

Sent via email

Information Governance

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Our ref: FOI/2016/025

31st March 2016

Dear [REDACTED]

Freedom of Information Act 2000 request: *Community Nurses & Lone Worker Information*

With reference to your request for information, dated 1st March, made under section 1(1) of the Freedom of Information Act, I am writing to inform you of the outcome of your information request.

You asked the following:

1. How many community nurses do you employ?

(By community nurse I mean: district nurses; health visitors; mental health nurses; community specialist nurse practitioners and any others who work with patients in community settings, including patients' homes – please use your own organisation's way of categorising and capturing that data to find the answer).

The headcount for community nurses employed by the Trust is 885.

2. Do you supply your community nurses with personal alarms or other type of lone worker protection device?

(i) if yes, please specify which kind of devices (ie; personal alarm)?

“Skyguard” Personal Safety Lone Worker Devices – monitored 24/7

(ii) if yes, please specify since which date you have supplied these devices?

Roll-out of the devices across the Trust commenced 16th March, 2015

(iii) if no, please specify if you have ever supplied community nurses with this kind of device and when you stopped supplying them?

N/A

3. What safety plans do you have in place for lone workers? Please share any safety plan and lone working policy.

All Community Nursing staff have access to guidance produced by the Trust (please refer to the attached policy). All staff receive Conflict Resolution Training which is mandatory.

Each Staff group who deploy lone working staff in the community have their own defined “buddy” systems, including the Argyll Monitoring device and escalation procedures. The NHS Local Security Management Specialist is available for advice and guidance.

This completes our response to your request for information. If you are unhappy with our response, please write to us giving your reasons and we will address them. If you remain dissatisfied you are entitled to appeal to the Information Commissioner:

Customer Contact
Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow SK9 5AF
Tel: 0303 123 1113
http://ico.org.uk/concerns/getting/report_concern_foi

Yours sincerely,

Cyndee Massa
Information Governance Facilitator
Central London Community Healthcare NHS Trust

TITLE: Lone Worker Policy

VALID FROM: 1st April 2015

EXPIRES: 31st March 2018

Version:	2.0
Policy reference and description of where held.	FHS 08
Title, name and contact details for author:	██████████ Local Security Management Specialist. ██████████ ██████████
Title, name and contact details for responsible director:	Chief Nurse, ██████████
Approved by originating committee, executive or departmental management group	Fire, Health & Safety Group 25 th March 2015
Ratified by Policy Ratification Group:	31 st March 2015
Review date: 2 years maximum for clinical guidelines 3 years maximum for other documents	April 2018
Target audience	All CLCH staff, including Bank, Interim, Agency and Contractors.

Version Control Sheet

Version	Date	Author	Status	Comments
0.1	4 th March 2015	██████████	Draft	New Policy drafted
1.0	30 March 2015	██████████	Final	Policy finalised to ensure compliance with the policy template
2.0	6 th Jan 2016	██████████	Final	Addition made to App 4. GPS Monitoring concerns.

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1. Introduction

This Policy is designed to reflect good practice in relation to the protection of lone workers. It should also be used to develop or revise local policies, procedures and systems to protect lone workers, reflecting the local needs of staff and the environments within which they work.

2. Aims and Objectives

- 2.1. The aims of this policy are to underline safety issues and contribute to the provision of a safer working environment for staff working alone. The Trust has a legal duty under the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999 to ensure, so far as is reasonably practical, the health and safety of employees. Key to achieving this aim is conducting suitable and sufficient risk assessments and acting on the findings.
- 2.2. The Trust recognises its duty to care for its employees and is committed to maintain, as far as is reasonably practical, a safe working environment for all people working on their own.
- 2.3. While lone workers may face additional risks, it is important that these risks are not over-emphasised; creating an unnecessary fear amongst staff that is disproportionate to the reality of the risks faced. It is therefore important that work to minimise the risks is based on fact.
- 2.4. A common-sense approach should be adopted and encouraged for the protection of lone workers. A balance needs to be struck between providing a high standard of care for patients/service users and the protection of lone workers where there are perceived or real risks.

