



SIMON FRASER UNIVERSITY
ENGAGING THE WORLD

TO: Senate

FROM Joy Johnson
Chair – Senate Committee on Agenda and Rules

DATE: March 25, 2022

SUBJECT: Revisions to GP39 - Working Alone or In Isolation

The Senate Committee on Agenda and Rules has reviewed Revisions to GP39 - Working Alone or In Isolation and is bringing it to Senate for information.

BRIEFING NOTE

Subject: GP39 Working Alone or in Isolation Policy

Date: March 15, 2022

VP Sponsor: Martin Pochurko

Unit/Department: Safety & Risk Services

Prepared by: Mark Lalonde

BACKGROUND

Policy GP39 – Working Alone or in Isolation was last revised in March, 2009 and was slated for review as part of the policy update initiative. The policy has been updated to reflect current SFU practices, to incorporate a risk assessment procedure and to ensure ongoing compliance with WorkSafeBC requirements.

SUMMARY OF CHANGES

- The revised policy clarifies the roles and responsibilities of Deans, Directors, Chairs, Supervisors and Employees and assigns new responsibilities to the Environmental Health and Safety department.
- A new procedure was developed to provide a framework for risk assessment and control and to aid Supervisors in meeting legislative requirements.
- The policy definitions were revised for clarity, new examples of Administrative and Engineering Controls were provided, and two new definitions (Check-in Designate and Lone Worker Program) were added.

RESULTS OF COMMUNITY CONSULTATION

In addition to consulting with the University's health and safety committees, the draft revised policy and procedure was posted on the Gazette for a 3 week period. Labour Relations and Faculty Relations were also notified of the revised policy. Very little input was received and consisted primarily of questions related to hybrid work. Overall the feedback was positive. One minor change was made to the procedure resulting from the feedback and consisted of a re-ordering of sections to improve clarity.

Decision

The Senate Committee on Agenda & Rules is asked to determine whether the policy should be forwarded to Senate, and if so, whether it will go to Senate for approval, for input, or for information.

ATTACHMENTS

- Policy GP39, definitions appendix and procedure in one document with track changes.
- Policy GP39, definitions appendix and procedure in one document (clean version).

WORKING ALONE OR IN ISOLATION

Date
March 26, 2009

Number
GP 39

**Date of Last
Review/Revision**
[date]

**Mandated
Review**
[TBA, 2026]

Policy Authority: Vice-President, Finance and Administration

Associated Procedure(s): Working Alone or In Isolation Risk Assessment Procedure

EXECUTIVE SUMMARY

Simon Fraser University aims to provide a healthy and safe work environment for its Employees. Working alone or in isolation is an activity that has the potential to be hazardous. In compliance with provincial health and safety regulations, this policy and its procedure provide a framework and resources for identifying such circumstances, determining the risk level, and implementing appropriate protocols to ensure Employee health and safety.

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1.0 PURPOSE

1.1 The purpose of this policy is to:

1.1.1 ensure that Simon Fraser University (“the University”) and its Employees comply with provincial working alone or in isolation legislative requirements.

1.1.2 provide a framework to protect the health and safety of, and minimize risk to, any Employee who works alone or in an isolated location at their place of employment.

2.0 SCOPE AND JURISDICTION

2.1 This policy applies to those locations on or away from all campuses of Simon Fraser University where Employees conduct university work activities related to research, teaching, or operational services.

2.2 This policy applies to all Employees of the University.

3.0 DEFINITIONS

3.1 See Appendix A for the definitions of words used in this policy and its associated procedures.

4.0 POLICY

4.1 The risks and consequences associated with working alone or in isolation are a concern of the University. It is, therefore, the policy of the University to:

4.1.1 identify and assess risk to protect the health and safety of, and minimize the risk to, any Employee who works alone or in isolation;

4.1.2 develop site-specific preventative and response protocols that will address the identified risk(s), specify the types of activities that may be conducted, and any limitations on and/or prohibitions of specific activities, and establish procedures for the Employee to secure assistance; and

4.1.3 document the site-specific preventive and response protocols, communicate to affected individuals, and monitor to ensure compliance and effectiveness.

