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PRC Final Report and Chronology of Events

This report is completed by the PRC Co-Chairs for unresolved PR issues being advanced to:

* the Union for SRC consideration and/or
* transfer from the local PRC to the NRC

**Worksite:**

Click here to enter text.

**Unit:** Choose an item.

**PR form author(s):** 

Click here to enter text.

**Date of incident:** Click here to enter a date.

**Date nurse reported incident to manager:** Click here to enter a date.

**Date of conversation with manager:** Click here to enter a date.

**Date written report received by nurse(s):** Click here to enter a date.

**Date of PR committee meeting:** Click here to enter a date.

**Present for the NBA at PR Committee meeting:**

Click here to enter text.

**Present for Employer at PR Committee meeting:**

Click here to enter text.

**Summary of Issue(s):**

Click here to enter text.

**List of mutually agreed upon actions to be taken (must include timelines and the individual responsible for each action):**

Click here to enter text.

**List which actions have been completed, which have not been completed within the agreed timelines and which issues or concerns cannot be resolved:**

Click here to enter text.

**Explain why resolution was not possible at the local PRC:**

Click here to enter text.

**Date minutes, final report and author(s)’ final recommendations reviewed with PR form author(s):**

Click here to enter a date.

**Final recommendations of the PR form author(s):**

Click here to enter text.

## PR Issues to be advanced to the Union

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Union PRC Co-Chair Employer PRC Co-Chair

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| PR Representative or Steward Contact Information |
| Name: |
| P. |
| C. |
| Email. |

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| --- | --- |
| Union Co- Chair Contact Information | Employer Co-Chair Contact Information |
| Name: | Name: |
| P. | P. |
| C. | C. |
| Email. | Email. |