

 <p>BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI</p>	<p><b>SECURITY STANDARDS</b></p>	<p><b>Policy 5.5.1 Protocol 0</b></p>
<p><b>SECURITY PROTOCOL</b></p>		

**STANDARDS TO BE MET**

**1. Roles & Responsibilities**

**1.1 BOPDHB Board Executive**

- a) Setting policy direction for safety of staff, property and clients of Bay of Plenty District Health Board (BOPDHB)

**1.2 Cluster leaders**

- a) Establishing and implementing security programmes under their control ensuring the security objectives are met.
- b) Ensuring a consistent approach is adopted throughout the organisation.

**1.3 Security Manager**

- a) Providing advice, training and direction regarding security issues.
- b) Liaising with Police and community groups.
- c) Co-ordination of hospital security issues.
- d) Contracting any licensed security and guard services as required by BOPDHB to provide those services.
- e) Managing the activities of any contracted security and guards services.
- f) Investigation and recommendations on security issues as required.

**1.4 Security Staff**

- a) Following all security procedures as outlined.
- b) Responding immediately to smoke / fire / duress alarms or requests for emergency assistance.
- c) Reporting incidents promptly and accurately.

**1.5 Clinical Nurse Managers and departmental managers**

- a) Ensuring correct procedures are being followed in the work area.
- b) Ensuring that security is discussed at regular staff meetings, induction / familiarisation courses (e.g. it is not necessary for Security to attend staff meetings).
- c) Identifying training needs and keeping staff informed of security policies and procedures.

**1.6 All BOPDHB Staff**

- a) Following security procedures.
- b) Acting in a safe manner. Taking no risks with personal safety and personal or company assets.
- c) Reporting incidents promptly and accurately.

**2. Authorisation To Operate**

2.1 Specified security functions may be carried out by external security contractors and persons designated by the Chief Operating Officer (COO) or designate.

2.2 Any contracted service or investigators employed by BOPDHB are to be licensed under the provisions of the Private Investigators and Security Guards Act, 1974, and the organisation must be a member of the New Zealand Security Industry Association.

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### 3. Security Patrols

- 3.1 All / any security patrols will be undertaken by authorised staff or contracted security personnel and comply with procedures outlined and authorised by management.
- 3.2 Security staff will patrol to ensure BOPDHB staff, patients, visitors and assets are protected from nuisance or criminal behaviour.

### 4. Parking

Refer to policy 5.5.2 Parking and 5.5.2 protocol 1 Parking Standards.

### 5. Training

Security staff are to be adequately trained in the relevant statutes and application of security practices to promote and maintain a safe and secure environment.

### 6. Risk Management

#### 6.1 Emergency Response Procedures

All staff will familiarise themselves with the Hospital Emergency Procedures guidelines available in each Department - refer to BOPDHB policy 5.2.1 Emergency Management.

#### 6.2 Emergency Response Extraordinary Measures

In an extraordinary emergency situation security measures may need to be put in place outside of those documented. Any such action will be taken on the authority of the designated Incident Controller taking into account the best information available and in accordance with the intent of this policy.

#### 6.3 Prisoners / Security Risks / Requiring Protective Status

In the event of a need to provide security for high risk patients e.g. prisoners, persons under Trespass Notice or persons displaying aggressive behaviour, the Duty Nurse Managers in consultation with the Security Manager / Police will put in place a security plan as appropriate. This plan will outline the procedures in place to protect the safety and wellbeing of staff, visitors and other patients.

### 7. Security Systems

#### 7.1 Fire / Duress Alarms

BOPDHB will install and maintain alarm systems to protect people and assets against fire and duress – refer BOPDHB policy 5.2.2 Fire Safety

#### 7.2 Electronic Access Systems

Access to BOPDHB premises / sites may be protected by electronic access systems with management and monitoring capabilities - refer BOPDHB policy 3.50.01 protocol 6 Identification (ID) Card Standards.

#### 7.3 Locks and Key Control

- a) All locks utilised will be of good quality and fit for the purpose intended.
- b) Keys will be issued to authorised staff and recorded in a key register.
- c) Master keys will be accounted for and stored in a secure key safe.

