Month xx, xxxx {insert day and year}

To whom it may concern,

I am writing to you today about some concerns that the audiology team has regarding safety in the workplace. Due to the nature of our job and the physical configuration of the office—a configuration that is necessary for us to complete our jobs—the audiologists who practice here have profession-specific safety concerns. These concerns may not be immediately recognized but, if left unaddressed, could prove detrimental to the audiology staff and/or the patients we serve.

Using the American Speech-Language-Hearing Association (ASHA) *Self-Reflection Checklist for Workplace Safety,* we have identified the following safety concerns in our workplace:

- challenges in receiving crisis communication notifications when in the sound booth (e.g., fire alarms or announcements over the PA systems)
- inability to communicate with staff in the event of a dangerous situation that may require help from others outside that immediate workspace
- inability to lock entryways to workspaces or to restrict access from intruders
- inability to exit the workspace in the event of the space becoming unsafe or during an emergency event
- lack of clinical policies and procedures prominently posted in the workspace or waiting areas

Please consider this letter to be official documentation of employee safety concerns. These concerns can be addressed if we work together and take advantage of appropriate technology and environmental/procedural modifications. The audiology team would like to start a conversation regarding our unique workplace safety concerns and possible solutions. Please let me know who the most appropriate people would be to include in a group meeting—as well as a time and date that would work best for you and your team. Thank you for your time and consideration regarding this very important topic.

Best Regards,

{Insert Signature Here}

First Name Last Name, {Insert Credentials}

{Insert Title}

{Insert Center Name}

email@domain.com {Insert Email Address}

202-123-4567 {Insert Phone Number}

CC: {insert information of any copied parties/offices}