



HSA

An tÚdarás Sláinte agus Sábháilteachta
Health and Safety Authority

Guidance on Managing the Risk of Lone Working in the Health and Social Care Sector

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Introduction

This guidance document considers any employee working alone in the health and social care sector who can be described as a lone worker. It provides advice on how to ensure a safe and healthy working environment for health and social care lone workers in the health and social care sector. The term 'lone worker' is used in this document.

The term 'service user' is used in this document to describe a client, resident, patient, or any other appropriate term used to describe an individual receiving care or support in a health and social care setting.

Lone working, such as working alone in the community or in a health or social care establishment, has its own unique set of risks which need to be considered by both employers and employees as part of a risk management exercise.

Any potential hazards and risks associated with lone working must be identified and discussed between management and employees through agreed consultation arrangements. Consultation is a process that requires commitment and participation from both management and employees.

This document is not intended as a legal interpretation of the legislation.



Legal Duties

The law requires employers to consider and address any health and safety risks before employees are allowed to work alone.

Section 19 of the Safety, Health and Welfare at Work Act 2005 requires an employer to undertake a risk assessment, and this risk assessment shall determine whether or not an employee may work alone. Therefore, in general, an employer must assess whether an employee is at significantly higher risk when working alone.

Employers have responsibility for the health, safety and welfare of all their employees. They have responsibilities for the health and safety of those affected by work activities, including visitors to any premises under their control and any self-employed people they engage.

These responsibilities cannot be transferred to any other person, including those who work alone. It is an employer's duty to assess risks to lone workers and take steps to avoid or control risks where necessary.

Employees, under Section 13 of the Safety, Health and Welfare at Work Act 2005, have responsibilities to take reasonable care of themselves and other people affected by their work activities and to cooperate with their employers to enable the employer to comply with health and safety legislation.

Employees are required to:

- use tools and other equipment properly in accordance with any relevant safety instructions and training they have been given;
- ensure that they are not under the influence of any intoxicant to the extent that they could be a danger to themselves or others while at work;
- not to engage in improper conduct or other behaviour that is likely to endanger themselves or anyone else;
- attend or complete any training identified by their employer relating to their safety, health and welfare at work as a lone worker; and
- report any work carried out in a manner that may endanger safety and health, as well as report any defects in the place of work, equipment, and systems of work that might endanger safety and health.



Definition of Lone Workers

For the purpose of this guidance, people who work by themselves without close or direct supervision are classified as lone workers. Lone workers include those who work alone at the place of work or in isolation off-site. Examples of lone workers are shown below.

Lone workers exist in all health and social care sectors and can be found amongst those who:

- work alone at a fixed base e.g., an administration staff member working alone in a healthcare setting; an employee who is the only staff member working in a community house supporting a service user(s);
- work separately from others within a premises or in an isolated part of a premises e.g., a maintenance person working in an isolated area or a porter working in an isolated part of a hospital;
- work away from their fixed base for any period of time e.g., a security person on patrol in hospital grounds; a lone worker supporting a service user on an outing in the community; a health and social care professional, nurse, doctor or home support worker working in the community;
- work alone outside normal hours e.g., a doctor on call; an ambulance driver or a technician working alone in a laboratory providing an out-of-hours service;
- travel in the course of their work either alone or whilst escorting or accompanying a service user(s) as part of their work e.g., a public health nurse; a nurse on escort duty, a health care worker bringing a service user to an appointment; or
- working in rural, remote or isolated areas e.g., a health or social care professional working in a health centre or a community hub in a village.





Hazard Identification

Lone workers may be exposed to hazards such as violence and aggression. This includes physical and verbal abuse and challenging behaviour of service users that presents a risk to staff.

Employers must identify their lone workers and ask questions such as:

- Does the workplace present a special risk to the lone worker?
- Is there a hazardous substance or process which makes it unsuitable for lone working? E.g., working in a high-risk confined space?
- Is there a risk of violence?
- Have psychological risks (work-related stress or mental health) that can arise from lone working been considered, particularly the need to mitigate against the risk of isolation, poor relationships and lack of support?
- Are young, older, pregnant workers or workers with a disability particularly at risk if they work alone?
- Are there any other reasons why an individual, e.g., a trainee, an agency or a temporary worker, may be more vulnerable than others?
- What training is required for the worker to safely work alone and has the worker received this training? Have additional training needs been identified?
- Has the worker's previous experience both in relation to their role and working alone, been considered when assessing training and supervision needs?
- If the lone workers' first language is not English, are suitable arrangements in place to ensure clear communication, especially in an emergency?
- Are there relevant cultural factors that need to be considered and discussed with the lone worker?