5.0 ROLES AND RESPONSIBILITIES

5.1 Deans, Directors and Chairs are responsible for:

5.1.1 directing Supervisors in their areas of responsibility to develop and implement a site-specific protocol with appropriate preventive and response procedures for working alone or in isolation; and

- 5.1.2 monitoring to ensure the protocol and measures are communicated, enforced and effective.
- 5.2 Supervisors are responsible for:
 - 5.2.1 identifying University employees in their area of responsibility who are required to work alone or in isolation;
 - 5.2.2 conducting a risk assessment to identify hazards and assess risk(s) and take any necessary steps to eliminate the hazard(s);
 - 5.2.3 developing a site-specific Working Alone or in Isolation Protocol to address the risk(s);
 - 5.2.4 training all Employees in their area of responsibility on the site-specific Working Alone or in Isolation Protocol ;
 - 5.2.5 reviewing, and revising as needed, the site-specific Working Alone or in Isolation Protocol annually or more frequently when there is a change in work activities or a report that the procedures, policies or work environment arrangements, as applicable, are not working effectively; and
 - 5.2.6 maintaining documentation of the site-specific Working Alone or in Isolation Protocol.
- 5.3 Employees are responsible for:
 - 5.3.3 obtaining their Supervisor’s approval prior to working alone or in isolation;
 - 5.3.4 complying with and participating in the development of the site-specific Working Alone or in Isolation Protocol; and
 - 5.3.5 advising their Supervisor of arising concerns or personal factors that may increase the risk of working alone or in isolation.
- 5.4 Environmental Health and Safety (“EHS”) Department is responsible for:
 - 5.4.3 providing guidance and acting as a resource, if required;
 - 5.4.4 monitoring legislative changes and incident statistics to inform the need to review the policy; and
 - 5.4.5 developing training and resources to assist University Employees and Supervisors to fulfill their responsibilities under this policy.

6 REPORTING

- 6.2 EHS will report annually through the EHS Due Diligence report to the Board of Governors on the implementation of this policy.

7 RELATED LEGAL, POLICY AUTHORITIES AND AGREEMENTS

7.2 The legal and other University Policy authorities and agreements that may bear on the administration of this policy and may be consulted as needed include but are not limited to:

7.2.3 *University Act*, R.S.B.C. 1996, c. 468

7.2.4 *Freedom of Information and Protection of Privacy Act*, R.S.B.C. 1996, c. 165

7.2.5 *Workers Compensation Act*, S.B.C. 2019, c.1

7.2.6 Occupational Health & Safety (“OHS”) and WorkSafe BC regulations, policies, and guidelines

7.2.7 University Health and Safety Policy (GP 17)

7.2.8 Response to Violence and Threatening Behaviour Policy (GP 25)

7.2.9 Interim University-Related International Travel Policy

7.2.10 Employee Collective Agreements and relevant human resource policies

8 ACCESS TO INFORMATION AND PROTECTION OF PRIVACY

8.2 The information and records made and received to administer this policy are subject to the access to information and protection of privacy provisions of British Columbia’s *Freedom of Information and Protection of Privacy Act* and the University’s Information Policy series.

9 RETENTION AND DISPOSAL OF RECORDS

9.2 Information and records made and received to administer this policy are evidence of the University’s actions to comply with the legislative requirements for working alone or in isolation. Information and records must be retained and disposed of in accordance with a records retention schedule approved by the University Archivist.

10 POLICY REVIEW

10.2 This policy must be reviewed at least once every five years.

10.3 The procedure will be reviewed annually.

11 POLICY AUTHORITY

11.2 This policy is administered under the authority of the Vice-President, Finance and Administration.

12 INTERPRETATION

12.2 Questions of interpretation or application of this policy or its procedures shall be referred to the Vice-President, Finance and Administration whose decision shall be final.

13 PROCEDURES AND OTHER ASSOCIATED DOCUMENTS

13.2 Appendix A contains the definitions applicable to this policy and its associated procedures.

13.3 The procedures for this policy are: Working Alone or In Isolation Risk Assessment Procedure

APPENDIX A - DEFINITIONS - WORKING ALONE OR IN ISOLATION

Date
March 26, 2009

Number
GP 39

**Date of Last
Review/Revision**

**Mandated
Review**
[TBA, 2026]

Policy Authority: Vice-President, Finance and Administration

Parent Policy: Working Alone or in Isolation (GP 39)

1.0 PURPOSE

- 1.1 The definitions in this Appendix define the words used in the Working Alone or in Isolation Policy (GP 39) and in the Working Alone or in Isolation Risk Assessment Procedure.

