



Lone Working Policy & Guidance

Lone working applies to any workforce member who works alone off-site or from home. These guidelines apply to those who are working in patients/young person homes as well as other members of the workforce.

Aim

Youth at Heart acknowledges that whilst lone working offsite or at home is often unavoidable it does present risks to the individual including but not limited to: accidents or injuries arising from the venue or home working environment, inadequate provision of or access to first aid, sudden illness, physical violence or intimidating behaviour by members of the public, intruders or unknown clients and dangers arising from unsafe or unfamiliar off-site locations.

In order to mitigate these and other lone working risks, this policy details guidelines that all workforce members are expected to follow, whilst working alone either offsite or whilst working alone at home.

Implementation

- **Offsite lone working**
 - Workforce members should inform keep their diary updated so the Y@H team know their whereabouts.
 - Where possible, workforce members should arrange offsite meetings in a public place.
 - If attending an off-site meeting late in the evening, in an unsafe location or if meeting with an unfamiliar client, workforce members will need to conduct a risk assessment beforehand (Appendix 1).
 - If a risk has been identified, it needs to be addressed and mitigated either by the workforce member or Y@H manager.
 - Workforce members should then proceed to text a Y@H manager and let them know the above information
 - If a workforce member's safety is threatened or they are confronted by violence or intimidation whilst working offsite, they should look to leave the premises immediately and dial 999
 - If a workforce member is seriously injured whilst working offsite, they should seek medical attention immediately, by dialling either 999 or 112.
 - Workforce members should inform their Y@H manager of any health and safety incident or 'near miss' they have encountered, using appendix 3.
 - Workforce members should update the team with any change to their personal contact information.
- **Home working**



- All workforce members should complete a home working risk self-assessment form and address any risks that have been raised. This risk assessment should be updated as and when risk to the workforce member's working environment changes.
- Workforce members should keep their mobile on and charged so they are contactable, and they can contact others whilst working from home.
- If a workforce member is serious injured whilst working at home, they should seek medical attention immediately, dialing either 999 or 111.
- Workforce members should inform their project manager of any health and safety incident or 'near miss's' they have encountered at home, using appendix 3.



Working Alone Guidance

This guidance contains all the information Youth at Heart (Y@H) workforce needs to ensure that both patients/young person and workforce members are safe when working alone. It sets out guidance for making official visits to homes of patients/young person who have been referred for one to one support and for working with patients/young person in studios alone:

- In order to keep patients/young person safe
- To ensure the personal safety of the workforce.
- To ensure personal data is protected when working in homes.

Y@H Working Alone guidance applies to all members of the workforce. This includes paid employees, volunteers, placement students, self-employed contractors, Trustees or any other individual employed by the organisation.

1. Working with patients/young person in their homes

- a) Workforce members and patients/young person have a right to work in a safe and healthy environment, free from abuse or threat of harm. Workforce members are responsible for their own safety and are empowered to make professional judgments appropriate to the circumstances they find themselves in. If they ever feel unsafe or uneasy they should leave a participant home immediately. Their own safety should come first.
- b) Before any initial visit is made by Y@H workforce members, sufficient background information should be obtained. This is generally done at the point of referral. Y@H managers consult with referrer and other agencies involved with a participant referred to Y@H. Where advice is communicated from any source that suggests caution, or states that no individual should visit alone, then this advice must be followed.

2. Visits

a) Initial visit

The initial visit is an opportunity for Y@H workforce members to explain how Y@H works as well as our expectations of patients/young person and responsible adult/carers. A dynamic risk assessment is made at the time of the initial visit, to assess the suitability of the home environment as an activity venue (See Appendix 1). If there are any concerns these are followed up with workforce members and responsible adult. Alternative arrangements can be made if the home is deemed unsuitable, unless the risks identified can be resolved.

An Initial Home Visit Agreement Record Sheet (**Appendix 2**) is completed at the initial visit and this records the discussion and key points raised with patients/young person and responsible adult in regard to the health and safety of workforce members. This is signed, a copy lodged with Y@H and one given to patients/young person

Our expectations of visits are the following:



- Responsible adult present at all times (usually responsible adult unless agreed otherwise)
- Smoke-free environment
- Suitable workspace
- Pets restrained
- Appropriate behaviour (by patients/young person, and other persons in the home, including visitors) i.e non aggressive, non threatening, no illegal substances

Workforce members are expected to reinforce expectations outlined above and report any issues to Y@H managers.

b) Ongoing visits/meetings in the home:

The purpose of the visits are to provide Y@H activities for the participant.

