

## Working Alone or In Isolation

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### 1.0 Introduction

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#### 1.1 Description

Providence Health Care is committed to taking all reasonable steps to ensure persons on Providence Health Care property are safe while carryout work-related activities. Part of that commitment involves ensuring the safety of all PHC employees who work alone or in isolation.

#### 1.2 Scope

This policy applies to all PHC sites where [Staff](#) may be assigned to work alone or in isolation and may not be able to secure assistance in the event of injury or other misfortune.

### 2.0 Policy

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Every reasonable effort will be made to limit the occurrences of Staff working alone or in isolation. When this is not operationally possible, PHC is committed to having procedures in place to secure the safety of all PHC Staff, to prevent incidents and to check the well being of those who are required to work alone or in isolation. Whenever possible, preference should be given to implementing available and practical engineering controls to minimize the risks from hazards. When this is not practical or not sufficient to reduce risks, administrative controls need to be developed and implemented.

#### 2.1 Procedures

The following general procedures can be used as a guideline for developing unit or site-specific procedures. Refer to the BC Occupational Health and Safety Regulation 4.20-4.23 for more details. Prior to any employee working alone or in isolation, Supervisors/Leaders must identify any potential workplace hazard that could reasonably be anticipated. Hazards and corrective actions can be identified through a Risk Assessment process.

A procedure to check the well-being of Staff must be developed in consultation with the affected Staff. In this procedure, Staff will check-in at regular, predetermined intervals and at the end of shift. The checks must be done by a trained, designated person and the results recorded and kept. Higher risk facilities/situations should perform checks more frequently than low risk sites/situations.

The procedure will include an Emergency Response Protocol in the event a worker fails to check-in. Inform all key stakeholders such as the Leader On Call in the event the emergency response protocol is activated.

## 2.2 Roles and Responsibilities

### Supervisors/Leaders (or delegate)

- Ensure every attempt has been made to limit the occurrences of Staff working alone or in isolation, including scheduling of office appointments between normal business (0800-1700) hours Monday to Friday as much as operationally possible.
- Identify and then eliminate or minimize any risk of hazards to any Staff working alone or in isolation by implementing control measures.
- Develop and maintain site-specific written procedures in consultation with Staff for working alone or in isolation, including a check-in, shift-end check response and an Emergency Response Protocol for action if the Staff does not check in.
- Designate a person to establish contact with the Staff at predetermined intervals. All contacts must be recorded by the designated person including the shift-end check.
- Review procedures annually and whenever there is a change in work arrangements that could adversely affect a Staff's well-being or safety.
- Review procedures in the event a report is received indicating that current procedures are not working effectively.
- Ensure appropriate training is provided for Staff who are required to work alone or in isolation.
- Ensure appropriate training for Staff designated to do the person-check procedure.
- Provide appropriate communication equipment, considering geography, reliability etc. as required.

### Staff

- Be familiar with and follow all established safe work procedures and guidelines to ensure personal safety when working alone
- Assist in the development and review of check in and follow up procedures
- Be aware of how to contact the Leader/Supervisor or designate
- Communicate any hazards, issues or changes in risk to Leader/Supervisor
- Report all injuries, incidents, exposures or near misses as per the PHC reporting protocol
- Use or wear protective equipment, devices and clothing as required by policy or by regulation
- Attend and actively participate in training on established safety procedures for working alone safely
- Ensure all contact information, including cell phone number, is up to date and on file with your facility/department as applicable
- Notify the Leader/Designate of any staffing or schedule changes so the Leader/Designate is aware of which staff member is on shift in the event of a missing worker.

### Occupational Health and Safety

- Provide consultation, education and subject matter expertise to guide compliance with Workers Compensation Act and the Occupational Health & Safety Regulation
- Advise on the development of Working Alone policies/procedures according to individual facility requirements and applicable legislation.

### Joint Occupational Health and Safety Committees

- Provide input into the Working Alone guidelines/procedures specific to their area, and assist in their implementation
- Review the Working Alone procedures specific to their area of representation on a regular basis and when concerns are raised.