2.0 DEFINITIONS

- 2.1 **Administrative Controls** means the provision, use and scheduling of work activities and resources in the workplace, including planning, organizing, staffing and coordinating to manage risk.
- 2.1.1 Establishing a check-in procedure, scheduling hazardous work while other Employees are present, implementing a buddy system for certain activities, restricting new or young employees from certain tasks and/or increasing the amount of direct supervision are all examples of Administrative Controls that can be implemented to reduce risks associated with working alone or in isolation.
- 2.2 **Check-in Designate** means a person (who is not the Supervisor) who is assigned to establish contact with the lone Employee at predetermined intervals and the results must be recorded by the person. If a Supervisor opts to utilize the Lone Worker Program for on campus after-hours emergency check-in, SFU Campus Public Safety ("CPS") will become the check-in designate.
- 2.3 **Engineering Controls** means the physical arrangement, design or alteration of workstations, equipment, materials or other aspects of the physical work environment to manage risk.
- 2.3.1 The use of communication systems (cell phones, radios, intercoms), location systems (closed-circuit cameras), alarms or personal emergency call devices and redesigning the work area to improve line-of-sight and/or access are all examples of Engineering Controls that can be implemented to reduce risks associated with working alone or in isolation.

- 2.4 **Employee** means a person employed by Simon Fraser University (“the University”).
- 2.5 **Lone Worker Program** means a safety program provided by CPS specifically for on campus after-hours check-in. Prior to working alone or in isolation, call CPS at 778.782.7991 to register for check-in.
- 2.6 **Supervisor** means any person who instructs, directs, and controls Employees in the performance of their duties.
- 2.7 **Working alone or in isolation** means to work in circumstances where assistance would not be readily available to the Employee in case of an emergency or in case the Employee is injured or in ill health.

WORKING ALONE OR IN ISOLATION RISK ASSESSMENT PROCEDURE

Date

Number
GP 39

**Date of Last
Review/Revision**

**Mandated
Review**
[TBA, 2022]

Policy Authority: Vice-President, Finance and Administration

Parent Policy: Working Alone or in Isolation Policy (GP 39)

1.0 PURPOSE

- 1.1 Where working alone or in isolation increases the risk to the health and safety of an Employee, special arrangements must be made to minimize this risk. Supervisors must take the necessary steps to identify potential hazards in working alone or in isolation situations and eliminate or reduce the risks from the hazards. To do this, Supervisors must assess the risk of all workplaces in their area of responsibility.
- 1.2 These procedures provide a framework for risk assessment and aid Supervisors in developing site-specific protocols to control risk factors present when Employees are working alone or in isolation.

2.0 DEFINITIONS

- 2.1 See Appendix A to the Working Alone or in Isolation Policy (GP 39) for definitions of words used in the policy and in these procedures.

3.0 PROCEDURE

- 3.1 Supervisors must complete a risk assessment before an Employee is assigned to work alone or in isolation. The purpose of this risk assessment is to identify hazards and to determine if the work should continue as scheduled.
 - 3.1.1 Supervisors should first consider the following when assessing risk:
 - a. Tasks and hazards associated with the work;
 - b. Time and location of the work;

- c. Consequences of the worst-case scenario;
- d. Likelihood of an injury or other harm that would prevent the Employee from calling for help;
- e. Training and experience level of the Employee; and
- f. Access to emergency assistance.

3.1.2

3.1.3 The chart below provides a non-exhaustive list of examples of risk associated with certain work activities/locations.

Risk Level	Examples
High	Any activity that has the potential to cause serious harm to people, the environment, and/or equipment, including but not limited to: activities with the potential for explosion or out of control reaction, activities involving highly toxic, highly corrosive, pyrophoric, or other highly reactive or otherwise highly dangerous substances. A task which, based on hazard analysis, is deemed to require more than one person for safety reasons including, but not limited to: confined space entry, electrical systems rated at more than 750 volts, working at heights, the use of machines and power tools that may cause critical injury (e.g. lathe, table saw, chain saw), risk of drowning, use of a vehicle, boom or similar equipment near live power lines where it is possible for any part of the equipment or its load to make contact with the live power line, and hot work where a fire watch is required. Work activities in a location where there is a risk of violence Work in a remote area where there is wildlife or rapidly changing environmental hazards (e.g. wildfire, avalanche, landslides, flash flood)
Moderate	Lab work that does not involve highly hazardous materials or where those materials are being used in a highly controlled environment, or using amounts that are very limited. Examples include: handling of small volumes of chemicals, use of x-rays, super magnets, NMR, or MRI, handling of radioactive materials (above exempt quantities), Class 3B and 4 lasers, and work in Risk Group 2 Biohazard labs. Tasks involving handling of cash, and dealing directly with the public. Work in isolated areas or those with extreme temperature environments. Work with human subjects. Maintenance work when limited or no other Employees are present in the work area
Low	Laboratory work with minimal risk (analytical equipment, monitoring equipment or process, work not involving hazardous materials or equipment).

