

Working Alone and in Isolation Policy and Procedure



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Purpose

To establish a consistent approach to support staff who are working alone or in isolation, ensuring their safety while carrying out work-related tasks.

Scope

This policy applies to all clinic personnel, including staff physicians, locum physicians, allied health professionals, administrative staff, Primary Care Network (PCN) clinicians, medical students, and residents.

Policy

Our clinic will take all reasonable steps to minimize the time staff work alone or in isolation. When this occurs, procedures will be in place to protect staff safety, prevent incidents, and monitor their wellbeing. This includes identifying and assessing hazards and risks, ensuring staff are informed, eliminating or minimizing hazards where possible, and implementing a written procedure for regularly checking on the wellbeing of staff.

Definitions

Working alone or in isolation: As defined by WorkSafeBC, working alone or in isolation means performing work in circumstances where assistance would not be readily available to the worker in case of emergency, injury, or ill health.

Readily available assistance: Assistance that is considered readily available is help that can be provided quickly by nearby individuals who are both aware of the situation and capable of offering timely support. Clinic staff working near employees of adjacent businesses, such as pharmacies or other medical clinics, may be considered to have readily available assistance if those workers are capable and willing to help in an emergency. Employers must ensure all parties are aware of and agree to the arrangement, and that it is documented in writing.

Responsibilities

Employer:

- Identify, eliminate, or minimize risks for staff working alone or in isolation by implementing appropriate control measures.
- Ensure staff are trained and informed of working alone procedures.
- Provide appropriate communication tools (e.g., phone, radio, check-in system).

Supervisor:

- Limit the time staff are working alone or in isolation.
- Establish a check-in and check-out procedure that ensures regular contact (visually or verbally) and a reliable method to verify each worker's wellbeing.
- Designate someone to conduct check-ins with staff at set intervals.

- Ensure an up-to-date list of all staff emergency contact numbers is maintained and readily accessible.

Staff:

- Participate in training and orientation related to working alone or in isolation.
- Follow all established safe work procedures when working alone or in isolation.
- Know how to contact the supervisor and check-in person. Ensure contact information is up to date.

Risk Identification and Assessment

Working alone or in isolation risks are identified and assessed through a standardized process that evaluates whether it is reasonable and safe for the employee to work alone, considering the situation, location, time of day, and duration of the work, and establishes reasonable limits if needed.

Risk Control

Minimizing working alone

- Appointments are scheduled to limit working alone, especially outside regular hours.
- Workflows are adjusted, when possible, to reduce time spent alone or in isolation.

General conditions

- Risks are controlled through measures such as locked doors, well-lit areas and parking lots, clear sightlines, and emergency alarms.

Communication tools

- Staff will be asked to use reliable communication devices (e.g., clinic phone, mobile phone, emergency alert systems) and trained in their use when working alone.

Check-in system

- A check-in procedure is in place, requiring staff to check in at the start of their shift, at regular intervals based on risk level, and at the end of their shift.
- A designated, trained person monitors check-ins and responds to missed check-ins.

Procedures

Emergency action plan

1. If a check-in is missed, a second attempt will be made after 15 minutes. If there is still no response, a third attempt will follow after five minutes. If the staff member remains unresponsive, their emergency contact will be notified.
2. If the emergency contact doesn't respond, can't be reached, or can't be found, the police will be notified and take over the safety response.

Missing a check-in

- Staff must take all reasonable steps to remain reachable during check-ins, including keeping phones charged and being at required locations.
- Staff must be present and available at the scheduled check-in times.
- If a check-in is missed, staff must immediately contact the designated check-in person to stop the emergency action plan.

Example: Staff working alone in the clinic outside regular hours, or at home, or visiting a patient at their home.

- At the start of your shift, sign-in with the designated check-in person (e.g., via call or text). Indicate your name, site location, contact number, and the estimated number of hours you will be working alone.
- Check in during your shift according to the required frequency based on the clinic's *Working Alone Risk Assessment*.
- At the end of the shift, sign-out using the same method.
- If you fail to check-in during your shift or do not sign-out at the end, the designated check-in person will follow the emergency action plan.

Training

All staff will receive orientation and annual refresher training on:

- The definition and risks of working alone or in isolation.
- Procedures for communication and check-ins.
- Emergency protocols and available resources.

Annual Review

This policy and procedure will be reviewed annually and updated as needed.

Reference

- [WorkSafeBC – Working Alone or in Isolation Regulations](#)
- [WorkSafeBC – Working Alone or in Isolation Guidelines](#)
- [WorkSafeBC – Working Alone: A Handbook for Small Business](#)

Approval

Employer:

Date: