

A photograph of a woman sitting at a desk in a modern office, talking on a mobile phone. She is seen through large glass windows. The office is dimly lit, and a coat is hanging on a rack in the background. The image is partially obscured by a large blue curved shape that frames the text.

NHS Lone Worker Protection Service

Providing an accessible, all-encompassing and affordable solution to protect NHS lone working staff.

For more information please visit:
www.nhsprotect.nhs.uk/lw

Introduction

NHS workers experience abuse ranging from verbal abuse to serious physical assaults.

Statistics show that in 2011/12 there were more than 60,000 assaults against NHS staff, resulting in 1,247 criminal convictions against attackers. Although it is not known how many of these assaults were on lone workers, it is widely recognised that this group of staff may face significantly increased risks because they do not have the immediate support of colleagues or others, such as security staff, if an incident occurs.

The NHS Lone Worker Protection Service was set up in 2009 with the objective of providing an accessible, all-encompassing and affordable solution for the protection of NHS lone working staff. This user guide is designed to reflect the good practice that is in use throughout the NHS and other organisations to help protect lone workers, or staff who sometimes work alone. It is aimed primarily at line managers of lone workers. It will also be of interest to Local Security Management Specialists, risk managers, health and safety managers and human resource departments providing support to those who work alone on behalf of, but not exclusively for, the NHS.



Responsibilities of a line manager

The line manager is responsible for keeping up to date with all the relevant policies and procedures and ensuring that they are implemented and disseminated to lone working staff. Line managers must also ensure that staff are appropriately protected before entering a lone working situation.

Layers of protection for lone workers

Measures for the protection of lone workers fall into three main areas, which can also be seen as protective layers around the lone worker:

PREVENT

Identify the risks by conducting and maintaining a risk assessment for lone workers.

PREPARE

Create a safer working environment through supervision, training and information.

PROTECT

Mitigate and manage risks through control measures such as protective devices.



Identification of lone workers

As part of risk assessment, line managers must identify those who may be at risk. It is important for lone workers to be made aware that they have been identified as a lone worker and to be notified of the outcomes of the risk assessment.

NHS Protect has identified some staff groups within different healthcare settings which often include lone workers.

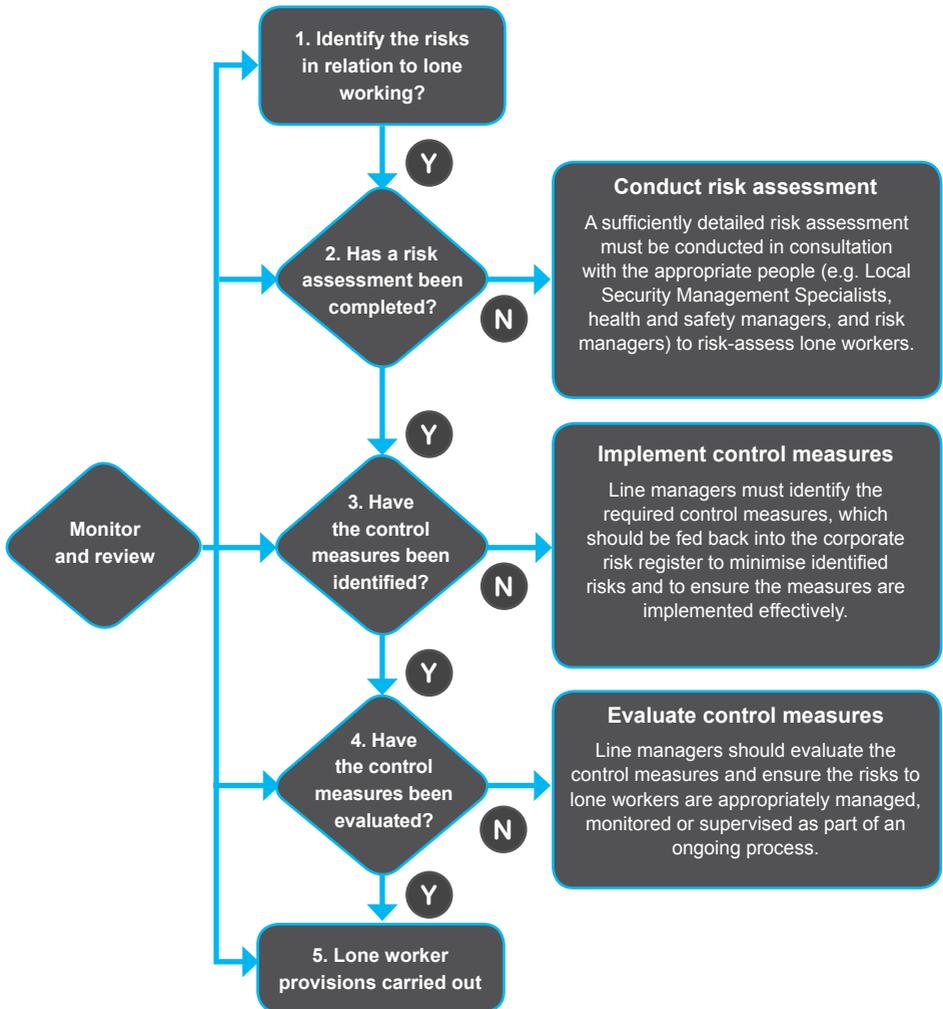
Examples of lone workers in a healthcare setting:

