



ASIS Councils

NEWSLETTER

Healthcare Security Council

June 2008

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Chairman's Message

From the Desk of John Charron, Chairperson

The Healthcare Council continues to work hard to be sure that we are on top of the continual changes occurring in the United States as well as across the open waters. The most recent change that will affect Healthcare is the combination of Safety and Security as viewed by the Joint Commission. As we all know they are two different venues. We are preparing ourselves for the National Conference to be held in Atlanta GA. We will be hosting an information booth where members of the council as well as handouts will be available. We encourage all to stop by and pay a visit. Should you have any questions and/or concerns regarding the field of Healthcare, please feel free to contact any member of the Healthcare Council.

Healthcare Security Vision / Mission Statements

Vision - The Healthcare Security Council of ASIS International will be a credible and progressive source of information and leadership on issues affecting healthcare security.

Mission – To achieve this vision, the Healthcare Security Council will establish, develop, and promote excellence in the healthcare profession by:

- * Developing & delivering high quality educational programs in security and related disciplines to include but not limited to: safety, risk management, transportation, parking & communications, which will include forums that foster the exchange of information and ideas
- * Serving as an available resource, as appropriate, regarding legislation or regulation affecting healthcare security
- * Promoting & communicating high standards of professional & ethical conduct within the healthcare security profession
- * Identifying & promoting the “best practices” of security professionals through cooperative efforts & the exchange of information, ideas & programs
- * Collaborating within ASIS International and with other outside organizations having goals compatible to fostering mission achievement

Council Members in the News . . .

Michelman Wins Top Award

ASIS & IAHS past-president Bonnie S. Michelman, CPP, CHPA has been announced as Campus Safety Director of the Year for Healthcare by Campus Safety Magazine. The award honors “the top police chiefs and security directors of our nation’s hospitals, schools and universities

for their achievements and outstanding management of their campuses”. Achievements cited include expanding the community policing program, increasing the number of bike patrol officers, upgrading the universities communications center, and utilizing a special investigations unit. For further details on this award please visit www.campussafetymagazine.com. Congratulations Bonnie and her team at Massachusetts General Hospital!!!!

Hospital Security Series Concludes

Marilyn Hollier, Director of Security & Entrance Services at University of Michigan & Ben Scaglione, Director of Security at New York Presbyterian Hospital recently concluded a 3-part series for Joint Commission Resources entitled “*Hospital Security Series – Best Practices – Community Policing, Special Security Tactical Teams*”. The conclusion of this series concentrated on successful programs that both Marilyn & Ben have initiated within their organizations that have significantly increased the level of safety and security for healthcare workers, patients and visitors.

Healthcare Security Officer Training Update - Supervisor Training

The International Association of Healthcare Security and Safety recently introduced the third edition of the Supervisor training manual for healthcare security personnel. This newest edition offers extensive revisions to previous editions and has been expanded in the areas of crime prevention, training plans, security operations, emergency procedures, and supervisor development to reflect the changes in our profession.

Course content includes chapters on the following:

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| ❖ Introduction to Supervision | ❖ Self-Improvement |
| ❖ Supervisor Responsibilities | ❖ Civil Liability and the Supervisor |
| ❖ Employee Relations and Employee Appraisals | ❖ Safety and the Supervisor’s Responsibilities |
| ❖ Planning for Emergency Management and Response | ❖ Developing Training Plans and Programs |
| ❖ Supervisor Development | ❖ Effective Crime Prevention Programs |
| ❖ Authority and Control | ❖ Budgeting and Cost Control |
| ❖ Leadership | ❖ Principles of Customer Service |
| ❖ Handling Complaints and Grievances | ❖ Professionalism and Ethics |
| ❖ Communication Skills in Supervision | ❖ Security Operations |

For more information please visit the IAHS web site at www.iahss.org.

Joint Commission Resources – Environment of Care

The physical environment one works in has a significant impact on safety and human performance. The design and implementation of a health organization’s facility including its technology, systems and processes, and equipment affect patient safety and quality.

From blueprints to existing facility design, a health care organization can receive the benefit of our talented consultants who guide facilities design, construction, and maintenance process improvements all across the globe. Some of those specific services offered include:

- Address issues related to the Statement of Conditions™
- Assist in implementation of Building Maintenance Program
- Provide facility assessment and assist in completion of The Joint Commission equivalency reports
- Assist with implementation of appropriate Interim Life Safety Measures and Infection Control Risk Assessment for new construction or renovation
- Combined focus of Infection Prevention and Control and Environment of Care consultants
- Review and design of Environment of Care management plans
- Conduct and document effective risk assessments
- Assess and individually score all EC Standards and Elements of Performance for use with organization’s Periodic Performance Review (PPR)
- Provide overall Environment of Care survey preparation

- Review Emergency Management program and Emergency Operations Plan

For more information on this service, please contact us at (630) 268-7400 or via email at consultingservices@jcrinc.com

Infant Security Alert – Timeline of Events

The following article was printed in the Orlando Sentinel on May 6, 2008 outlining the timeline associated with a recent infant abduction in the State of Florida. Fortunately this infant was returned to the hospital unharmed in a relatively short period of time; however, the impact on the family and organization will go on for some time:

1311 Hours: Alleged Abductor enters the maternity ward. 30 seconds later Alleged Abductor walks into Room 265, which is empty.

1326 Hours: Wearing different clothes and posing as a nurse, Alleged Abductor walks into the room of Allison Pastor and her baby girl. Alleged Abductor says the baby needs an eye exam. After Pastor and her father challenge her, Alleged Abductor leaves and returns to the empty room. During one visit to the empty room, a hospital housekeeper walks in but assumes Alleged Abductor is a nurse and allows her to leave.

1337 Hours: Alleged Abductor, dressed as a nurse, leaves the vacant room and enters the room of the child she would abduct. She lifts the baby from the arms of his sleeping mother. The woman awakens and questions Alleged Abductor, who says the baby needs an eye exam.

1339 Hours: Alleged Abductor carries the baby to the vacant room she's been using.

1341 Hours: Alleged Abductor heads for the exit and steps out of the vacant room with the infant inside a shoulder bag.

1343 Hours: An alarm, triggered by an anti-theft microchip placed on the baby's bellybutton, sounds as Alleged Abductor walks out of the maternity ward. A nurse quickly determines which child is missing, checks with his mother, then calls for help.

1346 Hours: The hospital operator sounds a "code pink". The hospital goes into lockdown. Employees begin a room-by-room search.

1430 Hours: Lake Mary police Sgt. Joseph Gowen sees a bulletin about the missing baby and drives to I-4 and Lake Mary Boulevard.

1455 Hours: Shortly after parking in the grass near I-4, Gowen sees Alleged Abductor's Chevrolet Blazer and pulls it over. She tells him the baby in the back seat is hers.

1537 Hours: Alleged Abductor is arrested after refusing to talk to Sanford Investigator Richie Ayala. A short time later the infant is returned to the hospital unharmed.

For more information on how you can better protect your healthcare facility's infant and pediatric patients please see the publication "*For Healthcare Professionals: Guidelines on Prevention of and Response to Infant Abductions, Eighth Edition*" or contact the National Center for Missing and Exploited Children at www.missingkids.com or 1-800-THE-LOST (1-800-843-5678).