Lone Worker Policy & Procedure
(Out-based, Community, Agile and After Hours Working)

Policy Ref: GOV-030

NHS Cheshire CCG Lone Worker Policy

Effective from insert date

Applies to all employees of NHS Cheshire CCG

This document will be read in conjunction with:
- Security Management Policy
- Risk Management Strategy
- Health & Safety Policy
- Serious Incident Management Policy & Procedure
- Agile Working Guidance
- Equal Opportunities Policy

Policy Revisions and Amendments			
Date	Section	Reason for Change	Approved By

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1. Introduction

The CCG recognises that during the course of their work, it may be essential for employees to work alone. This may occur as a regular part of an employee's working practice or may occur on an occasional basis. In either situation it will arise from an understanding that this is the most appropriate and effective way of delivering a particular service.

It is the policy of the CCG to make provision for the Health and Safety at Work Act (1974) and the Management of Health and Safety at Work Regulations (1999) and associated regulations. Under this legislation, the employer must ensure as far as reasonably practicable the health, safety and welfare of employees and those affected by the work, e.g. visitors such as contractors and self-employed people with whom the CCGs may engage.

The CCG is committed to minimising the risk of lone working for all employees. All possible steps will be taken to ensure that staff are not put at unnecessary risk through lone working.

This policy is based on advice and guidelines published by the Health and Safety Executive and NHS Employers to identify, manage, reduce and prevent risks to members of staff undertaking lone working.

2. Purpose

The purpose of this policy is to
- Ensure that all staff are aware of their responsibilities and take suitable precautions in relation to lone working
- Protect staff, so far as is reasonably practical, to reduce and prevent risks when lone working through risk assessment processes
- Ensure the risk of lone working is assessed in a systematic and ongoing way, and ensure that safe systems and methods of work are put in place to reduce the risk(s) so far as is reasonably practical
- Ensure that appropriate support is available to staff who have to work alone
- Encourage full reporting and recording of all incidents, near misses and injuries to staff related to lone working

3. Definitions

The Health and Safety Executive (HSE) defines lone working as 'those who work by themselves without close or direct supervision' and work-related violence as 'any incident in which a person is abused, threatened or assaulted in circumstances relating to their work'.

Lone working occurs when employees travel by themselves, carry out work in the community by themselves or work away from their base that may increase the risks to their security and safety and may include staff who :
- Work separately from others
- Work in care homes or individual's homes
- Work in isolated buildings or departments
- Work alone after others have left the building
- Travel alone between sites

4. Responsibilities

4.1 Responsibilities of the Governing Body

It has overall responsibility for ensuring the CCG has in place the necessary systems for the effective management of lone working and will ensure:-

- Through the line management structure that this policy and the procedures are applied fully and consistently, and that all employees are aware of the standards and behaviours required of them
- The provision of sufficient resources to implement the Health and Safety Policy
- The CCG complies with the requirements of Health and Safety legislation
- There are arrangements in place for identifying, evaluating and managing the risks associated with lone working
- There are arrangements for monitoring incidents linked to lone working
- That the policy is regularly reviewed and updated

4.2 Managers

Managers will ensure that:-

- Staff are aware of the policy and attend any training
- Staff complete a Display Screen Equipment assessment on a regular basis and specifically if they are working from home or there are any changes to the workstation
- Risk assessments (appendix 1) are carried out and reviewed annually or when systems change to mitigate or minimise risk
- They put procedures and safe systems of work into practice (appendix 2) which are designed to eliminate or reduce the risks associated with working alone
- The appropriate support is given to staff involved in an accident which may include referral to the Occupational Health Department
- They manage the effectiveness of preventative and control measure through an effective system of reporting, investigation and recording incidents, near misses and accidents

4.3 Staff

Employees are responsible for:-

- Taking reasonable care of themselves and others affected by their work activities and processes
- Following the policies, procedures, safe systems of work and guidelines designed for safe working
- Reporting all incidents, accidents and near misses affecting the health, safety and security of themselves and others, seeking advice as appropriate
- Reporting any dangers or potential dangers and concerns identified in respect of lone working
- Complete a Display Screen Equipment assessment on a regular basis and specifically if working from home or there are any changes to the workstation

4.4 H&S Representative

The person responsible for Health and Safety in the CCG will

- Ensure this policy is applied constantly and fairly to mitigate the risks to lone workers
- Inform the CCG of its obligations to mitigate the risks to lone workers
- Advise on the completion of risk assessments and any subsequent actions
- Support the improvement of processes before, during and after a period of working alone

4.5 CCG Human Resources

The HR Team will:-
- Support the CCG in the application of this policy

5. Risk Assessment

Working alone may put staff in a vulnerable position because it may be more difficult to summon help if things go wrong or their health and safety is at risk. People who work alone face the same hazards in their daily work as other workers but the degree of risk of harm may be greater than for other workers. This is particularly important for new and less experienced staff.

Appendix 5 provides details of the differing risks related to community, agile and home working. However, this is not an exhaustive list.

A risk assessment is a careful examination of what could cause harm, whether sufficient precautions are in place or what could be done to prevent harm and should be carried out prior to a period of lone working.