Assessment and Control of Risks

What must employers do to support lone workers?

(a) Carry out a risk assessment:

Employers need to identify the potential hazards faced by lone workers and assess the associated risks. Employers must ensure that measures are in place to avoid or control such risks.

Where the risk assessment shows that it is not possible for work to be done safely by a lone worker, alternative arrangements must be made. The risk management process and the risk assessments must be included in the Safety Statement for that service.

The risk assessment process must involve consultation and participation of employees. If required, the services of a competent person must also be sought in developing protective and preventive measures (e.g. identifying appropriate training and security measures).

Risk assessments must:

- identify the significant hazards;
- identify the specific group of health and social care staff likely to be affected;

- identify the control measures already in place;
- determine whether these control measures are sufficient to adequately control risk;
- identify any further control measures necessary and ensure control measures are implemented;
- identify any tasks that are too difficult or dangerous to be completed alone so these can be avoided;
- identify the supports that lone workers need to work alone safely both from a physical and psychological perspective;
- be documented, signed and dated; and
- be reviewed periodically and in the context of any reported incident, or if there is a significant change in the work or any reason to believe the original assessment is no longer valid.

Prior to working alone in a service user's home, an assessment must be carried out to ensure the work can be carried out safely, including the risk of challenging behaviours and risk associated with people moving and handling activities.

Employers of lone workers must:

- involve lone workers or their representatives when undertaking the required risk assessment process;
- ensure that hazards, potential harm and precautions determined by the risk assessment are effectively communicated to lone workers involved;
- take steps to check control measures are in place; and
- ensure that where a lone worker is working at another employer's workplace, there is cooperation between the respective employers so that the lone worker knows of any risks and the required control measures at the workplace.

Medical Conditions:

- Occupational health advice may be required for employees who have a medical condition which may place them at greater risk while lone working. Any assessment should consider both routine work and foreseeable emergency situations. This will facilitate the employer in ensuring that the appropriate control measures can be put in place.

Dynamic risk assessment for violence and aggression:

- Dynamic risk assessment is the process of continually observing and analysing risks and hazards in the work environment.
- Understanding dynamic risk factors assists with short-term predictions and has an important role to play in actively managing risk. If the risk increases during this process, the lone worker can then decide whether the work continues, or they withdraw.
- The aim is to make the employee aware of the environment and potentially dangerous situations and take actions to remove themselves if the risk increases.
- Employees can be trained to recognise the potential for aggression and remove themselves from danger before it occurs.



(b) Identify and implement control measures to ensure employee safety:

In order to secure a lone worker's safety, an employer shall determine, following risk assessment, the most appropriate control measures in consultation with employees. The following control measures should be considered, where appropriate to the risk:

- match lone worker skills to service user support needs;
- identify the supports that will be put into place for the lone worker. This includes agreeing on how to keep in contact with lone workers, how to consult with lone workers regarding their health, safety and wellbeing, and how to support workplace relationships between the lone worker, their colleagues and their line manager;
- where available, provide lone workers with a service user history prior to the visit, including any relevant background information, e.g., information about behaviours that may be encountered, experiences reported from previous visits, and information about the area. If the risk is unacceptable, identify additional appropriate controls, e.g., having a service user come to a workplace or visiting in pairs;
- provide lone workers with emergency contact equipment and any safety devices that they require e.g., mobile phones including emergency code words, speed dials for emergency contact persons and emergency services, and duress alarms;
- put in place a system for lone workers to inform their fixed base (or contact person) of the service users' names, the addresses of the external locations to be visited, and the scheduled arrival/ departure times;
- put in place procedures for employees to phone their fixed base (or contact person) at agreed intervals;
- have an effective action plan in place should the lone worker fail to return on time or does not phone at agreed intervals, e.g., try to contact the lone worker, inform a senior manager, or contact the Gardai;
- develop plans to address emergencies arising such as a situation where the risk of work-related violence and aggression escalates, in the event of a lone worker becoming ill or in the event of an accident;
- set up a safe working procedure to facilitate a lone worker to withdraw from a visit or situation immediately and seek further assistance or advice if they feel threatened or at risk in any way;
- test and practice any emergency or response plans or procedures to confirm the arrangements in place are effective and to allow for any changes to be identified;
- review the building security arrangements where there is a lone worker; and
- ensure vehicles provided are roadworthy and kept in good repair.

