



Redacted version for external publication

Lone Working Procedure

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Status: Approved

Document type: Procedure

Overarching policy: [Health and Safety Policy](#)

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1 Introduction

The Trust has a legal and moral obligation to manage risk from lone working. By following this procedure, the lone worker and responsible persons will ensure that the risk to lone workers is adequately controlled.

The Health & Safety Executive (HSE) definition of lone working is:

“Lone workers are those who work by themselves without close or direct supervision.”

This is irrespective of location (This can include patient’s homes, community places, Trust premises, third party premises e.g., GP Practices, Care Homes etc.), as it is not always about where you are seeing someone, it is also about who you are seeing and the support that is available to you.

This procedure links to Our Journey to Change as outlined within the Health and Safety Policy.

2 Purpose

Following this procedure will help the Trust to comply with its legal obligations:

- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Protecting lone workers How to manage the risks of working alone INDG73(rev4)

3 Who this procedure applies to

This procedure applies to all bank, locum, permanent, fixed term contract employees (including apprentices) who hold a contract of employment or are engaged with the Trust, and seconded (including students), volunteers, non-Executive Directors, Governors, and those undertaking research work within TEWV Trust. It also applies to external contractors, agency workers, including those within the GIG economy, limb workers, those on honorary contracts, those on work experience and other workers who are assigned to TEWV Trust.

4 Related documents

This procedure describes what you need to do to implement duties under the Trust Health and Safety Policy.

This procedure also refers to: -

- ✓ Risk Assessment (H&S) Procedure
- ✓ Trust Incident Reporting Procedure
- ✓ New and Expectant Mothers/People Procedure

- ✓ New and Expectant Mothers/People Risk Assessment
- ✓ Workplace Adjustments Procedure
- ✓ Dress Code Procedure

5 Procedure

5.1 Managers and Staff Member's Obligations

Managers need to:

- Undertake a specific lone working risk assessment for their team which identifies all risks and control measures to reduce the risk to an acceptable level. Use the Risk Assessment template within the appendix of the Risk Assessment (H&S) Procedure.
- Account for the following, as a guide within the lone working risk assessment:
 - Violence and aggression (including harassment).
 - Use of hazardous or dangerous equipment.
 - Working in confined spaces.
 - Working in remote spaces.
 - Exposure to wiring, chemicals or hot surfaces.
 - Slips, trips and falls.
 - Working at height.
 - Stress, anxiety and burnout.
 - Tiredness and fatigue from driving long distances.
 - Working outside of normal business hours.
 - Sudden medical emergencies.

Please note this list is not exhaustive.

- Involve and communicate risk assessments to all appropriate staff.
- Monitor the effectiveness of the measures to control the risk by regular testing.
- **REDACTED**
- **REDACTED**
- **REDACTED**
- Ensure that only those who are suitably competent to perform tasks associated with the specific Lone Working activity are authorised to work alone. *“Consider both routine work and foreseeable emergencies that may put additional physical and mental burdens on an individual.” INDG73 HSE*
- Ensure special consideration is given to the following, young people (under 18's as defined by the HSE), new and expectant mothers/people, disabled workers, trainees. and other vulnerable groups.
- Identify any workers that may require an individual lone working risk assessment, and complete as necessary.
- *“If a lone worker's first language is not English, you should ensure that suitable arrangements are in place to provide clear communications, especially in an emergency. Lone workers from outside the UK may come across unfamiliar risks, in a workplace culture very different from that in their own country. You must ensure they have received and understood the information, instruction and training they need to work safely.” Consulting employees whose first language is not English, HSE Website.*

- Assess new starters capabilities, for example “*literacy and numeracy levels, general health, relevant work experience, physical capability to do the job, familiarity with the work being done and the working environment*”. *Diversity in the workplace - New to the job HSE Website*
- Ensure that staff groups, associated others (e.g., students) and individuals identified as being at risk are provided with appropriate information, instruction, and training (including training at induction), updates and refresher training as necessary.
- Ensure staff have access to Occupational Health, and Trust Employee Support Officers.
- Ensure staff have access to regular supervision.
- Ensure they have a clearly documented protocol in place in the event if someone:
 - Does not return to base or home when planned to do so.
 - Does not make a planned contact with the department.
 - Contacts the department with concerns about a visit.
- Ensure they have a record of all staff’s personal details, including who to contact in the event of an emergency.
- **REDACTED**
- Ensure staff report lone working incidents and near misses on the incident reporting system.

