**Purpose**

The organization employs safety and security officers to ensure patient and staff safety and security. Safety and security officers will:

* Provide on-going situational awareness
* Be willing to assist patients and staff when safety or security issues arise

Safety and Security officers' duties include:

* Internal and external patrol of clinic grounds
* Issue official visitors with a pass after signing in
* Ensure validity of all visitors and update visitor’s log
* Diffuse difficult situations
* Deal with any incidents which may threaten the security of staff or patients
* Attend all training required for the job
* Posted sign enforcement
* Control of building keys and alarm codes
* Monitor employee parking
* Assist employees with minor vehicle issues
* Participate in infant child safe haven law.
* Disposal of syringes and drug paraphernalia
* Lost and found
* Work with police and other emergency services when required
* Monitor juvenile and adult inmates
* Use of defense tactics such as force or OC spray only in extreme situations
* Other duties as delegated

**Procedure**

**USE OF FORCE TRAINING**

Clinic has an established Safety and Security Use of Force Procedure 7002.02. This Use of Force procedure supersedes any other use of force policies or procedures. All Safety and Security officers are expected to follow this procedure. Training on the use of force will be given and demonstrated quarterly. Please see the current WA State RCW’s related to Use of Force.

Use of Force Continuum:

1. Presence of the officer

2. Verbal communications/de-escalation techniques

3. Soft hands (compliance & redirection techniques, display of non-lethal weapons).

4. non-lethal weapons (OC spray, Electronic Restraint Device).

5. Hard hands & impact strikes

6. Deadly force

RCW [9A.16.020](http://app.leg.wa.gov/RCW/default.aspx?cite=9A.16.020)

### Use of force—When lawful.

The use, attempt, or offer to use force upon or toward the person of another is not unlawful in the following cases:

(1) Whenever necessarily used by a public officer in the performance of a legal duty, or a person assisting the officer and acting under the officer's direction;

(2) Whenever necessarily used by a person arresting one who has committed a felony and delivering him or her to a public officer competent to receive him or her into custody;

(3) Whenever used by a party about to be injured, or by another lawfully aiding him or her, in preventing or attempting to prevent an offense against his or her person, or a malicious trespass, or other malicious interference with real or personal property lawfully in his or her possession, in case the force is not more than is necessary;

(4) Whenever reasonably used by a person to detain someone who enters or remains unlawfully in a building or on real property lawfully in the possession of such person, so long as such detention is reasonable in duration and manner to investigate the reason for the detained person's presence on the premises, and so long as the premises in question did not reasonably appear to be intended to be open to members of the public;

(5) Whenever used by a carrier of passengers or the carrier's authorized agent or servant, or other person assisting them at their request in expelling from a carriage, railway car, vessel, or other vehicle, a passenger who refuses to obey a lawful and reasonable regulation prescribed for the conduct of passengers, if such vehicle has first been stopped and the force used is not more than is necessary to expel the offender with reasonable regard to the offender's personal safety;

(6) Whenever used by any person to prevent a mentally ill, mentally incompetent, or mentally disabled person from committing an act dangerous to any person, or in enforcing necessary restraint for the protection or restoration to health of the person, during such period only as is necessary to obtain legal authority for the restraint or custody of the person.

RCW [49.19.040](http://app.leg.wa.gov/RCW/default.aspx?cite=49.19.040) Violent acts—Records.

Beginning no later than July 1, 2000, each health care setting shall keep a record of any violent act against an employee, a patient, or a visitor occurring at the setting. At a minimum, the record shall include:

(1) The health care setting's name and address;

(2) The date, time, and specific location at the health care setting where the act occurred;

(3) The name, job title, department or ward assignment, and staff identification or social security number of the victim if an employee;

(4) A description of the person against whom the act was committed as:

(a) A patient;

(b) A visitor;

(c) An employee; or

(d) Other;

(5) A description of the person committing the act as:

(a) A patient;

(b) A visitor;

(c) An employee; or

(d) Other;

(6) A description of the type of violent act as a:

(a) Threat of assault with no physical contact;

(b) Physical assault with contact but no physical injury;

(c) Physical assault with mild soreness, surface abrasions, scratches, or small bruises;

(d) Physical assault with major soreness, cuts, or large bruises;

(e) Physical assault with severe lacerations, a bone fracture, or a head injury; or

(f) Physical assault with loss of limb or death;

(7) An identification of any body part injured;

(8) A description of any weapon used;

(9) The number of employees in the vicinity of the act when it occurred; and

(10) A description of actions taken by employees and the health care setting in response to the act. Each record shall be kept for at least five years following the act reported, during which time it shall be available for inspection by the department upon request.