Hazards which lone workers may face or situations which may be an increased risk include:
- Accidents or emergencies arising out of work e.g. verbal abuse, physical assault, road traffic accident etc.
- Inadequate provision of rest, hygiene and welfare facilities
- Manual handling
- The remoteness or isolation of workplaces
- Any problems of communication such as no mobile signal
- Criminal activity from other persons
- The nature of potential injury or damage to health
- The level of experience and knowledge of individuals
- The availability of first aid facilities
- Access to relevant information held on customer alerts register
- Hazards that may affect certain groups of employees e.g. race, gender, age, disability, sexual orientation
- Staff delivering unwelcome information or bad news: whether they have received suitable and sufficient training to deliver sensitive or bad news and defuse potentially violent situations

Managers should ensure a Risk Assessment (appendix 1) is carried out annually and regularly reviewed where staff are required to work in lone situations.

Following completion of the risk assessment, managers must ensure that the appropriate action plans are in place to meet the specific needs of all lone workers within their area of control.

Some of the factors that need to be addressed within the risk assessment include:
- Communication and how to summon assistance if required
- Whether anyone is notified that there is a lone worker in the area
- Whether the line manager is aware that the person will be working alone especially if

outside normal working hours
- Whether emergency arrangements in addition to existing ones are required
- If the means of access to the area are adequately controlled to prevent unauthorised access
- Whether the activities being carried out suitable for one person
- The ability to facilitate or maintain agile or flexible working

There is a Good Practice Checklist for Managers at appendix 4.

6. Compliance Monitoring

There are two types of monitoring, which managers should carry out:

Active Monitoring:
Managers should ensure that systems and procedures are working without waiting until something goes wrong. It will confirm whether agreed procedures are actually being complied with by employees and whether they are workable in the individual circumstances and have the desired effect of preventing accidents or incidents

Reactive Monitoring:
Managers should investigate all accidents, incidents and near misses so that everyone involved can learn from the experience. Managers must ensure that employees understand the incident reporting and recording system and that all such incidents are reported. Information gained from this process will also assist in the effective review, and modification if necessary, of risk assessments and control measure.

7. Working from home

There will always be greater risks for lone workers with no direct supervision or anyone to help them if things go wrong.

The same health and safety responsibilities apply to those working from home as for those working from an office or other work environment to mitigate risks as far as is reasonably possible. This includes supervision, education and training, as well as implementing sufficient control measures to protect the employee.

It is important to keep in contact with employees to ensure they do not feel disconnected, isolated or abandoned which can affect stress levels and their mental health.

7.1 Working with display screen equipment

For those people who are working at home on a regular basis, the risks associated with using display screen equipment (DSE) must be reasonably reduced. This includes employees completing basic workstation assessments at home.

There are some simple steps people can take to reduce the risks from display screen work:
- Breaking up long spells of DSE work with rest breaks (at least 5 minutes every hour) or changes in activity
- Avoiding awkward, static postures by regularly changing position
- Getting up and moving or doing stretching exercises
- Avoiding eye fatigue by changing focus or blinking from time to time

8. Guidance on Lone Working

8.1 Outside Office Hours

From time to time employees may need to carry out their work outside of normal office hours, such as at weekends and evenings. The following precautions must be taken to ensure your health and safety continues to be protected:-

- Always let your line manager know if you are staying behind in the office at the end of the normal working day
- Ensure that all window and doors are secured to prevent unauthorized access so that the working environment is as safe as possible
- Do not open doors to any strangers, no matter what identification they have. If they are meant to be there, they will either have keys, a swipe card or other means of access
- Never give security codes, keys or swipe cards to a stranger. Again, there are channels they can use to gather information and access if they are legitimate and are meant to have access
- Make sure your escape routes are available to you and not locked, as may happen outside of normal working hours
- Do not use the lifts at these times as you may become trapped inside and unable to gain assistance or attention
- Should the fire alarm activate whilst you are in the office alone, you must leave the building immediately by the nearest fire exit. Make your way to the front of the building, a safe distance way and wait for the emergency services

In addition to the information above employees should:-

- Sit nearest the exit
- Make themselves aware of locks, bolts etc. on door and how they work
- Ensure colleagues are aware that a meeting is taking place
- Ensure visitors cannot see security codes on coded doors

8.3 The Buddy System

It is essential that lone workers keep in contact with colleagues and ensure that they make another colleague aware of their movements. This can be done be implementing the 'buddy system'.

To operate the buddy system, the lone worker must nominate a buddy to contact for the period of time they will be working alone. The nominated buddy will:-

- Ensure they have access to the lone worker's electronic diary with details of visits
- Have all the necessary contact details for the lone worker, including personal contact details such as their personal mobile number, emergency contact etc.
- Attempt to contact the lone worker if they do not contact the buddy as agreed
- Pass the details to another colleague if you will not be contactable before the lone worker is due to return e.g if you finish work early
- Follow the escalation procedure for alerting their senior manager if the lone worker cannot be contacted, or if they fail to contact their buddy within the agreed timescales

Essential to the effectiveness of the buddy system are the following factors:-

- The buddy must be made aware they have been nominated, agree to be a buddy and what the procedures and requirements are for the role
- Contingency arrangements are in place for someone else to take over the role of the buddy if the lone working situation extends past the end of the nominated person's normal working day, you are on annual leave, sick etc.