	Custodial work. Building maintenance with minimal risk. Routine office work when limited or no other Employees are present in the work area. Remote routine office work.
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- 3.1.4 If the Supervisor determines the risk level is high, working alone or in isolation is prohibited without prior approval from the Dean, Director, Chair or designate. Otherwise, an additional Employee must be scheduled or the task must be rescheduled to occur when direct supervision can occur. Supervisors must develop a site-specific Working Alone or in Isolation Protocol for all authorized high-risk work.
- 3.1.5 If the Supervisor determines the risk level is moderate, the Supervisor must develop a site-specific Working Alone or in Isolation Protocol which includes a written procedure for checking on the well-being of the Employee who is working alone or in isolation.
- 3.1.6 If the Supervisor determines the risk level is low, the Supervisor must develop a site-specific Working Alone or in Isolation Protocol and perform periodic check-ins to ensure the safety of the Employee who is working alone or in isolation.

3.2 Working Alone or in Isolation Protocols

- 3.2.1 The site-specific Working Alone or in Isolation Protocol for moderate and authorized high-risk work activities should include:
- a. Position titles of employees who are required to work alone or in isolation;
 - b. Under which conditions working alone or in isolation is permitted;
 - c. Which types of duties may be conducted while working alone, stating limitations on and/or prohibitions of specific activities while working alone;
 - d. The risks to the Employee in terms of the nature of their work, isolation and conditions at the work-site; and
 - e. Steps for checking on the well-being of the Employee who is working alone or in isolation. This must be developed in consultation with the Employee and must include:
 - i An established time interval between checks;
 - ii The method for checking Employee well-being
 - iii A person, Supervisor or check-in designate, who will be designated to establish contact with the Employee and the pre-determined interval and record;

iv Steps to follow if the Employee cannot be reached, including steps to take in an emergency; and

v A check at the end of the shift.

3.2.2 The Employee who is working alone or in isolation and the Check-in Designate (if applicable) are required to be trained by their Supervisor on the site-specific Working Alone or in Isolation Protocol.

3.2.3 The site-specific Working Alone or in Isolation Protocol must be retained by the Supervisor and reviewed annually and revised as needed or when there is a change in work activities or a report that the procedures, policies or work environment arrangements, as applicable, are not working effectively.

3.3 Supervisors must implement appropriate Administrative Controls and/or Engineering Controls to eliminate the identified hazards completely or minimize the risk.

3.4 Where a Supervisor determines that risks cannot be eliminated, the Supervisor must take the following steps to mitigate the risk(s):

3.4.1 Establish minimum standards of competence and ensure these minimum standards are met by providing sufficient training and instruction in safe work practices to all Employees in their area of responsibility;

3.4.2 Establish an effective communication system;

3.4.3 Provide applicable personal protective equipment (PPE); and

3.4.4 Where applicable, maintain regular contact with the Employee working alone or in isolation and provide emergency supplies.

3.5

4.0 RELATED LEGAL, POLICY AUTHORITIES AND AGREEMENTS

4.1 The legal and other University Policy authorities and agreements that may bear on the administration of this policy and may be consulted as needed include but are not limited to:

4.1.1 *University Act*, R.S.B.C. 1996, c. 468

4.1.2 *Freedom of Information and Protection of Privacy Act*, R.S.B.C. 1996, c. 165

4.1.3 *Workers Compensation Act*, S.B.C. 2019, c.1

4.1.4 Occupational Health & Safety (“OHS”) and WorkSafe BC regulations, policies, and guidelines

4.1.5 University Health and Safety Policy (GP 17)

4.1.6 Response to Violence and Threatening Behaviour Policy (GP 25)

4.1.7 Interim University-Related International Travel Policy

4.1.8 Employee Collective Agreements and relevant human resource policies.

WORKING ALONE OR IN ISOLATION

Date
March 26, 2009

Number
GP 39

**Date of Last
Review/Revision**
[date]

**Mandated
Review**
[TBA, 2026]

Policy Authority: Vice-President, Finance and Administration

Associated Procedure(s): Working Alone or In Isolation Risk Assessment Procedure

EXECUTIVE SUMMARY

Simon Fraser University aims to provide a healthy and safe work environment for its Employees. Working alone or in isolation is an activity that has the potential to be hazardous. In compliance with provincial health and safety regulations, this policy and its procedure provide a framework and resources for identifying such circumstances, determining the risk level, and implementing appropriate protocols to ensure Employee health and safety.