3. Definition of a Lone Worker

3.1. Lone Workers are defined as 'those who work by themselves without close or direct supervision' Health Safety Executive 1998. Such staff will be found working throughout the Trust, for example:

- Only one person working in a premises
- Staff working separately from others or outside normal working hours e.g. night staff
- Community staff who work away from their work base – off site working or domiciliary visits.

3.2. It is the responsibility of line managers of staff who work alone to ensure that, where lone working is identified within their department or area, local procedures are developed, implemented, monitored and adhered to, in line with the guidance contained within this Policy. Lone workers also have a responsibility to follow these procedures for their own safety.

3.3. The annexes include a short checklist, summarising the key points for line managers and their lone workers and a flow chart of what to do in the event of an incident of violence or abuse.

3.4. Patients and Visitors to Trust premises are not subject to this Policy. However it does apply to contract, bank and agency staff.

4. Duties

4.1. All members of staff should adhere to this Policy. Managers at all levels are responsible for ensuring that all members of staff are updated in regard to any changes in policy.

4.2. Managers

4.2.1. All Trust Managers, Team Leads or any staff responsible for the supervision of others are to ensure that:

- So far as is reasonably practicable, all staff within their areas of responsibility have read and understood the Trust's Policy for the Protection and Support of Lone Workers, and the related Violence and Aggression at Work Policy.
- There are preventative measures, or any other measures, as may be required to reduce the number of security incidents, in place. Seeking advice from the Trust designated Local Security Management Specialist (LSMS), as appropriate

4.3. In addition to the Trust's general policy, individual departmental procedures for their own area or discipline are to be produced as appropriate to the nature of the activity of the area. This is to reflect the hazards, not only within their own physical work area, but also those associated with the work process. Advice may be sought from the Trust Health and Safety Manager.

4.4. Lone workers have access to this Policy and appropriate arrangements are made in conjunction with staff and the LSMS to ensure robust procedures are in place to safeguard lone workers.

4.5. Information is communicated to all staff regarding practices to be carried out in the Trust, including changes and / or new developments, as they occur

4.6. Managers are responsible for:

- Ensuring the local implementation of this Policy.
- Ensuring that adequate risk assessments are carried out for all staff who work alone and acting on the results e.g. procuring equipment, providing training e.g. Conflict Resolution Training (CRT).
- Ensure significant risks are escalated to the Risk Register.
- Raising awareness of lone working issues.
- Adopting the Buddy and Diary Systems as a principal control measure.
- Ensuring safe systems of work are developed, such as procedures requiring staff to set out their movements and maintain a report back to base system.
- Facilitating the use of approved technical equipment to assist lone workers to call for assistance.

- Investigating reports of accidents and incidents associated with lone working, including aggression towards staff.

4.7. Employees have a responsibility to:

- Beware of risk at all times using appropriate risk assessment tools.
- Notify manager of any risks identified.
- Follow this Policy and any local procedures as well as any subsequent updates.
- Accept responsibility for sharing information and keeping colleagues safe.
- Exercise positive reporting regarding appointments, movements etc.
- Utilise all technical equipment provided to assist with your safety.
- Report all accidents / incidents to management at the earliest opportunity in accordance with current procedures.
- Keep up to date with all reporting procedures.
- Ensure that they are continuously trained with regard to risks associated with lone working, including personal safety, by virtue of the Lone Worker element within CRT.