You must inform your buddy of the following:-
- The location of the visit
- A contact phone number
- The time of the appointment
- The likely or estimated length of the visit
- The time you are expected to return to the office / base or call in
- If not returning to the office, the time and location of your next visit or the time you are due to arrive home
- If driving, your car make, model, colour and registration

It is important that contact arrangements, once in place, are adhered to. Many such procedures fail simply because employees forget to make the necessary call when they finish their shift. The result is unnecessary escalation and expense, which undermines the integrity of the process.

9. Lone Working in Office Environments

This guidance should be used to assist in the development of local procedures and safe systems of work following risk assessment of lone working activities. Staff working alone within a department during office hours should consider taking the following precautions as necessary:
- Ensure staff are near a telephone to call for help if needed
- Do not take valuables to work unless absolutely necessary and secure them in an appropriate place
- Ensure that keys are secured and not accessible to visitors
- If you become anxious regarding your safety, call a colleague for your line manager for assistance
- Avoid arranging meetings with people they don't know if they are alone in the workplace
- If they are meeting someone, let other people know who they are meeting, when, where and telephoning them to let them know that their visitor has arrived and that they will get back to them at a certain time
- Not tell anyone that they are alone in the workplace
- Report any incidents to the relevant manager as soon as practicable after any events

9.1 Safety When Approaching or Opening the Workplace
When approaching the workplace, be alert. If you see a broken window, signs of forced entry or an insecure door, assume that someone is on the premises. Go to a safe place and telephone the police immediately and inform your manager. Do not go into the workplace to use the telephone.

9.2 Safety When Leaving or Closing the Workplace
If you see someone acting suspiciously or inappropriately outside do not go out alone to check. Stay inside and telephone the police.

If you are usually collected by car, think about waiting inside until it arrives before going out. Similarly, if you are travelling by public transport, think about not leaving the workplace so early that you have to wait a long time for the bus or train.

Check the premises are secure before you leave.

9.3 Interviewing Service Users in the Office

When interviewing in the office consider the following:-

- Sit nearest the door or exit
- Familiarize yourself with locks, bolts etc. On exit doors and how they work
- Ensure that colleagues are aware that an interview is taking place
- If there is ever a need to take a client/visitor through a coded security door ensure that the client/visitor cannot see the code

9.4 Weekend Working

Working on CCG premises during weekends must be agreed with your line manager beforehand and the following precautions should be put in place:

- Ensure that all windows and doors are secured to prevent unauthorised access, so that the working environment is as safe as possible
- Do not open the doors to any strangers no matter what identification they have. If they are meant to be there, they will either have keys or another means of access
- Never give security codes or keys to any stranger. Again there are channels they can use to gather information if they are legitimate and are meant to have access
- Make sure your fire escape routes are available to you and not locked (as may happen outside working hours)
- Do not use lifts at these times, as you may become trapped inside and unable to gain assistance or attention
- Should the fire alarm activate whilst you are in the office alone, you must leave the building immediately by the nearest fire exit. Make your way to the muster point and wait for the emergency services to arrive
- Should you discover any problems with equipment whilst in the office, do not attempt to repair or tamper with the controls. If it is not serious, report it to your manager the following working day
- On leaving, ensure that all windows are closed and doors locked
- Ensure you have access to a phone in case you need to call the emergency services
- Park as close to the building as possible in a well-lit area
- Move your car closer to the building during normal hours if you know you will be leaving late to minimise the risks when leaving the building on your own
- If you change your plans, let your line manager know immediately

10. Home Visits

When visiting people in their homes, remember that it is their home and their territory. People may feel that employees from statutory agencies are invading their privacy, imposing rules and regulations, taking away their power or intimidating.

Visits to a patient's home represent a series of particular risks to which a lone worker and the CCG should aim to minimise. Before making a home visit alone, the member of staff should assess the risks (appendix 1) prior to the visit to ascertain whether it is safe enough to attend

alone. If you have any concerns regarding the safety of a particular home visit, you should either take a colleague with you or rearrange it for a time when the risks can be minimised.

