

<b>Reference Number:</b> UHB 380 <b>Version Number:</b> 1	<b>Date of Next Review:</b> 14 <sup>th</sup> Jun 2017 <b>Previous Trust/LHB Reference Number:</b> N/A
<b>Mental Health Clinical Board Lone Worker Protocol</b>	
<b>Introduction and Aim</b> To support Cardiff and Vale UHB Lone Worker Policy and provide managers and staff with instructions on minimum information regarding staff contact details. It will provide clarity on what actions to follow in the event of a staff member going missing.	
<b>Objectives</b> <ul style="list-style-type: none"> <li>• To emphasise the definitions of lone worker and lone working</li> <li>• To ensure safe systems are in place through a single reporting process in the event of a staff member being held hostage, being reported as missing or whose whereabouts is unknown.</li> </ul>	
<b>Scope</b> This protocol applies to all mental health staff in all lone worker scenarios including those with honorary contracts. <i>Staff from physiotherapy services will follow their own protocol.</i>	
<b>Equality Impact Assessment</b>	An Equality Impact Assessment has not been completed. This is because the protocol has been written to support the implementation of the Lone Worker Policy. The Equality Impact Assessment completed for the policy found there to be no impact.
<b>Documents to read alongside this Protocol</b>	<ul style="list-style-type: none"> <li>• Lone Worker Policy</li> <li>• Skyguard Lone Worker Procedure</li> <li>• Health and Safety Policy</li> <li>• Violence and Aggression (Personal Safety) Policy</li> <li>• Incident Hazard and Near Miss Policy</li> <li>• Security Policy</li> <li>• Violent Warning Marker Procedure</li> <li>• Weekend Community Mental Health Nursing Procedure for Adult CMHTs</li> <li>• Operational Policy for Integrated Community Mental Health Teams</li> </ul>
<b>Approved by</b>	Mental Health Clinical Board Policy Group Mental Health Clinical Board Quality & Safety Group
<b>Accountable Executive or Clinical Board Director</b>	Mental Health Clinical Board
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<b><u>Disclaimer</u></b> If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the <a href="#">Governance Directorate</a> .	

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<b>Summary of reviews/amendments</b>			
<b>Version Number</b>	<b>Date of Review Approved</b>	<b>Date Published</b>	<b>Summary of Amendments</b>
1	14/6/2017	05/01/18	New document

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## 1. Definition of a Lone Worker and Lone Working

This protocol reiterates the stance taken in the Cardiff and Vale University Local Health Board (UHB) Lone Worker Policy which

“...intentionally sets out not to identify specific groups of staff thought to be lone workers, or to delineate a specific time when lone working is deemed to occur. The overarching principle must be that lone working can occur anywhere, at any time, and within any group of staff. In support of this, the Cardiff and Vale University Local Health Board ... has adopted the Health and Safety Executive definition of lone working which is:

***“.. those who work by themselves without close or direct supervision”.***

## 2. Responsibilities concerning Contact Details

### Staff

All staff (permanent or temporary) are expected to provide the following details for inclusion in a central register (hard copy) which will be stored appropriately in a central location to facilitate appropriate access by their line manager and senior management. The same details are to be stored electronically within the Team’s own IT system and subject to the same provisions of access:

- Name
- Address
- Car Registration, Make and Model, Colour
- Work issued mobile phone number \*
- Personal mobile number \*
- Home phone number
- Name and phone number of emergency contact

\* - one of these numbers **must** be provided along with all other details.

Any amendments to these details must be completed as soon as possible.

### Line Manager

The Line Manager will ensure staff provide the details outlined above and said details are current. Additionally, it will be the responsibility of the Line Manager to ensure they are stored securely, in hard copy and electronic format. This task may be delegated to other staff, e.g. administrative staff.

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### 3. Responsibilities concerning Lone Working

It is essential safe systems are in place to ensure the whereabouts of all staff can be accounted for at all times if necessary. As such, there must be some form of risk assessment conducted prior to entering a lone working scenario. This may be as simple as conducting a mental checklist prior to a visit. Nevertheless,

“The risk assessment needs to consider options to eliminate or control a hazard in order to decrease the degree of risk to as low as reasonably practicable.”

*(Violence & Aggression (Personal Safety) Policy, Cardiff and Vale UHB)*

Additionally, it is essential to have available a record of each lone worker’s schedule for the day. This may be in the form of daily logs/contact sheets or through the use of electronic calendars, such as those found in e-mail programmes. The lone worker’s safety is to be verified at least twice per shift (e.g. lunchtime and home time if working 09:00-17:00hrs). The following details must be recorded:

- a. Patient’s name
- b. Patient’s full address including postcode
- c. Location of contact if different from point ‘b.’
- d. Time of visit/contact

It is preferable that each member of staff return to their normal place of work before the end of their span of duty. ***If the lone worker is not returning to their normal place of work at the end of their period of work, arrangements must be made for verbal contact to be established with a designated colleague.*** Failure to adhere to this stipulation may result in disciplinary action.

It will be the Team Manager’s or Line Manager’s responsibility to ensure that such a system is in place and is followed by all members of staff who are lone workers.

### 4. Staff needing assistance

#### Prior to visits / lone working

Before undertaking lone working the member of staff must have completed the necessary training in line with the Health Board’s Violence & Aggression (Personal Safety) Policy. This is designed to increase awareness of violence and aggression and its prevalence, the theory and practice of de-escalation techniques and the practical skills needed to break away from a situation of violence and aggression.

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Each team member will have access to a lone worker device and work mobile, which the staff member must have with them while working outside of the office base in case of a situation when it may be required.

Of equal importance is the responsibility on each member of staff engaged in lone working to adopt safe working practices. Examples of this could include checking the patient's record for risk alerts, ensuring any issued mobile phones/lone worker devices are fully charged, parking the car in the direction of departure and under street lighting, not leaving valuables/items of interest on display, removing identifiable badges/stickers from windscreens and windows. This list is not comprehensive as other criteria may apply such as environment, dangerous pets, criminality etc.

#### **Procedure for Staff who find themselves needing assistance**

If using a lone worker device – activate as instructed during training. This will then be escalated to the appropriate manager / nominated deputy.

If staff find themselves in a threatening or violent situation, they should remember the 3 R's:

- Retreat
- Raise the alarm
- Re-assess

Staff should never put themselves in a risky situation; if this were to happen their first duty is to protect themselves by getting out, staying out, and obtaining support.<sup>1</sup>

Please refer also to the [Lone Worker Policy](#) – Appendix A: Guidance on Risk Management and Assessment for Lone Workers.

#### **5. Staff missing, unaccounted for or whereabouts are unknown**

See Appendix 1

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<sup>1</sup> Putting Things Right – Guidance on dealing with concerns about the NHS from 1 April 2011  
Version 2 – April 2012

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**Appendix 1**

