

Lone Working and Working in Isolation Policy

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NHS Shetland Document Development Coversheet*

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Please record details of any changes made to the document in the table below

Date	Record of changes made to document
Dec 21	Lone Working Policy (2007) (HRPOL006) withdrawn and replaced with new version written in line with Once for Scotland work.

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1. Introduction

Working alone is not in itself against the law, and it will often be safe to do so, with the exceptions of working with live electricity or working in confined spaces. However, the law requires employers to consider carefully, and then deal with, any health and safety risks for people working alone.

NHS Scotland has developed this Policy to facilitate a consistent approach to the management of individuals, lone working, whilst carrying out their work activities.

NHS Shetland takes the health, safety and welfare of all its employees extremely seriously. 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 NHS Shetland to fulfil its obligations in protecting such staff, so far as is reasonably practicable, from the risks associated with lone working. This policy and supporting guidance defines how the Board will identify and manage personal safety risks, and provides the tools to supporting staff that have been involved in an adverse event that compromised or may have compromised their personal safety.

2. Scope

This policy applies to all NHS Scotland staff, visitors and contractors undertaking work at NHS Scotland premises.

This policy does not cover working with live electricity or working in confined spaces. This is covered by separate legislation. See Useful Links section.

3. Aim

The aim of this Policy is to provide an overarching framework around the management of lone working to enable staff and their managers to comply with their legal duties towards lone workers. In addition a guidance document will provide direction around how to eliminate, reduce and control the associated risks.

This Policy should be used to inform your risk assessments, systems of work and local procedures for lone working, however, it should not be used in isolation and other relevant policies, such as Management of Violence and Aggression (V&A) should also be considered.

It is possible, indeed likely, that local areas will have their own lone working protocols; however, these must follow the principles of the Lone Working Policy.

4. Definition of lone working and working in isolation

Lone working may be a constituent part of a person's job or it could occur on an infrequent basis. It is defined by the Health and Safety Executive (HSE) as "Those who work by themselves without close or direct supervision" (HSE Guidance, INDG73, 2020).

NHS Protects definition of lone working is: "any situation or location in which someone works without a colleague nearby; or when someone is working out of sight or earshot of another colleague"

4.1. Examples of Lone Workers

Examples of Lone Workers include:

- People working from home;
- People working outside normal working hours;
- A single member of staff who works in an isolated part of the premises;
- Staff working separately from others or outside normal working hours e.g. night staff or on call staff;
- Community staff who work away from their work base – off site working or domiciliary visits;
- Any member of staff who may be required to spend time alone in the workplace;
- Individual employees who travel to attend any activity during working hours inside or outside their Health Board's premises.

4.2. Working in isolation

Local Managers are responsible for ensuring that both environmental and patient specific Risk Assessments are carried out and in place where staff are seeing patients alone in clinic rooms within a hospital setting or a medical practice. To ensure staff safety, appropriate local Response Protocols (actions to be taken when an alarm is raised or a colleague requires support) must be in place and all staff should be up to date with Violence and Aggression guidelines and training. Managers and staff should refer to their local Board Violence and Aggression Policy.

4.3. Remote working

Remote working is a way of working 'at a distance', using information technology (IT) to allow employees to undertake work away from the employers' premises. Remote workers can be based at home, occasionally work from home, or be mobile and connected from anywhere, e.g. practitioners such as Community Nurses or Allied Healthcare Professionals working in remote and isolated communities/areas.

5. Legislation

The main pieces of legislation that apply are:

- Health & Safety at Work Act 1974
- The Management of Health & Safety at Work Regulations 1999
- HSE Guidance on Health and Safety at Work etc. Act 1974

6. Roles and responsibilities

6.1. Chief Executive

The chief executive has overall responsibility for the health, safety and welfare of staff, and as the accountable officer, has a duty to provide sufficient resources to allow implementation of the Lone Working Policy. They will, however, delegate the day to day responsibility for implementation of the Policy to Line Managers.

6.2. Line managers

To ensure that:

- Any staff who may work alone when carrying out their work duties are identified;
- Risk assessments are conducted for all lone working situations in consultation, and findings communicated to all relevant staff;
- Risk Assessments and Response Protocols are in place for those staff working in isolation;
- Procedures and safe systems of work are put into practice, which are designed to reduce lone working risks to as low as is reasonably practicable;
- The effectiveness of procedures and safe systems of work are monitored and any identified failings are resolved;
- Local guidelines are developed to address issues including emergency response, and contact / communication procedures;
- All staff are aware of the Lone Working Policy and local procedures;
- All staff that have been identified as being at risk have adequate information, training, instruction, supervision and support. This includes refreshing staff skills where and when necessary;
- Staff receive suitable and effective support following an adverse event at work related to lone working;
- There are set limits to what can and can't be done whilst working alone;
- Workers are competent to deal with the requirements of the job and are able to recognise when to seek advice from elsewhere;
- Staff have the skills to undertake a dynamic, on the spot risk assessment;
- If staff raise concerns the manager will jointly discuss and agree a resolution;
- Staff report any near misses or adverse events through the reporting system as per local procedures.

6.3. All employees

All employees designated as a lone worker must:

- Take reasonable care of themselves and other people who may be affected by their actions;

- Notify their line manager of any underlying health conditions which may affect their work;
- Follow procedures/ safe systems of work that are in place to minimise risk related to lone working;
- Use any equipment that is provided for their safety while lone working, e.g. mobile phones, lone working technology;
- Report all adverse events including near misses that arise whilst lone working;
- Attend the appropriate training and instruction and ensure practical skills are regularly refreshed;
- Assist managers with the identification of risks associated with lone working;
- Ensure (where practical) that colleagues are aware of their movements and appointments;
- Assess any immediate and unfolding risks to their safety;
- Feel empowered to raise concerns if they feel the situation is unsafe.