10.1 Prior to a Home Visit

Prior to a home visit, a risk assessment should be carried out to determine whether the patient is high / potential high risk, taking into account the following:-

- Review the existing information regarding the patient their families and the location to be visited from case notes, system records etc. on the patient,
- Review the last risk assessment and interventions. If they are unavailable, contact the referrer to ascertain whether or not there are any relevant risk factors present and / or whether there is any reason why it would be inadvisable to visit the patient alone
- Consider whether the situation has changed since the last visit
- Double check the address and telephone number
- In the event there are no records or information available, consider whether or not it would be more appropriate to invite the patient into the workplace or a safe place, therefore avoiding the need to make a home visit
- Ensure the visit details are in your electronic diary and it can be accessed by your buddy and / or colleagues
- Always ensure that colleagues know where you are and are aware of:
  - Your expected time of return
  - Names and addresses of patients being visited
  - The time of appointment if visiting alone
  - Your mobile number
- Make sure you carry personal identification e.g. name badge or ID to verify your authenticity
- When not required to wear a uniform, dress appropriately for the area or patient to be visited, particularly when a patient's culture demands that women are covered
- Minimise the amount of jewellery you wear
- Wear shoes and clothes that do not hinder movement or ability to run in case of an emergency
- Programme your mobile phone with speed dial numbers
- Consider the time, location and route
- Whether a second member of staff should be present
- Your vehicle is well maintained and has sufficient fuel

10.2 Driving To and From a Home Visit

Whist driving to a home visit the employee should ensure:-
- Plan your route
- Bags, drugs and equipment are concealed and cannot be seen when the vehicle is parked
- You only carry to individual appointments the equipment that is needed
- You lock your car while driving and waiting
- Always lock your vehicle when entering and leaving it
- Check you have not left your lights on when leaving your vehicle
- Do not leave valuables, paperwork etc. On display in vehicle
- Have your vehicle keys in your hand so you can get straight into the vehicle
- Look around your vehicle as you approach in case someone is crouching down
- Look inside before entering your vehicle to ensure no one is hiding there - even if the doors were locked - use a torch if necessary

- If you are followed in your vehicle do not get out, ensure that it is locked, flash your lights and sound the horn to attract attention
- Try not to park in dark, deserted streets or car parks
- Always try to reverse into a parking space so you can be ready to leave quickly if necessary
- If you must use a multi-storey car park, try to park on the ground floor as stairs and lifts can be dangerous places. Have the correct change ready for the machine
- Don't linger longer than necessary and keep alert at all times
- Always carry a torch with you
- If in difficulty and a stranger offers to help, do not get out of your vehicle - ask the person to phone for help. The safest way to help a stranded motorist is to stop at the next telephone and call for assistance
- If possible always travel on busy roads, avoid isolated areas
- Be careful if someone flags you down on a quiet road. Make sure it is a genuine emergency before you wind down the window or unlock your door. If you are in any doubt, drive on and call the police
- Ensure your vehicle has sufficient fuel for the journey
- Consider joining a motoring / breakdown organisation such as green flag, the AA or RAC

10.3 Walking To and From a Home Visit

If walking, walk facing the oncoming traffic
- Be alert, walk with purpose and confidence, avoiding groups of rowdy people
- Do not take short cuts
- Do not wear your identification badge when walking in the street
- Avoid short cuts through unlit or deserted areas such as alleys or waste ground and carry a torch in the dark
- Do not overload yourself with packages or bags
- Walk near to the kerb edge and away from buildings and alleys so that someone lurking in an alley has further to come to reach you
- Whenever possible, do not walk alone
- Walk facing the traffic so that a car cannot pull up behind you unnoticed
- Do keep your handbag/briefcase close to your body. If someone makes a grab for your bag, it is better to let it go rather than risk injury. Your personal safety is more important than your handbag or other belongings
- Keep your keys in a safe place such as in your hand or your pocket
- Avoid wearing excessive jewellery
- If you carry a mobile telephone, ensure that it is easily accessible and consider presetting your emergency call number
- Consider carrying a personal attack alarm in a handy place - regularly check the alarm function and condition of the batteries

If you feel you are being followed, feel uneasy or uncertain, remain with or return to your car and drive away for a short while or to a place of safety. If your suspicions are confirmed, contact the police.

10.4 On Arrival and During a Home Visit

On arrival and during a home visit the employee should:-
- Be alert, aware and safe

- Park with care as near to the address as possible in a well-lit area away from subways and waste ground
- Do not leave equipment / valuables on show in your car
- Assess the situation on approach and be prepared to abandon or postpone the visit if you are concerned for your safety
- Check for obvious dangers such as dogs, people behaving suspiciously
- After knocking / ringing, stand back and slightly to the side of the door
- Ensure your identity badge is visible
- If the person answering the door makes you feel uneasy about entering, an excuse should be made not to enter; for instance, if the patient or relatives are drunk or high on non-prescription drugs
- Follow the occupants when entering, do not take the lead
- Note the way in and out, the type of lock or handle etc.
- Be aware of other people in the property
- Remain alert while in the house and look for anything that may present a problem
- Introduce yourself politely and explain the reason for your visit
- When taking a seat within the property, ensure you are near an exit route
- Avoid criticism of the person you're talking to and avoid unfriendly gestures
- Stay calm, show sympathy / empathy and remain engaged in conversation with the person.
- Be aware of any obstacles that may prevent you from exiting the premises quickly if needed
- Sit on the edge of a chair or sofa, near the arm as this will allow you to stand up more easily and quickly if necessary
- Note any objects/items that could be used as a weapon
- Try to leave with dignity as it may help any future dealings with the Service User/Client

Above all, if you are in serious or imminent danger – leave immediately

10.5 After a Home Visit

On return to the car the employee should:-
- Have your keys ready
- Check the interior before getting in
- Lock the doors as soon as you get in

If, for whatever reason, you find you will not be back at the expected time you must ring and let your colleagues know of any changes to your plans.

