DHS Oregon Department of Human Services **S**eniors and **P**eople with **D**isabilities **State Operated Community Program** (SOCP) Policies and Procedures	Supersedes: New	Policy Number: 2.014
	Effective Date: July 1, 2004	
	Approval Signature:	

Subject: Management On-Call

POLICY:

SOCP will have open lines of communication in the event of an emergency at all times by maintaining an on-call list that covers all shifts with responsibility for notification for all staff.

Site Managers and Program Administrators may request notification for many situations at their discretion, however, at a minimum the SOCP Emergency Reporting Procedure (Attachment A) will be followed by all staff on all shifts for situations that require a process of notification.

SOCP Site Managers, Nurse Managers and Program Administrators are considered on-call from Monday at 8 a.m. through Friday at 5 p.m. each week. An on-call rotation list is maintained from Friday 5 p.m. through Monday 8 a.m. for coverage on the weekends and holidays. The SOCP Director is notified of all situations listed on the SOCP Emergency Reporting Procedure list at all times.

NURSING ON-CALL FOR INDIVIDUALS WITH A NURSE-CLIENT RELATIONSHIP

The Site Manager (or designee) will initiate all calls for medical issues of concern to the nurse on-call for those individuals having a Nurse-Client Relationship only.

The following are reasons to contact the on-call nurse related to a situation with an individual with a current Nurse-Client Relationship:

1. Any accident or injury or suspected injury to the individual.
2. Whenever the individual is complaining of being sick or has symptoms of a new, worsening condition, or as directed by Health Care Plan/Nursing Care Plan.
3. Whenever 911 are called or an individual is taken to the emergency room and/or hospitalized.
4. Whenever there is a noticeable change in a individual's condition such as: sleeping more than usual for the individual, not eating or drinking, change in normal activities for the individual, nausea or vomiting, ongoing diarrhea (more than 2x).
5. Sudden onset of fever more than 101 degrees.

Attachment A: SOCP Emergency Reporting Procedure

Emergency Reporting

SOCP Chain-of-Command / Procedure

Situation	Staff report to Site Manager	Site Manager, reports to Program Manager, Service Coordinator / Guardian	Program Manager reports to Director	Program Manager reports to OIT
◆ Death	↓	↓	↓	↓
Abuse / neglect	↓	↓	↓	↓
* AWOL (serious = immediate call)	↓	↓	Serious	
* Suicide attempts serious	↓	↓	Serious	
* Emergency Restraints / Psych Med.	↓	↓		
*911Fire/Medical/Police	↓	↓	↓	
ER Visits	↓	↓	Admits	
*Hospitals / Jail	↓	↓	Admits	
Neighbor or Community complaints	↓	↓	Serious	
Incidents involving the Public	↓	↓	Serious	
Serious staffing issues (inclement weather, etc.)	↓	↓	↓	
◆ Vehicle Accidents	↓	↓	If Injuries	

✶ **Contact Clinical Services Manager** (jail, 911, Serious suicide attempt, AWOL and supine or prone PPI).

◆ **Safety Manager** (Vehicle accidents and Death)

✶ **Contact Clinical Services Manager** (jail, 911, Serious suicide attempt, AWOL and supine or prone PPI).

*Cross over policies: 2.007 Abuse, 3.001 Behavioral Support, 5.001 Safety Committee & Program, 5.003 Emergency Plan, **5.005 IRs & Emergency Notification,** 5.006 Individual Summary Sheets*