7. Risk assessment

Suitable and sufficient risk assessments should ensure areas have effective control measures in place for lone worker safety issues. The risk assessment should take account of both normal work and foreseeable emergencies such as fire, illness and accidents, be reviewed regularly (based on the level of risk) and communicated with staff.

- The risk that lone workers face should be reduced to the lowest level that is reasonably practicable. This may include:
- Where a lone worker is working at another employers workplace, informing the other employer of the risks and required control measures
- When a risk assessment shows it is not possible for the work to be conducted safely by a lone worker, addressing that risk by making arrangements to provide help or back up.
- If alternative arrangements are required, please refer to the Lone Working and Working in Isolation Operational Guidance document

When Control Measures are being developed to mitigate risk, the hierarchy of controls must be used. This requires the most effective control to be implemented first and only if this is not reasonably practicable should a lower control be evaluated.

8. Safe systems of work

Local managers have responsibility for the health and safety of their staff. Safe systems of work must be adopted locally and policies and procedures must be in place to manage the risks effectively. Systems of work/procedures must be reviewed regularly to ensure that all measures are effective and continue to meet the requirements of the lone worker(s).

Safe systems of work could include the following:

- Using checking-in and monitoring systems;

- Systems for effectively communicating and sharing information with other health care professionals and support staff, especially when a risk has become known;
- Joint working with others for high risk activities;
- Environmental security arrangements in buildings and vehicles e.g. access control doors, security lighting in parking areas etc;
- Using equipment like mobile phones, lone working technology systems fall detection systems;
- Use of safety equipment e.g., high visibility jackets, hard hats, safety footwear etc;
- Guidelines to assist lone workers to identify and assess risk;
- Guidance on how to summon help in an emergency;
- Making available a list of appointments with a line manager and informing of any change to appointment schedule as soon as possible;
- When working away from the work base keep in regular contact with line managers or colleagues, this is sometimes known as operating a “buddy system”.
- NOTE: the “buddy” should not be lone working at the same time as they would be the nominated safety contact. See Lone Working and Working in Isolation Operational Guidance document.

Detailed guidance may also be required to address specific areas of risk such as:

- Work related business travel;
- Home visits / Community visits;
- Working out with normal office hours;
- Working with dangerous substances e.g. Labs, Fumigation work

9. Escalation of risk

Any situation, whether it is to visit familiar individuals and/or location/environments, can change with little or no warning. Therefore all situations need to be risk assessed and consideration given to the “what if” scenario.

Where there is a known history of violence and/or the location of the visit is considered a high risk.

- The first consideration must be **is the visit necessary?**
- Could the consultation/meeting take place in a clinic area or GP practice where there are colleagues in close proximity to reduce the risk and increase the response provided;
- Staff should consider being accompanied by a colleague or possibly the Police and tight control measures must be in place.

10. Mobile phones

Lone workers should be provided with mobile phones, however as much as a mobile phone is an essential control measure when lone working, it should not be relied upon as the sole means

of communication. Lone working staff should follow their team's local lone working procedure including lone working technology where available

Staff are responsible for ensuring that their mobile phone is always fully charged and for checking phone network signal strength before entering a lone working situation. Failure to comply with the use of mobile phones and lone working technology (where available) is a breach of Health and Safety policy.

11. Lone working technology

In line with the hierarchy of controls, Lone Working Technology should be considered where technically feasible and proportionate (See Lone Working and Working in Isolation Guidance).

12. Training

A risk assessment and training needs analysis will highlight the level of training required. Staff must be informed about any risks identified as part of the risk assessment.

Information about safe systems of work must be given to staff who are lone workers and they must be trained in these systems/how to use the systems or equipment. Emergency procedures must be established and employees trained in them. Information regarding emergency procedures should be given to lone workers. They should have access to adequate first aid facilities.

13. Monitoring

13.1. Local arrangements

Procedures must be put in place to monitor lone workers as effective means of communication are essential. These may include:

- Supervisors periodically checking and observing staff following lone working protocols;
- Pre-agreed intervals of regular contact between lone workers and supervisors;
- Use of lone working technology e.g. manually operated or automatic warning devices which trigger if specific signals are not received periodically from the lone worker;
- Implementing robust systems to ensure that a lone worker has returned to their base or home once their task is completed.

13.2. Policies and procedures

Audits should be carried out on a regular basis or before any significant changes of the local Lone Working procedures to ensure they are still suitable and sufficient to minimize the risk to staff, visitors and contractors who may require to work alone.

14. Useful links

Management of Health & Safety at Work Regulations 1999 - [www.hse.gov.uk
www.legislation.gov.uk/uksi/1999/3242/contents/made](http://www.hse.gov.uk/legislation.gov.uk/uksi/1999/3242/contents/made)

Protecting Lone Workers: How to manage the risks of Working Alone March 2020-
<http://www.hse.gov.uk/pubns/indg73.pdf>

HSE health services violence <http://www.hse.gov.uk/healthservices/violence/index.htm>

HSE guidance on the Electricity at Work Regulations 1989
<https://www.hse.gov.uk/pubns/priced/hsr25.pdf>

HSE guidance on the Confined Spaces Regulations
1997 <https://www.hse.gov.uk/confinedspace/legislation.htm>

<http://nhsgintranet.grampian.scot.nhs.uk/depts/HandS/VandS/Pages/default.aspx>

Violence and Aggression intranet site

<http://nhsgintranet.grampian.scot.nhs.uk/depts/QGRU/PublicProtection/Pages/MAPPA.aspx>

Multi Agency Public Protection Arrangements intranet site