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1.0 PURPOSE

~~1.1 To provide for measures to protect the health and safety of, and minimize risk to, any worker that works alone or at an isolated place of employment as defined in the Workers Compensation Act, Occupational Health and Safety Regulation, (Sections 4.20—4.23). Adherence to this policy will help to meet health and safety legal requirements and demonstrate due diligence in working alone or in isolation situations. The purpose of this policy is to:~~

~~1.1.1 ensure that Simon Fraser University (“the University”) and its Employees comply with provincial working alone or in isolation legislative requirements.~~

~~1.1.2 provide a framework to protect the health and safety of, and minimize risk to, any Employee who works alone or in an isolated location at their place of employment.~~

2.0 SCOPE AND JURISDICTION

~~2.1 This policy applies to all SFU campuses and to work for SFU at off-campus locations. This policy applies to those locations on or away from all campuses of Simon Fraser University where Employees conduct university work activities related to research, teaching, or operational services.~~

~~2.1.2~~ This policy applies to all Employees of the University.

3.0 DEFINITIONS

~~3.1 See Appendix A for the definitions of words used in this policy and its associated procedures.~~

4.0 POLICY

~~4.1 This policy requires the assessment of risk and the development of site-specific preventive and response procedures to protect the health and safety of, and minimize the risk to, any worker who works alone or in isolation, in circumstances where assistance may not be readily available in an emergency or should the worker be injured or fall ill.~~

~~4.2 For individuals required to work alone or in isolation the preventive and response procedures will address the identified risk(s), specify the types of activities that may be conducted, and any limitations on and/or prohibitions of specific activities, and procedures for securing assistance. Where possible, standard operating procedures (SOPs) can be developed to address similar activities within a department. Situations where an SOP may be appropriate include activities such as working alone in research laboratories or offices.~~

~~The site-specific policy with preventive and response procedures must be documented within the department, communicated to affected individuals, and monitored to ensure compliance and effectiveness.~~

~~4.3.1~~ The risks and consequences associated with working alone or in isolation are a concern of the University. It is, therefore, the policy of the University to:

~~4.3.1.1~~ identify and assess risk to protect the health and safety of, and minimize the risk to, any Employee who works alone or in isolation;

~~4.3.1.2~~ develop site-specific preventative and response protocols that will address the identified risk(s), specify the types of activities that may be conducted, and any

limitations on and/or prohibitions of specific activities, and establish procedures for the Employee to secure assistance; and

4.3.34.1.3 document the site-specific preventive and response protocols, communicate to affected individuals, and monitor to ensure compliance and effectiveness.

5.0 ROLES AND RESPONSIBILITIES

5.1 Deans ~~and Division Heads will;~~ Directors and Chairs are responsible for:

5.1.1 directing Supervisors in their areas of responsibility to develop and implement a site-specific ~~policy protocol with~~ appropriate preventive and response procedures for working alone or in isolation; and

5.1.2 monitoring to ensure the ~~policy protocol~~ and measures are communicated, enforced and effective.

5.2 Supervisors are ~~required to review all workplaces under their jurisdiction and~~ responsible for:

5.2.1 ~~5.2.1—~~ identifying individuals required to work alone University employees in their area of responsibility who are required to work alone or in isolation;

identify hazard(s) and assess risk(s);

take any necessary steps to eliminate the hazard(s);

eliminate the hazard(s) and minimize the risk(s) from the hazard(s) by using engineering controls, administrative controls or a combination of the two controls;

5.2.2 conducting a risk assessment to identify hazards and assess risk(s) and take any necessary steps to eliminate the hazard(s);

5.2.3 developing a site-specific Working Alone or in Isolation ~~Protocol Policy and Procedure~~ to address the risk(s);

5.2.4 training all Employees in their area of responsibility on ~~communicate~~ the site-specific Working Alone or in Isolation ~~Protocol Policy and Procedure to all workers under their jurisdiction;~~

ensure understanding and compliance with the Policy and Procedure;

5.2.5 review, and revising as needed, the site-specific Working Alone or in Isolation Protocol Policy and Procedure annually or more frequently when there is a change in work activities or a report that the procedures, policies or work environment arrangements, as applicable, are not working effectively; and

5.2.6 maintaining documentation of the site-specific Working Alone or in Isolation ~~Protocol Policy and Procedure within each department.~~

5.3 Employees ~~Individuals required to work alone or in isolation are~~ responsible for:

- 5.3.1 obtaining their Supervisor’s approval prior to working alone or in isolation;
- 5.3.2 complying with ~~the site-specific Working Alone or in Isolation Policy~~ and participating in the development of the site-specific Working Alone or in Isolation Protocol; and
- 5.3.3 advising their Supervisor of arising concerns ~~or personal factors that may increase the risk of working alone or in isolation.~~
- 5.4 Environmental Health and Safety (“EHS”) Department is responsible for:
 - 5.4.1 providing guidance and acting as a resource, if required;
 - 5.4.2 monitoring legislative changes and incident statistics to inform the need to review the policy; and
 - 5.4.3 developing training and resources to assist University Employees and Supervisors to fulfill their responsibilities under this policy.