Staff Need to:

- Have read, understood, and are following the lone working risk assessment for their team.
- Ensure any Patient risks are known, and documentation is up to date.
- **REDACTED**
- **REDACTED**
- **REDACTED**
- Report lone working incidents and near misses on the incident reporting system.

5.2 Considerations for Patient Facing Staff

Prior to any lone working the following should be considered by both Managers and Staff:

- The patient safety summary.
- Safety concerns
- Recent conversations.
- The team lone working risk assessment.
- **REDACTED**
- Individual risks.
- Environmental and location-based risks (e.g., TEWV building, location within building, patient's home, escorted ground leave, escorted leave, escorting within vehicles etc.).

If it is not appropriate for staff to be lone working with a client this should be documented within the patient safety summary, communicated, and followed.

Where staff undertake assessments of clients in their own homes:

- Information should be collated, screened and/or triaged prior to the visit to inform a decision on lone working.
- The Team Lone Working risk assessment must be completed/reviewed.

- All initial visits to a client's home must be undertaken by 2 members of staff where the risk indicates this is appropriate.

5.3 Patient Facing Students / Trainees

Students/trainees may be considered as a vulnerable group due to factors such as inexperience and limited knowledge of the environment or client group.

The student, supervisor and/or manager should discuss the risk assessment and make a record of this discussion and any action points arising including the willingness of the client to be seen by a student.

Students should not visit a client alone for first visits. First contact should always be with a competent member of staff.

Students are not to act as a second member of staff where it has been identified that staff need to visit in twos.

5.4 Where No Lone Working Is Permitted

The following groups are not permitted to work alone.

- Under 18's.
- First year craft/engineering apprentices.

5.5 Non-Patient Facing Roles

If staff are identified as lone workers, then a lone working risk assessment must be completed which details robust control measures.

The effectiveness of control measures should be monitored by regular testing.

5.6 Staff Working Alone from Home

The Trust's responsibility for employees who work from home are the same as those for any other groups.

This means providing supervision, education, and training, as well as implementing control measures to protect the homeworker, including the same liability for accident or injury of a homeworker as for any others.

An individual lone working risk assessment must be completed.

6 REDACTED SECTION

7 Health, Safety and Security Team

The Health, Safety and Security Team (which also includes a Local Security Management Specialist) provides advice and support to all staff and managers around the risk of lone working.

8 Definitions

Term	Definition
Lone Workers	Health & Safety Executive definition: <i>“Lone workers are those who work by themselves without close or direct supervision.”</i>

9 How this procedure will be implemented

- This procedure will be published on the Trust intranet.
- Line managers will disseminate this procedure to all Trust employees through a line management briefing.

9.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
All staff	Lone Worker Awareness Workshop	60 minutes	On identification of lone working.
REDACTED	REDACTED	REDACTED	REDACTED

10 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Compliance with the legal requirements outlined within the Management of Health and Safety at Work Regulations 1999. <i>NB. There are 14 questions listed in the audit template that are assessed for compliance.</i>	<p>Frequency: Annual rolling audit programme.</p> <p>Method: Risk Assessment audits will be undertaken for a sample of all teams utilising a standard audit template via an internet-based audit platform. Results are collated and discussed at Health, Safety, Security and Fire Group (HSSF GROUP) with a report to be submitted to the appropriate committee.</p> <p>Responsible: Undertaken by members of the Health and Safety Team as directed by the Head of Health, Safety and Security.</p>	Implementation and monitoring are directed by the Executive Risk Group and devolved to the HSSF Group.

11 References

- ✓ Health & Safety at Work Act 1974
- ✓ Management of Health and Safety at Work Regulations 1999 (MHSWR)
- ✓ Personal Protective Equipment (PPE) at Work Regulations 1992 as amended 2022
- ✓ INDG73(Rev 4 March 2020) Working Alone Health & Safety Guidance on the risks of lone working
- ✓ HSE website: Consulting employees whose first language is not English (hse.gov.uk)
- ✓ HSE website: Young people at work (hse.gov.uk)
- ✓ HSE website: Diversity in the workplace - New to the job
- ✓ www.suzylamplugh.org

12 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval	24 January 2024
Next review date	24 January 2027
This document replaces	HS-0001-005-v5 Lone Working Procedure (REDACTED)
This document was approved by	EFM DMT
This document was approved	15 January 2024
This document was ratified by	Health, Safety, Security and Fire Group
This document was ratified	24 January 2024
An equality analysis was completed on this policy on	24 November 2023
Document type	Redacted Version
FOI Clause (Private documents only)	N/A

Change record

Version	Date	Amendment details	Status
V5 (Redacted)	July 2022	Full review in line with Journey to Change and clarification of wording completed. REDACTED	Withdrawn
V6 (Redacted)	October 2023	Full review with input for the Care Groups to add further information and clarification. REDACTED	Published

Appendix 1 – REDACTED

Appendix 2 – REDACTED

Appendix 3 – REDACTED

Appendix 4 - Equality Analysis Screening Form

Please note: The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Health & Safety, EFM
Title	Lone Working Procedure
Type	Procedure
Geographical area covered	Trust wide
Aims and objectives	<p>The objectives of this procedure are to:</p> <ul style="list-style-type: none"> • Comply at all times with the Health and Safety at Work etc. Act 1974 etc., the Management of Health and Safety at Work Regulations 1999 and all other relevant statutory provisions; • Manage health and safety effectively to improve the quality of patient care, visitors and working conditions of staff and others.
Start date of Equality Analysis Screening	01 November 2023
End date of Equality Analysis Screening	24 November 2023

Section 2	Impacts
Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	All staff, patients, contractors and visitors and the general community.
Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or	<ul style="list-style-type: none"> • Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO

Business plan impact negatively on any of the protected characteristic groups?	<ul style="list-style-type: none"> • Sex (Men, women and gender neutral etc.) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO • Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO • Pregnancy and Maternity (includes pregnancy, women who are breastfeeding and women on maternity leave) NO • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO
Describe any negative impacts	<p>Some groups as identified above may not be able to carry out lone working in some circumstances.</p> <p>There will be times when health and safety has to take priority and this may have an impact on a person's protected characteristics. TEWV would however always try and mitigate as much as possible any negative impact whilst ensuring health and safety legislation is followed.</p>
Describe any positive impacts	Procedure is in place to reduce risk to all staff undertaking lone working.

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	<p>Health & Safety at Work Act 1974</p> <p>Management of Health and Safety at Work Regulations 1999 (MHSWR)</p> <p>INDG73(Rev 4 March 2020) Working Alone Health & Safety Guidance on the risks of lone working</p>

Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes
If you answered Yes above, describe the engagement and involvement that has taken place	Programme of visits and audits have been undertaken where concerns have been discussed and documented. These have been considered while reviewing the procedure.
If you answered No above, describe future plans that you may have to engage and involve people from different groups	

Section 4	Training needs
As part of this equality analysis have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	N/A
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

Check the information you have provided and ensure additional evidence can be provided if asked

Appendix 5 – Approval Checklist

	Title of document being reviewed:	Yes / No / Not applicable	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Are people involved in the development identified?	Yes	
	Has relevant expertise has been sought/used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
	Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are supporting documents referenced?	Yes	
6.	Training		
	Have training needs been considered?	Yes	
	Are training needs included in the document?	Yes	
7.	Implementation and monitoring		
	Does the document identify how it will be implemented and monitored?	Yes	

	Title of document being reviewed:	Yes / No / Not applicable	Comments
8.	Equality analysis		
	Has an equality analysis been completed for the document?	Yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	24 November 2023
9.	Approval		
	Does the document identify which committee/group will approve it?	Yes	
10.	Publication		
	Has the policy been reviewed for harm?	Yes	REDACTED = Harm Removed
	Does the document identify whether it is private or public?	Yes	Redacted version now public
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	Redacted version now public