNs provided: ______
# of PCTs per staffing matrix: ______ Actual # of PCTs provided: ______

Unit Clerk (please circle one)?

- yes
- no

Uninterrupted 30 minute meal break?

- yes
- no

Two 15 minute break periods?

- yes
- no

Brief statement of the situation:

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

SUPERVISOR’s Acknowledgement/Response: ___________________________ Date/Time ___________________________

If Supervisor declines to sign, note their name, the date and time: _____________________________________________

NURSE(S): Print names: ____________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

Please provide email address for follow up: ______________________________________________________________
The practice of registered nursing means the performance of acts requiring substantial specialized knowledge, judgment, and skill based upon the principles of the biological, physical, behavioral, and social sciences in the following:

- The observation, comprehensive assessment, evaluation and recording of physiological and behavioral signs and symptoms of health, disease, and injury, including the performance of examinations and testing and their evaluation for the purpose of identifying the needs of the client and family.
- The development of a comprehensive nursing plan that establishes nursing diagnoses, sets goals to meet identified healthcare needs, and prescribes and implements nursing interventions of a therapeutic, preventive, and restorative nature in response to an assessment of the client’s requirements.
- The performance of services, counseling, advocating, and education for the safety, comfort, personal hygiene, and protection of clients, the prevention of disease and injury, and the promotion of health in individuals, families, and communities, which may include psychotherapeutic intervention, referral, and consultation.
- The administration of medications and treatment as prescribed by a legally authorized healthcare professional licensed in the District of Columbia.
- The administration of nursing services including:
  - Delegating and assigning nursing interventions to implement the plan of care.
  - Providing an environment for the maintenance of safe and effective nursing care.
  - Evaluation responses and outcomes to interventions and the effectiveness of the plan of care.
  - Promoting a safe and therapeutic environment.

A registered nurse may provide nursing services, which are beyond the basic nursing preparation for a registered nurse, if the registered nurse has the appropriate education, knowledge, competency, and training to safely perform the services.

A registered nurse shall not accept or perform professional responsibilities which the nurse is not competent to perform.

A registered nurse shall report unsafe nursing practice by a nurse that he or she has reasonable cause to suspect has exposed or is likely to expose a client unnecessarily to risk of harm as a result of failing to provide client care that conforms to the minimum standards of acceptable and prevailing professional practice. The registered nurse shall report such conduct to the appropriate authority within the facility, or to the Board.

**DISTRICT OF COLUMBIA MUNICIPAL REGULATIONS 22-B2021 NURSING STAFF**

Each hospital shall provide a nursing staff that is adequate for the diagnostic facilities and services, therapeutic facilities and services, and rehabilitation facilities and services that the hospital undertakes to provide.

Supervisory and staff personnel shall be provided for each department of patient care unit to ensure the immediate availability of a professional nurse for bedside care of all patients at all times.

Qualified personnel shall be provided in sufficient numbers to provide nursing care not requiring the services of a licensed registered nurse.

All nursing personnel shall be qualified by education, experience, and demonstrated ability for the positions to which they are assigned.