

Checklist

Guidelines for good practice in personal safety

The following is based on the Chartered Society of Physiotherapy's checklist Personal Safety for Lone Workers:

- ✓ ensure that risk assessments identify lone working on and off-site as a potential hazard

 - ✓ challenge cost-cutting exercises which cut staff and potentially compromise members' safety by forcing them to work alone

 - ✓ accurate records of staff whereabouts, including estimated return and appointment times, should be kept and clearly communicated

 - ✓ reporting-in systems at regular intervals, e.g. lunchtime, end of the day etc., and clearly understood procedures as to what to do in the event of non-reporting in, need to be in place

 - ✓ introduce a policy of no new visits after dark, where possible and certainly not alone

 - ✓ no visits alone to tower blocks, multi-occupancy buildings or areas where the member cannot drive and park very close to the place being visited

 - ✓ compile a list of agreed areas which will never be visited alone or after dark. Information on such high-risk areas should be communicated clearly, particularly to new members

 - ✓ ensure policies are in place which encourage members to leave immediately if they feel vulnerable, and assure them of managerial support
- ✓ never allow doors to be locked, locking members inside residences

 - ✓ ensure sufficient staffing levels which allow members to visit in pairs when necessary

 - ✓ consider and assess whether or not any new clients should be visited alone

 - ✓ communication measures, such as personal alarms, have extremely limited effectiveness, but two-way radios and mobile phones may be helpful. Ensure proper training is received in the use of such alarm and communication equipment

 - ✓ referral information should be as accurate, comprehensive and up-to-date as possible; be in writing; and should establish if the referrer is familiar with the home situation. They should also identify whether or not it is appropriate for a therapist or assistant to visit alone: this question could pertain to the location, client, carers, etc.

 - ✓ referrals should be followed up with telephone contact to establish more information and to make contact with the client, prior to any visit

 - ✓ problems and incidents should always be reported, and acted upon

 - ✓ training in – for example – inter-personal skills, aggression management and assertiveness, and information should be regularly updated and offered to all staff, and procedures and ways of working should be reviewed regularly

The full text of CSP information paper *Personal Safety for Loneworkers* is available at www.csp.org.uk/uploads/documents/csp_erus_brief_loneworkers.pdf