5 REPORTING

- 5.2 EHS will report annually through the EHS Due Diligence report to the Board of Governors on the implementation of this policy.

6 RELATED LEGAL, POLICY AUTHORITIES AND AGREEMENTS

- 6.2 The legal and other University Policy authorities and agreements that may bear on the administration of this policy and may be consulted as needed include but are not limited to:
 - 6.2.3 *University Act*, R.S.B.C. 1996, c. 468
 - 6.2.4 *Freedom of Information and Protection of Privacy Act*, R.S.B.C. 1996, c. 165
 - 6.2.5 *Workers Compensation Act*, S.B.C. 2019, c.1
 - 6.2.6 Occupational Health & Safety (“OHS”) and WorkSafe BC regulations, policies, and guidelines
 - 6.2.7 University Health and Safety Policy (GP 17)
 - 6.2.8 Response to Violence and Threatening Behaviour Policy (GP 25)
 - 6.2.9 Interim University-Related International Travel Policy
 - 6.2.10 Employee Collective Agreements and relevant human resource policies

7 ACCESS TO INFORMATION AND PROTECTION OF PRIVACY

- 7.2 The information and records made and received to administer this policy are subject to the access to information and protection of privacy provisions of British Columbia's *Freedom of Information and Protection of Privacy Act* and the University's Information Policy series.

8 RETENTION AND DISPOSAL OF RECORDS

- 8.2 Information and records made and received to administer this policy are evidence of the University's actions to- comply with the legislative requirements for working alone or in isolation. Information and records must be retained and disposed of in accordance with a records retention schedule approved by the University Archivist.

9 POLICY REVIEW

- 9.2 This policy must be reviewed at least once every five years.
- 9.3 The procedure will be reviewed annually.

10 POLICY AUTHORITY

- 10.2 This policy is administered under the authority of the ~~President and all Vice Presidents~~ Vice-President, Finance and Administration.

11 INTERPRETATION

- 11.2 Questions of interpretation or application of this policy or its procedures shall be referred to the Vice-President, Finance and Administration whose decision shall be final.

12 PROCEDURES AND OTHER ASSOCIATED DOCUMENTS

- 12.2 Appendix A contains the definitions applicable to this policy and its associated procedures.
- 12.3 The procedures for this policy are: Working Alone or In Isolation Risk Assessment Procedure

APPENDIX A - DEFINITIONS - WORKING ALONE OR IN ISOLATION

Date
March 26, 2009

Number
GP 39

**Date of Last
Review/Revision**

**Mandated
Review**
[TBA, 2026]

Policy Authority: Vice-President, Finance and Administration

Parent Policy: Working Alone or in Isolation (GP 39)

1.0 PURPOSE

- 1.1 The definitions in this Appendix define the words used in the Working Alone or in Isolation Policy (GP 39) and in the Working Alone or in Isolation Risk Assessment Procedure.

2.0 DEFINITIONS

- 2.1 **Administrative Controls** means the provision, use and scheduling of work activities and resources in the workplace, including planning, organizing, staffing and coordinating to manage risk.

2.1.1 Establishing a check-in procedure, scheduling hazardous work while other Employees are present, implementing a buddy system for certain activities, restricting new or young employees from certain tasks and/or increasing the amount of direct supervision are all examples of Administrative Controls that can be implemented to reduce risks associated with working alone or in isolation.

- 2.2 **Check-in Designate** means a person (who is not the Supervisor) who is assigned to establish contact with the lone Employee at predetermined intervals and the results must be recorded by the person. If a Supervisor opts to utilize the Lone Worker Program for on campus after-hours emergency check-in, SFU Campus Public Safety ("CPS") will become the check-in designate.

- 2.3 **Engineering Controls** means the physical arrangement, design or alteration of workstations, equipment, materials or other aspects of the physical work environment to manage risk.