**OC SPRAY USE**

NOHN employs men and women to perform duties as health care security officers. These officers are trained and instructed in non-violent crisis intervention skills that allow them to avoid or defuse most confrontational situations. Security officers are expected to patrol the clinic grounds and respond to potentially violent situations either with or without immediate backup. OC spray when used properly and with the proper training may enable an officer to protect him/herself or other persons from physical attack. The purpose for utilizing OC spray must be limited to the protection of the officer or others who are under immediate physical attack and will in no way be used to otherwise influence, intimidate or detain an individual regardless of circumstance. Proper training, restrictive policy and certification will indemnify NOHN and its employees from liable of actions.

The following outlines where and when Safety and Security Officers employed by NOHN may employ OC (pepper spray) in the performance of their duties.

* + OC spray may only be used by Safety and Security Officers who have been trained and certified by a recognized training agency with training arranged and sponsored by NOHN. Record of such training must be on file and a copy present in the officers’ personnel file.
  + The use of pepper spray is limited to areas that are well ventilated and care will be taken where others are in attendance.
  + OC spray will used only to protect the Safety and Security Officer or others from imminent physical harm and will only be used in accordance with the use of force policy where OC spray is addressed.
  + Any public safety officer who is forced to rely on the use of OC spray after exhausting all other measures including withdrawing from the situation must file a complete written account of the event and notify the Security and Safety Specialist as soon as it is prudent to do so. Safety and security specialist of N.O.H.N. will conduct a review and provide a written report to the C.O.O.

Questions about this security procedure or the law enforcement elements of such plans or policies should be directed to the Lead Safety and Security Officer.

**INFANT CHILD SAFE HAVEN LAW**

NOHN participates in the Infant Child Safe Haven Law for Washington State. See the applicable WA State RCW below.

RCW [13.34.360](http://app.leg.wa.gov/RCW/default.aspx?cite=13.34.360)

Transfer of newborn to qualified person—Criminal liability—Notification to child protective services—Definitions.

(1) For purposes of this section:

(a) "Appropriate location" means (i) the emergency department of a hospital licensed under chapter [70.41](http://app.leg.wa.gov/RCW/default.aspx?cite=70.41) RCW during the hours the hospital is in operation; (ii) a fire station during its hours of operation and while fire personnel are present; or (iii) a federally designated rural health clinic during its hours of operation.

(b) "Newborn" means a live human being who is less than seventy-two hours old.

(c) "Qualified person" means (i) any person that the parent transferring the newborn reasonably believes is a bona fide employee, volunteer, or medical staff member of the hospital or federally designated rural health clinic and who represents to the parent transferring the newborn that he or she can and will summon appropriate resources to meet the newborn's immediate needs; or (ii) a firefighter, volunteer, or emergency medical technician at a fire station who represents to the parent transferring the newborn that he or she can and will summon appropriate resources to meet the newborn's immediate needs.

(2) A parent of a newborn who transfers the newborn to a qualified person at an appropriate location is not subject to criminal liability under RCW [9A.42.060](http://app.leg.wa.gov/RCW/default.aspx?cite=9A.42.060), [9A.42.070](http://app.leg.wa.gov/RCW/default.aspx?cite=9A.42.070), [9A.42.080](http://app.leg.wa.gov/RCW/default.aspx?cite=9A.42.080), [26.20.030](http://app.leg.wa.gov/RCW/default.aspx?cite=26.20.030), or [26.20.035](http://app.leg.wa.gov/RCW/default.aspx?cite=26.20.035).

(3)(a) The qualified person at an appropriate location shall not require the parent transferring the newborn to provide any identifying information in order to transfer the newborn.

(b) The qualified person at an appropriate location shall attempt to protect the anonymity of the parent who transfers the newborn, while providing an opportunity for the parent to anonymously give the qualified person such information as the parent knows about the family medical history of the parents and the newborn. The qualified person at an appropriate location shall provide referral information about adoption options, counseling, appropriate medical and emotional aftercare services, domestic violence, and legal rights to the parent seeking to transfer the newborn.

(c) If a parent of a newborn transfers the newborn to a qualified person at an appropriate location pursuant to this section, the qualified person shall cause child protective services to be notified within twenty-four hours after receipt of such a newborn. Child protective services shall assume custody of the newborn within twenty-four hours after receipt of notification.

(d) A federally designated rural health clinic is not required to provide ongoing medical care of a transferred newborn beyond that already required by law and may transfer the newborn to a hospital licensed under chapter [70.41](http://app.leg.wa.gov/RCW/default.aspx?cite=70.41) RCW. The federally designated rural health clinic shall notify child protective services of the transfer of the newborn to the hospital.

(e) A hospital, federally designated rural health clinic, or fire station, its employees, volunteers, and medical staff are immune from any criminal or civil liability for accepting or receiving a newborn under this section.

(4)(a) Beginning July 1, 2011, an appropriate location shall post a sign indicating that the location is an appropriate place for the safe and legal transfer of a newborn.

(b) To cover the costs of acquiring and placing signs, appropriate locations may accept nonpublic funds and donations.

(5) The department shall collect and compile information concerning the number of newborns transferred under this section after June 7, 2018. The department shall report its findings to the public annually, which may be on its web site, beginning July 31, 2018.

If an infant is found in are outside the clinic, bring infant inside to a medical staff member. Once the infant is inside and under the care of medical staff, call 911 to report found infant/child and location.

Contact child protective services and write up a detailed report including time, date, location. Copies will be forwarded to law enforcement, child protective services (DCYF), Lead Safety and Security Officer and COO.

**INTERNAL AND EXTERNAL PATROLS - CLINIC SITES**

**External** patrols of the building including all parking areas will be completed every 30 min and logged in the daily security log. Any findings, security or medical related, will also be put in the daily security log with the initials of security officer and the time. Things to look for and report:

* Domestic violence
* Persons appeared to be passed out or sleeping, check on them if on NOHN property
* Unaccompanied children
* Damage to employee vehicles
* Loitering
* Suspicious Activity
* Persons who made need a vehicle battery jump
* Patients needing wheelchair or other assistance.
* Garbage needing pickup

\*When walking past recycle bins and dumpsters, listen for sounds, and look inside at least once during your shift\*

**Internal** patrols will be completed 3 times a day (including patient/visitor restrooms) and logged in the daily security log along with any findings. At the end of each shift a walk through is required to make sure all entry and exits are secure and there are no potential safety or security issues. All rooms and restrooms are supposed to be clear and need to be verified and logged in the daily security log.

**Visitor log**

Anytime there is a visitor to a facility they will be directed to security for a visitor’s badge. Security will log date, time, badge number, and purpose of the visit in visitor logbook. When visitors leave, they will come back to security to return the badge and security will log the time they left.

**Diffusing difficult situations**

Security will often be called to standby or be visibly present when a patient or staff member gets upset or emotional. The health security officer must respond with respect, understanding, and authority and listen to what people are saying. Security can learn much just by listening. Stepping aside with the aggressor away from the situation is always recommended. Onboard training will cover this in more detail.

**Alarm codes**

Security will receive alarm codes from Hi Tech electronics contact. Security will be notified if an employee needs alarm code. Security will then issue alarm codes and teach the employee how to use it. Security will be responsible to respond to alarm either by phone or in person. Details of the response and follow up will be situational.

**Key control**

All keys will be stored in a locked key box in the security office, and keys will be inventoried on a log and audited quarterly. Keys will be labeled and numbered before they are locked in the box. Security will issue all keys according to what the employee needs to access. Unknown keys will be investigated and stored in a separate lock box. If they cannot be identified, then they will be destroyed.

**Employee parking tags**

All employees are issued parking tags. It is security's responsibility to monitor employee vehicles when out completing rounds. If damage or vandalism is seen on employee vehicles, security will look up tag number and report the issue to the proper employee.

**Disposal of drug syringes/ drug paraphernalia**

Upon finding syringes or anything believed to be drug related, always remember to put gloves on before picking up anything from the ground. Security officer will get a hazard bag then place the item in the bag and bring it to security desk or office. The officer will take a photo with cell phone and email it to the officer’s work email. Document what was found in the daily security log and dispose of the item in biohazard red bin.

**Lost and found**

Security will keep lost & found items and log the date, time, and what the item is on the lost and found log as well as on the daily security log. The items will be tagged as they are logged, and security will secure lost and found items in a locked drawer in security desk/office. If items are not collected by the rightful owner within 20 days from the date found, they will be donated. Lost and found will be audited every 20 days to ensure accuracy.

**Juvenile Corrections/Adult Corrections**

In the case that any Law Enforcement/Corrections officer comes to the clinics for inmate appointments, the corrections officer will check them in at the registration desk. Registration will notify security that the officer is on site with an inmate. Security will escort corrections officer and inmate to the security office to wait for the inmate’s appointment and log this activity in the daily security log.

**Other Duties as Assigned**

Security officers can often get other duties assigned to them. This can include moving items for administration, transporting things from clinic to clinic, and helping staff with various tasks. If asked, security should always help and be available with a great attitude. However, all security and safety issues come first. Officers should always finish preset task and make sure there is time in between rounds before assisting in other tasks.