

E-MAILED DEC 20 2022

UNIT: ER

SHIFT: 1900 - 0730



DATE: 13 Dec 22

Fax to: 714-970-5133



UNITED NURSES ASSOCIATION OF CALIFORNIA / UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION

STAFFING OBJECTIONS E-MAILED DEC 20 2022

Part I

Melissa Joy David, RN

Nurse/s Employed at: Saint Francis Medical Center

TIFFANY NGUYEN, RN

JESSICA ROSAS, RN

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

As a patient advocate, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to carry out the assignment to the best of my ability.

Part II

I am objecting to the above assignment on the grounds that:

- I was not trained or experienced in area assigned.
- I was not given adequate staff for acuity (short staffed).
- The unit was staffed with excessive registry.
- New Patients were transferred or admitted to unit without adequate staff.
- I was given an assignment which posed a potential threat to the health and safety of my patients.
- I was involuntarily forced to work beyond my scheduled hours.
- Increase acuity patients without adjustment to assignment.
- Inadequate support staff to allow safe quality care.

- LVN coverage causing OOR.
- Functioning in multiple assignments/areas (i.e., Charge and Monitor Tech., Charge and Break relief)
- Breaker flexed prior to providing break and meal relief to all staff
- No breaker
- OOR (# of pts per nurse) in Team Care
- MICN with other Assignment (Trauma / Break relief)
- Other (please specify) performing in two functions greet/bring
- Short staffed

Part III

#Beds/Pt's: _____ Census of Unit: _____ Acuity: High Average Low Clerk: Yes No

Part IV

	Shift
	Regular/Float Casual
RN	
LVN	
Aide	
Registry	

Staffing

No Charge Nurse

Part V

ACTION: Notified supervisor/other Elizabeth Catalan 14 Dec 2022
Supervisor response _____

Part VI

Comments / Additional Information: _____
Fax to Sandi Marques @714-970-5133 or submit to a SFRNA Officer or Representative

Reho / MICU (FAX)

UNIT: ER
SHIFT: 11-7A



DATE: 12/17/2022
Fax to: 714-970-5133

UNITED NURSES ASSOCIATION OF CALIFORNIA / UNION OF HEALTH CARE PROFESSIONALS ST. FRANCIS REGISTERED NURSES ASSOCIATION

STAFFING OBJECTIONS

E-MAILED DEC 22 2022



Part I

Haror Rua (CNS)

Nurse/s Employed at: **Saint Francis Medical Center**

Donna Ericson RN

ROSALIE V. ORTEGA RN

Jessica Rivas RN

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

Nichelle Cabrera

As a patient advocate, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to carry out the assignment to the best of my ability.

Part II

I am objecting to the above assignment on the grounds that:

- I was not trained or experienced in area assigned.
- I was not given adequate staff for acuity (short staffed).
- The unit was staffed with excessive registry.
- New Patients were transferred or admitted to unit without adequate staff.
- I was given an assignment which posed a potential threat to the health and safety of my patients.
- I was involuntarily forced to work beyond my scheduled hours.
- Increase acuity patients without adjustment to assignment.
- Inadequate support staff to allow safe quality care.

- LVN coverage causing OOR.
- Functioning in multiple assignments/areas (i.e. Charge and Monitor Tech.; Charge and Break relief)
- Breaker flexed prior to providing break and meal relief to all staff
- No breaker
- OOR (# of pts per nurse) 2500 = 2 of 75 Tbl
- MICN with other Assignment (Trauma / Break relief)
- Other (please specify) Assigned turnover under 1hr to MAN ARA & A-RISC AND CONTINUED TO HAVE PATIENTS IN ARA

Part III

#Beds/PL's: _____ Census of Unit: _____ Acuity: High Average Low Clerks: Yes No

Part IV

	Shift	
	Regular	Float/Casual
RN		
LVN		
Aide		
Registry		

Staffing

No Charge Nurse

Part V

ACTION: Notified supervisor/other: ELIZABETH CARTMAN, Manager 12/17/2022

Supervisor response: _____ DATE/TIME: _____

Part VI

Comments / Additional information: _____



UNIT: ER

SHIFT: 1900 - 730

DATE: 18 DEC 2022

Fax to: 714-970-5133

UNITED NURSES ASSOCIATION OF CALIFORNIA/ UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION

STAFFING OBJECTIONS

E-MAILED DEC 22 2022



Part I

Melissa Joy Dana, RN

Nurse/s Employed at: Saint Francis Medical Center

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

As a patient advocate, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to carry out the assignment to the best of my ability.

