

USN Best Practice for On-Call

This document outlines the best practices for on-call during a job action. Please read thoroughly and see USN Clinical for any questions regarding on-call.

- Surgical services typically require On Call during a job action. If your strike assignment is OR, PACU, CATH LAB, EP, IR, or ENDO, be prepared to take call. Other units may require On-Call based on facility needs.
- Once the job action begins (Day 1 of strike) the call schedule will be confirmed by your unit or USN.
 - The call schedule will be shared with you by USN **via email** by Day 1 at PM shift change. The facility may also notify you of the On-Call once confirmed.
- If you are scheduled to take call, you are responsible for leaving your cell phone on during the call shift and answering your phone from any number you receive a call from. ◦ Call back can come from the unit, facility operator, or USN clinical team.

Call Back

- Once you are called back, you are responsible for notifying transportation to the facility.
 - The number for transportation is posted on the Go Page for each job action.
 - You are responsible for notifying transportation once the case is complete for transportation back to the hotel.
- If you are called back, the expectation is you are dressed and on the unit **within 30 minutes of the call you received.**
- You are responsible for updating your timesheet for call back within 24 hours to ensure that you are paid on time.
 - Failure to update call back times will result in delayed payment.

Changes to Call Schedule

- Once the call schedule has been confirmed (Day 1) and you wish to swap call shifts, YOU and the person you are swapping with **MUST** notify your unit of the change (confirm it is approved) and **notify USN via email** of the change.
 - Failure to comply will result in possible missed payment as you will not be able to update your timesheet for any callback or will not receive pay for your call shift.
 - Failure to comply could result in the wrong person being notified for a call back by the unit, facility operator, or USN clinical team.