Lone workers working away from their base can reduce the risk to their health and safety by:

- ensuring that the fixed base or point of contact knows their work schedule and has their contact details;
- planning the visit and reviewing risk assessments developed and information about health and safety risks, e.g., information from a referral source;
- being familiar with all communication devices for indicating an emergency situation and fully understanding the service that supports the device and the policies to be adhered to in order for the service to be effective;
- cooperating with training provided by the employer;
- being alert to their surroundings;
- being cautious when entering an external location and leaving immediately if there is any evidence of a threat or safety issue that may make the situation unsafe, e.g., arguments or abusive behaviour;
- reporting any defects in the place of work, equipment and systems of work that might endanger safety and health;
- reporting health and safety concerns, hazards, incidents and near misses in keeping with local procedures;
- avoiding working late shifts when travelling long distances if possible due to the risk of fatigue whilst driving home; and
- keeping vehicles in good repair (reporting defects in a timely manner if it is a work vehicle) and ensuring enough fuel for the journey.



Training, Supervision and Communication

Lone workers need to be sufficiently experienced and fully understand the risks and precautions they need to take. Employers should set the limits to what can and cannot be done while working alone. They must ensure that their lone workers are competent to deal with circumstances that are predictable but not routine and that there are clear procedures in this regard, e.g., how to respond to an aggressive situation and when to stop work and seek advice from a supervisor.

Training is particularly important where there is limited supervision to control, guide and help in situations of uncertainty. Training may be critical to avoid people panicking in unusual situations. Lone workers do not have more experienced colleagues to support them directly so additional training may be required, including before the person commences working alone. Training should be relevant to the work being undertaken.

Before commencing lone working, ensure workers are:

- competent to deal with the requirements of the job;
- competent in relation to implementing health and safety controls;
- suitably trained in the use of any equipment or technical solutions provided; and
- able to recognise when to take action; action includes seeking advice or leaving the workplace if there is a serious or imminent threat to their health and safety.

The information, instruction and training provided to lone workers includes (but is not limited to) the following:

- first aid procedures;
- emergency procedures and the use of safety devices;
- infection control training;
- cultural awareness/cultural competence training;
- manual handling and people moving and handling training;
- safety intervention training (including prevention, de-escalation skills and interventions); and
- any other relevant training in relation to the prevention and management of aggression and violence.

Training for lone workers should be based on risk assessment and specified both in the Safety Statement/risk assessment and any other relevant PPPG (policy/procedure/protocol/guideline) for that organisation.

Consider any previous experience as part of assessing the worker's competency to work alone. Workers should not work alone until they have been adequately trained for the work task or situation, received training in personal safety and the use of lone worker devices, and have the skills and competency to work alone.

Additional consideration is required for lone workers whose first language is not English. Training (including induction training) will need to be delivered in a form, manner and language that will be understood by workers whose first language is not English. Ensure that workers understand any instruction and information that they are given in relation to risks, how to manage those risks, and any precautions they need to take.

Cultural awareness means understanding that cultural factors influence a person's beliefs, values and behaviour (AHRQ, 2020). In Ireland, cultural awareness recognises the increasingly diverse community of service users accessing health and social care services. Being culturally aware is key to enabling the lone worker to use culturally relevant information to build good relationships and provide care and support to individual service users in the most appropriate way. Relevant cultural factors should be considered when completing the risk assessment.

Employers can support their staff and any lone workers to develop cultural competence through the provision of appropriate training.

The extent of supervision required for lone workers depends on the risks involved and the previous experience of the individual worker as well as an assessment of their individual capacity to identify and manage relevant risks. The level of supervision needed is a management decision that should be based on the findings of the risk assessment. The higher the level of risk and the less experienced the individual, the greater the need for supervision. New workers, workers undergoing or awaiting training, or workers new to a work task or situation will need to be accompanied initially.

Communication and supervision arrangements may take various forms including at a minimum:

- periodic visits by supervisors;
- agreed means of regular contact between a lone worker and their supervisor;
- the use of appropriate technology solutions including safety devices that raise the alarm in an emergency;
- a system to ensure lone workers have signed off at the end of their task; and
- procedures to follow in the event of an emergency.

