

## On-Call Protocol

### Basic Rules/Considerations

- Call On-Call after 5pm weekdays, on weekends, on holidays or when staff are unable to get hold of your Program Coordinator, Program Manager or Program Director.
- Do not call from your cell phone, use the house phone (unless client has run away and you are not at the house).
- If the On-Call doesn't answer or call back right away, you may have to make a decision in regards to client care, always side with caution.
- The purpose of On-Call is to answer your questions, not to cover your shift.
- If the On-Call doesn't answer, leave them a message including the house you are working at, the client you are calling about and details about the situation.

### When you need to contact on-call

- Client requires medical attention
- Law enforcement is involved
- Manual restraint has been used
- Client is missing or attempted to run away
- Vehicle accident
- Prior to giving PRN medications ( unless otherwise specified at the site or meds already approved to give by Nurse)
- Fire in the home
- Medication error
- Suspicion of staff being under the influence of alcohol or drugs
- Money missing from the home
- Property Damage that places the clients and/or staff in immediate danger
- Client behavior, excluding verbal aggression and non-compliance.
- Client-to-Client aggression
- Staff injury
- Maltreatment of a Vulnerable Adult or Maltreatment of a Minor

### Specific Protocols to Follow

- Sleeping Co-Worker
  - Attempt to verbally wake co-worker but if they won't listen, ignore you or fall asleep again, staff should contact on-call or supervisor for assistance.
  - Do NOT touch your co-worker to try and wake them up.
  - On-call will assess the situation and determine how to handle the situation.
- Suspicion that staff is under the influence of drugs or alcohol
  - Staff cannot leave the site, you must stay at the house to ensure appropriate supervision of the clients.
  - Contact on-call or supervisor immediately