Part II

I am objecting to the above assignment on the grounds that:

- I was not trained or experienced in area assigned.
- I was not given adequate staff for acuity (short staffed).
- The unit was staffed with excessive registry.
- New Patients were transferred or admitted to unit without adequate staff.
- I was given an assignment which posed a potential threat to the health and safety of my patients.
- I was involuntarily forced to work beyond my scheduled hours.
- Increase acuity patients without adjustment to assignment.
- Inadequate support staff to allow safe quality care.

- LVN coverage causing DOR.
- Functioning in multiple assignments/areas (i.e. Charge and Monitor Tech.; Charge and Break relief)
- Breaker flexed prior to providing break and meal relief to all staff
- No breaker
- OOR (# of pts per nurse) _____
- MICN with other Assignment (Trauma / Break relief)
- Other (please specify) working in two roles as
greet and triage, helping in
Team care

Part III

#Beds/Pt's: _____ Census of Unit: _____ Acuity: High Average Low Clerk: Yes No

Part IV

Shift	
	Regular/Float Casual
RN	
LVN	
Aida	
Registry	

Staffing

No Charge Nurse

Part V

ACTION: Notified supervisor/other Elizabeth Catalan
Supervisor response _____

18 DEC 2022

Part VI

Comments / Additional information:

R2KW Main TC

(FAX)

UNIT: ER
SHIFT: Nights



DATE: 12/18/22

Fax to: 714-970-5133

UNITED NURSES ASSOCIATION OF CALIFORNIA / UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION



STAFFING OBJECTIONS

E-MAILED DEC 22 2022

Part I

Nurse/s Employed at: Saint Francis Medical Center
Jonathan Fuentes
RN

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

As a patient advocate, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to carry out the assignment to the best of my ability.

Part II

I am objecting to the above assignment on the grounds that:

- I was not trained or experienced in area assigned.
- I was not given adequate staff for acuity (short staffed).
- The unit was staffed with excessive registry.
- New Patients were transferred or admitted to unit without adequate staff.
- I was given an assignment which posed a potential threat to the health and safety of my patients.
- I was involuntarily forced to work beyond my scheduled hours.
- Increase acuity patients without adjustment to assignment.
- Inadequate support staff to allow safe quality care.

LVN coverage causing OOR.

Functioning in multiple assignments/areas (i.e., Charge and Monitor Tech., Charge and Break relief)

Breaker flexed prior to providing break and meal relief to all staff

No breaker

OOR (# of pts per nurse) 6 tele admits + 80 walk-ins

MICN with other Assignment (Trauma / Break relief)

Other (please specify) 1 RN in TC

Part III

#Beds/Pt's: _____ Census of Unit 95+

Acuity: High Average Low Clerk: Yes No

Part IV

Shift	
	Regular/Float Casual
RN	
LVN	
Aide	
Registry	

Staffing

No Charge Nurse

Part V

ACTION: Notified supervisor/other Elizabeth Catalan/Manager 12/18/22

Supervisor response _____

Part VI

Comments / Additional Information: _____

①

micn

NIT: ER
HIFT: 1900-0730



DATE: 12/18/22
Fax to: 714-970-5133

UNITED NURSES ASSOCIATION OF CALIFORNIA / UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION E-MAILED DEC 22 2022

STAFFING OBJECTIONS

Part I

Jenny Choi Nurse/s Employed at: Saint Francis Medical Center

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

I, the undersigned, do hereby certify that I am a registered nurse, and that I am protesting this assignment because it is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to complete the assignment to the best of my ability.

Part II

Objecting to the above assignment on the grounds that:
I am not trained or experienced in area assigned.
No adequate staff for acuity (short staffed).
Unit was staffed with excessive registry.
Patients were transferred or admitted to unit without adequate staff.
I was given an assignment which posed a potential threat to health and safety of my patients.
I was involuntarily forced to work beyond my scheduled hours.
I care for acuity patients without adjustment to assignment.
I do not have adequate support staff to allow safe quality care.

