



# Lone Worker Policy

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Names and roles of contributors, user engagement etc.	
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Equality Impact Assessment	Complete
Linked procedural documents	Violence and aggression policy. Home Working Policy Dignity at Work Policy Freedom to Speak Up policy Health & Safety Policy Management of Incidents Policy Disciplinary Policy
Dissemination Requirements	All Trust employees by Intranet Public - To be published on the Trust's website

The East of England Ambulance Service NHS Trust (the Trust) has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity. The Trust will not tolerate unlawful discrimination on the basis of, spent criminal convictions, Trade union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity for and fostering good relations between; people from different groups and people with protected characteristics.

All Trust policies can be provided in alternative formats if required. Please contact the Human Resources Department if you require an alternative format.

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## 1. Introduction

- 1.1 The purpose of this policy is to protect as far as possible, those within the Trust who are required to work alone in line with the Trust's Health and Safety Policy and any other relevant statutory provisions. The definition of staff and employees within this document includes both contractors and volunteers working on behalf of the Trust.
- 1.2 This policy updates and supersedes all previous related policies, SOGs or Ops instructions.
- 1.3 This policy should be read in conjunction with the Trusts Violence and aggression policy.

## 2. Policy Statement

- 2.1 This document outlines the Lone Worker Policy and Procedures for the East of England Ambulance Service NHS Trust (the Trust). The Trust recognises that it has a duty to ensure the safety of its employees, workers, volunteers and contractors when operating in lone worker roles.
- 2.2 The Trust will ensure, so far as is reasonably practical, that staff and others who are required to work alone or unsupervised for significant periods of time are protected from risk to their health and safety. Measures will also be adopted to protect anyone affected by lone working. Please make reference to the Lone working risk assessment. (Appendix A)
- 2.3 Lone working exposes staff and others to certain hazards. The Trust will do everything possible to remove the risk from these hazards or, where elimination is not reasonably practical, to reduce the risk to the minimum possible.
- 2.4 The Health and Safety at Work Act 1974 (HASWA) and the Management of Health and Safety at Work Regulations 1999 (MHSWR) lays down duties on the employers to ensure (so far as reasonably practicable) the safety of their employees and

others who may be affected by their undertaking. Complete avoidance of lone working is not possible to achieve within an organisation dealing with the care and transportation of patients.

- 2.5 Harassment Statement: In any workforce there will be a range of attitudes about what conduct is considered to be offensive, humiliating, intimidating, hostile, or degrading. What one worker – or even a majority of workers – might see as harmless fun or ‘banter’, another may find unacceptable. A worker complaining about conduct may be considered by others to be overly sensitive or prudish. However, it is important to understand that conduct can amount to harassment or sexual harassment even if that is not how it was intended.

EEAST will not tolerate sexual harassment, bullying and harassment, harassment because of a protected characteristic and or victimisation, this policy reminds that sexual harassment, harassment and victimisation can be deemed as unlawful. Those who carry out these acts should be aware it may lead to disciplinary action up to and including dismissal.

### 3. Definition of Lone Workers

- 3.1 Lone working is not unique to any particular group of staff, working environment or time of day. The Trust defines a lone worker as:

Any situation or location in which both clinical or non-clinical staff work without a colleague nearby; or when someone is working out of sight and earshot of another colleague whilst engaged on Trust business.

### 4. Scope

- 4.1 This policy applies to all Trust employees as well as, workers, volunteers, and contractors. The policy covers all Trust property and premises and all locations in which Trust employees may be working in a lone worker role arising in connection with their duties (see below).

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4.2 The Health and Safety Executive (1998) defines lone workers as “those who work by themselves without close or direct supervision”. However, for the purpose of this policy, this can also be applied to all those who are working alone.

4.3 Where lone working is part of the employee’s role, the Trust will consider the appropriate level of training and support the role requires.

