

SANILAC COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE PROCEDURE

NUMBER: DA1092

NAME: ON-CALL/OBRA ASSIGNMENT PROCEDURE

INITIAL APPROVAL DATE:	09/16/2020	BY: Administrative Committee
(LAST) REVISION DATE:	08/01/2024	BY: Human Resources Manager
(LAST) REVIEW DATE:	08/15/2024	BY: Policy Committee
DISCONTINUED DATE:	N/A	REPLACED BY: N/A

I. **OBJECTIVES**

To establish an OBRA and On-call assignment procedure.

II. **ON-CALL STAFF**

- A. ACT, Children's, and Community Crisis requires on-call services to be available.
- Per the AFSCME Contract, assignments for Community Crisis on-call employees shall be made in seniority order and days shall be divided as evenly as possible among the on-call staff.
 - Staff responsible for on-call Community Crisis Services shall include all full-time Clinicians and Care Managers who have completed the training process and have been approved for Crisis duty by the Clinical Supervisor.
 - On-Call Coverage will be provided by the staff assigned for all hours outside of business hours from 5PM until 8AM Monday-Friday and 24hrs on Saturday, Sunday, Agency Holidays, and days the Agency closes for other reasons.
 - The On-Call Crisis Calendars will be created each month, starting in October and continuing to the end of the fiscal year, with the Clinical Supervisors. Seniority will be used for assignment of days.
 - The most senior employee shall pick first and so on to the least senior employee.
 - Once a rotation is complete, it will begin again with the most senior employee again etc. as outlined above.
 - As On-Call employees are hired and completing their training, they will be added to the end of the Seniority On-Call Roster.
 - In the event the employee is unable to attend the regularly scheduled Crisis Calendar meeting, it is their responsibility to notify the Supervisor of what days they have interest in or appoint a proxy to the meeting in writing.
 - If they do not attend or appoint a proxy, the Supervisor will choose a date for them.
 - When staff are required to cover more than one on-call day a month, and no staff volunteer to cover the additional day(s), the next staff on the roster will be assigned.
 - Staff who are required to take more than one on-call day a month are only required to take one weekend day.
 - Staff can offer their on-call days to other staff. If no other staff volunteers to cover the day, then supervisory personnel shall be allowed to work those days.

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- If no staff or supervisor volunteers to cover the assigned on-call shift, the staff who was assigned that day will be required to complete their day.
- B. If a staff is unable to cover their on-call day on the assigned day:
- Being unable to cover a day is defined by being Ill/Sick requiring the utilization of PTO time during that business day, or extenuating circumstances that are approved by the supervisor.
 - The on-call day will be sent out to staff and supervisors to see if any staff would volunteer to cover said shift.
 - If no staff or supervisor volunteers to cover the day, staff will be reverse seniority assigned. Once an on-call staff has been reverse assigned to an on-call day they will not be reverse assigned again until all eligible staff have been reverse assigned to reduce burnout. Rather, the next low senior staff will be assigned and then move up through reverse seniority as needed. This process will be reset each fiscal year.
 - If a staff member is unable to work on their on-call day, they will be responsible to provide on-call coverage on the staff's day that covered the call in. When this does not pertain for the month (i.e. the staff that provided coverage would like to keep their on-call day, already worked on call for the month, or a supervisor picked up the on-call call-in), the staff that was unable to provide their on-call coverage day will be placed on the reverse assignment list to cover the next reverse assignment day. This will be in addition to the staff's usual reverse assignment date via seniority.
 - In the event a staff member volunteers or is reverse assigned to cover a call-in day, they will be removed from the reverse assignment process.
 - New employees who are added to the On-Call Roster, once approved for on-call, will be the next staff assigned via the reverse assignment.
 - Call-In's and non-responsiveness to the On-Call Program will be monitored and patterns of call in or inability to perform the on-call function will be addressed thru the disciplinary process. (Example: Not covering 3 out of 5 scheduled on call periods without clear extenuating circumstances.)
 - Staff that provide on-call coverage will have the ability to flex or use PTO the day after being called out, once they have sought approval from their supervisor. Approval will not be unreasonably withheld.

III. OBRA COVERAGE

A. Nursing Assignment:

RN-Clinical Union Nurses in the Outpatient/Clinical Services department will be assigned OBRA assessments as Agency need arises. The most senior Union Clinical Nurse will be assigned first, with the ability to pass to the next senior Clinical Nurse. In the event all Union Clinical Nurses pass on completing an OBRA assessment, a Substitute Nurse may be utilized when appropriate timelines can be met. In the event no Substitute Nurses or Union Clinical Nurses take the OBRA assessment, reverse order of seniority will be used between the Clinical Nurses. Once a Clinical Nurse has been reverse assigned, they will not be assigned again until both eligible staff have been reverse assigned. The ACT Nurse may be utilized as backup when an Agency need arises, at the discretion of the COO.

B. Clinical Assignment:

All Union clinical staff (Clinicians and Care Managers) within the Care Management and Clinical Services programs may be assigned OBRA assessments. When an OBRA assessment referral is received, the OBRA Coordinator, with supervision from the Clinical Supervisor, will send out an email request with information regarding the assessment and due date. Staff will be given a timeframe to respond to the email if they are volunteering to complete the assessment. Final assignment will then be given to the

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most Senior Union staff that volunteered. If no Union staff volunteer, the Clinical Supervisor will review staff calendars based on reverse seniority to assign. Once a Union staff has been reverse assigned during a fiscal year, they will not be assigned again until the next fiscal year (unless the full seniority list has been utilized, then the process will be repeated). Rather, the next low seniority staff will be assigned and then move up through reverse seniority as needed.

Completing the OBRA assessment for overtime must be pre-approved by the Clinical Supervisor. Calendars will then be reviewed to confirm that overtime is justified for completion of the OBRA assessment.

NOTE: Staff may be assigned outside of this procedure for OBRA Assessments in situations that do not allow for following this procedure, i.e., coverage is not available.