

THE NHS STAFF COUNCIL
WORKING IN PARTNERSHIP


HEALTH, SAFETY AND WELLBEING
PARTNERSHIP GROUP

Improving safety for lone workers

A guide for
managers

February 2018





The Health, Safety and Wellbeing Partnership Group (HSWPG), has produced this advice to assist employers and managers in dealing with staff working on their own and, in particular, to stress the need for robust risk assessment and risk management in lone worker situations.

This document outlines what employers and managers should do to improve the personal safety of lone workers.

An increasing number of health and social care staff work alone in community settings such as patients' homes or on outreach work. Lone workers can be vulnerable and at increased risk of physical or verbal abuse and harassment from patients, clients, their relatives or members of the public simply because they don't have the immediate support of colleagues or security staff.

Lone working can be defined as any situation, or location, in which someone works without close or direct supervision; without a colleague nearby, or is out of sight or earshot of another colleague (NHS Protect 2017, Croner 2017). Even staff who work in a building with others may be considered lone workers. Lone workers face a variety of hazards. For more information on the hazards associated with lone working, please visit the [Health and Safety Executive website](#).

Employers have a duty to protect lone workers by reducing the risks of physical and verbal abuse. Staff can also take a number of practical steps to help improve their personal safety while out and about.

The local security management specialist

The local security management specialist (LSMS) is responsible to the security director for ensuring that the healthcare organisation has robust and up-to-date policies and procedures in place to ensure the safety of lone workers. In liaison with line managers, the LSMS should ensure that these are passed on to all relevant staff, including those responsible for their implementation and to those they are designed to safeguard

NHS Constitution (England only)

As part of the NHS Constitution, the NHS has committed to a number of pledges that relate to providing a high-quality working environment for staff. The provision of lone worker devices relates directly to the pledge in the Constitution to 'provide support and opportunities for staff to maintain their health, well-being and safety

Provider Standards (England only)

To comply with the requirements of the standard contract, providers of NHS care in England should comply with the Security Management Standards (NHS Protect 2016). These require organisations to assess the risks to its lone workers, including the risk of violence and take steps to avoid or control the risks and these measures are regularly and soundly monitored, reviewed and evaluated for their effectiveness (Standard 3.3)



What staff need to do

Staff have a responsibility under health and safety legislation to take reasonable care of themselves and to cooperate with their employer.

This responsibility includes making full use of conflict resolution training, training in the use of relevant technology and any other information, instructions, equipment and advice from line managers regarding working alone.

With good employer and line management support, lone worker jobs should be much safer. There are a number of things that staff can do to protect the safety for themselves and their colleagues:

- **Report incidents** – incidents and ‘near misses’, provide details about violent individuals, unsafe environments and important information on the risks faced. Staff can help you and your trust take steps to address these risks by reporting incidents.
- **Attend training** – make sure staff attend any training provided by your employer to help them in lone working situations.
- **Follow the lone worker policy and procedures** – make sure staff follow local procedures put in place to protect their safety. This includes guidance on reporting incidents and the use of lone worker devices, radios and other relevant technology.
- **Assess the risks to their personal safety** – when staff are going to be working alone, they should assess any immediate and unfolding risks to their safety. This is called ‘dynamic risk assessment’. As their manager, you should support any decision they make to withdraw to a place of safety if they feel in serious or imminent danger.

- **Make use of their lone worker devices** – there is now a wide range of technology that can support lone workers as they go about their work.

Your duties as a line manager

- You have a duty to ensure that all relevant policies and procedures are implemented and passed on to the lone working staff that you are responsible for.
- You must ensure that lone worker jobs have been effectively risk assessed.
- You have a duty to ensure that these staff are appropriately protected before entering a lone working situation, that they have the means of getting help, and you know where they are.

Risk assessment

You must ensure that a suitable and sufficient risk assessment is conducted in consultation with the appropriate people. These will include the lone worker themselves, health and safety representatives, Local Security Management Specialists (LSMS), health and safety manager and risk manager.