Communication and supervision arrangements need to be established and tested. Ensure appropriate communication arrangements are in place both for regular contact and in the event of an emergency. Ensure lone workers know how to raise any health and safety concerns. Ensure emergency procedures clearly identify the steps to take in the event of an emergency and who to contact. Ensure all health and social care staff know their responsibilities in emergency situations.

There should be clear procedures relating to the sharing of information with colleagues concerning aggressive service users or others who may be present during a visit. This should include what should be communicated and how this is to be done having due regard to the relevant legislation protecting those at work and those who are receiving care. Lone workers should be provided with the information they require about the risks of aggressive or violent behaviour by service users or others who may be present and the appropriate measures for controlling these risks.





Managing Incidents

Incidents that occur in lone working situations, whether they involve assaults, theft or criminal damage to property, have a direct impact on the lone worker. Employers should have measures in place to support any lone worker or other staff member involved in the response and who has been subject to an abusive or violent incident. These might include a debrief following an incident, access to occupational health, psychological support, counselling services, post-trauma support and peer support. Employees should know how to access these services.

Employers must have a system in place for the reporting and investigation of incidents that have or could have resulted in a health and safety issue for a lone worker. The reporting of all incidents helps employers and employees to obtain information about safety issues in the workplace, identify problems as they arise, and address them.

Reporting and investigating incidents assists employers in understanding why incidents occurred, in making decisions, and in setting priorities. Systems should also be in place for the analysis of incidents as this helps employers monitor trends and safety issues, identify hazards and risks that were previously unnoticed, and revise existing or develop new safe working procedures or prevention strategies.

Where, as a result of a workplace accident, an employee is unable to perform their normal work for more than three consecutive days, the employer must ensure this is reported to the Health and Safety Authority online or by using an IR1 form available from the Authority.



Monitor and Review

Employers should have a system for monitoring and reviewing the effectiveness of the arrangements in place for lone workers. These arrangements should be outlined in a lone working policy and should be specific to the service/facility to which they relate.

An audit system is one example of an effective mechanism for identifying any areas that require improvement or adjustment. Audit systems that include interviews of lone workers are particularly effective. Audits should also consider any refresher training required.

Another method is to follow the initial steps taken in identifying hazards, assessing risks and developing controls to check that controls have been implemented and are effective. This process must involve consultation with lone workers and safety representatives to properly assess whether the controls are still adequate. Improvements are then implemented to address any areas that require attention.

The more serious the risk, the more frequently the controls should be reviewed. The implementation of safe systems of work must be monitored to ensure they are working effectively.



Appendix 1

Examples of Hazards and Related Control Measures for Lone Health and Social Care Workers in the Community

Some examples of hazards and related control measures for lone workers in the community are given below which may assist in the risk assessment process. Please note that this is not an exhaustive list.

Hazard	Possible Control Measures
<p>Lack of Support Network</p> <p>A support network should be developed to ensure the lone worker is provided with support from other colleagues and their supervisor.</p>	<p>Agree on how to keep in contact with lone workers including how they will participate in team meetings, team events and social activities.</p> <p>A supervision arrangement should be in place that includes communication arrangements and arrangements to facilitate regular contact between the lone worker and their supervisor.</p> <p>Arrangements to allow consultation with lone workers in relation to any health and safety matters, opportunities to raise concerns, discuss any issues or consult in relation to any proposed changes.</p>
<p>Transport Breakdown.</p> <p>Being broken into.</p>	<p>Vehicles to be checked, maintained and serviced in line with manufacturers' schedule.</p> <p>Carry a legal and useable spare tyre, jack and tools for wheel change and a mobile phone to summon assistance.</p> <p>Ensure valuables or other items which might attract attention such as medicines are not left on display (controlled drugs stored as per the requirements of the Misuse of Drugs Act).</p> <p>A mobile phone to summon assistance.</p>