Ambulance personnel	Patient transport services
Assertive outreach workers	Social workers
A receptionist working alone in a clinic reception	Community mental health staff
Community psychiatric nurses	Occupational therapists
Clinical staff	Carers in the community

Other staff figures which frequently work alone can be found in primary care services. Examples include single-handed GP practices, community pharmacists, and dentists or opticians who may provide out-of-hours services, dispense controlled drugs/emergency medicines or make domiciliary visits.

Risk management process

Each risk assessment should consider the vulnerabilities of the lone worker within a healthcare setting to establish if the work can be done safely by a lone worker without supervision and to make arrangements if the lone worker is exposed to higher risks, by virtue of working alone, than those who work together.



Key recommendations for lone working provisions

Line managers should provide a risk rating for each risk identified before considering the necessary control measures. This includes considering the appropriate technology available, or where the safety of the lone worker is threatened and alternative arrangements can be made.

The level of risk can be rated as High, Medium, or Low to describe all existing control measures or to identify other control measures required. Choice of control measures in a particular case should be based on the likelihood of the risk identified causing actual harm.



There are different levels of control measures to consider to mitigate or manage the risks identified:

Buddy system

Discreet alert device

Electronic diary

Emergency phone number

In/out board

Mobile phone

Mobile phone alert app

Personal alarm

Ringling back to base

Torch

Training

Other

Determining control measures

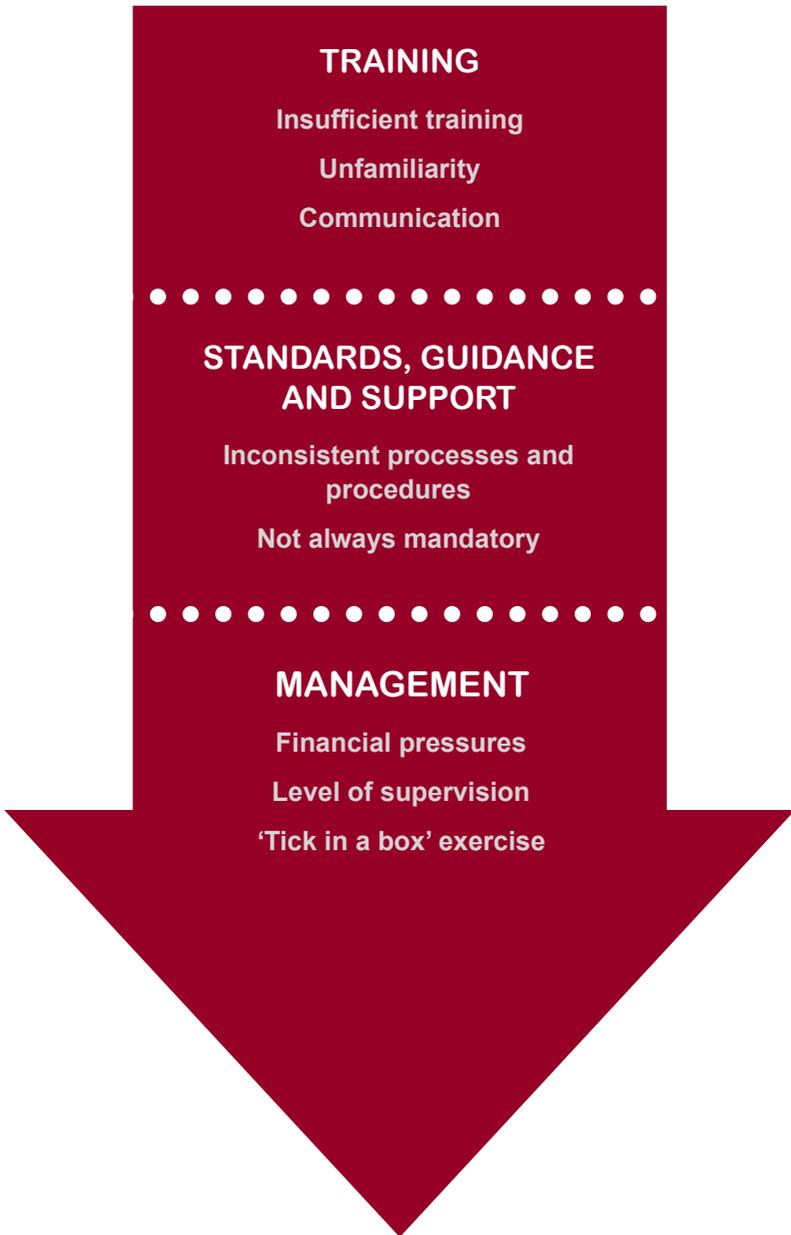
The risk assessment should be constantly reviewed to identify any significant changes from the previous results or activity. A nominated individual should be allocated to setting the timescale and actions to address any issues raised from the risk assessment.

