Lone Working Policy

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Lead Manager	Health & Safety Service Manager
Responsible Director	Director of Human Resource and Organisational Development
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1. Introduction

NHS Greater Glasgow and Clyde (NHSGGC) takes extremely seriously the health, safety and welfare of all its employees. Due to the nature of the work within the NHS a significant number of employees are required to work by themselves for significant periods of time without close or direct supervision in the community or in isolated work areas. The purpose of this policy is to enable NHSGGC to fulfil its obligations in protecting such staff, so far as is reasonably practicable, from the risks associated with lone working.

2. Scope

This Policy applies to all NHS Greater Glasgow and Clyde employees including temporary and agency staff, contractors, volunteers, students and those on work experience. The Policy applies to all work situations involving lone working arising out of, or in connection with, the duties and activities of our employees. Whilst not within the scope of this policy, employees may wish to apply some of the principles contained out with work situations.

3. Lone Workers Definition

NHS Greater Glasgow and Clyde defines lone workers as:

> 'Employees whose working activities can involve periods of time during their working hours where they are working by themselves without close or direct supervision or in contact with other colleagues'.

This includes activities where staff may be working with a colleague without close or direct supervision and outwith an NHS base, for example, community or on home visits, where similar risks associated with lone working exist.

Lone working can occur anywhere, at any time and within any group of staff. This includes:

- working alone from a fixed base
- working separately from other colleagues on the same premises or outside normal hours, for example, security and domestic staff
- working away from a fixed base, for example, agile and community health care workers
- mobile workers, for example, drivers
- those who travel for work activities

4. Aims of the Policy

The aims of this Policy are:

- To increase staff awareness of safety issues associated with lone working
- To ensure that safe systems and methods of work arising from risk assessment are in place to promote staff safety, when lone working
- To encourage full reporting and recording of all adverse incidents relating to lone working
- To reduce the number of incidents and injuries to staff related to lone working

5.   Roles and Responsibilities

Although there is no specific legal guidance on working alone, under the Health and Safety at Work Act 1974, and the Management of Health and Safety Regulations 1999, NHSGGC must organise and control the health and safety of lone workers.

5.1.   The Chief Executive and Director of Human Resources and Organisational Development are responsible for all health and safety matters. The Director of Human Resources & Organisational Development has delegated responsibility from the Chief Executive and is responsible for ensuring all health and safety policies are implemented throughout the organisation

5.2.   Directors and Chief Officers have responsibility for ensuring that suitable and sufficient health and safety management arrangements are in place in relation to lone working activities, that the Lone Working Policy is being applied and that local procedures are prepared to comply with them

5.3.   Senior Managers & Heads of Department have a pivotal role in translating the general policy into the effective assessment and control of lone working hazards and risks. Their main responsibilities include:

1) ensuring the Lone Working Policy is implemented and that staff to whom specific responsibilities are delegated, are fully aware of and discharge these responsibilities. Where they do not have the authority to deal with such matters they are brought to the attention of more senior management

2) ensuring that risk assessments are completed, updated as necessary, that is, when change occurs and reviewed as identified by the assessment process

3) reducing the risks identified by risk assessment as far as is reasonably practicable by establishing and introducing specific controls that assist the lone worker

4) following investigation of incidents through DATIX, where additional controls outwith the authority of the local manager have been identified, ensure a course of action to reduce risk is implemented

5) reviewing lone working related incidents for trends

6) considering control measures required for lone working risks during the design stage of new facilities

7) ensuring that appropriate post incident support is available for staff involved in any incident associated with lone working

5.4.   Local Managers are responsible for ensuring that work is undertaken safely in their area of responsibility, this includes:

1) regularly reviewing their procedures in relation to risk assessments to ensure that practice reflects assessments controls and safe systems of work

2) implementing procedures / safe systems of work designed to eliminate or reduce the risks associated with lone working

3) where appropriate ensuring that staff complete the home / community first visit risk assessment on EMISweb or available on HRConnect here

4) ensuring that incidents and near misses are recorded via DATIX

5) investigating incidents reported on DATIX relevant to their area and taking action as appropriate

6) ensuring that appropriate post incident support is provided to staff involved in any incident associated with lone working

7) Identifying through local risk assessment whether there is a need for training to enable employees to safely work alone

5.5.   All staff members (including agency, bank, part time, students and those on short term or temporary contracts) are responsible for:

1) taking reasonable care of their own health and safety and that of others who may be affected by their activities or omissions.

2) complying with NHSGGC's Lone Working Policy

3) contributing to risk assessments and complying with protocols and procedures designed for safe working.

4) utilising any equipment that has been provided as a control when lone working.

5) reporting all incidents and near misses on DATIX that may affect the health and safety of themselves or others and seeking guidance in areas of uncertainty.

6) documenting and reporting any hazards they identify or any concerns they might have in respect of lone working.