5. Lone Workers Policy

5.1 This policy is designed to advise Central London Community Healthcare NHS Trust (CLCH) staff on developing, implementing and disseminating local procedures that address the needs of, and minimise the risks faced by, the many different groups of staff that may have to work alone in a diverse range of environments. It also provides lone workers and their line managers with practical advice to assist in preparing for a lone worker situation. Finally, this Policy will assist CLCH Trust employers and their staff to meet their legislative responsibilities under the Health and Safety at Work Act (1974) and the Management of Health and Safety at Work Regulations (1999). Guidance on this legislation is available from the Health and Safety Executive (HSE) website, www.hse.gov.uk.

5.2 General Procedures

5.3 Management instructions to staff should make it clear that they should not enter into lone working situations where they feel that their safety, or the safety of their colleagues, could be compromised.

5.4 A common sense approach should be adopted and encouraged. Staff that carry out an assessment of the risks that they face should not be penalised for not performing their duties if they perceive that their personal security and safety, or that of others, may be in jeopardy. However, this needs to be balanced against providing a good standard of care for patients/service users.

5.5 Where there are perceived or real risks, alternative provision should be made, such as arranging treatment in secure premises or organising accompanied visits.

5.6 Risk Assessment

5.7 This procedure offers a framework for the assessment of the risks that staff may face when working alone on behalf of the Trust and provides guidance on the avoidance or reduction of these risks. Risk assessment must be carried out to identify the risks to lone workers, using the risk assessment tool provided at Appendix 2.

5.8 Staff will not be expected to undertake tasks or enter situations where they face serious and unacceptable risks. However, following risk assessment, it may be necessary to take controlled risks so long as adequate resources are in place to minimise the risk as much as is practical. All staff should be concerned about the risks their colleagues face as well as themselves.

5.9 When considering control measures and local procedures to keep staff safe reference should be made to the series of flowcharts contained in Appendix 3 of this Procedure.

These cover:

- Lone Worker Summary
- Home visits
- Lone Workers and vehicles
- Lone Worker travelling by foot
- Lone Works travelling by public transport
- Office based Lone Workers

Managers and staff are encouraged to use the attached flow charts to assist them in their working practices. Further advice can be obtained from the LSMS.

5.10 Lone Worker Devices

The Trust has commissioned Lone Worker Technology Devices for use by Community Staff. These devices, supplied by Skyguard, enable Lone Workers to summon assistance in the case of emergency.

These devices will be allocated to Teams in order that they can be issued to Community Lone Workers according to local risk assessment on a pooled basis.

In conjunction with the use of these devices the following must be strictly considered;

The deployment of Lone Worker Devices must be viewed as an additional and last line of defence to be used by Lone Workers. Devices are complimentary to existing 'best practice' such as 'Buddy' or 'Diary' systems and must never be assumed to be a stand-alone solution.

Protocols on the issue and administration of Lone Worker Devices can be found in Appendix 4.

6. Consultation

The following stakeholders were consulted in the creation of this policy and comments incorporated as appropriate.

- SMD / NED
- Divisional Directors of Operations
- Fire, Health & Safety Group
- Estates & Facilities Team
- Trade Union Staff side Representatives

7. Approval and Ratification Process

The initial draft of this procedural document was sent to the Fire, Health & Safety Group on the 25 March 2015.

Final approval was given virtual approval by the Policy Ratification Group on 31st March 2015

8. Dissemination and Implementation

This document will be placed on the intranet by the QLD team. The QLD team will provide a reference number for the policy. It will be therefore be available to all staff via the CLCH NHS Trust intranet. Furthermore the document will be circulated to all managers who will be required to cascade the information to members of their teams and to confirm receipt of the procedure and destruction of previous procedures/policies which this supersedes. Managers will ensure that all staff are briefed on its contents and on what it means for them.

9. Archiving

The QLD team will undertake the archiving arrangements.

10. Training

A Lone Worker Training element is included within the provision of Conflict Resolution Training (CRT).

The requirement for Training specifically for Lone Worker Technology Devices will be undertaken by the device provider and the Local Security Management Specialist (LSMS).