Control measures should be selected for effective prevention, deterrence and safety. However, not all control measures identified will mitigate or remove all risk associated with a particular situation.

Line managers should consider adopting a lone worker protection system as part of a total solution and check if lone working staff are happy and confident in using it.

Risk identification	Level of risk (e.g high, medium and low)	Control measures (e.g. discreet alert device, buddy system, electronic diary, mobile phone alert application)	Mitigated/managed by whom (e.g. Local Security Management Specialists, risk managers, health and safety managers and human resource department)
Violence, abuse or aggression: from previous incidents etc.			
Individual: inexperienced, expectant mothers, medical conditions etc.			
Working patterns: alone all day/out of hours, location (isolated/remote)			
Other			
Additional control measures			
Identification of lone workers (this may include more than one individual, e.g. ambulance personnel, patient transport services, clinical staff, carers in the community, dentists, community pharmacists etc):			
Training, information, and instructions: (e.g. policy, guidance and procedures)			
Supervision: procedures where there is regular contact between a lone worker and a member of supervisory staff or a line manager.			
Telephone or radio	Yes/No	Site visits to lone workers	Yes/No
		Telephone or radio	Yes/No

Why do lone worker protection systems fail?



Key recommendations for lone working provision

Line managers should consider a number of lone worker protection systems to meet the needs of the individual lone worker. Whatever system is adopted, there should be a process for monitoring usage, e.g. through ongoing risk assessments and sufficient auditing.

Consider creating a focus group to review and evaluate the control measures before making a commitment and include an ongoing monitoring process.

Provide training to ensure lone working staff understand how to use the system and provide refresher training as and when required (including new staff and contractors).

Talk to other NHS healthcare organisations to find out what other systems are being used successfully and develop an action plan.

Talk to the Local Security Management Specialist, risk managers, health and safety managers and the human resource department for further guidance and support for monitoring of action plans and implementation.

Lone worker device standards

BS8484:11

BS8484:11 is the standard for any organisation that supplies lone worker solutions (e.g. lone worker alarm devices) which enable transmission of the user's location and a professional security response when an alarm is raised.

BS5979

BS5979 is the standard for both the management and operation of Alarm Receiving Centres (ARCs) under category II, which states the requirements for the ARC to receive the most immediate police emergency response.

Alerts are escalated using a Unique Reference Number (URN) system developed by the Association of Chief Police Officers (ACPO). The standard outlines when and how the police will respond to a lone worker alarm.

ISO27001 is an international standard which provides best practice controls and compliance regarding how to put in place an independently assessed and certified Information Security Management System (ISMS).

ISO27002 provides the guidelines and general principles for developing organisational security standards and effective security management practices.

Key challenges for line managers

Line managers should ensure that when choosing a lone worker alarm system, the supplier is both compliant and regulated to deliver the required service.

