



NMHS POLICY

Working Alone Policy

Scope (Staff):	All Workers of NMHS
Scope (Area):	All Workplaces of NMHS

1. Aim

The North Metropolitan Health Service (NMHS) is committed to ensuring a safe workplace for all workers, including those working in isolation, in accordance with its occupational safety and health obligations.

2. Background

Compliance with this policy will mitigate the risk of injury or harm to NMHS workers and others (i.e. patients, visitors and contractors) and assist in promoting worker health and wellbeing. In addition, adhering to this policy will mitigate risk for the organisation and its accountable officers being exposed to the industrial, legislative and reputational impacts of not appropriately managing legislative obligations.

3. Definitions

Hazard	In relation to a person, means anything that may result in - a) injury to the person; or b) harm to the health of the person.
Incident	An unplanned event (including dangerous occurrences and system failures) resulting in, or having a potential for injury, ill health, damage or other loss.
Risk	The probability of injury or harm occurring and the severity of the consequences of that harm.
Risk management	Is the process by which hazards are identified, assessed and controlled in a systematic manner.
Workers	As per Staff member under the <i>Health Services Act 2016</i> , this refers to an employee in the NMHS and a person engaged under a contract for services by the NMHS. For the purpose of this policy, this also includes volunteers, students and persons on work placement / work experience / unremunerated clinical agreement (UCA).
Workplace	An area, place, or vehicle where a NMHS employees performs their duties and includes but is not limited to hospital premises, laboratories, workshops, training rooms, on-site and off-site facilities.

4. Principles

Working alone hazards exist where Workers are working by themselves, in isolation, without close supervision or contact with colleagues. This may be because they are:

- Working in isolated areas of the site (e.g. tunnels, plant rooms etc.)
- Working off-site (e.g. home visits, stand-alone settings or telecommuting/working from home)
- Working in areas depopulated after office hours (e.g. laboratories and offices, including those who arrive first and leave last).

Risks of working alone may include the risk of fire, equipment failure, injury, illness, security, aggression/violence, the capacity to safely undertake a task alone, or the impact of isolation on mental wellbeing.

Where Working Alone hazards are identified, controls must be put in place in order to adequately reduce the risk.

Working alone controls must ensure:

- There is a means of communication available, which will enable the worker to call for help in the event of an emergency.
- There is a procedure to ensure that regular contact can be made with the worker and the worker is trained in the procedure.
- There is a procedure outlining actions to be taken by the employer and/or the worker in the event of either not being able to be contacted.
- Lone workers are capable of safely responding to emergencies and have access to adequate first aid facilities.
- New workers are informed of working alone procedures during their induction.

Communication strategies can include:

- Visiting the lone worker or regular contact via telephone or radio;
- Automatic warning devices if communication is not received regularly;
- Alarm devices; and
- Checks to ensure that the worker has returned to an agreed destination following completion of a task, shift or visit.

The workplace should be designed in such a way as to provide security to lone workers. This could include:

- Room set-up to ensure that an exit point is easily accessible in case of an emergency;
- Securing the area by ensuring that any safety barriers or doors are locked when working alone; and



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- Ensure the building or relevant rooms are securely locked when leaving the premises.

Workers who are conducting Home/Community Visiting must follow any local health service policies and procedures.

- Local Home/Community Visiting policy/procedure must ensure that a risk assessment is completed prior to off-site premises being visited.

5. Roles and Responsibilities

Managers/Supervisors are responsible for:

- Identifying situations where workers work alone on or off site;
- Assessing the risks of these situations;
- Putting control measures in place to reduce the risk (including avoiding lone work where it is unnecessary or unsafe); and
- Ensuring workers are aware of the relevant procedures.

Local sites/services must develop, where working alone risks exist, complementary procedures specific to their needs.

Workers must:

- discuss with their Line Manager if they have any concerns regarding working alone;
- report incidents and potential hazards as per the NMHS Incident/Hazard Reporting and Investigation Policy;
- take reasonable care to ensure their own safety when working alone; and
- follow working alone procedures as instructed.

6. Compliance and Evaluation

The Chief Executive and each NMHS service Executive Director are responsible for ensuring compliance with this policy.

Compliance with this policy will be monitored by site Safety and Health Committees through compliance reporting and the NMHS OSH Department through auditing processes.



Related internal policies, procedures and guidelines

[NMHS OSH Policy](#)

[NMHS Prevention and Management of Violence and Aggression Policy](#)

[NMHS Incident/Hazard Reporting and Investigation Policy](#)

[NMHS Contractor Safety Policy](#)

[NMHS Mandatory Training Policy](#)

[NMHS Induction and On Boarding Policy](#)

[NMHS Volunteers Policy](#)

[NMHS Flexible Work Arrangements Policy](#)

[MHPHDS \(Mental Health\) - Home and Community Visiting Policy](#)

[WNHS Home Visiting in Safety](#)

[SCGH Allied Health Practice Guideline - Home Visiting](#)

[OPH Home Visiting Hospital Wide Policy](#)

References (if required)

[Occupational Safety and Health Act 1984](#)

[Occupational Safety and Health Regulations 1996](#)

[WorkSafe WA Guidance Note: Working Alone 2009](#)

Useful resources (including related forms) (if required)









[NMHS OSH Intranet Hub](#)

[Incident/Hazard Reporting](#)

[NMHS OSH Department](#)

[NMHS Issue Resolution Process](#)



Sponsor	Executive Director Business and Performance				
Contact	Director Work Health and Safety				
First Issued:	June 2012	Last Reviewed:	04/12/2020	Review Date:	04/12/2023
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NSQHS Standards Applicable:	<input checked="" type="checkbox"/>  Std 1: Clinical Governance <input type="checkbox"/>  Std 2: Partnering with Consumers <input type="checkbox"/>  Std 3: Preventing and Controlling Healthcare Associated Infection <input type="checkbox"/>  Std 4: Medication Safety		<input type="checkbox"/>  Std 5: Comprehensive Care <input checked="" type="checkbox"/>  Std 6: Communicating for Safety <input type="checkbox"/>  Std 7: Blood Management <input type="checkbox"/>  Std 8: Recognising and Responding to Acute Deterioration		
National Standards for Mental Health Services	<input type="checkbox"/> Std 1: Rights and Responsibilities <input type="checkbox"/> Std 2: Safety <input type="checkbox"/> Std 3: Consumer and Carer Participation <input type="checkbox"/> Std 4: Diversity Responsibility <input type="checkbox"/> Std 5: Promotion and Prevention <input type="checkbox"/> Std 6: Consumers <input type="checkbox"/> Std 7: Carers <input checked="" type="checkbox"/> Std 8: Governance, leadership and management		<input type="checkbox"/> Std 9: Integration <input type="checkbox"/> Std 10: Delivery of Care <ul style="list-style-type: none"> <input type="checkbox"/> 10.1 Supporting Recovery <input type="checkbox"/> 10.2 Access <input type="checkbox"/> 10.3 Entry <input type="checkbox"/> 10.4 Assessment and Review <input type="checkbox"/> 10.5 Treatment and Support <input type="checkbox"/> 10.6 Exit and Re-entry 		
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The health impact upon Aboriginal people have been considered, and where relevant incorporated and appropriately addressed in the development of this health initiative (IS20P016).

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