If you have to make a visit at the end of a shift, ensure that you report back to base or contact a designated person.

If a risk is highlighted that has not previously been detailed on the records of the patient or premises, the employee should log a professional concern on the appropriate system(s) to advise and alert others.

10.6 Known High Risk Home Visits

Lone visits **MUST NOT** be made to clients or locations where there is a history of violent or aggressive incidents unless all possible risks have been accounted for and eliminated or mitigated as far as is reasonably possible. Managers should advise on how contact should be made in these circumstances based on the risk assessment.

If a visit is deemed to be a potential high risk, it may be necessary to visit in pairs. The need for such additional support should be discussed with your line manager so that appropriate arrangements can be made. However, sending staff in pairs must not be relied upon to reduce the risks involved. In circumstances where there have been instances of abuse or misrepresentation of what has been said, visiting in pairs may be considered, but this must be supported by a risk assessment.

You should report back to your work base or contact a designated person that you have safely left the person / premises. A record must be made of the times entering and leaving the patient's home.

10.7 Dealing with Animals

If there is a known problem with animals at a particular address or location, the occupants should be contacted and asked to remove or secure the animal before arrival, bearing in mind this may provoke a negative reaction. Clinical procedures may provoke a reaction from an animal or pet, so it may be prudent to request that it be removed or placed in a different room for the duration of the visit.

If a lone worker is confronted by an aggressive animal on the first visit to the patient or premises, they should not put themselves at risk. If necessary, they should abandon the visit and report the incident in accordance with local reporting procedures.

If a lone worker feels uneasy with animals being present, they should politely request that they be removed, bearing in mind that this could provoke a negative reaction. All possible efforts should be made to ensure that the situation is managed and de-escalated should hostility become evident. If this is not possible, alternative arrangements should be made to carry out the visit, such as rescheduling so that the lone worker can be accompanied or asking a colleague more at ease with animals to accompany them.

11. What to do if a Difficult situation Occurs

Try to defuse the situation - Listen, acknowledge that the person is distressed and ask what you can do to help them

Help the person to feel in control of themselves - Remain calm and don't take the aggression/abuse personally.

If you feel at risk from violence - Leave the situation **IMMEDIATELY** and report the occurrence.
If unable to leave, protect yourself as follows;
- Place barriers between yourself and the assailant - continue talking and tell the patient you mean them no harm
- Use reasonable force to protect yourself if absolutely necessary and only as a last resort.

Observe peoples' behaviour closely - Be aware of the following non-verbal communication
- Body language
- Facial expression
- Eye contact
- Tone of voice
- Physical touch

- Appearance
- Posture
- Proximity
- Hand and foot movement

11.1 Use of Self-Defence

The law in relation to the use of Self Defence was clearly described in the Appeal Judgement given in Palmer v Regina 1971 and still applies today.

In law, self-defence is permitted in law to the extent of what is 'reasonably necessary' to stop the attack.

It is not permitted beyond what is 'reasonably necessary' in time and degree to stop the attack.

11.2 What Is Reasonable Force?

Each situation is different, and what may be deemed as reasonable force used to defend yourself when a drunken person attacks you with a broken bottle in the street, may not be deemed as reasonable in a social services day centre when dealing with a service user with learning difficulties. Extreme care must be taken in using force as a means of self-defence, and if the only consideration is your own safety, then escape should be your first option.

12. Loss of Contact or a Colleague Does Not Return as Expected (see appendix 3)

If a colleague has not returned to the office or made contact with their buddy to confirm their whereabouts, the most important thing to remember is not to panic as it may be that they have genuinely forgotten to let you know of changes to their plans or have been delayed.

The following sequence should be followed:-
- Ask other colleagues if they have heard from that person or have been notified of any changes to their plans
- Ring their mobile, bearing in mind they may be driving and unable to answer until it is safe
  to do so, and leave a message asking them to contact you immediately

If they answer but sound distressed, you should notify their line manager immediately. If the line manager is not available, notify the most senior person on the premises or on-call

In cases where the person answers but appears to be in distress, the police should be called immediately.

If you receive no answer, their line manager should try to contact them on a personal mobile or at home.

If it has not been possible to contact the person, the line manager should try to contact them through their next of kin before contacting the police as a last resort.

If there has been an incident which prevented the person from being contacted, this should be recorded on the system.

13. Requesting Assistance

If you feel your safety is being compromised, you should contact a colleague, your line manager or dial 112 for a quicker response as this goes directly to the police, even if there is no mobile signal.

14. Support Following a Physical / Non-Physical Assault

Staff may be affected emotionally following a physical or non-physical assault. Managers need to be aware that individuals may need counselling support, especially after the incident and on resuming or returning to work. This is particularly important given the potential impact of stress on the employee's current or future health.

It is therefore essential that the line manager conducts a full debriefing with the staff involved and considers the following:
- Take concerns seriously even if the incident seems to have been minor
- Hold regular team meetings to discuss problems and learn from them
- Allow staff to talk through the incident
- Thoroughly investigate the incident and update procedures to prevent recurrence
- Be aware that minor problems can sometimes be the precursor to more serious incidents
- Follow up at a later date to ensure staff are fully recovered and working normally, and that any amendments to procedures are being followed
- The arrangements for professional counselling via the Staff Support Service/Occupational Health

15. Post-incident Support

Incidents that occur in lone working situations, whether they involve assaults on staff, theft or criminal damage to NHS property, have a direct impact on both the employee and organisation.

Employers should have measures in place to support any member of staff who has been subject to an abusive or violent incident. These might include a debrief following the incident, psychological support, counselling services, post-trauma support, peer support and access to the staff member's professional or trade union representative. This policy provides information about what support is available and relevant contact details.

If assaulted, the individual will also need to undergo a physical assessment and receive treatment for any injuries, so they are well enough to return to work.

15.1 Post-incident Action

Following an incident or threat in a lone working situation, effective arrangements should be made to ensure that incidents and risks are reported and dealt with in accordance with the NHS SMS national frameworks for tackling violence and security management work.

If the incident involves a physical assault on an NHS staff member, it must be reported and investigated according to the framework for tackling violence against NHS staff established in November 2003, and the guidance to underpin this. Where appropriate, it should also be reported to the police as soon as possible.

If the incident involves a non-physical assault, such as verbal abuse, it must be reported, investigated and dealt with according to the national framework for nonphysical assaults against NHS staff established in April 2004 and the underpinning guidance.

For all incidents, irrespective of whether the police may be pursuing sanctions against offenders, an investigation should be conducted to establish the causes of the incident and whether any further action needs to be taken. This action might be aimed at creating a pro-security culture, deterrence, prevention or detection.

Where lessons can be learned, it is essential that they are used in the revision of procedures and systems locally, as well as guidance nationally. This will ensure that lone workers are given the best possible protection and minimise the risks that they face.

For incidents where violence is not a factor, such as theft or criminal damage, arrangements should be in place to ensure that staff report these to the police, where appropriate, and through their local incident reporting systems. Reporting has a significant effect, as it will determine the actions following an investigation. The investigation will establish, if possible, who the offenders are and whether there are any trends or patterns that can be identified to prevent a recurrence and determine the actions required to control and reduce the risk. Such information can also be used to inform action that needs to be taken to enhance pro-security culture, deterrence, prevention and detection and allow for solutions to be developed for specific problems.

Through effective investigative work, the CCG can identify resources lost as a direct result of an incident. This provides the information and evidence needed to attempt to recover that loss, whether through the criminal courts, by way of compensation or by seeking redress through the civil courts.

15.2 Post-incident Review

Post-incident review will enable all available information to be used to ensure that lessons can be learned and the risk of future incidents minimised. The key to post incident review, risk assessment and follow-up action is an understanding of how and why incidents occur in lone working situations and being able learn from that understanding. In order to achieve this, the following factors should be considered:
- type of incident (for example, physical assault/theft of property or equipment)
- severity of incident
- likelihood of incident recurring
- cost to healthcare organisation (human and financial)
- individuals and staff groups involved
- weaknesses or failures that have allowed these incidents to take place (for example, procedural, systematic or technological)
- training needs analysis of staff, in relation to the prevention and management of violence, the correct use and operation of lone worker protection technology or other relevant training
- review of measures in place to manage and reduce identified risk
- review of the effectiveness of support measures for the staff involved
- technology such as mobile phones is available to protect lone workers

Managers should ensure that the comprehensive and robust lone working policies and procedures developed and implemented are reviewed after an incident that exposes a fundamental weakness or failure.

15.3 Sanctions

There are various sanctions that can be taken against individuals (or groups) who abuse NHS staff and professionals, or who steal or inflict damage on its property. These range from criminal prosecutions and Anti-Social Behaviour Orders to civil injunctions.

Investigation of incidents will inevitably lead not only to more intelligence about the problems and possible solutions, but also to more sanctions being taken against offenders. This can be achieved by close working with the police, the Crown Prosecution Service and the NHS SMS Legal Protection Unit.

If staff who report incidents are part of the investigation process, feel supported and see that improvements in working practices are made to reduce the levels of risk from violence and aggression, the more confident they will be in reporting future incidents. As a consequence, they will feel safer and more secure in their working environment.

More sanctions against offenders, where appropriate, will help develop a strong deterrent message that the NHS will take firm action to protect its staff, particularly those who work alone to deliver vital healthcare to the most vulnerable in the community.

It is important to remember that following an incident and investigation, the investigator should keep the victim (and any witnesses) fully informed of progress, supported and, where appropriate, involved in the process as the case progresses to court. They should refer to the Home Office website, where they can read the victim's charter and, more specifically, the code of practice for victims of crime, which sets out the services that victims can expect to receive from the criminal justice system:
https://www.gov.uk/government/publications/the-code-of-practice-for-victims-of-crime

16. Incident Reporting

In order to manage lone worker risks it is important that incidents, accidents and concerns are reported through the CCG incident reporting system. Regular monitoring of incidents and near misses will allow lone worker issues to be considered and investigated when required.