11. Monitoring and Auditing Compliance

The LSMS will be responsible for carrying out the monitoring of this policy and will report to the Fire, Health & Safety Group at least annually. Any actions arising from the dynamic review will be recorded and reported accordingly.

12. Review arrangements

This procedural document will be reviewed in 3 years' time in 2018. It will be reviewed by the Local Security Management Specialist.

13. Associated Documentation

Risk Management Strategy
Statutory and Mandatory Training policy
Incident Management and Reporting Policy

14. References

Secretary of State Directions
Standards for Providers 2015/16 – Security Management (NHS Protect)
Not Alone. A Guide for the better protection of lone workers in the NHS (NHS Protect)

15. Appendices

Appendix 1 – Checklist for managers

Appendix 2 – Lone worker risk assessment

Appendix 3 - The Lone Worker Summary and Flow Advice Charts

Appendix 4 – Skyguard: Lone Worker Device Protocol

Appendix 1

Checklist for managers

Are your staff –

- *Issued* with all relevant policies and procedures relating to lone working staff?
- *Trained* in appropriate strategies for the prevention and management of violence (in particular, have they received conflict resolution training)?
- *Given* all information about the potential risks for aggression and violence in relation to patients/service users and the appropriate measures needed to control these risks?
- *Issued* with appropriate safety equipment and the procedures for maintaining such equipment and know who to contact to discuss any issues with equipment provided?
- *Trained* to be able to confidently use a device and familiar with the support service systems in place before being issued with it?
- *Aware of* how to report an incident and of the need to report all incidents when they occur?
- *Issued* with the necessary contacts for post-incident support?

Are they –

- *aware* of the importance of doing proper planning before a visit, being aware of the risks and doing all they can to ensure their own safety in advance of a visit?
- *aware* of the importance of leaving an itinerary of movements with their line manager and/or appropriate colleagues?
- *aware* of the need to keep in regular contact with appropriate colleagues and, where relevant, their nominated 'buddy'?
- *aware* of the need to carry out continual dynamic risk assessments during a visit and take an appropriate course of action?
- *aware* of how to obtain support and advice from management in and outside of normal working hours?
- *aware* that they should never put themselves or colleagues in any danger and if they feel threatened should withdraw immediately?

Do they –

- *appreciate* the organisation's commitment to and support for the protection of lone workers and the measures that have been put in place to protect them?
- *appreciate* that they have their own responsibilities for their own safety?
- *appreciate* the circumstances under which visits should be terminated?
- *appreciate* the requirements for reporting incidents of aggression and violence?
- *understand* the support made available to lone workers by the trust, especially post-incident support and the mechanism to access such support?

Appendix 2

Lone Worker Risk Assessment

WORKING ALONE IN BUILDINGS		
Staff exposed to the risk		
Department:		
Site:		
Assessment completed by:		
Date completed:		
Main Issues of Concern	Yes	No
Do staff work alone?		
Do staff work outside normal office hours?		
Do staff meet with clients or patients in isolated locations?		
Does a member of staff have a health condition – either temporary or long-term – that could impact their safety in lone working situations? (Employee Health advice should be sought)		
Is the area secured by either access control or door locks?		
Is there poor access to the department?		
Do staff activities involve working in confined spaces (i.e. places which are substantially enclosed where serious injury can occur from hazardous substances or conditions within)?		
Do staff activities involve handling dangerous substances?		
Have staff reached the required competencies to work alone?		
Are staff made aware of the possible risks of working alone and the control measures to be implemented to reduce those		
Control Measures for Consideration	Yes	No
Do you provide joint working for high-risk activities (i.e. in confined spaces		
Do you carry out regular supervisor or colleague checks during		
Do you use entrance security systems (i.e. digital locks or swipe		
Is there security lighting around access points and parking areas?		
Are panic buttons linked to staffed locations?		
Do you use reporting checking-in systems?		
Have you determined a maximum time between contacts with the lone worker?		
Do you use two-way radios or other communication systems?		
Do staff have information and training on basic personal safety,		
Are staff trained in strategies for preventing and managing violence,		
Are staff fully conversant and encouraged to submit incidents via Datix?		
Are checks on control measures used to protect lone worker(s) regularly undertaken?		