2.3.1 The use of communication systems (cell phones, radios, intercoms), location systems (closed-circuit cameras), alarms or personal emergency call devices and redesigning the work area to improve line-of-sight and/or access are all examples of Engineering Controls that can be implemented to reduce risks associated with working alone or in isolation.

- 2.4 **Employee** means a person employed by Simon Fraser University (“the University”).
- 2.5 **Lone Worker Program** means a safety program provided by CPS specifically for on campus after-hours check-in. Prior to working alone or in isolation, call CPS at 778.782.7991 to register for check-in.
- 2.6 **Office hours** means the Simon Fraser University hours during which there are people available to help in the case of an incident. Office hours are 8:30 a.m. to 4:30 p.m. at SFU Burnaby and SFU Surrey, and 9:00 a.m. to 5:00 p.m. at SFU Vancouver. Some departments have office hours that do not fall within this range. In such cases, the department must stipulate what they consider to be their office hours.
- 2.7 **Supervisor** means any person who instructs, directs, and controls Employees in the performance of their duties, a person authorized by an employer to oversee or direct the work of workers and students, including teaching and research supervisors, department heads, deans, managers and any other persons in positions of authority.
- 2.8 **Worker** means any person engaged in an occupation in the service of an employer, including faculty, staff, graduate and undergraduate students, and volunteers.
- 2.9 **Working alone or in isolation** means to work in circumstances where assistance would not be readily available to the Employee in case of an emergency or in case the Employee is injured or in ill health. according to The Occupational Health and Safety Regulation, means “to work in circumstances where assistance would not be readily available to the worker in case of an emergency or in case the worker is injured or in ill health.” In these circumstances extra precautions and requirements may be warranted. A variety of work environments and situations call for various interpretations of “working alone or in isolation.” For example, a worker who comes in alone after office hours to perform paperwork duties may not be considered to be “working alone.” A laboratory worker working alone may be considered to be “working in isolation,” while a worker coming in after office hours to do laboratory testing with hazardous substances may be considered as “working alone.” Depending on circumstances, situations, or environments, a site specific Working Alone or in Isolation Policy may be required to limit individuals’ duties.
- 2.10 **Worksite** means any place where work is performed, including locations such as laboratories, offices, or field work.

WORKING ALONE OR IN ISOLATION RISK ASSESSMENT PROCEDURE

Date**Number**
GP 39**Date of Last
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Policy Authority: Vice-President, Finance and Administration

Parent Policy: Working Alone or in Isolation Policy (GP 39)

1.0 PURPOSE

- 1.1 Where working alone or in isolation increases the risk to the health and safety of an Employee, special arrangements must be made to minimize this risk. Supervisors must take the necessary steps to identify potential hazards in working alone or in isolation situations and eliminate or reduce the risks from the hazards. To do this, Supervisors must assess the risk of all workplaces in their area of responsibility.
- 1.2 These procedures provide a framework for risk assessment and aid Supervisors in developing site-specific protocols to control risk factors present when Employees are working alone or in isolation.

2.0 DEFINITIONS

- 2.1 See Appendix A to the Working Alone or in Isolation Policy (GP 39) for definitions of words used in the policy and in these procedures.

3.0 PROCEDURE

- 3.1 Supervisors must complete a risk assessment before an Employee is assigned to work alone or in isolation. The purpose of this risk assessment is to identify hazards and to determine if the work should continue as scheduled.
- 3.1.1 Supervisors should first consider the following when assessing risk:
- a. Tasks and hazards associated with the work;
 - b. Time and location of the work;

- c. Consequences of the worst-case scenario;
- d. Likelihood of an injury or other harm that would prevent the Employee from calling for help;
- e. Training and experience level of the Employee; and
- f. Access to emergency assistance.

3.1.2 The chart below provides a non-exhaustive list of examples of risk associated with certain work activities/locations.

Risk Level	Examples
High	Any activity that has the potential to cause serious harm to people, the environment, and/or equipment, including but not limited to: activities with the potential for explosion or out of control reaction, activities involving highly toxic, highly corrosive, pyrophoric, or other highly reactive or otherwise highly dangerous substances. A task which, based on hazard analysis, is deemed to require more than one person for safety reasons including, but not limited to: confined space entry, electrical systems rated at more than 750 volts, working at heights, the use of machines and power tools that may cause critical injury (e.g. lathe, table saw, chain saw), risk of drowning, use of a vehicle, boom or similar equipment near live power lines where it is possible for any part of the equipment or its load to make contact with the live power line, and hot work where a fire watch is required. Work activities in a location where there is a risk of violence Work in a remote area where there is wildlife or rapidly changing environmental hazards (e.g. wildfire, avalanche, landslides, flash flood)
Moderate	Lab work that does not involve highly hazardous materials or where those materials are being used in a highly controlled environment, or using amounts that are very limited. Examples include: handling of small volumes of chemicals, use of x-rays, super magnets, NMR, or MRI, handling of radioactive materials (above exempt quantities), Class 3B and 4 lasers, and work in Risk Group 2 Biohazard labs. Tasks involving handling of cash, and dealing directly with the public. Work in isolated areas or those with extreme temperature environments. Work with human subjects. Maintenance work when limited or no other Employees are present in the work area
Low	Laboratory work with minimal risk (analytical equipment, monitoring equipment or process, work not involving hazardous materials or equipment). Custodial work.