- LVN coverage causing OOR.
- Functioning in multiple assignments/areas (i.e., Charge and Monitor Tech; Charge and Break relief)
- Breaker flexed prior to providing break and meal relief to all staff
- No breaker
- OOR (#of pts per nurse) _____
- MICN with other Assignment (Trauma / Break relief) **MICN Assigned**
- Other (please specify)
holding multiple ICU pts - high acuity

Part III

Census of Unit _____ Acuity: High Average Low Clerk: Yes No

Part IV

Shift	
Regular	Floater/Casual

Staffing
 No Charge Nurse

Part V

Advisor/other _____
Name/Title _____ Date/TIME _____
Response _____

Part VI

Additional Information:

MICN

NIT: ER

HIFT: 1900-0730



DATE: 12/18/22

Fax to: 714-970-5133

UNITED NURSES ASSOCIATION OF CALIFORNIA/ UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION

E-MAILED DEC 22 2022



STAFFING OBJECTIONS

Part I

Infirmare Towers Nurse/s Employed at: Saint Francis Medical Center

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

I, [Name], a registered nurse, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to refuse the assignment to the best of my ability.

Part II

Objecting to the above assignment on the grounds that:

I am not trained or experienced in area assigned.

LVN coverage causing OOR.

I am not given adequate staff for acuity (short staffed).

Functioning in multiple assignments/areas (i.e., Charge and Monitor Tech.; Charge and Break relief)

Unit was staffed with excessive registry.

Breaker flexed prior to providing break and meal relief to all staff

Patients were transferred or admitted to unit without adequate staff.

No breaker

I was given an assignment which posed a potential threat to health and safety of my patients.

OOR (# of pts per nurse)

I was involuntarily forced to work beyond my scheduled hours.

MICN with other Assignment (Trauma / Break relief) *MICN Assigned*

I was asked to care for acuity patients without adjustment to assignment.

Other (please specify)

I was not given adequate support staff to allow safe quality care.

holding multiple ICU pts
high Acuity

Part III

Unit: _____ Census of Unit _____

Acuity: High Average Low Clerk: Yes No

Part IV

Shift

Staffing

Regular/Float Casual

No Charge Nurse

N	
ia	
istry	

Part V

Supervisor/other: _____

Response: _____ DATE/TIME: _____

Part VI

Additional Information: _____

UNIT: ER
SHIFT: 7P-7A



DATE: 12/18/22
Fax to: 714-970-5133

UNITED NURSES ASSOCIATION OF CALIFORNIA / UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION



STAFFING OBJECTIONS

E-MAILED DEC 22 2022

Part I

ROSALIE V. ORTEGA

Nurse/s Employed at: Saint Francis Medical Center

AD

RN

RN

RN

RN

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

As a patient advocate, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to carry out the assignment to the best of my ability.

Part II

I am objecting to the above assignment on the grounds that:

I was not trained or experienced in area assigned.

I was not given adequate staff for acuity (short staffed).

The unit was staffed with excessive registry.

New Patients were transferred or admitted to unit without adequate staff.

I was given an assignment which posed a potential threat to the health and safety of my patients.

I was involuntarily forced to work beyond my scheduled hours.

Increase acuity patients without adjustment to assignment.

Inadequate support staff to allow safe quality care.

LVN coverage causing OOR.

Functioning in multiple assignments/areas (i.e., Charge and Monitor Tech.; Charge and Break relief)

Breaker flexed prior to providing break and meal relief to all staff

No breaker

OOR (# of pts per nurse)

MICN with other Assignment (Trauma / Break relief)

Other (please specify) High Acuity pts, 3 SCD

calls with no support staff,

6 nurses & LVN

High Resistance to close to ED pay despite high acuity pts and nurses are out of ratio

Part III

#Beds/Pt's: _____ Census of Unit _____

Acuity: High Average Low Clerk: Yes No

Part IV

Shift	Regular/Float Casual	
	Regular	Float Casual
RN		
LVN		
Aide		
Registry		

Staffing

No Charge Nurse

CLOSING TO ACS
RUNS NEED TO BE ADDRESSED

BY ADMINISTRATION ->
WE ARE A LOT OF RESISTANCE
WHEN CLOSURE IS NEEDED
12/18/22 0900

ACTION:

Notified supervisor/other: Elizabeth Catalan RN

Supervisor response: _____

Part VI

Comments / Additional Information: _____

MICN

NIT: ER
HIFT: 1900-0730



DATE: 12/18/22

Fax to: **714-970-5133**

UNITED NURSES ASSOCIATION OF CALIFORNIA/ UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION



STAFFING OBJECTIONS

E-MAILED DEC 22 2022

Part I

TIFFANY NGUEN

Nurse/s Employed at: **Saint Francis Medical Center**

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

I, the undersigned, as a patient advocate, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to complete the assignment to the best of my ability.

Part II

Objecting to the above assignment on the grounds that:

I am not trained or experienced in area assigned.

I have not been given adequate staff for acuity (short staffed).

The unit was staffed with excessive registry.

Patients were transferred or admitted to unit without adequate staff.

I was given an assignment which posed a potential threat to my health and safety of my patients.

I was involuntarily forced to work beyond my scheduled hours.

I was assigned acute acuity patients without adjustment to assignment.

I was unable to obtain adequate support staff to allow safe quality care.

LVN coverage causing OOR.

Functioning in multiple assignments/areas (i.e., Charge and Monitor Tech.; Charge and Break relief)

Breaker flexed prior to providing break and meal relief to all staff

No breaker

OOR (# of pts per nurse) _____

MICN with other assignment (Trauma / Break relief)

Other (please specify) _____

holding multiple ICU pts. high acuity

SA MICN assigned

Part III

Census of Unit _____

Acuity: High Average Low Clerk: Yes No

Part IV

Shift

Regular/Float/Casual

Staffing

No Charge Nurse

Part V

Supervisor/other: ELIZABETH CATALAN

12/19/22

Response

Part VI

OOR/MICN

NIT: ER
HIFT: 1900-0730



DATE: 12/18/22

Fax to: 714-970-5133

UNITED NURSES ASSOCIATION OF CALIFORNIA / UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION



STAFFING OBJECTIONS

E-MAILED DEC 22 2022

Part I

Elene Magafas
RN

Nurse/s Employed at: Saint Francis Medical Center

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

I, the undersigned, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to complete the assignment to the best of my ability.

Part II

Objecting to the above assignment on the grounds that:

Not trained or experienced in area assigned.

LVN coverage causing OOR.

Not given adequate staff for acuity (short staffed).

Functioning in multiple assignments/areas (i.e., Charge and Monitor Tech; Charge and Break relief)

Unit was staffed with excessive registry.

Breaker flexed prior to providing break and meal relief to all staff

Patients were transferred or admitted to unit without adequate staff.

No breaker

Given an assignment which posed a potential threat to the health and safety of my patients.

OOR (#of pts per nurse)

Involuntarily forced to work beyond my scheduled hours.

MICN with other Assignment (Trauma / Break relief)

No acuity patients without adjustment to assignment.

Other (please specify)

Inadequate support staff to allow safe quality care.

holding multiple ICU pts - high acuity

worked 2 six nurses + charge

MICN Assigned

Part III

Shift: _____ Census of Unit _____

Acuity: High Average Low Clerk: Yes No

Part IV

Shift

Staffing

Regular/Float/Casual

No Charge Nurse

Signature

Part V

Supervisor/other

E. Carlan, RN

12/18/2022

Signature

Date

Response

Part VI

Additional Information:

MICN

NIT: FR

HIFT: 1900-0730



DATE: 12/18/22

Fax to: 714-970-5133

UNITED NURSES ASSOCIATION OF CALIFORNIA / UNION OF HEALTH CARE PROFESSIONALS
ST. FRANCIS REGISTERED NURSES ASSOCIATION

E-MAILED DEC 22 2022



STAFFING OBJECTIONS

Part I

Jenny Choi

Nurse/s Employed at: Saint Francis Medical Center

RN

RN

RN

RN

hereby protest my assignment as: Primary Nurse Charge Nurse LVN Coverage RN

As a patient advocate, in accordance with the California Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places my patients at risk. As a result, the facility is responsible for any adverse effects on patient care. I will under protest, attempt to complete the assignment to the best of my ability.

Part II

Objecting to the above assignment on the grounds that:

I am not trained or experienced in area assigned.

LVN coverage causing OOR.

Not given adequate staff for acuity (short staffed).

Functioning in multiple assignments/areas (i.e. Charge and Monitor Tech; Charge and Break relief)

Unit was staffed with excessive registry.

Breaker flexed prior to providing break and meal relief to all staff

Patients were transferred or admitted to unit without adequate staff.

No breaker

Given an assignment which posed a potential threat to health and safety of my patients.

OOR (# of pts per nurse)

Involuntarily forced to work beyond my scheduled hours.

MICN with other Assignment (Trauma / Break relief) **SO MICN Assigned**

Assigning acuity patients without adjustment to assignment.

Other (please specify)

Inadequate support staff to allow safe quality care.

holding multiple ICU pts. high Acuity

Part III

Unit's: _____ Census of Unit _____

Acuity: High Average Low Clerk: Yes No

Part IV

Shift

Staffing

Regular/Float Casual

No Charge Nurse

Part V

Supervisor/other: _____ NAME/TITLE _____ DATE/TIME _____

Response: _____

Part VI

Additional information: _____