If you have answered 'No' to any of these questions, what modifications or additional actions are necessary? 1. 2. 3. 4.		
Using the Trust Risk Matrix, what is the level of risk?		

Please ensure all risk assessments and associated action plans are sent to the Local Security Management Specialist.

DOMICILIARY (HOME) VISITS			
Description of work activity or danger:			
Staff exposed to the risk:			
Department: Site:			
Date completed:			
Main Issues of Concern	Yes	No	
Are all members of staff made aware of the possible risks of working alone and the control measures to be implemented to reduce those			
Do staff carry out visits in high-risk locations? (i.e. areas with known high crime rates)			
Do staff carry out visits in multi-tenanted blocks/estates?			
Do staff visit unfamiliar clients or relatives?			
Do staff visit a high-risk, unstable or unpredictable client group?			
Do staff carry out visits during unsocial hours?			
Do staff carry valuables or drugs?			
Control Measures for Consideration	Yes	No	
Do you provide accompanied visits when there are concerns about safety?			
Do you include potential or known risk factors in referral documents and care plans?			
Do you share risk information with other professionals and agencies?			
Are there systems for monitoring staff whereabouts and movements for regularly reporting to base?			
Do your local arrangements require staff to report in both at the start and end of their visit?			
Do your local arrangements ensure that staff confirm they have returned to work or home safely?			
Are there systems for communicating regularly with staff – for both routine and emergency communications?			
Do managers keep a list of vehicles used by lone workers making home visits or working in isolation, including vehicle registration number, make, model and colour of vehicle?			
Have you issued mobile phones?			
Have you issued Lone Worker Devices?			
Do staff have information and training on basic personal safety, CRT?			
Do local arrangements include appropriate plans to be activated if a lone worker fails to make a scheduled communication contact and/or keep a scheduled appointment?			
Are staff trained in strategies for preventing and managing violence, CRT?			

Are staff fully conversant and encouraged to submit incidents via Datix?		
Are checks on all control measures used to protect lone worker(s) regularly undertaken?		
<p>If you have answered 'No' to any of these questions, what modifications or additional actions are necessary?</p> <p>1.</p> <p>2.</p> <p>3.</p>		
Using the Trust Risk Matrix, what is the level of risk?		

