

Town of Craik Policy

Policy # 2024-02

Policy Title: Lone Worker Policy

Policy Objective:

The purpose of this policy is to ensure the safety of Lone Workers and mitigate risk factors.

Authority: May 7 2024 / 2024-094

Council Resolution: 2024-094

Definition: An employee is working alone when the employee is performing a job-function and is not in the presence of his/her supervisor, another person in a supervisory capacity designated by The Town of Craik, or another employee of The Town of Craik at the time the job function is being performed. The fact that the employee may be in contact with people from another employer or the general public does not eliminate the concept that the employee is working alone and, therefore, assessments and requirements applicable to the risks of the work will still apply.

Risk Assessment: Particular job functions will have inherent hazards associated with them and may be deemed as high risk, low risk or a combination of the two. The degree of risk will not eliminate the requirement to be aware of the hazard control measures applicable, but it will help to determine the appropriate hazard control measures.

(See Schedule A)

Examples of work functions that present high-risk hazards may include working with or in:

- Confined spaces
- High energy materials (radioactive, high temperature)
- Toxic gases, liquids or solids
- Flammable liquids
- High pressure or high voltage systems
- Extreme weather conditions

Examples of work functions that present low-risk hazards may include working with or in:

- Maintenance functions on inactive equipment
- Janitorial or custodial functions
- Routine job functions that are part of a long-standing operating procedure and where experience has shown them to be safe
- Desk work
- PME Certified Equipment

SAFETY PROCEDURES

Responsibilities:

Employees must:

- Notify a designated person when they will work alone.
- Provide information on their locations, when they expect their work to be completed, and where they will go once their work is completed.
- Assess risks before beginning to work alone and coordinate this assessment with their supervisors.
- All employees who regularly work alone must wear their personal connected safety devices at all times, not just when working alone.
- Inform supervisors or managers of any changes in personal connected safety devices or phone numbers or personal emergency contacts.

Managers/Supervisors must:

- Coordinate schedules for regular contact with employees who routinely work alone or do so for extended periods of time.
- Be available by mobile phone as much as possible when an alert occurs.
- Ensure mobile phones and personal connected safety devices are issued to the appropriate workers.
- Provide a system or procedure for signing in and signing out.
- Investigate when a lone worker does not sign out as expected and verify the safety of the employee.

- Delegate a peer to receive their worker's alerts in parallel.

All Personnel must:

- Follow the directives in this policy based on their role and potential classification as a lone worker
- Follow Town of Craik's sign-in/sign-out procedure (no workers, including an employee's supervisor, is permitted to sign in or sign out for another employee except under extraordinary circumstances)

Lone Worker Procedures:

Communication:

- Employee is to have a means of communication for the duration of their work day
(8:00am – 4:30pm) Monday-Friday
- If the employee does not have a form of personal communication, one will be provided by the Town of Craik (Cell phone, two-way radio, etc.)
- Employee is to check in at minimum once at lunch and once before 4:00pm
 - The frequency of check ins will be dependant upon the level of risk associated with the job being completed that day

Emergency Procedures:

- Evaluate the emergency
- Follow posted Emergency Procedures
- Remove yourself from the immediate area
- Alert the appropriate authorities

When co-worker or civilian are Showing Aggression Towards the Worker:

- Remove yourself from the situation immediately
- Report to the Town Office (222 Grid 643)
- Contact the appropriate authorities if necessary
- Stay at the office until given further instruction

M Wynne

Mayor Signature



Jaylene Boyd

Administrators Signature

SCHEDULE A

RISK ASSESSMENT FORM

Name of the Person Doing the Assessment:

Date:

Activity/Procedure being Assessed:

Known or expected hazards and risks associated with the activity:

Possible Consequences: What are they? How likely are they to occur? Severity of harm?

Who is at risk?

Measure to be taken to eliminate the hazard or lower the level of risk:

Is there a risk of the control measures failing? Consequences?

Training Requirements:

Level of Risk Remaining:

Action to be taken in an emergency:

References, if any?

Signature of Assessor: