

# SEVEN STEPS TO BUILDING SECURITY INTO YOUR HEALTHCARE FACILITY



**The most efficient, cost-effective time for healthcare providers to think about how security works in their facility is during a new building's design and construction. Having the right security partner throughout this process is essential. This white paper chronicles the evolution of one hospital and highlights steps you can follow to ensure your new facility provides the safest possible environment for patients, staff, and visitors.**

## INTRODUCTION: CHANGING TIMES, CHANGING NEEDS

Saint Joseph Hospital's legacy of providing high-quality, affordable healthcare in Denver began before Colorado became a state. Founded by four Sisters of Charity of Leavenworth in 1873 as a six-room hospital, Saint Joseph's has since grown its inpatient capacity by 60 times and now enjoys the support of 1,400-plus physicians.



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*Along with safety, Saint Joseph Hospital considered how many factors would create the best patient experience in its new facility, such as art, architecture, and lighting.*

With that growth came changing needs, including new facilities. In 2010, Saint Joseph Hospital embarked on a mission to build a modern facility with 365 private patient rooms in the heart of the city. Hospital administrators considered how numerous factors would create the best patient experience, such as art, architecture, lighting, technology, and safety.

When Saint Joseph Hospital needed an expert it could trust when making critical decisions about security design—and to ensure safe, continuous operations before, during, and after moving to its new home on 12/13/14—it turned to its longtime security provider, HSS.

## THE APPROACH: BUILDING SECURITY FROM THE GROUND UP

While outstanding security programs can be carried out within existing structures, building security design into a facility from the ground up is the optimal way to achieve the highest-performing infrastructure without costly retrofits. To do that, you need a seasoned security consultant with a thorough understanding of and willingness to share best practices.



*HSS helped the hospital design rooms and place workstations with an eye toward staff safety, one of many low- to no-cost recommendations HSS makes to increase safety at customer facilities.*

When planning a healthcare facility with security in mind, remember these key qualifications:

- ▶ **Partnership: Choose a consultant who shares your security philosophy and whose mission aligns with those of your organization.** HSS Healthcare Security has exclusively served healthcare providers since 1971 and Saint Joseph Hospital since 1972. As an outsourcing company, HSS creates longstanding customer relationships because of our employees' ability to integrate into customers' culture, sharing a common understanding and set of goals. HSS listened to Saint Joseph Hospital's objectives for securing an efficient new facility, provided input, and worked with the hospital to implement an individualized master security plan.
- ▶ **Expertise: Examine your security consultant's professional credentials and contributions to the field.** HSS COO and CEO Tony York played a leading role in writing the International Association for Healthcare Security & Safety's (IAHSS) "Security Design Guidelines for Healthcare Facilities," the industry standard-bearer. Eric Smith, the onsite HSS Security Director during the new Saint Joseph Hospital's construction and move, used these guidelines when making security recommendations to the hospital. Like York, Smith is active in the healthcare security industry, to which he contributes as a book author, blogger on security topics, and leader in his local IAHSS chapter. Smith's years heading the HSS security team at Saint Joseph—plus his knowledge of protecting against crime, gleaned from his previous work as a police officer—made his input to the hospital design panel invaluable. For expert advice on security technology, Smith relied on HSS Director of Systems Integration (SI) Bryan Jones.
- ▶ **Experience: Select a security professional with experience building security considerations into facility design and conducting successful hospital moves.** HSS consulted with facility leadership on the security design for St. Anthony Hospital, Lakewood, Colo., which opened in 2011. In addition, HSS's ability to up-staff on moving days eased the relocations of University of Colorado Hospital and Children's Hospital Colorado to their new medical campus in Aurora, Colo. Both moves occurred without interruption to patient care or security. "Children's Hospital was pleased with the fact that HSS could bring the lessons learned from other similar hospital moves," says Brian Sallee, the onsite HSS Security Program Manager for Children's Hospital Colorado. Sallee wrote an article for the IAHSS Journal of Healthcare Protection Management that he, in turn, shared with Smith as best practices to follow during the Saint Joseph Hospital move.<sup>1</sup>

<sup>1</sup>"Your Hospital is Moving: Concerns for the Security Leader," *Journal of Healthcare Protection Management*, 2012, Vol. 28, Number 2.