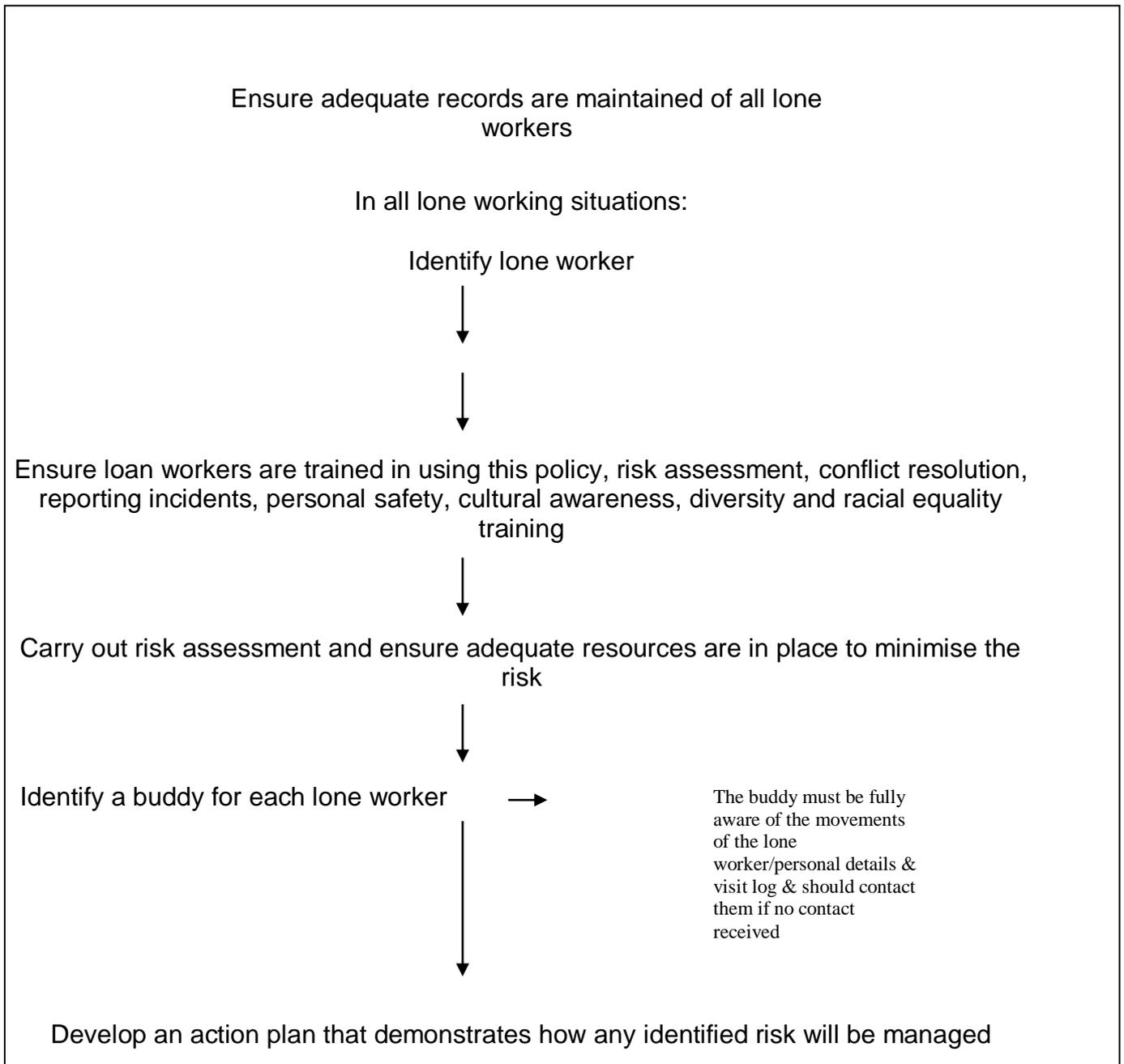
<p>Lone Working Assessment Check Sheet Results</p>
<p>If one or more answers to the questions above are 'No', your lone working arrangements may be considered inadequate and need to be addressed if applicable to the workplace.</p> <p>Please consult the Local Security Management Specialist for further guidance.</p> <p>Please ensure all risk assessments and associated action plans are sent to the Local Security Management Specialist.</p>

Appendix 3

The Lone Worker Summary and Flow Advice Charts

Definition of a Lone Worker

Lone workers can be classified as those who work by themselves without close or direct supervision. As a guide, could staff call for help and could another employee or someone who could assist them hear it?



Home Visits

ID badge to be kept in a non-visible place and personal possessions kept to a minimum



The buddy system should be aware of the start and finish times



Carry a mobile phone or device that will raise the alarm in case of emergency



The lone worker must carry out a 10 second risk assessment and noting their surroundings, particularly the door lock in case they need to leave urgently



If they feel there is a risk of harm to themselves they should make an excuse and leave. Arrangements should then be made for another appointment for a paired visit or arrange the appointment at a Trust site



2 people must attend a known or suspected high risk area or address, where possible this consultation must take place in a controlled environment



Dealing with animals

If there is a known problem with animals at a particular address or location, the owners should be asked to place the animal in another room until after the visit



If the lone worker feels uneasy with animals present, they should politely explain this to the owner and request that the animal is placed in another room until after the appointment



Lone Worker can be accompanied or ask a colleague – more at ease with animals – to assist them

Lone Working and Vehicles

Under no circumstances must a lone worker transport a patient in their own car. The lone worker must adhere to the following principles when using motor vehicles:

Before starting the journey there should be adequate fuel in the vehicle



Bags or any equipment must be stored in the boot of the vehicle



The keys for the vehicle must always be located and in the lone workers hand prior to leaving the property where the visit has taken place



The inside and outside of the vehicle should be checked for intruders



Lone workers should avoid parking on the driveway of the person that they are visiting



The Health and Safety Executive's safe driver training programme advises that lone workers should reverse into parking spaces so that if attacked the door acts as a barrier



If the lone worker is being followed, they must drive to the nearest police station or
manned

Building such as a petrol station and request assistance



If the vehicle breaks down, the lone worker should call the appropriate vehicle recovery service and inform their manager

Lone worker travelling by foot

Lone workers travelling by foot should plan their route in advance and walk briskly to appointments. If they get lost, need to access a map or need assistance, they should enter a safe establishment such as a petrol station. The lone worker should also consider calling the buddy or manager for further support/guidance.

They should:

Walk in the centre of the footpath facing oncoming traffic



Avoid waste ground, isolated pathways and subways



Not travel by foot at night



Ensure that their mobile phone and house keys are kept separately from the handbag/personal bag



Avoid using the mobile phone overtly in any area



Any bags carried should not indicate on the outside who the lone worker or what the contents might be



If a robbery is attempted, the lone worker should relinquish any property immediately without challenge and report the incident to the Police via 999 as soon after the incident as possible. Line Manager should be informed as soon as practicable

Lone Worker travelling by public transport

All journeys should be planned in advance so the lone worker should be conversant with the relevant bus and train time tables

The lone worker's buddy and manager should know the journey plans for each day including the proposed mode of transport, and must be notified of any changes to journey plans



Sitting on empty upper decks on buses or empty train compartments or where there is only one other passenger should be avoided



If the lone worker feels under threat by other passengers, then the driver/guard should be informed

Lone working and Taxis

Taxis should only be used if they have been booked through the Trust taxi contract system



If a taxi has not been pre booked the Lone Worker should go to a recognised taxi rank to hail a cab



They should never use a mini cab, unless it is licensed or registered hackney carriage



They should sit in the back, behind the front passenger seat



They should not give out personal information to the driver (either through conversation with the driver or release sensitive information while talking on the mobile phone)



They should be aware of child locks and central locking (although most black cabs will lock doors while in transit) within the taxi

Lone workers office based

Ensure that they are familiar with the fire alarm and other emergency procedures



Staff should notify a manager or other colleague that they will be working alone. This is also essential for Fire Safety reasons.



Lone Workers must have a means of raising an alarm to gain assistance



There must be a reporting procedure in place



Lone workers must ensure that their place of work is secure from intrusion as far as is practical



If the lone worker period is of short duration i.e. moving between offices, wards, etc. out of hours ensure they tell a colleague where they are going The route they are taking and how long they will be



If there is a major delay in their expected time of return they should notify their colleague



Be aware of what is happening around them and report all suspicious incidents. If available, call security. Advise Managers and colleagues. If necessary, do not hesitate to contact the Police.