The following guidelines/risk aversion measures must be followed:

Where are you going?	An electronic calendar must be kept up to date with any appointments or visits so that Y@H managers/admin know where you are. Workforce members are accountable for being where their calendars show them to be.
How are you getting there?	Workforce members are responsible for ensuring that their method of transport is safe and conditions are safe to travel.
How will you be contactable?	A Y@H mobile should be taken on all home visits. This mobile should be charged and kept on throughout the visit so that you can be contacted or so that you can use it in an emergency situation. You should make sure the Y@H team have your up to date contact details in addition to your Y@H mobile.
How will you be recognized?	You should wear the Y@H identification that has been given to you for the purpose of home visits.
Who is present in the house?	The agreed adult (usually responsible adult) should be present in the house. Other unknown adults could present a risk. If the agreed adult is not present or unknown adults are in the house then a Y@H manager should be called for a decision as to whether to complete the visit.
Pets	Pets should be restrained at all times. If



	any pet related concerns are present e.g. fleas then you should leave and contact a Y@H manager.
What will you do if participant is not there?	If the participant is not there then the Y@H administrator should be informed and further visits suspended pending management investigation or decisions.
Where are you going to carry out the activity?	All activities should be carried out in communal parts of the house. No activities should be carried out in an patients/young person bedroom.
How will you make sure that data is protected while you are at the participant's home?	Only carry essential information with you and ensure that any sensitive information is not left where it can be viewed either in your vehicle or at your home. Ensure that you have not left any information e.g. papers/data storage devices in the home before you leave.
How are you going to carry out dynamic risk assessment?	Ensure that you park in a safe place and that it is safe for you to go to and from the house – particularly when it is dark If anything causes you to feel uneasy or uncomfortable you must end the session as soon as possible and let a Y@H manager know so that a plan can be put into place.
What are you going to do if something that poses a risk happens?	Any incidents that happen should be reported to a Y@H manager on the form in Appendix 3.
What will you do if a participant makes a disclosure?	Follow the safeguarding advice in the safeguarding handbook – refer the disclosure to the Y@H designated safeguarding lead.
How will Y@H know that you have successfully completed your visit?	Text your Y@H manager once you have safely returned from your home visit. Your close relatives or friends (i.e. someone who would know if you did not return home) should have your Y@H manager phone number so that they can contact them in an emergency.

Thank you to Gloucestershire Hospital Education for the basis of this guidance



Appendix 1 – Risk assessment form

Workforce member				
Risk being assessed				
Date of event/occasion (s) being assessed				
Description of hazards or risks	Severity (1-5)	Likelihood (1-5)	Risk Category S x L =	Precautions (What will you do to prevent risk)
1.				
2.				
3.				
4.				

Information for completion of risk assessment

Likelihood	1=unlikely	2=possible	3=quite possible	4=likely	5=very likely
Severity	1=negligible	2=slight	3=moderate	4=severe	5=major or fatality
Risk Category	1-3=low	4-10=normal /acceptable	11-18 =improvements needed	19+ =Unacceptable	

(Thank you to Making Music for the basis of this risk assessment)



Appendix 2 - Home visit agreement record sheet

Date of visit		Patients/young person Name	
Responsible adult		Contact details	
Address			
1. Participant			
What does the participant want to get out of working with Y@H?			
Are any additional support or services that may be needed for the participant? (Explore learning needs or medical needs)			
2. Working in the home			
Who will be in the home when the sessions take place? (Agreement that a responsible adult or nominated adult will always be present)			
Where will the Y@H sessions take place? (Ensure that this is in a communal place and not participant's bedroom – if this is in some other isolated place e.g. garage or shed that agreement is reached as to how both Y@H workforce member and participant are kept safe by these arrangements)			
Are there any pets? (Agreement to be recorded that pets, particularly dogs will be restrained/removed)			
Does anyone in the home smoke? (Agreement to be recorded that smoking will not happen in the home during Y@H sessions)			



Agreement that neither alcohol illegal substances will not be used in the home during the Y@H sessions.			
Agreement that the sessions will not take place if either the participant or responsible adult is intoxicated			
3. Agreed Plan for Participant at home			
Number of hours/sessions			
Date of first introduction visit by Y@H workforce member			
Responsible adult has copy of visit report YES/NO		Date	
Name of Y@H Manager completing visit		Date	



Appendix 3 – Incident report form

Name of workforce member							
Date of incident/near miss							
Time of incident/near miss							
Date of completion of form (if different from incident date)							
Location of incident/near miss		Address:			Precise location e.g. stairs/pathway:		
<i>Please tick relevant box</i>							
Personal		Participant		Incident		Near miss	
Assault - physical		Assault - verbal		Injury			
Incident/near miss details							
Police incident number (if reported)							
Witness details (if any)							
Injuries sustained (Please give complete details including which part of body & who treated the injuries)							
Please provide any details of potential causes of the incident/near miss							
This form should be emailed to: contactus@youthatheart.co.uk							