



HEALTH AND SAFETY  
AUTHORITY

# Guidance on **Lone Working** in the Healthcare Sector





Our vision:

**A national culture where  
all commit to safe and  
healthy workplaces and  
the safe and sustainable  
management of  
chemicals**

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## 1. Introduction

This guidance document provides advice on how to ensure a safe and healthy working environment for lone workers in healthcare.

Lone working, such as working alone in the community or in a healthcare 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.

## 2. Legal Duties

### ***Are people legally allowed to work alone?***

Working alone is not in itself against the law and it will often be safe to do so. However, the law requires employers and others to think about and deal with any health and safety risks before people should be 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, for example 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 employers' 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 co-operate with their employers to enable the employer 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;
- ▼ Report any defects in the place of work, equipment, systems of work etc which might endanger safety and health.

### 3. Definition of Lone Workers

#### ***Who are lone workers and what jobs do they do?***

For the purpose of this guidance, people who work by themselves without close or direct supervision are classified as lone workers.

*Lone workers can be found amongst those who:*

- ▼ Work separately from others, e.g. a technician working alone in a laboratory providing an out of hours service, a maintenance person working in an isolated area;
- ▼ Work away from their fixed base e.g. a security person on patrol, a nurse on escort duty;
- ▼ Work in the community e.g. a psychiatric nurse visiting community homes;
- ▼ Work outside normal hours e.g. GP on call;
- ▼ Are the only person on the premises, e.g. a receptionist alone in a clinic;
- ▼ Visit people in their homes, e.g. social workers, doctors, home helps, public health nurses.

## 4. Hazards

### ***What kind of hazards might lone workers be exposed to?***

Lone workers may be exposed to hazards such as violence and aggression (including physical and verbal abuse) and difficult work environments and may be at greater risk in the event of an emergency or if involved in a work related accident.

*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? For example, working in a high risk confined space?
- ▼ Is there a risk of violence?
- ▼ Are young, pregnant or disabled workers particularly at risk if they work alone?
- ▼ Are there any other reasons why an individual, for example a trainee, may be more vulnerable than others?
- ▼ If the lone workers' first language is not English, are suitable arrangements in place to ensure clear communication, especially in an emergency?

## 5. 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.

*Risk assessments must:*

- ▼ Identify the significant hazards;
- ▼ Identify the specific group of staff most 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 controls necessary and ensure controls are implemented;
- ▼ Be documented, signed and dated;
- ▼ 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.