Appendix 4

Skyguard: Lone Worker Device Protocol

- Trust Administration of the System will be the responsibility of the Resilience Team
- Devices are issued to Teams to be distributed on a pooled basis
- Team Leaders will allocate devices to Team members according to risk
- All Team members must receive training in order to be allocated a device
- All Team members must complete a user profile
- No device can be issued to an individual unless there has been a user profile uploaded
- Devices are the responsibility of the individual and the Team Lead
- Devices are an individual and Team asset. They must be regularly charged and tested
- Any device found to be defective must be returned to the Resilience Team in order that replacement can be arranged
- There is no budgetary commitment to each Team for the rental or use of the device
- Loss of a device or negligent damage is the responsibility of the Team and its replacement cost will be attributed to the Team accordingly
- Team Leaders are responsible for the administration of the devices within their Team
- Escalation Protocols must be attached to each user's profile
- Escalation Protocols can be individually tailored or generic to a Team
- Regular usage audits will be carried out and any device that has not been used for a significant amount of time, will be recalled
- Issue of a device does not absolve an individual from abiding by accepted Team Lone Worker protocols. I.E. Buddy or Diary System

'The effectiveness of the Lone Worker Device is enhanced by its ability to pinpoint its location thereby enabling assistance to be directed to the user. Devices are solely issued for the purpose for which they are designed, i.e. GPS location information may only be used for the purposes of the **Security and Welfare of the user, and for the Prevention and Detection of crime**. All such information can only be accessed by the Associate Director of Resilience and Compliance and the Local Security Management Specialist. Any requests for location information will only be accessed for the above reasons.'

Appendix 5

LONE WORKING SPOT CHECKS

Spot checks of Lone Working arrangements should be carried out on a six monthly basis. The purpose of the spot check is to ensure that arrangements put in place to protect people in lone worker situations are being implemented.

You will need to talk to staff to establish if controls are being implemented appropriately. Please ensure that spot checks include night/out of hours arrangements, where relevant.

The Trust's Safety Advisor and/or Security Manager will support you in completing the spot check or in making changes to procedures, if needed.

Department	
Title of Activity:	
Location(s) of work:	
Brief Description of Work:	

HAZARD IDENTIFICATION:

Has a risk assessment identifying all hazards specific to the lone working activity been	YES	NO		
What risk grade was assigned to Lone Worker tasks?				

If no, please refer to the Trust's Lone Working Policy and complete the risk assessment template attached to this policy. If yes, please use the risk assessment as a means of verifying controls that should be in place:

TRAINING:	YES	NO	N/A
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Has necessary information, instruction and training			
Is attendance at training/ instruction documented?			
Are staff identified as potentially at risk able to describe			
Expand and clarify, if necessary.			
ACTIVITIES:	YES	NO	N/A
Are staff working in pairs?			
Are staff appropriately recording their activities/ routes?			
Are staff provided with a mobile telephone or alternative if working in lone worker situations?			
Can staff adequately describe what controls they need to put in place when undertaking lone work activities (i.e. charging phones, recording)			
Can staff adequately describe what to do if they are			
Expand and clarify, if necessary.			
SUPERVISION:	YES	NO	N/A
Is suitable supervision in place?			
Is periodic telephone contact with lone workers being			
Are periodic site visits to lone workers being made?			
Is regular contact (telephone, radio, etc.) possible?			
Are Lone Working Devices monitored appropriately and is there documented evidence to support this?			
Are Lone Worker Devices being used, if specified in the risk assessment?			
Are procedures for end of task / shift contact clear and being implemented?			
Do staff know what to do if contact is not made in line with agreed procedures?			
Are staff clear who is responsible for taking action if contact is not made?			
Do named individuals identified in a control procedure know what to do if they are			
During periods of leave, are you able to establish how staff are informed of changes to			
Other, specify			
Expand and clarify, if necessary.			

Additional Information:

If you have answered 'no' to any of the points above, please document changes made to arrangements. Where serious concerns about non-compliance exist, please discuss the outcomes of the spot check with your line-manager immediately and repeat the Lone Worker risk assessment.

1.			
2.			
3.			
4.			
5.			
6.			
Spot-check carried out by:		Dates:	
Name:		Date:	
Signature:		Review Date:	

Names of Persons Involved in Lone Working:

Name:	Signature:	Date:

Please retain a copy of this spot check together with the departmental Lone Worker Risk Assessment and send a copy to the Local Security Management Specialist.