4.4 Roles within the Trust that currently meet this definition are as follows:

- Some Primary Care Employees
  - Some Courier Transport Service employees
  - Some Patient Transport employees
  - General Practitioners
  - Community First Responders
  - Solo Emergency Operations Employees (including for example, RRV’s, CRU, ECP’s, Single staffed DSAs)
  - Managers
  - Support services employees
  - Some domestic employees
  - Nurses
  - Some Home Workers
  - Volunteer Car Drivers
  - Private Contractors/Temporary Employees
- (This is not an exhaustive list.)

## 5. Employer Roles and Responsibilities

5.1 The CEO has overall responsibility for the implementation and review of this policy.

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- 5.2 The Trust board will both individually and collectively ensure that the policy is implemented, reviewed and appropriate resources committed to ensure its effectiveness.
- 5.3 All Trust managers will support the CEO in ensuring the aims and objectives of the policy are proactively managed and supported.
- 5.4 The Trust will ensure that appropriate safe systems of work are developed and implemented. Clear arrangements for work allocation and communication should exist between the various control functions, such as Ambulance Operation Centres (AOC), (all hereafter referred to as “dispatch”) and employees, whether involved in an emergency, scheduled transport or primary care support services role.
- 5.5 Managers, HR employees and trade union representatives are responsible for providing advice and guidance to employees on the application of this policy and procedures. All adverse incidents relating to lone working, should be reported and investigated following the Trust’s standard procedure for the reporting of untoward incidents and employees should also notify their line manager.
- 5.6 The Trust is responsible for ensuring that their employees are suitably trained in relation to lone working. The Trust will ensure that employees of contractors working on our behalf will have the appropriate policies and procedures in place for their lone workers.
- 5.7 The Trust are responsible for providing employees with the appropriate information, instruction, and familiarisation together with access to relevant mandatory training and/or professional updates. Managers must ensure that employees, for whom they have direct responsibility, have received, and completed the required mandatory training. It is the responsibility of the “dispatch” to notify any member of staff if there are any known problems in the area(s) which are relevant to the patient they are visiting or their assigned work/incident.



- 5.8 It is the responsibility of the Trust, Managers and “dispatch” to ensure that lone workers have access to appropriate equipment to enable them to effectively communicate. This ensures an effective means of communication to enable staff to notify the employer of where they are going and how long they are likely to be at that location.
- 5.9 Where there are identified aspects of best practice or techniques to reduce risks, these will be communicated to employees through the appropriate channels.

## 6. Employees

- 6.1 The HASWA and the MHSWR lone working guidance requires employees “to take reasonable care of themselves and other people affected by their work activities and to cooperate with their employers in meeting their legal obligation”.
- 6.2 All employees are encouraged to offer suggestions into ways in which to improve lone working conditions. All suggestions for improvements should be made in writing to their line manager in the first instance.
- 6.3 Employees are responsible for:
- Reporting any lone working incidents or injuries using the appropriate incident reporting system and where applicable informing their line manager. This should include actual incidents, near misses, observed practice etc.
  - Attending any training as required.
  - Complying with all relevant Trust policies, procedures and guidance documents, in particular the Trust’s Policy on Violence and Aggression and all appendices attached to this Policy.

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- Ensuring all of their equipment is functional and in good order, which includes personal communication and safety equipment.

6.4 Employees should be aware of their own behaviour and reactions and how these could contribute to either triggering or the prevention of violence. Employees should:

- Treat all patients, the public and colleagues with courtesy, dignity and respect.
- Explain who they are, what they are doing and why these actions are necessary.
- Undertake their own dynamic risk assessment on approach to and during attendance at any patient/work/incident in accordance with their training.
- Consider their own safety first and if in doubt contact the relevant AOC/Control Centre/hub for further information, advice and assistance before proceeding.
- Respect an individual patient's right to refuse a particular treatment or advice.
- Undertake Trust provided training on conflict resolution or the equivalent

6.5 Further guidance for specific areas to be considered related to lone working is shown in the appendices.

## 7. Risk Assessment

7.1 Line managers are responsible for ensuring that risk assessments are undertaken for generic tasks and for specific activities that take place. Where a hazard has been identified, risk assessment is deemed appropriate or required the responsible manager should undertake a risk assessment.