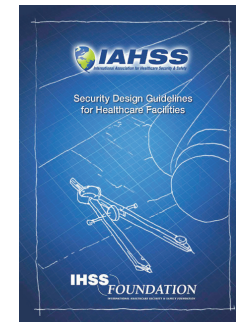
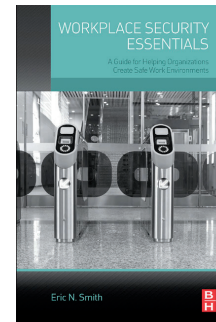
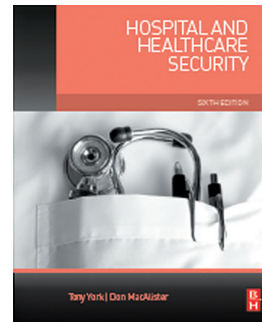
## THE PROCESS: FROM BLUEPRINT TO MOVE-IN

The involvement of Eric Smith's HSS team in the planning, design, construction, and relocation of Saint Joseph Hospital stretched from early 2011 to late 2014. HSS provided its expertise as a value-added service, without the associated costs of outside consulting. Smith and Saint Joseph Hospital's Director of Safety and Security Services Brad Steinger met regularly with hospital VPs during the facility's development. "Our expectations for HSS were to help us integrate the security system and design into a brand-new, state-of-the-art hospital that was at the same time welcoming—which is very hard to do," Steinger explains. "Eric and others at HSS who'd previously worked with hospitals under construction had very much to do with that process by partnering with us to develop a good understanding of security risks, by understanding our mission and values, and by balancing realistic expectations with scheduling and budget constraints."

Smith's knowledge of industry best practices informed many security-related decisions. Here he shares HSS's "Seven Stages of Incorporating Security Into New Hospital Design," along with new insights he gained along the way:

### 1. **Prepwork: Determine the customer's needs, vision, and project scope. Identify primary stakeholders. Establish design standards for creating a safe environment.**

"It was important at this initial stage to develop key



partnerships and get executive support for our security vision," Smith observes. The security vision was "a safe and secure hospital campus, built on strategies and tactics that meet or exceed the recommendations of the Department of Homeland Security, IAHSS, and ASIS International for the best practices and design measures for the security of urban hospitals."

The guiding principles were:

- ▶ Limit and control public access points to buildings on the hospital campus
- ▶ Maximize the use of technology for security and crime prevention
- ▶ Balance the need for a safe and secure environment with the hospital's value of "Welcoming Spirit"

Smith subscribes to the "broken window" theory of security: If a broken window goes unrepaired, it gives outsiders the perception that the building is neglected and subsequently attracts bad behavior. Smith brought

this theory, as well as the practice of Crime Prevention Through Environmental Design (CPTED), into early discussions with Saint Joseph Hospital planners and architects, with the goal of creating a sense of security through design functions such as establishing good lines of sight and a layered approach to access control. Smith would see the details of the security vision undergo many adjustments, but he still found it valuable to start with an ideal picture of security in the new building.

**2. Early Planning: Examine the building's potential footprint, access, and flow, as well as the customer's organizational culture and business needs.** Plans become more concrete during this phase, when conceptual thinking shifts into the technicality of how the building's components work together. For example, the ER's location determined the placement of many other departments. Also, the mom-and-baby unit is a focus of Saint Joseph Hospital's program, so the design needed to meet this department's associated security demands while keeping the environment friendly.



Smith conducted a value-stream analysis with the hospital's diverse clinical and support groups to develop wish lists. They discussed their workflow and how they wanted it to function in the new building. They considered parking locations, patient flow, and long-term security posture. They tracked everyone's ideas and went through countless sticky notes during planning meetings.

One primary outcome of the value-stream analysis was identifying entry points and adjusting the overall security stance. Round-the-clock visitor management, which involved scanning a visitor's driver's license and printing out a badge, was an effective strategy for HSS officers working in the former facility. However, in the new hospital, the presence of more access points necessitated a fresh security approach and plan for stationing officers.

**3. Security System Design: Define key objectives for security systems. Consider the needs of personnel utilizing security technology, including the hospital's Information Technology department. Provide proper training and support.** Smith worked with the hospital to identify security-sensitive areas, addressing special concerns such as infant protection. Saint Joseph Hospital selected integrated security technologies such as video surveillance, intrusion and door alarms, and mobile panic buttons. "On-site security leaders and personnel often are the end users of security

technology installed in a facility, so it helped to have our say at the table. It's important to select technology that is well supported in terms of training provided to end users. You need systems that are user-friendly," Smith advises. He points out that Bryan Jones's HSS SI team is a good example of a security systems integrator that "does it all," from initial consultations to maintenance and repair of security systems in both new and existing buildings.

**4. Construction: Stay vigilant to design changes and issues that might conflict with the security vision.** Smith likens this "deceptively calm" phase to being in the eye of a hurricane, but the security planning continued: reviewing fire codes and egress plans, checking blueprints, and identifying missing elements. HSS officers also secured the construction site.

"It was amazing, all that was going on" during construction, Smith remembers, listing a few surprises. Changes in building plans and placement of security technology meant Smith had to stay nimble to changes in security delivery. For example, to meet life-safety code, some locked doors needed to become egress doors, which could not be locked. Smith adjusted the plan for officer allocation accordingly. Adds Brad Steininger, "You really have to have an ongoing relationship [with your security consultant] so you can talk about issues as they come about."



*HSS adjusted its security plan to accommodate design changes such as adding a metal detector to the hospital's new ED.*

**5. Check-in/Review: Establish a security master plan and conduct an in-depth risk assessment to deal with potential issues and gaps.** Smith describes, “A lot of pieces come together” in this phase, when the initial security vision takes shape. “When the walls go up and you start visualizing the finished building, it’s the prime opportunity to think about security staffing and create a master security plan,” says Smith.

Smith formed the master security plan around the same industry standards he used to establish the security vision in Step 1. The master plan encompassed staffing, duties, technological solutions to supplement the security force, and plans for responses to such events as a fire alarm.

Smith continued to check in with stakeholders and review blueprints, which brought about further shifts in security planning and officer allocation. He learned that even small design changes such as lighting placement could make a big difference in security patrols. “A metal detector that the ED staff wanted was finalized late in the game,” Smith recalls. “We had to figure out how to utilize and staff it and manage the patient flow. We had to determine how to handle situations such as a patient arriving with chest pains.”

Also, the hospital had initially planned to reserve one cluster of rooms for high-risk patients but later decided to disperse these rooms among several zones, so Smith beefed up his security staffing in response. “Saint

Joseph’s uses PACT and BeST™ to supplement security staff when there is a high volume of at-risk patients,” he adds, referring to HSS’s programs that provide specially-trained professionals, on demand, to monitor high-risk patients while freeing security staff to focus on their other duties.

**6. Fit-up: Review the role of security, access plans, loss prevention, and safety.** During this phase—which involves placement of furniture and equipment needed to make the facility operational on moving day—Smith spent training time with HSS security staff, covering security systems, locations within the facility, emergency response, and competency tasks. He further fleshed out the master security plan, detailing staffing levels and placement, training, and emergency response plans. “In the old building, we had a certain response to infant abduction,” he shares. “Now with the hospital’s new technological infant protection system, all the babies wear a band. We had to rethink which officers would respond and where they would go.”

