Working Alone Standard Operating Procedure – Life Sciences Building
Biology Administrative Areas

Name: ___________________________ Student or Employee No: ________________

Date

Working Alone Standard Operating Procedures for Administrative Areas only

For: Staff, faculty, students and volunteers who work alone.

A standard operating procedure must be created for all work areas even if there is no likelihood of individuals working alone. A SOP must be in place should the situation arise.

☐ To be assessed jointly by supervisor and persons work alone
☐ training provided to all individuals working alone
☐ be aware of regulatory restrictions affecting working alone - see section 6.1 of RMM#304
☐ submit this report to the JOHSC of your area for their review
☐ SOP document must be reviewed and resubmitted on an annual basis.

Building: ___________________________ Room #: ______________

Supervisor (s): ___________________________ Emergency phone #: ___________________________

Protocols in place at the workplace for working alone

1) Identification badges must be worn

2) ALWAYS CALL SECURITY WHEN WORKING AFTER HOURS OR ON WEEKENDS;
   Security No: 905-525-9140 ext. 24281

3) A central telephone must be available with emergency telephone numbers of supervisors or
   designates posted - where is it? Or identify the alternative communication system which you have
   in place. Eg radio system.

4) Staff will check in with their supervisors (designate) every _____ hrs. (based on the risk of the work
   they are doing)

5) For MUMC site, as an added security feature, you may wish to sign in and out at the security desk at
   the entrance to the ER (east of the front entrance, 2nd floor) or submit list of regularly scheduled
   workers in advance (eg CAF). Security ext 76444

Expected hours during which staff will work alone

Weekday
☐ 6:00 to 8:30 a.m.    ☐ 4:30 p.m. to midnight.    ☐ 5:00 p.m. to 8:00 a.m.    ☐ Other: ___________________________

Weekends
☐ 8:00 a.m. to 5:00 p.m.    ☐ 8:00 a.m. to 12:00 p.m.    ☐ 24 hours    ☐ Other: ___________________________
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**Emergency assistance**

In the event of an emergency, assistance will be provided by:

- [ ] Hamilton Health Science locations  5555
- [ ] McMaster Campus Security  88
- [ ] St. Joseph’s Hospital  7777
- [ ] Emergency Services/Paramedics  911
- [ ] Community Centre Health Services (Stoney Creek)  7777

Where is the closest nearby individual? Is there a way to contact them?

______________________________________________________________________________________________

______________________________________________________________________________________________

**Security of the area - personal safety issues**

- [ ] All doors to be kept locked when staff is working alone
- [ ] Additional security controls specific for your area? i.e. mirrors, surveillance cameras, etc.

______________________________________________________________________________________________

______________________________________________________________________________________________

The Working Alone Policy requires supervisors and workers to perform a risk assessment. Please consider tasks that will be performed alone and the risk involved. This may help to determine if tasks can be performed alone.

<table>
<thead>
<tr>
<th>Task</th>
<th>Hazard</th>
<th>Controls</th>
<th>Worst Case Scenario</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Typing, filing, office work</td>
<td>Unauthorized individual enters area</td>
<td>Locking doors after hours, Checking for ID, Contacting Security if you see questionable individuals.</td>
<td>Injury or assault in area.</td>
</tr>
<tr>
<td>[ ] Lifting or moving heavy boxes</td>
<td>Strain back, arms or neck</td>
<td>Not allow heavy items to be moved after hours. Use a trolley or cart. Attend proper lifting training.</td>
<td>Permanent disability or injury to worker resulting in lost time or WSIB claim</td>
</tr>
<tr>
<td>[ ] Preparing beverages or food in kitchenette-lunch room</td>
<td>Appliances not in good working order i.e. frayed cords. Burns from hot food or beverages</td>
<td>Inspect appliances regularly. Take care when preparing hot food and beverages</td>
<td>Fire. Start the REACT process.</td>
</tr>
</tbody>
</table>
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Are there known current physical disabilities or medical conditions that may affect the health or safety of an individual working alone? (Do not provide names)

Training and Experience that must be in place and up-to-date for the individual to work alone:

☐ Due Diligence (All supervisors must have due diligence. Training must be completed every five years)
☐ Fire Safety lecture (at site) followed by ☐ Annual fire quiz for individual’s host medical institution
☐ Administrative WHMIS, FHSc OR ☐ Administrative Orientation, HHSc (Host hospital) (one time only)
☐ Technical Lab WHMIS  followed by ☐ Annual WHMIS Update
☐ Review of RMM#304 and this working alone procedure (SOP) – mandatory for all staff

High risk tasks which may NOT be performed by individuals working alone:

Issues which are still of concern to staff/supervisors:

Signature of supervisor (s)_________________________  Date:________________

Supervisor Name: ___________________________
(please print)

I have reviewed this policy with my supervisor and understand the Working Alone Policies for my laboratory.

__________________________
signature of student / employee