7.2 In all cases the Trust and members of the Trust will be supported in making dynamic risk assessments regarding emergency activations. Deployment decisions must take into

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account the presenting situation. Clinical staff have access to clinical advice line, tactical operations centre, AOC staff (with ambient listening if required.) and their Locality Operations Managers for additional support and guidance

- 7.3 Risks are likely to be greater in certain circumstances as identified below; therefore AOC or the attending crew must carry out a dynamic risk assessment(s) before considering the activation and on activation of a lone worker to:
- 7.3.1. Patients with mental health issues.
  - 7.3.2. Individuals under the influence of alcohol or drugs.
  - 7.3.3. Patients who are known to have a history of violence.
  - 7.3.4. Individuals who are clearly angry and/or reluctant to receive treatment either on location or at hospital.
  - 7.3.5. Patients with certain medical conditions such as diabetes or epilepsy.
  - 7.3.6. A patient who has experienced a longer than normal (or reasonable) response time.
  - 7.3.7. Poor signal reception areas, particularly rural areas, crowds at nightclubs or pubs or other locations with concealed spaces or restricted access.
  - 7.3.8. Forced entry to premises in order to gain access to patient.
  - 7.3.9. Public houses or licensed premises.
  - 7.3.10. Incidents under pre-alert conditions when further information is not clarified before arrival.
  - 7.3.11. Activation to an area where the lone worker has no local knowledge.

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7.3.12. CFRs and co-responders are not sent to incidents where there is a CAD marker for violence or aggression, or where the call handler has heard sounds of a violent or aggressive situation

7.4 Lone workers have the right to decline an instruction if it is reasonably considered to be unsafe For example withdrawing from an unsafe scene.  
<https://www.legislation.gov.uk/ukpga/1998/42/schedule/1/enacted>

7.5 When a lone worker requests assistance they will be supported appropriately as a priority, when needed.

7.6 Staff who find themselves working alone but are not normally employed to do so:

7.6.1 It is important to recognise that not all staff are comfortable working alone and therefore, where reasonable all steps must be made to ensure in such circumstances staff are supported accordingly.

7.6.2 Where a member of staff finds they are working alone, for example, where a crew member commences duty to find they are solo crewed, they will immediately ensure that AOC (or line manager in the case of non-operational staff) are aware.

7.6.3 A&E staff that do not normally work alone have the right to decline to do so. Discussions between the lone worker, the EOC and local management teams will always bring about a satisfactory conclusion. Where staff have declined to work alone they may either:

- Crew with another suitably skilled lone worker who is also solo.
- Be crewed on an alternative vehicle where the crew on that vehicle are happy to be separated, and one member will operate as a lone worker.

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- Be crewed on an Ambulance with a Solo Responder. This will be undertaken with mutual agreement between all parties.
  - Undertake 3rd manning with another crew at the discretion of the Senior Manager or Duty Manager on call for each locality.
- 7.7 It is accepted that public perception where an emergency ambulance vehicle arrives at the scene of an incident could be that the responder should be able to convey the patient. Where a crew member finds themselves single crewed and are happy to operate as a lone worker but not utilising an Emergency Ambulance Vehicle AOC / Operational Managers will identify a response car for the member of staff to use.
- 7.8 In the case of a lone worker being the subject of complaint, it may be necessary to work with a colleague as part of a management plan.
- 7.9. The safety of our staff is paramount; therefore, we do not tolerate any form of sexual harassment. Where a lone worker is subject to sexual harassment, immediate line management action should be taken to address the issue and the incident reported and escalated (please refer to either the Dignity at Work policy, Disciplinary Policy or the Violence and Aggression Policy). Line managers should ensure adequate welfare support is provided to the victim of the harassment and ensure the alleged perpetrator receives the necessary support whilst the allegations and/or incident is being investigated. Lessons should be learnt from each incident and where necessary the policy, risk assessment and or action plan updated.

## 8. Lone Workers in Trust Premises

Wherever possible staff should aim not to remain alone working in their work base after the premises officially close, but there are times when this is unavoidable. Where it is

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expected that staff work 'after hours' there must be a system in place, enabling staff to make contact with the office or their Manager.