Requirements			
Full BS8484:11 Compliance	Own BS5979 Cat II ARC	ISO27001 and ISO27002	Unique Reference Number (URN)
Line managers should use BS8484:11 as a minimum requirement to ensure the lone worker supplier is fully audited and compliant against the standard. Without it, they cannot guarantee a police emergency response.	Ensure BS5979 Cat II is accredited by the Security Systems and Alarm Inspection Board (SSAIB) which is a UKAS approved board.	Ensure the handling of communications and data by the supplier complies with the ISMS ISO27001 and ISO27002.	Ensure URNs are in place for the supplier to receive an immediate police emergency response from all police forces in the required area.
✓	✓	✓	✓

Responsibilities of a lone worker

Lone workers have a responsibility under health and safety legislation to take reasonable care of themselves and to cooperate with their employer.

Lone workers should also work together with their line managers to ensure the appropriate tools are in place for them to plan and risk-assess before each visit, undertake continuous dynamic risk assessment of the situations they find themselves in, report changing circumstances and take all necessary action to minimise the possibility of an incident occurring.



“You can have the best safety policies and procedures in place and use the most efficient tracking/alarm systems available but these cannot eliminate risk entirely or get help to staff instantly if there is a problem. Therefore it’s important that staff are trained in how to react in a potentially dangerous situation and, if necessary, how to defuse or exit the situation”

Jo Walker, Suzy Lamplugh Trust

Tips for working alone

PLAN

Lone workers must take reasonable care when carrying medication, mobile phones and devices, patient records etc to and from a patient's home.

Risk-assess the following scenarios whilst working alone

1. Would my colleagues know where to start looking if I do not return to base at the expected time?
2. Is there a clear policy and procedure to follow if a lone worker cannot be contacted by phone?
3. Is there an appropriate lone worker system in place to raise an alarm (e.g. to line managers, supervisor, buddy, family etc) in case of an emergency whilst working alone?

As part of the risk assessment process, lone workers should be informed of the importance of all necessary control measures.

Dynamic risk assessment

Unacceptable/
High

Further
Controls
Required/
Medium

Adequately
Controlled/
Low

The role of the NHS health body

Organisational commitment

NHS health bodies have a legal responsibility to monitor the health, safety and welfare at work of their employees.

A commitment should be made to manage the personal safety risks to lone workers (including the risk of reasonably foreseeable violence, threatening behaviour and verbal abuse). This should also include ensuring the full backing and commitment of the board for all organisational strategies and initiatives to protect lone workers.

All lone workers should be appropriately trained so that they are both aware and mindful of cultural issues before entering a lone working situation, and can manage some of the key challenges they encounter.

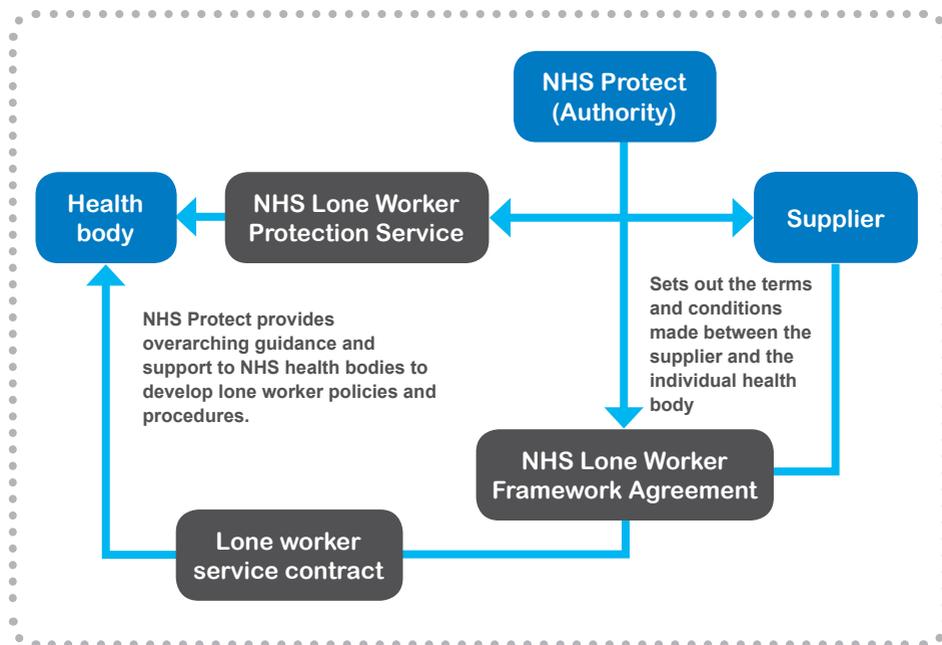
Legislation

- Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1999
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)
- Safety Representatives and Safety Committees Regulations 1977
- The Health and Safety (Consultation with Employees) Regulations 1996
- The Corporate Manslaughter and Corporate Homicide Act 2007