6.   Assessment of Risk

6.1.   NHSGGC will identify and develop management systems through the risk assessment process to ensure that any risk to lone workers is kept as low as can be reasonably attained. Establishing safe working arrangements for lone workers is no different than organising the safety of other employees; therefore, the general principles of risk assessment must be followed. If a risk assessment shows that it is not possible for the work to be done safely by a lone worker, then other arrangements must be put in place. Risk assessment should take account of both normal work and foreseeable emergencies such as fire, illness and accidents.

6.2.   The risk assessment process has been summarised below and is separated into five distinct stages and action points to support effective assessment of the risks involved in lone working.

	Process	Action Point
1	Identification of lone workers	Establish and identify lone workers for each work area.
2	Identification of associated hazards	Identify the range of hazards that are associated with the task of lone working. This may include violence & aggression, travel at work, emergency situations such as ill health or accidents. Review existing generic risk assessments and ensure those issues are considered
3	Assessment of the degree of risk for generic or individual situations.	Review generic risk assessments in conjunction with staff and complete individual/local risk assessments if required and share final / revised documents formally with staff. Ensure all associated hazards are considered. Prioritise level of associated risk.
4	Implementation of control measures, developing safe systems of work.	Assess implementation and effectiveness of existing control measures and update as appropriate. Develop local procedures or safe systems of work if required and formally share with staff.
5	Evaluation and review.	Evaluate and record effectiveness of control measures. Review at regular intervals and following significant incidents.

6.3. Risk assessments must be carried out in all areas of work where working alone poses an actual or potential risk to staff. The risk assessment will involve the identification of all potential hazards and the risks associated with specific work tasks or activities. It should identify who will be affected and how, and the control measures which are required to eliminate or reduce the risk to the lowest level reasonably practicable. Risk assessments must be carried out by competent persons with involvement of staff and must be recorded and shared with relevant others.

6.4. Details of the risk assessment must be recorded and should include:

- The extent and nature of the hazards

- Factors that contribute to the risk – including job content and specific tasks and activities.

- The safe systems of work to be followed to eliminate or reduce the risk.

6.5. There may be situations that are identified through departmental risk assessments (including the use of the First Visit Home or Community Risk Assessment (found here) where lone working may not be permitted. In these situations the staff must follow locally developed written procedures and guidance. Examples could include:

- Specific staff groups, for example, students and pregnant workers (if identified through pregnant workers risk assessment)

- When visiting an unknown patient within the home or community with no accessible information

- When information available identifies a potential unacceptable risk to staff

- When visiting a patient who has a known history of violence or aggression (physical or verbal) associated to them or their family.

- Where the risk assessment has resulted in a high risk evaluation/ risk rating

- When working in confined spaces, for example, plant rooms

- Any other specific considerations that are referred to in departmental protocols e.g. not entering isolated site buildings in darkness.

6.6. Staff should be involved in the drafting and review of the risk assessment and risk assessments must be reviewed as per the identified date on the assessment or sooner should circumstances change.

7. Management of Risk

7.1. The risk to which lone workers are exposed must be reduced to the lowest level that is reasonably practicable. Managers must ensure that local protocols or procedures are in place, that provide specific guidance for staff and contribute to the safe system of work when lone working.

Issues to consider in developing safe systems of work include:

- joint working, for example, with external agencies for high risk activities, where assessed as appropriate

- improvements to building security arrangements

- security lighting in parking areas

- use of checking in and monitoring systems

- communication systems for sharing risk information with colleagues and other disciplines and agencies

- use of safety equipment e.g. man down systems, high visibility jackets, personal alarms, mobile phones, lone worker security system

- appropriate training, (for example, use of lone working device, violence reduction and risk assessment training) and, supervision

- reporting, recording and investigation of incidents

7.2. Risk management arrangements should include guidance for lone workers on risk assessment, details of when to stop and seek advice and the procedures to be followed in the event of an incident or emergency. Managers must ensure that all staff are familiar (and compliant) with local protocols and procedures. Detailed guidance may also be required to address specific areas of risk such as:

- lone travelling on work related business

- home visits / community visits

- working outwith normal office hours

- working with harmful substances

- working in confined spaces

- electrical work near live conductors

7.3. NHSGGC will ensure that following risk assessment, adequate communication systems will be available for staff who are identified as lone workers. The following as a minimum will be provided:

- adequate telephone access which may include NHSGGC mobile phone
- mobile 2 way radio for staff within confined spaces

7.4. NHSGGC will provide access to a lone working support solution, utilising mobile phone technology or dedicated devices. Where this is identified as a necessary control through risk assessment, the use of the device is mandatory for all lone working activities. Usage is monitored locally through reports provided by the current solution provider.

8. Policy Monitoring and Review

This policy will be reviewed every three years and monitored through the Health & Safety committee structure.

The procedures will be audited in line with organisational and the results will be presented to the NHS GGC Health and Safety Forum.