Where there is a situation where members of staff are in a lone working scenario, they should where possible arrange for someone to ring them at a predetermined time to check they are all right.

If the colleague or line manager doesn't hear from the person working on their own, contact the relevant Manager on-call.

### **9. Lone Workers working from home**

Staff who work from home on their own on a regular basis, should where possible arrange for someone to regularly ring them at a predetermined time, to check their wellbeing. In virtual meetings, staff could adopt a rule of ensuring cameras are on in virtual meetings. If at any time you have immediate concerns for the safety of the member of staff, contact the police.

### **10. Policy Review**

10.1 This policy will be reviewed every 3 years or amended in the light of new employment legislation and/or relevant case law.

## Appendix A

### Equality Impact Assessment



EIA Cover Sheet	
Name of process/policy	Lone Worker Policy
Is the process new or existing? If existing, state policy reference number	V5.0
Person responsible for process/policy	Head of HR
Directorate and department/section	Workforce
Name of assessment lead or EIA assessment team members	EqIA Panel Members
Has consultation taken place? Was consultation internal or external? (please state below):	This policy has been written in partnership by management and staff side, in accordance with current employment legislation and followed the standard 21 days' consultation process across the Trust.

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The assessment is being made on:	Guidelines	
	Written policy involving staff and patients	x
	Strategy	
	Changes in practice	
	Department changes	
	Project plan	
	Action plan	
	Other (please state) Training programme.	



### Equality Analysis

What is the aim of the policy/procedure/practice/event?

This document outlines the Lone Worker Policy and Procedures for the East of England Ambulance Service NHS Trust (the Trust). The Trust recognises that it has a duty to ensure the safety of its employees, workers, volunteers and contractors when operating in lone worker roles.

The Trust will ensure, so far as is reasonably practical, that staff and others who are required to work alone or unsupervised for significant periods of time are protected from risk to their health and safety. Measures will also be adopted to protect anyone affected by lone working. Please make reference to the Lone working risk assessment. (Appendix A)

Lone working exposes staff and others to certain hazards. The Trust will do everything possible to remove the risk from these hazards or, where elimination is not reasonably practical, to reduce the risk to the minimum possible.

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List the main activities of the function or policy? (for strategies list the main policy areas)

The organisational objectives of this policy are to provide an effective framework to assist the Trust in complying with statutory requirements by ensuring that there are arrangements in place:

- for the effective implementation of this policy throughout the Trust
- for the carrying out of suitable and sufficient risk assessments on lone working, including the carrying out of dynamic risk assessments
- to ensure that all appropriate controls, so far as reasonably practicable, are put in place to control, manage and reduce that the risks to staff who are lone workers
- to provide suitable information, instruction and, where necessary, training to staff who are lone workers
- to provide support and assistance to lone workers so that they can work effectively and efficiently and deliver excellent professional care to patients
- to provide lone workers with information on addresses they may visit (special situation feature application)
- to ensure that all incidents involving lone workers are reported and investigated
- to provide staff with suitable post-incident support
- where appropriate, to liaise with external agencies following any assaults on lone workers

Who will be the main beneficiaries of the strategy/function/policy?

This policy applies to all Trust employees as well as, workers, volunteers, and contractors. The policy covers all Trust property and premises and all locations in which Trust employees may be working in a lone worker role arising in connection with their duties.

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Who does the policy/procedure/practice/event impact on?					
Race	×	Religion/belief	×	Marriage/Civil Partnership	×
Sex	×	Disability	×	Sexual orientation	×
Age	×	Gender re-assignment	×	Pregnancy/maternity	×
Who is responsible for monitoring the policy/procedure/practice/event?					
HR/ WORKFORCE					
What information is currently available on the impact of this policy/procedure/practice/event?					
<p><b>This policy links in with:</b></p> <p>Workforce Race Equality Standards                  Workforce Disability Standards                  EDS2 – Equality Delivery System                  Compliance with Public Sector Equality Duty and Specific Duty                  Gender Pay Gap                  Five Diversity Networks within EEAST e.g. AWE Women’s Network, Multi-Faith Network, Disability Network, LGBT Network, BAME Network, Equality Diversity Inclusion Group.                  Health and Safety Executive research on lone working staff</p>					
Do you need more guidance before you can make an assessment about this policy/procedure/ practice/event?					
No					

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Are there any examples that show that this policy/procedure/practice/event is having a positive impact on any of the following protected characteristics? Yes/No, If yes, please provide evidence/examples.