HSS secured the old and new facilities simultaneously. “As the hospital was putting in a million-dollar surgical arm, for instance, we needed to make sure it was protected,” tells Smith. Prior to moving day, an HSS officer found a pinhole-size water leak shooting from a hose in the new lab. The leak could have led to costly damages had it gone unnoticed over the weekend.

**7. Moving Day and Beyond: Move patients, troubleshoot surprises, and revisit security plans.** Smith, HSS Facility Security Supervisor Keith Karel, and their entire HSS

security team helped Saint Joseph Hospital accomplish its move to the new facility in one day. Karel had participated in the hospital’s moving-day drill in preparation for running the patient move for HSS. “It went very smoothly because a lot of planning went into it,” Smith reflects. “It was all hands on deck. All of our trained officers worked 12-hour shifts and did a great job.”

Saint Joseph’s staff and HSS officers relocated every patient and turned the lights off in the old building and on in the new—all while providing seamless security and medical care. Some officers took responsibility for way-finding, guiding patients to where they could receive care in the new facility. Security also screened hundreds of construction workers daily after the move. Smith says, “Once the patients were in the new facility, there were still lots of little things to be done, and some more surprises. We also rewrote security documents based on the final features of the facility.”



Moving Day, 12/13/14

## THE RESULTS: A MODERN, SECURE, PATIENT-CENTERED HOSPITAL

After years of making, adjusting, and implementing plans, the security program at the new Saint Joseph Hospital is off to a solid start. While the hospital continues to implement additional security plans, Smith collaborated with its administrators to evaluate risks and prioritize necessary measures to ensure the utmost in safety by opening day. “Saint Joseph’s is still fine-tuning, but I’m generally very happy with how the security posture played out in the new facility,” Smith says. “When you’re designing a new hospital, it’s so much easier to install security system cables and hardware than retrofitting an existing building—plus you get the latest technology and it’s consistent throughout your facility.”

Steininger agrees, “Now security is a much more robust process than in the old building.” Beyond the improved infrastructure, what really impresses Steininger are the people who fulfill their security mission day in and day out: “Many of the officers are integrated into our culture—they are with HSS but have been here a long time. I appreciate that as well as their professionalism and approach to their work. A lot of them are unsung heroes.”

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## CONCLUSION

Eric Smith discovered that the main keys to success when building security considerations into a new healthcare facility are:

- ▶ Establishing a partnership between facility administrators and the security provider
- ▶ Understanding the facility’s culture
- ▶ Recognizing how to balance security plans with the patient experience and the healthcare provider’s business needs
- ▶ Getting complete buy-in and executive support for the security vision
- ▶ Staying flexible in order to adjust to changing plans

Planning, constructing, and moving a hospital require an immense amount of effort, along with a healthy dose of patience and flexibility. However, with an experienced security partner providing insight and steady guidance through every step, your organization can build the most cost-effective, efficient, and patient-oriented security programming into your new facility.



## THE HOSPITAL’S PERSPECTIVE

Brad Steininger, Director of Safety and Security Services at Saint Joseph Hospital, offers these recommendations to hospital administrators considering a construction project:

- ▶ “From a security standpoint, one thing to do when planning a new hospital is assessing your risk, which is something HSS does very well. They put together a risk assessment every year for us.
- ▶ “Another is understanding the patient population your hospital serves and how that affects the way you want to present security. It does matter where a facility is located, whether it’s a downtown hospital like ours or a suburban hospital, or whether it’s behavioral health.
- ▶ “It can get frustrating with all the entities involved, so keep an eye on the big picture and don’t get bogged down in the minute details initially. Budget and scheduling are big drivers, so balancing those parameters has an effect on when things get rolled out and implemented. Maintain the approach that some security features might be phased in incrementally, but still have an understanding of what you want to have in place to secure your facility on opening day.”