This assessment should consider the type of work, the environment, the patients, for example do they have a record of violence, and any specific factors to the lone worker (for example training and competences). Throughout this process, you should aim to ensure that all risks from lone working are identified and appropriate control measures introduced to minimise, control or remove them.



Prevention

When looking at ways of reducing the risk you should first look at ways of eliminating the hazard.

For example, if the risk is caused or increased by a visit to a patient, it may be safer if the patient comes to a healthcare environment. Alternatively, it may be safer if the member of staff is accompanied by a colleague during a visit. Inevitably there may be circumstances where staff regularly visit patients on their own. If this is the case, control measures must be put in place to reduce the risks.

Control measures should include:

- ensure that lone workers receive sufficient training, information, instruction and advice
- ensure that any necessary physical measures are put in place
- ensure that appropriate technology is available

There is now a wide range of technology that can support lone workers as they go about their work from systems integrated to mobile phones to stand alone units integrated into ID badge holders. NHS Protect (2017) provide further advice on the use of technology including the standards that lone worker devices and other technology should comply with.

Where the safety of lone workers is threatened, alternative arrangements should be made.

You should hold regular reviews of arrangements to ensure that all measures are effective and continue to meet the requirements of the lone worker. Risk assessments should be reviewed and revised after each incident.

If an incident occurs

If an incident occurs, you should ensure that the member of staff involved completes an incident reporting form as soon as possible, in line with local policy.

You should also ensure that relevant staff such as the LSMS is informed so that they can take the necessary action, such as contacting the police.

You will need to ensure that anyone involved in an assault incident has access to a list of relevant contacts or can be referred to the relevant person (for example LSMS, occupational health, staff support, counselling or psychological services). This will ensure that they are properly debriefed and receive a physical assessment and access to post-incident support. It also allows any injuries to be documented.

Sharing information

Where there has been a 'near miss' or an incident involving a team member, it is essential that you ensure the information is shared with other team members and colleagues who may be visiting the individual concerned, or going into an otherwise risky environment.

Training and supervision

You should ensure that staff are able to attend any training related to the management of violence and aggression, including conflict resolution, personal safety and the use of lone worker devices. You should also ensure that your staff have the skills and competencies to work alone safely. You will need to agree the way you support individuals, through appropriate supervision and monitoring.

The level of which will depend on the risk level and their individual capability. In general, the higher the level of risk and less experienced individuals are, the greater the need for supervision. If you have new workers or workers new to a situation you may need to arrange for them to be accompanied at the start.



Monitoring


You must put in place appropriate monitoring procedures to ensure effective communication.

You should consider:

- supervising lone workers periodically by visiting and observing individuals working alone
- agreeing regular contact between the lone worker and their supervisor
- the use of lone worker devices and other technology
- a robust system to ensure a lone worker has returned to their base or home once their task is completed


Support

The support you provide to staff is essential. If staff feel in serious or imminent danger when working alone, you should support any decision they make to withdraw to a place of safety. You should provide staff with support following an incident and allow them time to attend counselling if required. You should also follow up and act on incident reports.



Things to think about

- Are your staff trained in appropriate strategies for the prevention and management of violence?
- Have they received conflict resolution or other suitable training?
- Have they been issued with all policies and procedures relating to lone working?
- Have they been given all the information about the risks of aggressive and violent behaviour by patients/service users and the appropriate measures for controlling these risks?
- Have they been issued with appropriate lone worker safety devices/radios and the procedures for maintaining it?
- Have they been trained to confidently use the device and to understand how the support systems behind it will support them?
- Do they know how to report an incident?
- Do they know how important it is to report all incidents when they occur?
- Do they know who to report incidents to?
- Do they understand the importance of proper planning before a visit, the need to be aware of the risks and do everything they can in advance to ensure their own safety?
- Do they always leave an itinerary with you or their colleagues?
- Do they keep in regular contact?
- Can they carry out continual dynamic risk assessments during their visits?
- Are they aware that they should never put themselves or colleagues in danger and that, if they feel threatened, they should withdraw immediately?
- Do they appreciate the circumstances under which visits should be terminated?
- Do they understand their responsibility for their own safety?

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