Hazard	Possible Control Measures
<p>Violent or Threatening Persons</p> <p>This may include service users, partners, relatives and friends who may be aggressive.</p>	<p>Assessment of any new service user to determine if it is possible for the work to be done safely by a lone worker.</p> <p>Briefings from managers, colleagues or other agencies on service users, where appropriate.</p> <p>Formal training in prevention, de-escalation skills and verbal and safety interventions (includes both verbal and disengagement and/or holding skills).</p> <p>Agreement prior to the visit that a particular person will not be present.</p> <p>Second person in attendance where risk assessment determines this (including when dealing with unpredictable service user behaviour and situations with a history or potential of violence or aggression).</p> <p>Provision of appropriate technology solutions including safety devices.</p> <p>Rearrange visit for the office/clinic where others are present.</p>
<p>Aggressive animals</p>	<p>Check for shared information about animals which may cause difficulty.</p> <p>Arrange prior to the visit that a particular animal will be securely restrained when the lone worker calls.</p>
<p>Sudden onset of illness or accident</p>	<p>A mobile phone to seek assistance.</p> <p>Lone workers are aware of the procedures to follow in the event of an emergency.</p> <p>Procedures are in place to ensure that action will be initiated if the lone worker does not make contact at agreed intervals.</p>

Hazard	Possible Control Measures
<p>Environment</p> <p>Service user's home and surrounding area may, in addition to hazards indicated above, include known problems, such as remote location, difficult access, and difficulties locating the house.</p> <p>Service user's home may not be conducive to work activities such as people moving and handling.</p>	<p>Briefing lone workers on relevant issues previously identified or raised by other agencies.</p> <p>Seek information regarding the area prior to the visit.</p> <p>Have a second person in attendance where risk assessment determines this.</p> <p>Rearrange a visit to the office/clinic where others are present.</p> <p>Carry out risk assessment and identify controls to reduce the risk.</p>
<p>Lack of Communication</p> <p>Communication is essential to have other persons aware of a lone worker's movements and to respond if a lone worker does not follow their schedule. Assistance can be initiated in the event of the unexpected.</p>	<p>Provision and use of a mobile phone.</p> <p>Storing speed dials to summon assistance.</p> <p>Reporting movements to base with pre-determined action in the event of missing scheduled calls or a request for assistance.</p> <p>A buddy system to give support and assistance if required.</p> <p>Potential cultural differences and language barriers identified to inform the risk assessment process.</p>
<p>Sickness/Medical Condition of Lone Worker</p>	<p>Occupational health advice may be required for employees who have a medical condition which may place them at greater risk while lone working. Any assessment should consider both routine work and foreseeable emergency situations. This will facilitate the employer in ensuring that the appropriate control measures can be put in place.</p>



Appendix 2

Examples of Hazards and Related Control Measures for Lone Health and Social Care Workers in Health and Social Care Premises

Some examples of hazards and related control measures for lone workers in health and social care premises are given below which may assist in the risk assessment process. Please note that this is not an exhaustive list.

Hazard	Possible Control Measures
<p>Lack of Support Network</p> <p>A support network should be developed to ensure the lone worker is provided with support from other colleagues and their supervisor.</p>	<p>Agree on how to keep in contact with lone workers including how they will participate in team meetings, team events and social activities.</p> <p>A supervision arrangement should be in place that includes communication arrangements and arrangements to facilitate regular contact between the lone worker and their supervisor.</p> <p>Arrangements to allow consultation with lone workers in relation to any health and safety matters, opportunities to raise concerns, discuss any issues or consult in relation to any proposed changes.</p>

Hazard	Possible Control Measures
<p>Violent or Threatening Persons</p> <p>These may include service users, partners, relatives and friends who may be aggressive.</p>	<p>Assessment of any new service user to determine if it is possible for the work to be done safely by a lone worker.</p> <p>Appropriate appointment times made for new service users to avoid lone working.</p> <p>Briefings from managers, colleagues or other agencies on service users, where appropriate.</p> <p>For service users who are known to be threatening/violent, consider security support for appointment.</p> <p>Second person in attendance where risk assessment determines this (including when dealing with unpredictable service user behaviour and situations with a history or potential of violence or aggression).</p> <p>Use of an appropriate meeting room/area, e.g., centrally located, viewing panels, easy access to exit, panic button, phone etc.</p> <p>Risk assessment prior to escorting a service user(s) to other internal or external areas/services.</p> <p>Formal training in prevention, de-escalation skills and verbal and safety interventions (includes both verbal and disengagement and/or holding skills).</p> <p>An incident reporting procedure in place with follow-up action.</p> <p>Procedures are in place for sharing appropriate information.</p>

