

**APPENDIX G**

**UMHS/UMPNC  
DRC Notification Checklist**

\*This checklist is a guide to provide a format where available information and documentation that has been obtained is provided to UMPNC prior to the scheduled DRC. We agree that this form and it's supporting information are provided with the scheduling of the DRC and that the DRC should not occur in less than two (2) business days of being requested.

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

Classification: \_\_\_\_\_ Employee ID#: \_\_\_\_\_

Date of Hire: \_\_\_\_\_ Unit: \_\_\_\_\_

Nurse Manager: \_\_\_\_\_

Dates of investigatory meetings: \_\_\_\_\_

Summary of Issue and Information

- ✓ Attach prior action(s)/discipline(s) taken
- ✓ Attach OneStaff report(s) on attendance (if applicable)
- ✓ Attach evaluation(s) or report(s) (if applicable)
- ✓ Attach any audit or investigatory reports
- ✓ Attach any applicable notes or documents provided by the employee

Brief summary of issue(s) or question(s) for DRC

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Date sent to UMPNC: \_\_\_\_\_ Date for DRC: \_\_\_\_\_ (if established)

cc: UMPNC  
HR  
Unit file