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**Lone Working Guide for Volunteers**

Where the conditions of service delivery or its associated tasks require staff/volunteers to work alone, both the individual staff member, volunteer and their Line Manager have a duty to assess and reduce the risks which lone working presents.

This is designed to alert you to the risks presented by lone working, to identify the responsibilities each person has in this situation, and to describe the procedures which will minimise such risks. It is not intended to raise anxiety unnecessarily, but to give us a framework for managing potentially risky situations.

**Working alone during home visits**

You must ensure that:

1. You have access to a mobile telephone.
2. Wherever possible that you park in a well-lit and busy area.
3. You complete the home visit risk assessment form below.

**Personal safety**

1. You must not assume that having a mobile phone and a back-up plan is a sufficient safeguard. The priority is to assess the situation and plan for a reduction of risks identified.
2. You should take all reasonable precautions to ensure your own safety, as you would in any other circumstances (see (g) below).
3. Before working alone, an assessment of the risks involved should be made in conjunction with the Volunteer Coordinator.
4. You must inform the Volunteer Coordinator when you will be working alone outside of your home or office, giving accurate details of your location and following an agreed plan to inform that person when the task is completed (see notification process below).
5. The Volunteer Coordinator must ensure that there is a robust system in place for virtually signing in and out, and that volunteers use it (see the notification process below).
6. If you do not report in as expected, an agreed plan should be put into operation by the Volunteer Coordinator, initially to check on the situation and then to respond as appropriate (see the notification process below).
7. ‘Reasonable precautions’ might include;

* Checking directions for the destination.
* Ensuring your car, if used, is road-worthy and has break-down cover.
* Avoiding where possible poorly lit or deserted areas.
* Ensuring that items such as laptops or mobile phones are carried discreetly.
* The agreed plan for contact or emergency response should be recorded and readily accessible by the volunteer. It may be appropriate to agree a code word or phrase to indicate that assistance is required.
* Further advice can be gained from the Suzy Lamplugh Trust <http://www.suzylamplugh.org/personal-safety-tips/free-personal-safety-tips/working-alone/>

**Reporting**

1. Should an incident occur, volunteers should report to the Volunteer Coordinator as soon as possible after the incident.
2. The Volunteer Coordinator should debrief in the first instance.

**Support**

The Volunteer Coordinator will discuss with the volunteer what may be needed and offer further aftercare.

**Notification Process when carrying out visits**

1. The Volunteer Coordinator must be notified of the date, start time and end time at least 3 days before a home visit if the home visit is taking place during working hours (Monday-Friday 9:00am-5:00pm). If the home visit is taking place outside of working hours, the Volunteer Coordinator must be notified of the details of the visit at least 5 days in advance.
2. You must contact the Volunteer Coordinator if these arrangements change.
3. At the end of your visit, you must notify your Volunteer Coordinator by text to say that the visit has ended and you have safely left the address. Please save the Volunteer Coordinator mobile number in your phone: 07587130643.
4. If you expect that the visit is going to overrun your planned end time, you must politely excuse yourself to text your Volunteer Coordinator to let them know.
5. If your Volunteer Coordinator does not receive a text notifying them of the end of your visit within 1 hour of the expected end time, they will call you from either their mobile (07587130643) or work phone (01327 362461).
6. If you do not answer, they will leave an urgent voicemail asking you to return their call and they will call your emergency contact.
7. If your emergency contact had also not heard from you since the end of the visit, the Volunteer Coordinator will call the service user to check whether you had left the address.
8. If within 1 hour of the voicemail being left, there has still been no contact from you, the Volunteer Coordinator will call 999.

**Home visit risk assessment**

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| --- | --- |
| **Home Visit**  **Risk Assessment** | Name:  Address:  Date:  PSPA Worker/Volunteer Completing: |
| |  |  | | --- | --- | | **PRE-VISIT CHECKLIST (LINK VOLUNTEER TO COMPLETE)** | TICK | | Colleagues/Volunteer Coordinator know where I am |  | | My phone is charged |  | | I have the service user’s emergency contact details |  | | I have instructions what to do if there is no answer at the address when I arrive |  | | I have hand sanitiser |  | | I have a face mask *(this should be worn if you or the family would prefer you to)* |  | | I know how to get to the address, any parking or entry system arrangements |  | | I can manage any stairs / ramps / lifts |  | | I know who else to expect to be there when I visit |  | | I know if we will be indoors or outdoors during the visit and am prepared |  |     **WHO LIVES AT THE ADDRESS?**    Alone  Partner  Family  Under 18’s  Friend  Live-In Carer  Lodger  Further details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **PROPERTY TYPE**    Flat  House  Sheltered Housing  Care Home  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  |  |  |  | | --- | --- | --- | --- | | **ACCESS TO PROPERTY** | Yes | No | Comments / Action | | Is there flat level access?  *If not, are there steps, a ramp or lift?* |  |  |  | | Can the person answer the door themselves?  *If not, can someone else, is there a key safe, make pre- arranged phone calls on arrival?* |  |  |  | | If they do not appear to be at home when you visit, what would they like you to do?  *Phone, ring a named contact?* |  |  |  | | **COVID ARRANGEMENTS** | Yes | No | Comments / Action | | | Are you able to keep social distance?  *With number of people and space?* |  |  |  | | | Would they prefer to meet outside weather permitting or to be indoors? |  |  |  | | | Do they wear a mask or visor?  *It is the person’s choice to or not.* |  |  |  | | | Is there adequate ventilation?  *Could doors or windows be used if the person is happy to open them?* |  |  |  | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **IN THE HOME** | Yes | No | Comments / Action | | | Will anyone else be there on future visits?  *Is it safe to be there alone?* |  |  |  | | | Are there any pets?  *Do they need approaching in a certain way? Are they aggressive? Take any allergy precautions if needed.* |  |  |  | | | Are there any physical hazards for staff/volunteers?  *Trip hazards, excessive clutter, open fires etc?* |  |  |  | | | Does the person behave in any way that challenges others?  *Consider approaches / avoid known triggers.* |  |  |  | | | Is this a smoke-free environment?  *Is there a room not used for smoking?* |  |  |  | | | Is there adequate lighting?  *Can you be nearer natural light? Is a portable lamp needed?* |  |  |  | | | Is there a toilet staff/volunteers can use?  *Upstairs / downstairs?* |  |  |  | | | Can you get out of the property easily?  *In case of danger posed to self or others.* |  |  |  | | | **AFTER VISIT CHECKLIST (LINK VOLUNTEER TO COMPLETE)** | | | | TICK | | | Colleagues know I have left | | | |  | | | Change face mask | | | |  | | | Wash hands if possible or use antibacterial hand sanitiser | | | |  | | | Clean and sanitise any materials or equipment as need be | | | |  | | | Report any concerns, potential safeguarding or other issues | | | |  | | | Conplete paperwork and send from to PSPA | | | |  | | | |