

WORKLOAD INCIDENT REPORT

Year / Item # _____

Overworked and Understaffed - The Public and Elderly Deserve Better

Has your workload increased but staffing level remain the same, is your Employer not replacing absent staff or replacing absent staff for part of the hours, are you expected to work faster or you're not taking your break time?

PLEASE FILE A WORKLOAD INCIDENT REPORT

Facility / Site: _____

Date: _____

Name: _____

Phone number: _____

STEP 1

Describe the workload problem and how it is affecting your health and safety, and quality care:

How can the workload problem be resolved?

STEP 2

Forward a copy to Health and Safety Steward

over



HOSPITAL EMPLOYEES' UNION

5000 North Fraser Way BURNABY, B.C. V5J 5M3

www.heu.org

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continued

STEP 3

For Supervisor respond by _____

Signature: _____

STEP 4

For Management / Employer respond by _____

Signature: _____

STEP 5

Occupational Health and Safety Committee for review

Signature: _____

Cc: Local
Servicing Representative
PE OH&S subcommittee



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