Incident reporting is an integral part of the risk management process. It allows the necessary information to be gathered to identify actual or potential problems so that lessons can be learned and solutions developed to prevent recurrence.

It is essential that where lessons can be learnt that they are incorporated into revisions of local procedures and systems to ensure that lone workers are provided with the best possible protection, if the risks they face are to be minimised.

Serious incidents which can be reported immediately without waiting a precautionary 3 day period must be reported by the Health and Safety Lead to the Health and Safety Executive without delay

If an incident causes more than 7 consecutive days absence, there is a legal requirement for it to be reported to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013. This must be done in addition to reporting all physical assaults to the NHS SMS through its physical assault reporting system (PARS).

17. Training

Where applicable Conflict Resolution training should be made available to those staff who may need it as part of their working practices. Training is vital in areas where there is limited supervision to control and guide in situations of uncertainty. Managers must identify the training needs of lone workers and arrange for it to be provided to ensure the individual can carry out their job safely.

18. Medical Fitness

Consideration must be given to ensure that lone workers are medically fit to carry out the work. Should the risk assessment identify hazards where a standard of medical fitness may be required, management should consult the Occupational Health Service/HR department for further advice and guidance.

19. Reference Documents

The following documents should be read in conjunction with this guidance:
* Health and Safety at Work Act 1974
* Management of Health and Safety at Work Regulations 1999
* Workplace (Health, Safety and Welfare) Regulations 1992
* Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
* Safety Representatives and Safety Committees Regulations 1977
* Health and Safety (Consultation with Employees) Regulations 1996
* Corporate Manslaughter and Corporate Homicide Act 2007
* NHS Protect Document - Not Alone: A guide for the Better Protection of Lone Workers in the NHS
* The Health and Safety (HSE) leaflet Protecting Lone Workers: How to Manage the Risks of Working Alone

20.Monitoring

This policy will be reviewed every 3 years and in accordance with the following on an as and when required basis:

* Legislative changes
* Good practice guidance
* Case law
* Significant incidents reported

21. Equality Impact Assessment

The CCG aims to design and implement services, policies and measures that are fair and equitable. As part of its development, this policy and its impact on staff, patients and the public has been taken into consideration. The purpose of the assessment is to improve service delivery by minimising and if possible removing any disproportionate adverse impact on employees, patients and the public on the grounds of their protected characteristics as defined in the Equality Act (2010).

An Equality Impact Assessment has been completed to support this policy

Risk Assessment for Lone Workers

Patient's Name / Circumstances	
Address or Premises	
Assessment Completed by	
Post Title	
Date	

What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done

If an incident happens it should be reviewed and a professional concern recorded on Datix or other reporting system and a flash alert added to the patient records on Emis. Your line manager can provide instructions and advice on completing these actions.