### Contractors

- Comply with all aspects of the PHC Occupational Health and Safety Programs requirements as well as any safety programs administered by contractors.
- Ensure the health and safety of all their workers (workers of subcontractors' inclusive) as defined by Workers Compensation Act

## 3.0 References

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### 3.1 Related Guidelines, Tools, and Forms

- WorkSafeBC Occupational Health and Safety Regulation Part 4, 4.20 -4.23
- Interior Health Authority – Persons Working Alone or in Isolation AV0200
- Canadian Centre for Occupational Health and Safety, Violence in the Workplace Guide.
- The Occupational Health and Safety Agency for Healthcare in BC– OHSAH (BC) Preventing Violence and Aggressive Behavior, 2005

### 3.2 Related Policies

- Workplace Violence Prevention Policy
- Right to Refuse Unsafe Work

### 3.3 Definitions

**Staff** means all employees (including management and leadership), Medical Staff Members (including physicians, midwives, dentists and Nurse Practitioners), residents, fellows and trainees, health care professionals, students, volunteers, contractors and other service providers.

**Working alone or in isolation** refers to work in circumstances where assistance would not readily be available to the employee in the case of an emergency or if the employee is injured or in ill health.

**Engineering controls** means the physical arrangement, design or alteration of workstations, equipment, materials, production facilities or other aspects on the physical work environment, for the purpose of controlling risk.

Examples include:

- Redesigning waiting areas to provide welcoming, calming surroundings;

- Controlling access/egress to an area by using access cards;
- Installing security lighting, protective barriers & remote control door locks;
- Improving surveillance and visibility where there is a potential for offending behaviours; and,
- Environmental restraints such as seclusion rooms.

**Administrative controls** means the provision, use and scheduling of work activities and resources in the workplace, including planning, organizing, staffing and coordinating, for the purpose of controlling risk.

Examples include:

- Scheduling a balance of experienced and casual employees;
- Adjusting staffing to cope with peak flows to minimize crowding and delays;
- Avoiding staff working alone for high risk situations in community settings;
- Providing personal alarms systems or panic buttons
- Training and instruction

**Working Alone or Check-In Procedures** refers to a work practice designed by both the Leader and employees of a department to ensure that an appropriate mechanism is in place for checking on the well-being of an employee working alone or in isolation. This includes a defined Emergency Response Protocol for use in the event that an employee does not check-in.

### 3.4 Appendix

- Sample Questions to Aid in Determining Risk (Appendix A)
- Example of Emergency Response Protocol for Failure to Check-in (Appendix B)
- Sample Working Alone Log (Appendix C)

**Appendix A – Sample Questions to Aid in Determining Risk**

1. Does the employee work alone (out of sight and hearing of other workers)?
2. Does the employee have direct contact with patients\residents\clients?
3. Does the employee work with a high-risk patient\resident\client group?
4. What time of day and how long is the employee working alone?
5. Is the employee physically secured during his or her shift (e.g. is the work place only accessible to authorized staff)?
6. Is the employee able to easily and quickly summon help in the event of an emergency?
7. Is the employee in contact with other workers regularly during their shift?
8. Are there other environmental hazards in the workplace (heavy equipment or potentially toxic substances)?
9. Are there any special risks or considerations for a particular employee that may require additional safety checks when working alone (a medical condition or a restraining order)?

**Low Risk:**

An employee who does not work with patients\residents\clients, is in a secured work area, is engaged in low risk work activities, and is in regular contact with other employees or who is able to summon help (e.g. security checks in once every shift).

**High Risk:**

An employee who works alone in an unsecured work area and who is unable to easily access help. This includes situations where an employee is working:

- With patients\residents\clients
- At height (more than 3 meters)
- In confined / enclosed spaces
- With electricity
- With hazardous substances or materials
- With hazardous equipment
- Or in any situation that presents an increased risk of disabling injury

***Appendix B – Example of an Emergency Response Protocol – For Failure to Check In***

1. Employee(s) or Leader/Supervisor is made aware that an employee has not checked-in. If not already aware, Leader/Supervisor should be informed.
2. Leader/Supervisor or designate calls the contact numbers provided by the employee.
3. The Leader/Supervisor or designate performs a visual check for the employee at the last known location as appropriate.
4. Leader/Supervisor contacts Security to have them check when and where the worker last used the access card swipe system. Leader/Supervisor or designate or Security to search this area as applicable.
5. Have the missing employee paged using the overhead paging system.
6. If still unable to reach the employee, contact the Leader On Call (if not already aware), other key stakeholders and consider requesting Security do a wider search, encompassing common areas, areas the employee have been or could potentially be and any other areas suggested by the Leader or co-workers.
7. Supervisor/Leader, in consultation with Security, notifies the Police.

