

The Healthcare Industry Faces Daily Risks to People, Privacy, Property and Profitability

From theft of prescription drugs and patient records to violence by unstable patients to infant kidnapping, healthcare facilities face many security threats every day. Companies stand to lose millions of dollars as a result of loss of property or increased liability if they fail to take proper measures to ensure quality security.

For these reasons, healthcare companies are increasingly turning to security contractors to play critical roles in maintaining a safe and secure environment. And while contracting for security services can be an effective way to safeguard facilities, healthcare administrators and security directors must play leadership roles in ensuring that contractors provide a reliable security force that protects patients, the public and hospital employees.

Prescription Drug Theft: Drug theft from hospitals and other healthcare facilities is widespread. Thieves often target narcotics and inside jobs are not uncommon. One pharmacy supervisor stole more than 205,000 doses of medicines with a street value of \$7.1 million.¹ A 2009 analysis of state healthcare records conducted by the *Denver Post* found incidents of drug theft occurring more than 100 times in the past three and a half years at 22 Colorado hospitals.²

“Every time an inventive product comes on the market, it is at risk for being diverted. Pharmacies need to treat drugs the same way a jewelry store treats jewelry. You are not going to put the Hope Diamond in a cheap, glass case out front where anyone can get to it. You’re going to keep it locked away in a vault”

—Jeff Ramirez, chief of management and clinical information systems, for the Department of Veterans Affairs

Hostile or Disorderly Individuals: Healthcare administrators know that hospitals, particularly emergency departments, are challenging environments from a security perspective. Many hospitals are now posting one or more security officers full time in the emergency department. Ensuring these officers are equipped to handle this challenging post is critical.

“Many times the event that caused the injury carries over into the emergency room. Victims of domestic violence, gang wars, bar fights and drug deals gone bad present themselves on a regular basis ... the original attackers may arrive at the ED to ‘finish what they started.’ Even when a patient is not a victim of violence, the family or friends may become violent in their fear or grief... An officer trained to handle verbal aggression can de-escalate the situation.”

—David Sells, author of *Security in the Healthcare Environment*³

“I was working security in a hospital. Many homeless people came to the hospital for their healthcare. Many times they were mental patients. You had to keep an extra eye on them, because of their pattern of behavior, psychiatric history. One patient in particular comes in, covered in blood, yelling, spitting in my face and I had to restrain him. Only later, did I learn that he was HIV positive.”

—Dave Freie, security officer at Kaiser Permanente, Panorama City, Calif.

Threats to Patient Privacy: Under the Health Insurance Portability and Accountability Act, since 2009 healthcare facilities must report all breaches of patient privacy that impact more than 500 people. The U.S. Department of Health and Human Services website currently lists 47 such security breaches.⁴ Although some of these breaches were cyber-crimes, the majority of breaches happened through physical theft of paper files, laptop computers or other media where the information was saved.

Infant Abductions: Infant abductions are a parent's—and a hospital's—worst nightmare. The National Center for Missing and Exploited Children (NCMEC) studied 124 reported cases of infant abductions from healthcare settings between 1983 and 2008.⁵ The costs of a single incident in terms of liability and damage to a company's reputation can be extremely high. Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requires that hospitals “develop and implement a proactive infant abduction prevention plan” and report any incidents. Although most hospitals use a variety of different technologically driven security elements as part of an infant abduction prevention plan, experts agree that a comprehensive plan must include an effective on-site officer component.

“[S]ince the 1980's ... family members are now allowed to view the delivery process and are freely admitted to nurseries. Visitor restrictions have also been relaxed to permit greater family involvement. ... Baby viewing areas are now considered quasi-public areas ... security must be strengthened, maintained and constantly evaluated.”

—Russell Colling and Tony York, authors of *Hospital and Healthcare Security*⁶

“The typical abduction from a healthcare facility involves an “unknown” abductor impersonating a nurse, healthcare employee, volunteer, or relative in order to gain access to an infant. ... Because there is generally easier access to a mother's room than to the newborn nursery ... most abductors “con” the infant directly from the mother's arms.”

“Electronic security measures are simply modern tools used to ‘back up’ a healthcare facility's policies and procedures and nursing practices.”

—National Center for Missing and Exploited Children⁷

For a minimal investment, healthcare companies can contract with a reliable, professional security contractor to keep experienced officers on the job, safeguard employees, patients and the public, protect company assets and reputation. Well-trained officers are equipped to work with any technological security solutions utilized by the company and help meet the difficult security challenges facing the healthcare industry.

INVESTING IN RELIABLE SECURITY SERVICES IS CRITICAL FOR THE HEALTHCARE INDUSTRY

Russell Colling and Tony York are leaders in the field of healthcare security. As certified protection professionals, certified healthcare protection administrators, and authors of *Hospital and Healthcare Security*, they have this to say about the importance of high-quality security in the healthcare setting:

- “Extensive training is apparent in almost all departments. The medical care arena focuses on training and continuous in-service education at almost every level. ... Security should be no exception.⁸”
- “The need for adequate training of security personnel is vigorously espoused by management and line personnel alike. ... However, this almost insatiable quest for proper training appears to break down at the design and implementation stage in many healthcare security programs.⁹”
- “Litigation has been a powerful driving force in the increase in healthcare security officer training. Claims that healthcare organizations have failed to provide necessary training are used with much success in lawsuits, especially those involving weapons, physical force, false arrests and civil rights issues. The responsibility for the adequate training of security staff rests squarely on the organization.¹⁰”

ENDNOTES

¹ <http://www.ashp.org/import/news/HealthSystemPharmacyNews/newsarticle.aspx?id=1221>

² http://www.denverpost.com/technology/ci_12818540#ixzz0jDvYMsE3

³ Sells, David H. *Security in the Healthcare Environment*. 2000 Page 14

⁴ <http://www.hhs.gov/ocr/privacy/hipaa/administrative/breachnotificationrule/postedbreaches.html>

⁵ http://www.missingkids.com/en_US/publications/NC05.pdf

⁶ Colling and York. *Hospital and Healthcare Security*. 2010. Page 511

⁷ http://www.missingkids.com/en_US/publications/NC66.pdf

⁸ Colling and York. *Hospital and Healthcare Security*. 2010., p 234

⁹ Colling and York. *Hospital and Healthcare Security*. 2010. p.231

⁹ Sells, David H. *Security in the Healthcare Environment*. 2000 Page 14

¹⁰ http://www.missingkids.com/en_US/publications/NC66.pdf