Senior Manager Name	
Post Title	
Date	

Lone Workers Visit Preparation Procedure

```
          ┌──────────────────────┐
          │  Prepare for visit   │
          │  following the       │
          │  information         │
          │  provided above      │
          └──────────┬───────────┘
                     ▼
┌──────────────┐  ┌──────────────┐  ┌──────────────┐
│   Unsafe     │◄─│  Travel to   │─►│    Safe      │
│ environment  │  │  premises    │  │ environment  │
└──────┬───────┘  └──────────────┘  └──────┬───────┘
       ▼                                   ▼
┌──────────────┐                    ┌──────────────┐
│ Return to    │                    │  Continue    │
│ base         │                    │ planned visit│
└──────┬───────┘                    └──────┬───────┘
       ▼                                   ▼
┌──────────────┐                    ┌──────────────┐
│ Review       │                    │Risk identified│
│ incident,    │                    │ during visit │
│ complete     │                    └──────┬───────┘
│ professional │                           ▼
│ concern on   │                    ┌──────────────┐
│ Datix or other│◄──────────────────│ Leave the    │
│ reporting    │                    │ premises     │
│ system and add│                   └──────────────┘
│ a flash alert to│
│ the patient  │
└──────────────┘
```
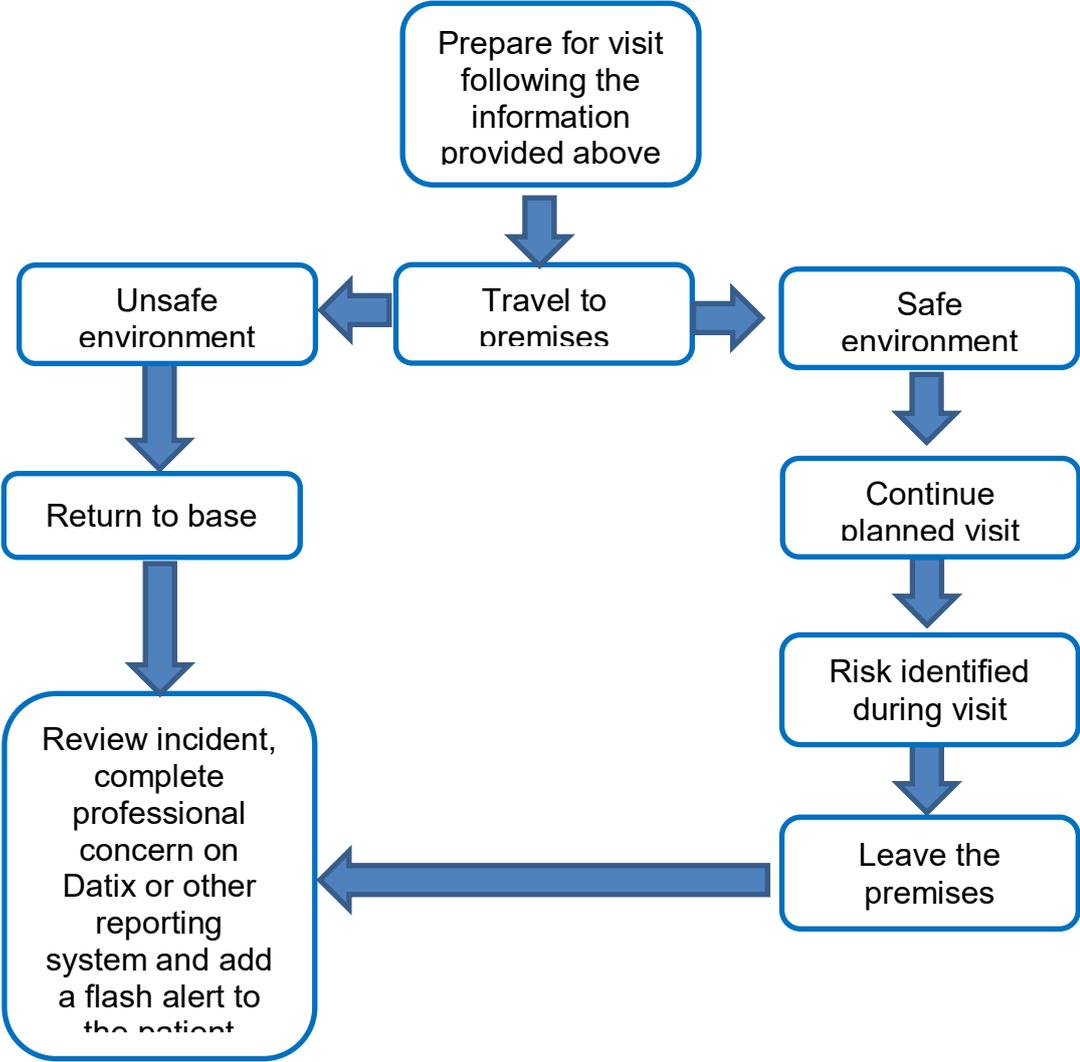
Loss of Contact of if a Colleague Does Not Return as Expected

Loss of contact / no return

Ring work mobile

Call answered → Is the employee distressed?
- Yes → Call the police
- No → Review incident, complete professional concern on Datix or other reporting system and add a flash

Call NOT answered → Notify line manager → Ring personal mobile number

Call answered → Is the employee distressed? → Yes → Call the police

Call not answered → Line manager to contact the next of kin and Senior Manager on-call
- No → (to Call the police path)
- Yes → Review incident, complete professional concern on Datix or other reporting system and add a flash alert to the patient records on Emis → Call the police

Good Practice Checklist for Managers

Adapted from NHS Counter Fraud and Security Management Service Guidance on Lone Working

Are Your Staff -		
	Yes / No	Comments
Trained in relevant and appropriate strategies for the diffusion and prevention of violence?		
Briefed about local procedures and safe systems of work for the area where they work?		
Given all relevant information available about the potential for aggression and violence service users?		
Issued with appropriate safety equipment?		
Aware of the procedures for maintaining such equipment?		
Aware of the importance of previewing cases?		

Aware of the importance of leaving an itinerary?		
Aware of the need to keep contact with colleagues?		
Aware of how to obtain support and advice from management in and outside normal working hours?		
Aware of how to obtain authorisation for an accompanied visit?		
Do Staff -		
Appreciate the circumstances under which meetings/interviews should be terminated?		
Appreciate their responsibilities for their own safety?		
Understand the provisions for staff support by the CCG and the mechanism to access such support?		
Appreciate the requirements for reporting and recording incidents in relation to lone working		

Appendix 5

Potential Lone Workers and Associated Risks

Health and safety legislation: applies to agile workers and home workers in the same way as it applies to office-based staff. An employer has a duty to take reasonable care of an employee's physical and mental health. The steps an employer would normally take in the workplace to assess health and safety should also be taken at home.

Lone Worker (Based Out of Office)

Community Worker

Risks
- Violence / Abuse from clients
- Loss / theft of equipment
- Infection
- Travel
- DSE - MSK

Agile Worker

Risks
- DSE - MSK
- Hackers
- Loss / theft of equipment
- Infection
- Travel

Working at Home

Risks
- DSE - MSK, Eye sight, Headaches
- Mental Health - isolation, depression
- Trips/Slips/Falls
- Disablility - reasonable adjustments
- Domestic violence / abuse