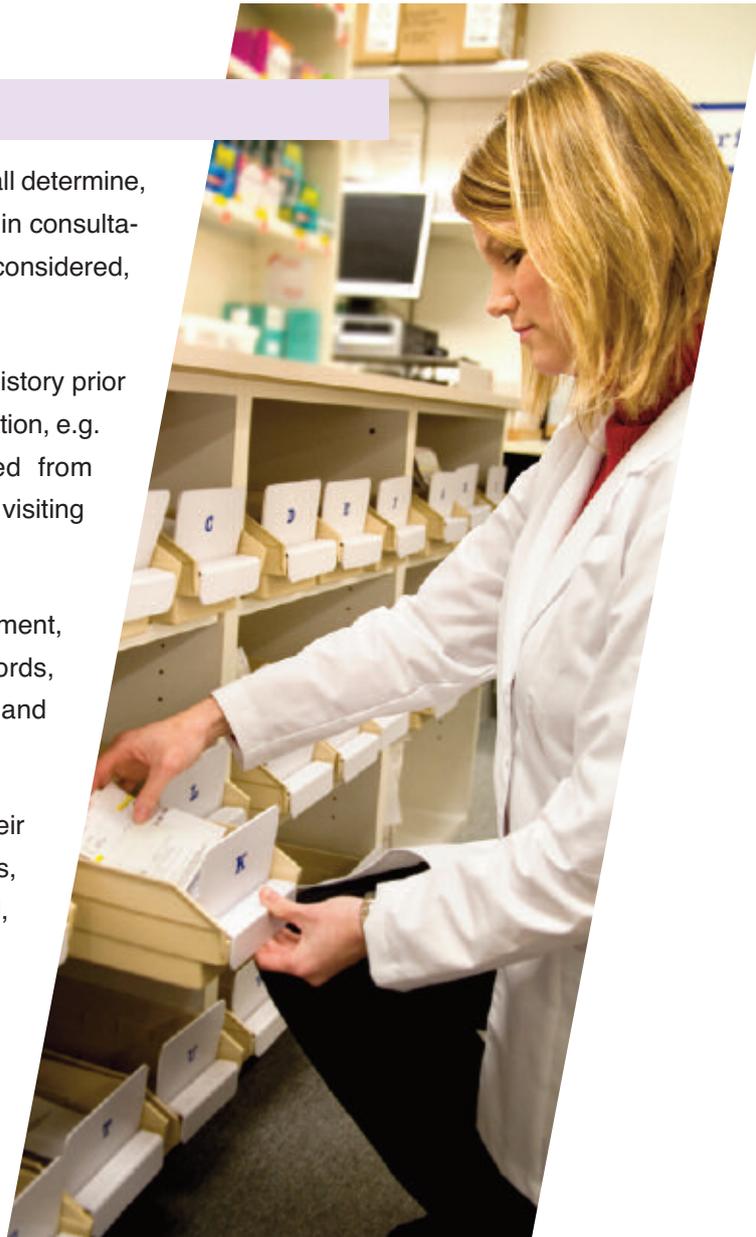
*Employers of lone workers must:*

- ▼ Involve staff 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 staff involved;
- ▼ Take steps to check control measures are in place;
- ▼ Review risk assessments periodically and when they may no longer be valid, as mentioned above;
- ▼ Ensure that when a risk assessment shows it is not possible for the work to be conducted safely by a lone worker, that the risk is addressed e.g. reorganising the work or work situation to avoid the risk, make alternative arrangements to lone working;
- ▼ Ensure that where a lone worker is working at another employers' workplace, there is cooperation between the respective employers so that the lone workers knows of any risks and the required control measures at the new workplace.

(b) Ensure their employees' safety:

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

- ▼ Where possible, provide lone workers with a client history prior to the visit including any relevant background information, e.g. information about the area, experiences reported from previous visits. If the risk is unacceptable, consider visiting in pairs or having a client come to a workplace;
- ▼ Provide lone workers with emergency contact equipment, e.g. mobile phones including emergency code words, speed dials for emergency contact persons and emergency services, duress alarms;
- ▼ Put in place a system for lone workers to inform their fixed base (or contact person) of the clients' names, the addresses of the external locations to be visited, 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 lone worker, inform senior manager, contact Gardai;
- ▼ Ensure vehicles provided are roadworthy and kept in good repair;
- ▼ Provide lone workers with appropriate training, e.g. first aid, emergency procedures, manual handling and de-escalation techniques;
- ▼ Match lone worker skills to client support needs;
- ▼ Carry out a patient moving and handling risk assessment (where this issue arises);
- ▼ Review the building security arrangements where there is a lone worker;



- ▼ Set up a safe working procedure to facilitate a lone worker to withdraw from a visit or situation if they feel at risk;
- ▼ Have an incident reporting procedure;
- ▼ Have arrangements in place to facilitate regular contact between lone workers and their supervisors.

Occupational health advice may be required for employees who have a medical condition which may place them at greater risk while lone working. This will facilitate the employer in ensuring that the appropriate controls can be put in place.

Healthcare workers provide a valued service and the majority of people would come to a healthcare workers assistance rather than cause harm. However there are a small minority of people who may present a risk of aggressive behaviour towards a healthcare worker. There should be clear procedures relating to the sharing of information with colleagues concerning aggressive clients. 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 need to be sufficiently experienced and fully understand the risks and precautions. 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, for example 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.

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 member of staff who has been subject to an abusive or violent incident. These might include a debrief following an incident, psychological support, counselling services, post-trauma support, peer support and access to the staff members' professional or trade union representative. Employees should know how to access these services.

#### (c) Provide an incident reporting system, monitor and revise:

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 to understand why incidents occurred and to make decisions and set priorities. It also helps employers to monitor trends and safety issues, identify hazards and risks that were previously unnoticed and to revise existing or develop new safe working procedures or prevention strategies.

The implementation of safe systems of work must be monitored to ensure they are working effectively.

### ***What can lone workers do to support safe work when working away from their fixed base?***

*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;
- ▼ Keeping vehicles in good repair (reporting defects in a timely manner if a work vehicle) and ensuring enough fuel for the journey;
- ▼ Reviewing risk assessments developed and information about health and safety risks, e.g. information from 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;
- ▼ Co-operating with training provided by the employer;
- ▼ Being alert to 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, abusive behaviour;
- ▼ Noting the availability and condition of equipment and aids, e.g. handrails, adjustable bed, shower, chair, hoist, access ramps, etc and if necessary, recommending to an employer that these be supplied, installed, replaced etc;
- ▼ If travelling long distances, avoiding working late shifts if possible due to the risk of fatigue whilst driving home;
- ▼ Reporting hazards, incidents and near misses in keeping with local procedures.

## Appendix 1:

### Examples of Hazards and Related Controls for Lone Healthcare Workers in the Community

Some examples of hazards and related controls for lone healthcare 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><b>Transport</b></p> <p>Breakdown</p> <p>Being broken into</p>	<p>Vehicles to be checked and maintained in line with manufacturers' schedule.</p> <p>Carry legal and useable spare tyre, jack and tools for wheel change and 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>Mobile phone to summon assistance.</p>
<p><b>Violent or Threatening Persons</b></p> <p>This may include patient, partner, relatives and friends who may be aggressive.</p>	<p>Briefing from managers, colleagues or other agencies on clients, where appropriate.</p> <p>Formal training in attitude recognition, de-escalation and break-away techniques.</p> <p>Agreement prior to visit that a particular person will not be present.</p> <p>Second person in attendance where risk assessment determines this.</p> <p>Rearrange visit for the office/clinic where others are present.</p>
<p><b>Aggressive animals</b></p> <p>These may cause a difficulty if not under control.</p>	<p>Check for shared information about animals which may cause a difficulty.</p> <p>Arrange prior to visit that a particular animal will be securely restrained when the healthcare worker calls.</p> <p>Incident reporting procedure in place with follow up action.</p> <p>Procedures in place for sharing appropriate information.</p>

### Sudden onset of illness or accident

Mobile phone to seek assistance.