	Building maintenance with minimal risk. Routine office work when limited or no other Employees are present in the work area. Remote routine office work.
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- 3.1.3 If the Supervisor determines the risk level is high, working alone or in isolation is prohibited without prior approval from the Dean, Director, Chair or designate. Otherwise, an additional Employee must be scheduled or the task must be rescheduled to occur when direct supervision can occur. Supervisors must develop a site-specific Working Alone or in Isolation Protocol for all authorized high-risk work.
- 3.1.4 If the Supervisor determines the risk level is moderate, the Supervisor must develop a site-specific Working Alone or in Isolation Protocol which includes a written procedure for checking on the well-being of the Employee who is working alone or in isolation.
- 3.1.5 If the Supervisor determines the risk level is low, the Supervisor must develop a site-specific Working Alone or in Isolation Protocol and perform periodic check-ins to ensure the safety of the Employee who is working alone or in isolation.

3.2 Working Alone or in Isolation Protocols

- 3.2.1 The site-specific Working Alone or in Isolation Protocol for moderate and authorized high-risk work activities should include:
- a. Position titles of employees who are required to work alone or in isolation;
 - b. Under which conditions working alone or in isolation is permitted;
 - c. Which types of duties may be conducted while working alone, stating limitations on and/or prohibitions of specific activities while working alone;
 - d. The risks to the Employee in terms of the nature of their work, isolation and conditions at the work-site; and
 - e. Steps for checking on the well-being of the Employee who is working alone or in isolation. This must be developed in consultation with the Employee and must include:
 - i An established time interval between checks;
 - ii The method for checking Employee well-being
 - iii A person, Supervisor or check-in designate, who will be designated to establish contact with the Employee and the pre-determined interval and record;
 - iv Steps to follow if the Employee cannot be reached, including steps to take in an emergency; and

- 3.2.2 The Employee who is working alone or in isolation and the Check-in Designate (if applicable) are required to be trained by their Supervisor on the site-specific Working Alone or in Isolation Protocol.
- 3.2.3 The site-specific Working Alone or in Isolation Protocol must be retained by the Supervisor and reviewed annually and revised as needed or when there is a change in work activities or a report that the procedures, policies or work environment arrangements, as applicable, are not working effectively.
- 3.3 Supervisors must implement appropriate Administrative Controls and/or Engineering Controls to eliminate the identified hazards completely or minimize the risk.
- 3.4 Where a Supervisor determines that risks cannot be eliminated, the Supervisor must take the following steps to mitigate the risk(s):
 - 3.4.1 Establish minimum standards of competence and ensure these minimum standards are met by providing sufficient training and instruction in safe work practices to all Employees in their area of responsibility;
 - 3.4.2 Establish an effective communication system;
 - 3.4.3 Provide applicable personal protective equipment (PPE); and
 - 3.4.4 Where applicable, maintain regular contact with the Employee working alone or in isolation and provide emergency supplies.

4.0 RELATED LEGAL, POLICY AUTHORITIES AND AGREEMENTS

- 4.1 The legal and other University Policy authorities and agreements that may bear on the administration of this policy and may be consulted as needed include but are not limited to:
 - 4.1.1 *University Act*, R.S.B.C. 1996, c. 468
 - 4.1.2 *Freedom of Information and Protection of Privacy Act*, R.S.B.C. 1996, c. 165
 - 4.1.3 *Workers Compensation Act*, S.B.C. 2019, c.1
 - 4.1.4 Occupational Health & Safety (“OHS”) and WorkSafe BC regulations, policies, and guidelines
 - 4.1.5 University Health and Safety Policy (GP 17)
 - 4.1.6 Response to Violence and Threatening Behaviour Policy (GP 25)
 - 4.1.7 Interim University-Related International Travel Policy
 - 4.1.8 Employee Collective Agreements and relevant human resource policies.