



Physical Security in Community Healthcare Facilities

Ted Bowen - Safety/Security Supervisor

What is a community health center and what is their purpose?

CHC's are community-based and patient-directed organizations that serve populations with limited access to health care. HRSA-supported community health centers must meet the following requirements:



Requirements Include

- Located in or serve a high need community designated as "medically underserved area"
- Governed by a community board composed of a majority (51% or more) of health center patients who represent the population served.
- Provide comprehensive primary health care services as well as supportive services (education, translation, and transportation, etc.) that promote access to health care.
- Provide services available to all with fees adjusted based on ability to pay.
- Meet other performance and accountability requirements regarding administrative, clinical, and financial operations



CHC's serve a population from all walks of life. They provide programs such as behavioral health, medicated assisted treatment, family medicine, dental, outreach, groups, & classes.

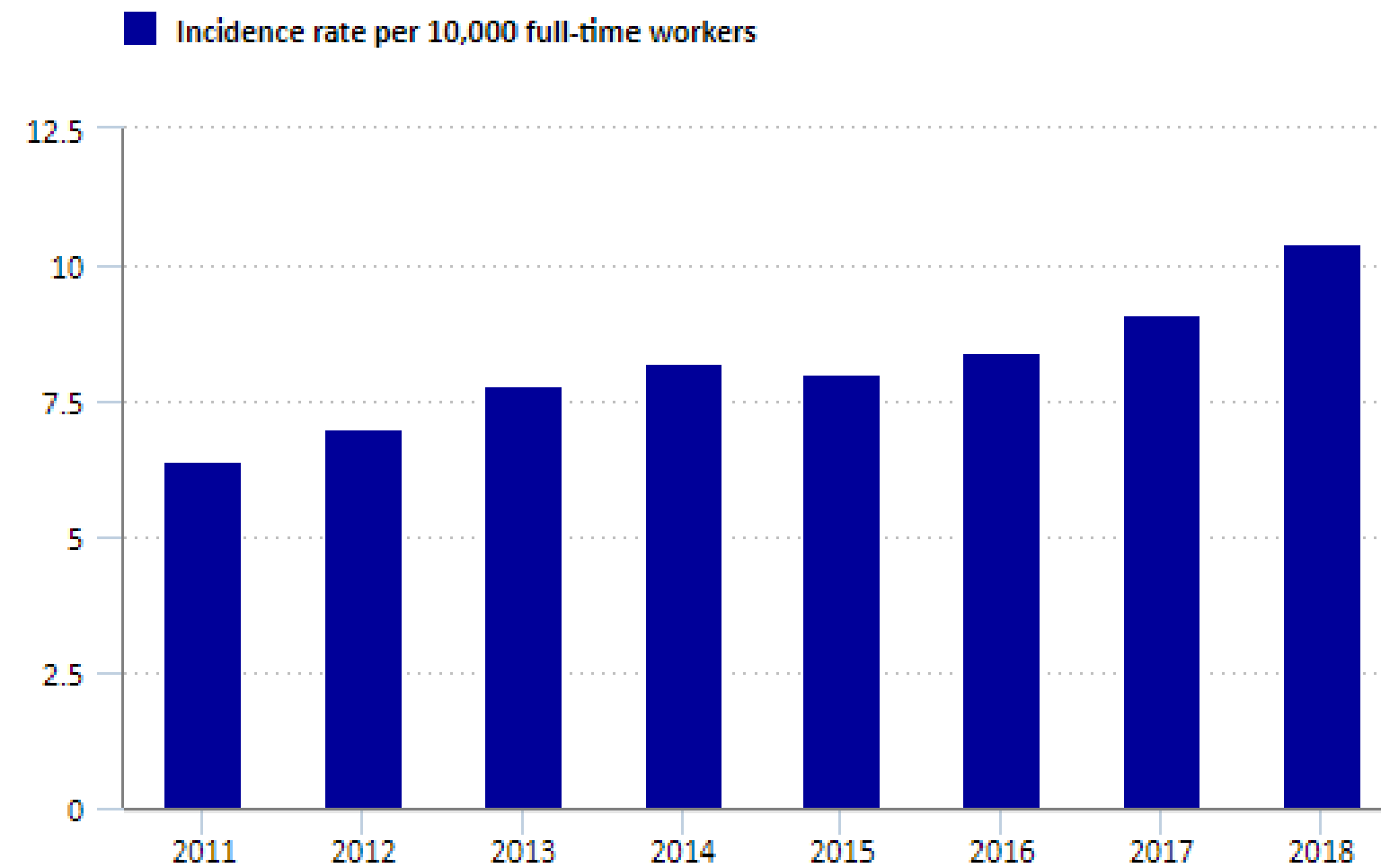




WHY DO
CHC'S NEED
SECURITY?

Assaults in Healthcare Are On The Rise

Chart 1. Incidence rate of nonfatal workplace violence to healthcare workers, 2011-18



Crisis Intervention

During late June, 40% of U.S. adults reported struggling with mental health or substance use*

ANXIETY/DEPRESSION SYMPTOMS



STARTED OR INCREASED SUBSTANCE USE



TRAUMA/STRESSOR-RELATED DISORDER SYMPTOMS



SERIOUSLY CONSIDERED SUICIDE†



*Based on a survey of U.S. adults aged ≥18 years during June 24-30, 2020

†In the 30 days prior to survey

For stress and coping strategies: bit.ly/dailylifecoping

WHAT SHOULD YOUR CHC LOOK FOR IN A SECURITY TEAM?