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**7.4 Lighting and Perimeter Security**

BOPDHB will provide adequate lighting and perimeter security of its operational sites to ensure staff, patient and visitor safety. Lighting will be checked on a regular basis.

**7.5 Building Projects**

Security issues shall be fully considered in any new building projects or facility alterations.

**7.6 Purchase and Installation**

All security systems will be purchased through the RFP process in line with BOPDHP policy 3.5.8 Purchasing and in consultation with the Security Manager. Any such purchases are to be made from and installed by reputable a company and be maintained in accordance with the manufacturer's specifications.

**8. Found Property**

8.1 Details of the property and the finder will be recorded.

8.2 Property will be retained for 30 days before being delivered to the Police for disposal or returned to BOPDHB as the finder. For clarification the organisation and not individual staff members will be treated as the finder of lost property.

**9. Patient / Client Property**

Refer to policy 6.9.3 protocol 1 Patient / Client Personal Property Management.

**10. Storage Procedure For Valuables Or Money**

10.1 Security may store valuables or amounts of cash in transit. Unless previously sealed by the owner the valuables must be accounted for in the presence of a witness. A receipt will be issued prior to storage.

10.2 Where jewellery is being stored, or an item is previously sealed, only a description is to be recorded e.g. ring gold coloured band, blue stones.

**11. Staff Property**

BOPDHB takes no responsibility for the security of staff property.

**12. Theft**

12.1 Employees are to act in such a manner that theft of any items / property will be minimised.

12.2 Immediately on discovery of a theft the employee should do all that is appropriate to stop / reduce the activity.

12.3 Report the theft to Security and involve the Police where BOPDHB property or patient property valued over \$100.00 is involved.

**13. Drug Security**

13.1 Refer to BOPDHB policy 7.1.1 Medications, IV Fluids & Standing Orders

13.2 Refer to BOPDHB Clinical Practice protocol CPM.M3.8 Medication - Storage, Checking & Administration of Controlled & Monitored Medications

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#### 14. Vehicle Security

Refer to BOPDHB policy 5.1.6 Transport - BOPDHB Vehicle Fleet.

#### 15. Security Incident Reporting / Investigation & Audit

15.1 A copy of any incident reports involving security issues are to be forwarded to the Regional manager support services who may consult with the Security Manager.

15.2 Qualified security staff will carry out a regular physical and system audits on BOPDHB locations and report back to the Security Manager.

15.3 The Security Manager will annually review and analyse the Incident Management records, and at any other time, to monitor security trends and incidents.

15.4 The results of this audit will be made available to departments and managers.

15.5 Managers must document their response to the audit detailing the actions taken and reasons if no action taken

#### 16. Security Risk Assessments

16.1 A minimum of every four (4) years (more frequently if required) Security Risk Assessments will be carried out on staff practice and BOPDHB facilities to ensure compliance with this policy and relevant procedures.

16.2 Risks will be entered into the BOPDHB Datix system, Risk and Hazard Identification form.

#### ASSOCIATED DOCUMENTS

- Bay of Plenty District Health Board Security controlled documents
- Bay of Plenty District Health Board policy 2.1.3 Hazard Management
- Bay of Plenty District Health Board policy 2.1.4 Incident Management
- Bay of Plenty District Health Board policy 3.5.8 Purchasing
- Bay of Plenty District Health Board policy 3.50.01 protocol 6 Identification (ID) Card Standards
- Bay of Plenty District Health Board policy 5.1.6 Transport - BOPDHB Vehicle Fleet
- Bay of Plenty District Health Board policy 5.2.1 Emergency Management
- Bay of Plenty District Health Board policy 5.2.2 Fire Safety
- Bay of Plenty District Health Board policy 6.9.3 protocol 1 Patient / Client Personal Property Management
- Bay of Plenty District Health Board policy 7.1.1 Medications, IV Fluids & Standing Orders
- Bay of Plenty District Health Board Clinical Practice protocol CPM.M3.8 Medication – Controlled Drugs and Monitored Medications - Storage, Checking, Administration and Stock Control
- Bay of Plenty District Health Board Incident Management System

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