

# Improving safety for lone workers



A guide for managers

**THE NHS STAFF COUNCIL**  
**WORKING IN PARTNERSHIP**

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PARTNERSHIP OCCUPATIONAL SAFETY AND  
HEALTH IN HEALTHCARE GROUP

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## A guide for managers

The Partnership for Occupational Safety and Health in Healthcare (POSHH), working closely with the NHS Security Management Service, has produced this advice to assist employers and managers in dealing with the important issue of 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. A separate document has been produced for members of staff and is available from the NHS Employers website [www.nhsemployers.org/HealthyWorkplaces/POSHH](http://www.nhsemployers.org/HealthyWorkplaces/POSHH)

An increasing number of NHS 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. It was for this reason that the NHS in England centrally funded and subsidised the provision of 30,000 lone worker devices in summer 2009.

The NHS Security Management Service defines lone working as any situation, or location, in which someone works without a colleague nearby, or is out of sight or earshot of another colleague. 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 [www.hse.gov.uk](http://www.hse.gov.uk)

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**

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'.

### **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 still a number of things that staff can do to protect their safety and that of 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 the use of their lone worker protection devices.

### **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 the Reliance Protect lone worker solution if it is provided**

There is now a wide range of technology that can support lone workers as they go about their work and the NHS is providing trusts with the Reliance Protect lone worker solution.

Your employer may provide an alternative to this system but, whichever system is offered, staff should make sure they understand and can use it.

The Reliance Protect lone worker device provides a discreet and simple way of raising an alarm if necessary, while also helping to create a culture of dynamic risk assessment.

The device can also capture audio recordings of verbal or physical assault which can be used as evidence in court.

### **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 properly risk assessed.
- You have a duty to ensure that these staff are appropriately protected before entering a lone working situation.

### **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, and your LSMS, health and safety manager and risk manager.

This assessment should take into account 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:**

- ensuring that lone workers receive sufficient training, information, instruction and advice
- ensuring that any necessary physical measures are put in place
- ensuring that appropriate technology is made available. The NHS Security Management Service has selected the Reliance Protect lone worker solution, which features the Identicom lone worker device as an effective means of reducing the risks to lone workers in the community.

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 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 proper access to post-incident support. It also allows any injuries to be documented.

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### 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.

### 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.

### A quick checklist

- Are your staff trained in appropriate strategies for the prevention and management of violence?
- Have they received conflict resolution 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 equipment 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?

### Contact us

For more information on how to become involved in our work, email [getinvolved@nhsemployers.org](mailto:getinvolved@nhsemployers.org)

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