Hazard	Possible Control Measures
<p>Emergency Procedures</p>	<p>Lone workers and other staff who may be involved in the response to an emergency situation are trained and aware of procedures in the event of an emergency such as fire, accident, etc.</p> <p>Emergency plans in case a situation escalates involving violence or aggression.</p> <p>Means of communication provided.</p> <p>Procedures are in place to ensure that action will be initiated if the lone worker does not make contact at agreed intervals.</p> <p>Occupational health advice may be required for employees who have a medical condition which may place them at greater risk while lone working. Any assessment should consider both routine work and foreseeable emergency situations. This will facilitate the employer in ensuring that the appropriate controls can be put in place.</p>
<p>Lack of Communication</p> <p>Communication is essential to have other persons aware of your movements, respond if you do not follow your schedule and to initiate assistance in the event of the unexpected.</p>	<p>Buddy system to give mutual support and assistance e.g., between adjacent wards or departments by direct contact, telephone or intercom.</p> <p>Speed dials to summon assistance.</p> <p>Notification of start and finish of lone working and periodic checks.</p> <p>Safety device or panic alarm to alert the adjacent area, department or security, together with agreed action to take and alarm routinely tested.</p>
<p>Security</p>	<p>Doors locked to prevent unauthorised access.</p> <p>Remote door locks with intercom and/or CCTV.</p> <p>Buzzer/chime to alert the lone worker that a person has entered the building or department, as applicable.</p> <p>Buzzer/chime to indicate door not fully closed and locked.</p>



Appendix 3

Example of a Safety Checklist for Lone Health and Social Care Workers in the Community

To be checked off informally by the lone worker and if any issues are believed to be significant, these should be discussed with the manager/supervisor and recorded in keeping with local procedures.

1. Have you checked if there is any specific information that you need to know before your planned visit?
2. Does anybody know where you are going and how long you will be?
3. Are arrangements in place for someone to initiate action if you do not return or report back when expected?
4. If your itinerary changes have you informed the person who would initiate such action?
5. Have you made sure that you can be contacted? Is your mobile phone charged?
6. Are you as far as practicable going to avoid a place or time where persons or other hazards may cause excessive risk?
7. Are arrangements made for safe travel?
8. Do you know exactly how to get there?
9. Have you parked in a well-lit area easily accessible from your destination where possible, facing in the direction of an exit?
10. Is your clothing suitable for the work and work environment, e.g., does not restrict movement and does not present a risk of entanglement or strangulation?
11. Have you got your phone and keys on your person (and not in a bag), so you can retrieve them quickly if necessary?
12. Have you minimised the carrying of cash and valuable items and ensured that items which might attract attention such as medicines are not left on display?
13. Are you prepared to seek advice, get support or terminate the visit as appropriate if there is any aspect of the visit that makes you uneasy?
14. Will you pass on to colleagues or other agencies at the first opportunity any aspects of the visit that need to be shared in keeping with local procedures?
15. Do you carry a personal alarm where one is required?
16. Are you familiar with the relevant policies and procedures relating to lone working?



Appendix 4

Example of a Safety Checklist for Lone Health and Social Care Workers in Health and Social Care Premises

To be checked off informally by the lone worker and if any issues are believed to be significant, these should be discussed with the manager/supervisor and recorded in keeping with local procedures.

1. Have you checked if there is any specific information that you need to know before your service user's appointment?
2. Does anybody know that you are lone working and how long you will be?
3. Are arrangements in place for someone to initiate action if you do not respond to calls or report in at agreed intervals?
4. If your appointment or work plans change, have you informed the person who would initiate such action?
5. Have you made sure that you can be contacted? If using a mobile phone, is it charged?
6. Is an appropriate access control in place to ensure that unauthorised persons cannot enter without your permission or knowledge?
7. Can you summon assistance and are arrangements made to enable specified persons to attend promptly?
8. Is your clothing suitable for the work and work environment, e.g., does not restrict movement and does not present a risk of entanglement?
9. In an emergency, can the process be safely stopped and persons evacuated if necessary?
10. Can you safely get to your work area and return to your car if, for example, you are working late?
11. Have you avoided or minimised the carrying of cash and valuable items?
12. Are you prepared to seek advice, get support or terminate the appointment as appropriate if there is any aspect that makes you uneasy?
13. Will you pass on to colleagues or other agencies at the first opportunity any aspects of the visit that need to be shared in keeping with local procedures?
14. Do you carry a personal alarm where one is required?
15. Are you familiar with the relevant policies and procedures relating to lone working?



Appendix 5

Sources of Further Information

Please visit the HSA website at www.hsa.ie

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