

# Lone working check-in and response

Standard operating procedure (SOP) | MOB-SOP-002

|                                  |                                                                                                                             |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| Document type                    | Standard operating procedure (SOP)                                                                                          |
| Title                            | Lone working check-in and response                                                                                          |
| Document ID                      | {{facility.code}}-MOB-SOP-002                                                                                               |
| Version and status               | 1.0   Issued for use. Pending ASF Expert Committee ratification                                                             |
| Prepared by                      | {{roles.quality_lead.name}}, Quality lead                                                                                   |
| Reviewed by                      | {{roles.clinical_director.name}}, Clinical director      Date: _____                                                        |
| Approver and signature           | {{roles.clinical_director.name}}, Clinical director<br>Signature: _____      Date: _____                                    |
| Effective date                   | {{document.effective_date}}                                                                                                 |
| Next review                      | {{document.review_date}} (12 months, or sooner after any incident or change)                                                |
| Replaces                         | None (new document)                                                                                                         |
| Standards and criteria supported | Standard 13 (Mobile Clinic and Outreach), criterion 13.10                                                                   |
| Evidence basis                   | E-006, E-009                                                                                                                |
| Status of this document          | Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria. |

## At a glance: what to do

1. A member of staff who works alone, or a team out of contact with the base, checks in at a set time.
2. The check-in is recorded on MOB-FRM-004.
3. If a check-in is missed, the response starts at once: a call, then the named person, then the emergency service.
4. The response is recorded.

Stop and get help straight away if: a check-in is missed and no response starts.

## 1. Purpose

To make sure someone notices if a lone worker is hurt or unwell in the field (13.10).

## 2. Scope

|                   |                                                               |
|-------------------|---------------------------------------------------------------|
| Applies to        | Clinical and support staff in the hospital                    |
| Locations         | All wards, clinics and departments of {{facility.legal_name}} |
| When              | Whenever the activity described is carried out                |
| Does not apply to | Activities covered by another document listed in section 15   |

## 3. Definitions and abbreviations

| Term          | Meaning in this SOP                                   |
|---------------|-------------------------------------------------------|
| Clinical lead | The doctor or nurse in charge of the area at the time |

## 4. Background and rationale

To make sure someone notices if a lone worker is hurt or unwell in the field (13.10).

## 5. Responsibilities

| Role               | Duties in this SOP                             | Competence needed |
|--------------------|------------------------------------------------|-------------------|
| Outreach lead      | Owns the check-in rule and the response        | Clinician         |
| Named base contact | Receives the check-ins and starts the response | Nurse             |

## 6. Equipment, materials and resources

| Item                                     | Specification or standard | Check before use   |
|------------------------------------------|---------------------------|--------------------|
| Records and forms named in this document | Current version           | Checked before use |

## 7. Safety and infection prevention

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

## 8. Before you start

- Confirm the forms and equipment named in this document are available and current.

## 9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

| Step | Action    | How to do it                                                                                   | Key point                      |
|------|-----------|------------------------------------------------------------------------------------------------|--------------------------------|
| 1    | Check in. | • Check in at the set time, and record it on MOB-FRM-004.                                      | At the set time.               |
| 2    | Respond.  | • If a check-in is missed, call the worker, then the named person, then the emergency service. | Call, named person, emergency. |
| 3    | Record.   | • Record the missed check-in, the response and the outcome.                                    | Every response recorded.       |

### Decision points

- No decision points in this procedure.

## 10. Special situations

| Situation    | What to do                                                              |
|--------------|-------------------------------------------------------------------------|
| Out of hours | Follow the same steps. Use the on-call contact on the wall of the area. |

## 11. Problems and escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

## 12. Monitoring and compliance

| What is checked        | Target | How often | Who           | If the target is missed       |
|------------------------|--------|-----------|---------------|-------------------------------|
| Check-ins made on time | 100%   | Monthly   | Outreach lead | Escalate to clinical director |

## 13. Records

| Record                        | Where it is kept                | Kept for                                   |
|-------------------------------|---------------------------------|--------------------------------------------|
| Record named in this document | Patient record or the area file | {{facility.records_retention_years}} years |

## 14. Training and competence

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

## 15. Related documents

| ID          | Title                     | Relationship |
|-------------|---------------------------|--------------|
| MOB-FRM-004 | Lone working check-in log | Log          |

## 16. Evidence

| ID    | Source and status                                                                     |
|-------|---------------------------------------------------------------------------------------|
| E-009 | Based on WHO classification and minimum standards for emergency medical teams (2013). |
| E-006 | ASF Policy Framework v1.2. Adapted.                                                   |
| E-009 | ASF Expert Committee consensus.                                                       |

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

## 17. Change history

| Version | Date                        | What changed  | Approver and signature            |
|---------|-----------------------------|---------------|-----------------------------------|
| 1.0     | {{document.effective_date}} | First version | Pending Expert Committee approval |