TRAINING THAT IS NEEDED FOR A SUCCESSFUL SECURITY TEAM



- 90 day FTO program
- IAHSS certification
- CPR/FIRST AID
- Nasal Narcan
- Crisis intervention
- DE-ESCALATION TECHNIQUES
- Quarterly DT training

WHAT CAN GO WRONG WHEN PROVIDING SECURITY AT CHC'S?



- Under Trained Staff
- Staff Perception of Security
- Lack of Budget for an Effective Team

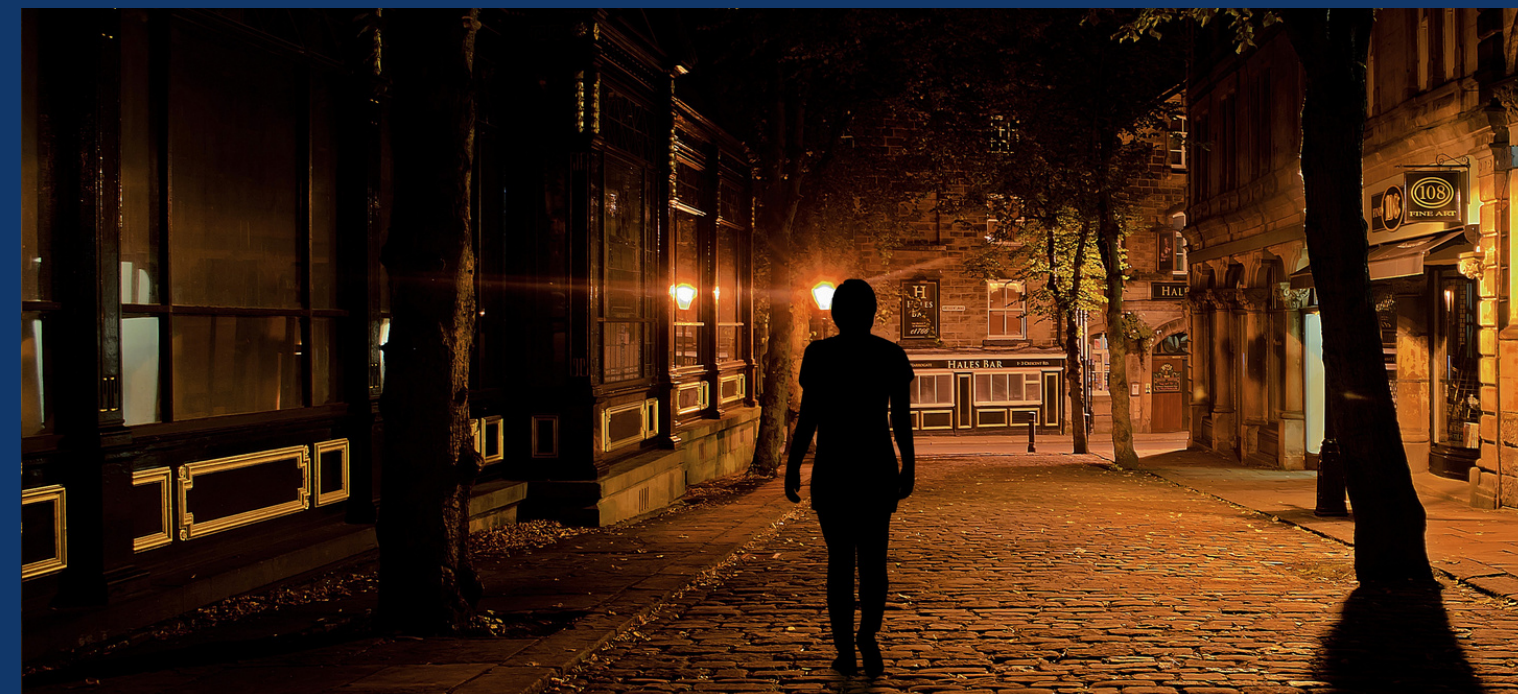
DAY TO DAY ACTIVITIES

- Parking area monitoring
- Constantly aware of surroundings
- Property patrols, inside and out
- Building relationships with staff
- Prohibiting loitering and vandalism
- Monitoring unconscious people
- Other duties as assigned



WHAT TOOLS ARE USED ?

- Cameras
- Key cards
- Panic alarms
- Policy and procedure on the use of force
- De-escalation and crisis intervention
- Training programs geared for hospitals and clinics.



SECURITY TRAITS UNIQUE TO CHC'S

- **Instinct**
- **Behavior Monitoring**
- **Body Language Reading**
- **Voice inflections**
- **Eye Contact**
- **Staff Trust**
- **Outreach**



CONSTANT OBSERVATION

- Observing who comes in and who goes out
- Observing if patients or staff have unusual behavior
- Is the patient on a behavior agreement?



EMOTIONAL PATIENTS & STAFF

- **Deescalating verbal threats**
- **Ensuring that staff are safe from violent patients**
- **Do we need to assign a Behavioral Agreement?**



WHAT ARE GOOD BOUNDARIES FOR YOUR SECURITY TEAM?



HOW YOUR SECURITY TEAM SHOULD RESPOND TO ESCALATED SITUATIONS.



FOR QUESTIONS AND CONSULTING CONTACT

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