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#### Step 5:

You are now presented with two (2) items.

- 1. the fillable Word version of the ONA PRWL Form 8 if a paperversion is being submitted.
- 2. the link to the new submission portal for the ONA PRWL Form 8.
- 3. So now what?
  - a. It is preferred that members complete the form electronically. As soon as you click "submit" all required individuals, including the writer, will receive an automated email confirming submissions.

SharePoint	Search this library
SHN Scarborough Health Network Departments & Programs Corporate Initiatives 🗸 Employe	ee Centre 🗸 🛛 For Physicians 🗸 Forms & Resources 🗸
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Documents > ONA PRWL Form and Process Guiding Documents	
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SONA PRWL Electronic Submission Portal.url	A few seconds ago
ONA Professional Responsibility Workload Fillable Form Sept 2022.docx	November 9, 2022

### What You See When You Open the Link:

Once you click the "Electronic-Automated Submission" link, Alchemer will launch and writer is met with Welcome Screen shown here. You will need to add your name as the Writer.

**NOTE:** If there is more than one (1) writer of the PRWL Form, please ensure you choose "yes"; a drop-down field will appear, so can enter their names and email addresses.

Enter the name and @shn.ca email address of your Unit Manager.

ONA/Hospital Professional Responsibility Workload Report Form
ONA/Hospital Professional Responsibility Workload Report Form Article 8 - Professional Responsibility provides a problem solving process for nurses to address concerns relative to patient care. This form is intended to appropriately identify employee concerns relative to
their workload saves in the context of their protession an responsibility. These issues include octate not imited to gaps in continuity of care, balance of sain mix, access to contingency sain and appropriate number of nursing staff. This report form provides a tool for documentation to facilitate discussion and to promote a problem solving approach.
**For our reference, we have provided inpatient magner names and email addresses. Please ensure that you are entering this information correctly - this list is correct as of Jan 2024*
First Name  Last Name    Vour @shn.ce email address
Name of Unit Manager:
Please ner the (jshn.ca email address of the Unit Vanager. We have provided a reference list below.



Step 6: Complete all fields. A list of Managers is provided and will be continually updated as required.	Image      Image <th< th=""></th<>

Step 7: Once you have completed all fields, will be asked to sign the form (as you would for a paper version) and then click "Submit".

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#### Submission Complete! You will see the "Successful Submission" screen.

Step 8:

You will then see this screen. Your submission was successful. A list of all stakeholders is here to show you who receives your submission.



ONA/Hospital Professional Responsibility Workload Report Form

#### Successful Submission

- Thank you for filling out this ONA Workload Pro
- A copy of this Professional Responsibility Workload form will be automatically sent to the follo ng upon sub
- 1. ONA Member who submitted the form (provided email address was entered correctly) 2. Unit Manager (provided email address was entered correctly)
- 3. ONA Rep
  4. Chief Nursing Executive
  5. Director Professional Practice
  6. ONA LRO

ONA PRWL Form – Electronic Submission How-To Guide Created in collaboration with ONA and SHN Professional Practice Updated Jan 22 2024 | Created: Sept 20 2022 Page | 3 of 4



#### Next Steps:

Please check your email for a copy of your submission; it will contain:

• PDF of the content you entered into Alchemer. You will also see the other recipients.

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File Message H	elp Acrobat 🖓 Tell me what you	want to do	
ignore X □ Delete Archive	Reply Reply Forward In More *	Image: For PAC    Image	
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ONA Workload Professional Responsibility Form.pdf 43 KB			
This Message is From an External Sender        Do not click on links or open attachments you do not trust			

Who receives what I just submitted? This process remains the same:

- You, the Writer
- Any additional Writers (if you added them, and provided their email addresses were correctly entered)
- Your Unit Manager provided the @shn.ca email address was correctly entered
- ONA Local 111 Office <u>ONA111SHN\_Workload@ona.org</u>
- Professional Practice Office professionalpractice@shn.ca
- Chief Nursing Executive via Professional Practice email address