

## Quick Guide:

### Implementing a Regional or National On-Call Roster

#### Why Consider a Regional/National On-Call Model?

Many aged care, health and community services rely on a small number of senior leaders to provide after-hours support. Over time, frequent on-call responsibilities can contribute to fatigue, reduced work-life balance and increased workload pressure. A regional or national on-call roster provides a shared approach, where after-hours responsibilities are distributed across a larger group of trained leaders, reducing the burden on individuals while maintaining safe and responsive support. This aligns with findings from the ARIIA Flagship 1 Project, where reducing on-call frequency and improving support structures were key goals.

#### Key Benefits

##### ✓ Improved Work-Life Balance

Reduces the frequency of on-call shifts for individual leaders, supporting the ability to disconnect from work outside rostered hours.

##### ✓ Stronger Workforce Capability

A larger pool of trained staff builds organisational resilience and reduces reliance on a small number of experts.

##### ✓ Consistent Decision-Making

Standardised escalation pathways, procedures and handover processes promote more consistent after-hours support across services.

##### ✓ Career Development Opportunities

Participation in on-call roles can expand leadership experience and build confidence in clinical and operational decision-making.

#### Recommended Implementation Steps

| Step                    | Action                                                                           |
|-------------------------|----------------------------------------------------------------------------------|
| 1. Assess Current State | Review current on-call arrangements, pain points and workforce needs.            |
| 2. Design the Model     | Define scope, coverage, escalation pathways and roster structure.                |
| 3. Develop Resources    | Create procedures, handover templates, contact directories & training materials. |
| 4. Train Staff          | Deliver education and practical scenario-based learning.                         |
| 5. Pilot Test           | Pilot the new roster in a defined region or service group, and gather feedback.  |
| 6. Refine the Model     | Adjust processes based on learnings before broader implementation.               |
| 7. Monitor Outcomes     | Track workforce satisfaction, workload, service quality and escalation trends.   |

## Critical Success Factors

### 1. Clear Escalation Pathways

Ensure staff understand:

- What should be escalated
- Who should be contacted
- Expected response times
- Responsibilities at each level

### 2. Comprehensive Training

Provide education and practical resources to build confidence, particularly for staff expected to manage after-hours incidents, clinical concerns and operational issues.

### 3. Structured Handover Processes

Implement standardised handover templates and clear communication processes before and after each on-call period.

### 4. Accessible Resources

Develop easy-to-use guides, decision support tools, contact lists and escalation flowcharts that can be quickly accessed during after-hours periods.

### 5. Ongoing Evaluation

Regularly gather feedback and monitor outcomes to identify opportunities for improvement and ensure the model remains fit for purpose.

## Evaluation Questions

Consider measuring:

- Has on-call frequency reduced for individual leaders?
- Do staff feel more supported after hours?
- Has confidence in decision-making improved?
- Are escalation processes being followed consistently?
- Has work-life balance improved for participating staff?
- Are residents and families continuing to receive timely support?

## Key Message

A regional or national on-call roster is more than a staffing arrangement—it is a workforce sustainability strategy. Success relies on clear governance, robust training, strong communication and continuous improvement to ensure safe, consistent and responsive after-hours support.