Staff aware of the procedures to follow in the event of an emergency.

Procedures in place to ensure that action will be initiated if the lone worker does not make contact at agreed intervals.

### Environment

Clients' home and surrounding area may, in addition to hazards indicated above, include known problems, such as remote location, difficult access, difficulties locating the house.

Briefing staff on relevant issues previously identified or raised by other agencies.

Seek information from residents regarding the area prior to the visit.

Second person in attendance where risk assessment determines this.

Rearrange visit for the office/clinic where others are present.

Clients' home may not be conducive to work activities such as patient moving and handling.

Risk assessment to be carried out and controls identified to reduce the risk.

### Lack of Communication

Communication is essential to have other persons aware of a lone workers movements and to respond if a lone worker does not follow their schedule. Assistance can be initiated in event of the unexpected.

Provision and use of mobile phone.

Storing speed dials to summon assistance.

Reporting movements to base with pre-determined action in event of missing scheduled calls or request for assistance.

Buddy system to give support and assistance if required.

### Sickness/Medical Condition of Lone Worker

If there is any doubt about the suitability for lone working, obtain a medical opinion.

## Appendix 2:

### Examples of Hazards and Related Controls for Lone Healthcare Workers in Healthcare Premises

Some examples of hazards and related controls for lone healthcare workers in healthcare 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><b>Violent or Threatening Persons</b></p> <p>These may include patient, partner, relatives and friends who may be aggressive.</p>	<p>Appropriate appointment times made for new patients to avoid lone working.</p> <p>Briefing from managers, colleagues or other agencies on clients, where appropriate.</p> <p>For patients who are known to be threatening/violent consider security support for appointment.</p> <p>Second person in attendance when determined by risk assessment.</p> <p>Use of an appropriate meeting room/area – centrally located, viewing panels, easy access to exit, panic button, phone etc.</p> <p>Formal training in attitude recognition, de-escalation and break-away techniques.</p> <p>Incident reporting procedure in place with follow up action.</p> <p>Procedures in place for sharing appropriate information.</p>
<p><b>Emergency Procedures</b></p>	<p>Staff trained and aware of procedures in event of an emergency such as fire, accident etc. Means of communication provided.</p> <p>Procedures in place to ensure that action will be initiated if the lone worker does not make contact at agreed intervals.</p>
<p><b>Sickness/Medical Condition relating to the employee</b></p>	<p>If there is any doubt about the suitability for lone working, obtain a medical opinion.</p>

### Lack of Communication

Communication is essential to have other persons aware of your movements, respond if you do not follow your schedule and to initiate assistance in event of the unexpected.

### Security

Buddy system to give mutual support and assistance e.g. between adjacent wards or departments by direct contact, telephone or intercom.

Speed dials to summon assistance.

Notification of start and finish of lone working and periodic checks.

Panic alarm to alert adjacent ward, department or security, together with agreed action to take and alarm routinely tested.

Doors locked to prevent unauthorized access.

Remote door lock with intercom and/or CCTV.

Buzzer/chime to alert staff that a person has entered department.

Buzzer/chime to indicate door not fully closed and locked.

## Appendix 3:

### Example of a Safety Checklist for Lone Workers in the Community

To be checked -off informally by lone worker and if any issues are believed to be significant, these should be discussed with 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 or 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, faced in the direction of 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?
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 minimized 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 Workers in Healthcare Premises

To be checked-off informally by lone worker and if any issues are believed to be significant, these should be discussed with 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 patients'/clients' 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 /work programme changes 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 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 minimized 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](http://www.hsa.ie).

“**Lone Workers**” produced by the Health and Safety Authority and available at [www.hsa.ie](http://www.hsa.ie). Put the reference “lone workers” into the site search facility to locate the document.

“**Working Alone**” produced by the Health and Safety Executive UK and available at their [www.hse.gov.uk](http://www.hse.gov.uk). Put the reference “working alone” into the site search facility to locate the document.

“**Working at External Locations**” developed by the WorkCover NSW Health and Community Services Industry Reference Group and available at [www.workcover.nsw.gov.au](http://www.workcover.nsw.gov.au). Put the reference “working at external locations” into the site search facility to locate the document.

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create a  
National Culture  
where All Commit to  
Safe and Healthy  
Workplaces and the Safe  
and Sustainable  
Management of  
Chemicals*

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