- **Please see table below**

Are there any concerns that this policy/procedure/practice/event could have a negative impact on any of the following characteristics?

- **NO**

Who does the policy/procedure/practice/event impact on?

Race	✗	Religion/belief	✗	Marriage/Civil Partnership	✗
Sex	✗	Disability	✗	Sexual orientation	✗
Age	✗	Gender re-assignment	✗	Pregnancy/maternity	✗

The policy should have a positive or neutral impact on all protected characteristics. No negative impact has been identified.

		Positive impact	Negative impact	Reasons
Gender	Women	✓	NA	This policy takes into account the increased risk to women who may be lone working. However, the policy is designed to protect all staff, including women who work on their own.
	Men	✓	NA	Policy is designed to protect all staff who may be lone working.
Race		✓	NA	Policy is designed to protect all staff who may be lone working.

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		✓	NA	Policy is designed to protect all staff who may be lone working.
		✓	NA	Policy is designed to protect all staff who may be lone working.
		✓	NA	Policy is designed to protect all staff who may be lone working.
		✓	NA	Policy is designed to protect all staff who may be lone working.
Disability		✓	NA	It may not be possible for those with certain disabilities to undertake all elements of lone working however, Managers are expected to make all reasonable adjustments to facilitate lone working as appropriate for all staff if the work situation requires it. Appropriate advice should be sought and the adjustment agreed with the employee. However, this policy is designed to protect all staff who may be lone working.
Sexual Orientation		✓	NA	Policy is designed to protect all staff who may be lone working.
Age	Older People (60+)	✓	NA	Policy is designed to protect all staff who may be lone working.

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	Younger People (17 to 25) and children	✓	NA	Policy is designed to protect all staff who may be lone working.
Religion/Belief		NA	NA	Policy is designed to protect all staff who may be lone working.
Pregnancy/ Maternity	Pregnant women	✓	NA	An increased risk to new or expectant mothers exists and lone working should be considered as part of the pregnancy risk assessment where reasonable adjustments are made to ensure the safety of new and expectant mothers. However, this is designed to protect all staff who may be lone working.
Gender Reassignment		NA	NA	Policy is designed to protect all staff who may be lone working.
Marriage/Civil Partnership		NA	NA	Policy is designed to protect all staff who may be lone working.

Will the policy/procedure/practice/event create any problems or barriers to any community or group?

**NO**

Will any group be excluded because of this?

**NO**

Will there be a negative impact on community relations?

**NO**

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If the answer to any of these questions is YES, you must complete a FULL Equality Impact Assessment

Could the policy/procedure/practice/event have a positive impact on equality by reducing inequalities that already exist? Explain how will it meet our duty to:

Yes – ensuring that a fair and consistent process is followed for all Trust staff.

### **Action Plan/Plans - SMART**

Specific

Measurable

Achievable

Relevant

Time Limited

Actions apply to all staff and a generic Lone Working Action Action Plan has been included within the Lone Working Policy

**Evaluation Monitoring Plan/how will this be monitored?**

**Who**

Director of Workforce is the ELT Sponsor

ELT, Workforce Committee and EDI Committee will monitor the policy and associated actions

**How**

The Lone Working Task and Finish Group will be asked to review the Action Plan and Risk assessment on a annual basis. As part of the process, this EQIA will be reviewed to establish if application of this policy has created any disproportionate impact and to assess if application of the policy has increased the risk of sexual harassment or any other kind of bullying and harassment. Relevant data will be supplied to the group for review

**By**

HR Policy Lead will ensure the review has taken place and update the Director of Workforce

**Reported to**

ELT and the Workforce Committee as part of the EHRC action plan