Lone worker protection measures

It is not acceptable to ignore the need for control measures identified through carrying out a risk assessment, especially if the lone worker is identified at 'high risk', e.g. if they are in a situation where there is a history of violence and/or the patient, other friends/relatives who may be present and/or the location are considered 'high risk'. In this situation, the implementation of technology to reduce residual risk may be considered. There is a variety of tools such as GPS to trace the lone worker's location, or to enable someone to check their location if they are late checking in. There are also other useful functions such as 'man down' alarms to trigger an alert if a lone worker trips or falls over. There are lone worker systems based on using existing mobile technology as well as discreet lone worker devices available to lone worker staff.

The role of the NHS Lone Worker Protection Service



NHS Protect is responsible for the ongoing control of both the NHS Lone Worker Protection Service and the NHS lone worker framework agreement at a national level to:

- Review current performance/ service delivery
- Consider ideas for improving the quality of the service
- Enhance and maximise the marketing of the service
- Resolve queries and issues
- Commission studies and surveys relating to the delivery of the service
- Consider a continuous improvement plan
- Consider new technologies/ devices/software for potential inclusion in the framework agreement.

When making a decision to invest in lone worker protection systems or devices, there are a number of factors to consider. An outline of the practical requirements, guidelines and the NHS lone worker framework agreement documents are provided on the NHS Business Services Authority website at:

www.nhsprotect.nhs.uk/lw

The NHS lone worker framework agreement

The NHS lone worker framework agreement is contracted to Reliance High-Tech Ltd as the BS8484 accredited supplier. This has been negotiated centrally on behalf of the NHS in England and has gone through a competitive tendering process according to EU guidelines to provide the largest lone worker contract in the UK.

Requirements			
Full BS8484 Compliance	Own BS5979 Cat II ARC	ISO27001 and ISO27002	URN
✓	✓	✓	✓
Lone worker device offerings			
<p>Identicom Series 8</p> <p>The Identicom Series 8 device is an improved model, offering a range of functionality including activated and rip cord alerts, GSM, GPS and man down systems.</p>	<p>Additional devices and mobile software</p> <p>Identicom Software Application</p> <p>LoneResQ Software Application</p> <p>These are available for Android, Blackberry and Windows Mobile. They provide the capacity to raise alerts to mobile phones already in use by lone workers, and are designed for the convenience for those lone workers who experience lower risk.</p>		

Identicom Series 8



Useful links and further guidance

We hope that you have found this user guide useful and that it will help you in your decisions on lone worker protection solutions.

For further information on the NHS Lone Worker Protection Service and the NHS lone worker framework agreement, please email

loneworkerenquiries@nhsprotect.gsi.gov.uk

Reliance

Contract supplier details:

www.relianceprotect.co.uk 0800 840 7121

RCN

The Royal College of Nursing (RCN) is the largest union and professional body for nurses and nursing in the UK. For more information, advice and support, please refer to:

www.rcn.org.uk 0345 7726 100

Suzy Lamplugh Trust

The personal safety charity Suzy Lamplugh Trust provides an in-house Train the Trainer course, which is an efficient and cost effective way of enabling your safety staff to provide personal safety training throughout an organisation/individual department or unit, to encourage staff to confidently use dynamic risk assessments models to stay safe in many different situations and to help staff to understand and recognise triggers of aggressive behaviour.

For more information about the course and how it can be tailored to suit your needs quote ref: **NHSProtect**

training@suzylamplugh.org 0207 091 0014

Working with other agencies

Wherever possible and legally permissible, NHS health bodies should share information on known risks relating to addresses and associated individuals with all relevant staff. Health bodies should therefore have information sharing protocols that provide a clear explanation of what information can be shared, how and to whom.

