



Issue 54  
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Safety Topics:  
**Security**  
JCAHO Environment of  
Care Standards

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### Clarification

The May 2003 issue of the Medical Center Safety, Security, and Parking newsletter said that "old ID badges can be used to gain illegal access" to secured areas.

The fact is that our new security technology allows us to "turn off" old ID badges so that they cannot be used to gain access. Unfortunately, Security can't "turn off" the badge unless they know that it's been lost or stolen or that the employee has left the job.

It's critical that employees notify Security if their badge is lost or stolen. Managers are required to notify Security when an employee terminates and to collect ID badges and return them to Security so that the badges cannot be used by someone posing as a hospital worker.

# University of Kentucky Hospital Safety Bulletin

## Medical Center Security Joins UK Police Department



In March 2003, Medical Center Security officially became a division of the University of Kentucky Police

Department (UKPD). The change, a result of the Medical Center reorganization, will bring enhanced security to the Hospital and other Medical Center locations.

Right now, the police department is in the process of evaluating the specific security needs of the Hospital. Security officers, now under the direction of UKPD, continue to staff and patrol the Hospital. In addition, UK police officers now make routine patrols.

Since March, UKPD has eliminated two posts at the stadium parking area, where UK police officers make regular patrols. Shuttle drivers will continue to take employees to their cars at night. According to Stephanie Bastin, Police Operations Specialist, the goal is to streamline redundant operations when possible, so that valuable resources can be directed where they are most needed.

Later this year, UKPD plans to eliminate the security dispatch operation at the Hospital and to have all calls to Medical Center Security channeled directly to UK police dispatch. Not only will this save money, it will also help ensure that appropriate security resources are dispatched to the scene. In the past, Medical Center Security often were dispatched to handle situations that required police response. When all calls

are coming into a central dispatch operations, they will be "triaged" so that the level of response is tailored to the particular situation. In April 2003, UKPD received 51 calls for service to the Medical Center.



## Locking MN/MS Doors is a Security Measure

In 2001, UK Hospital began installing a perimeter security system that will be completed when the MN/MS corridors are locked on May 9<sup>th</sup>.

Corridor doors between the Hospital and the College of Medicine on the 1<sup>st</sup> and 2<sup>nd</sup> floor will be unlocked between 6 a.m. and 6 p.m. for the convenience of our patients. All other MN/MS corridors will be locked 24 hours a day, 7 days a week for security.

When the MN/MS corridors are locked, faculty, staff, and students will be able to pass through easily by holding their Medical Center ID badges in front of the proximity card readers.

All MN/MS doors are programmed to unlock during a fire alarm for safe passage to the other side of a fire wall.

### Safety Feature Sounds Alarm When Used

To meet Life Safety Code requirements and to ensure that building occupants can get out in any emergency, all MN/MS corridor doors also have been equipped with a delayed egress device that sounds an alarm when someone  
*See Locking, page 2.*

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## Locking MN/MS Doors

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pushes on the door without using their ID badge. The alarm sounds at the site and in the Medical Center Security Office. Security officers must respond to the site to reset the alarm and to investigate the security violation.

Delayed egress on the College of Medicine side is required by Life Safety code because the MN/MS corridors are required exits from that building.

### A Difficult Project

“The perimeter security project has been a long and difficult project,” said Tomi Ross, Hospital Safety Officer. “Our biggest problem has been communication. We haven’t been able to find a way to ensure that all of our faculty, staff, and students understand what we’re trying to do and why,” Ross said.

The perimeter security system was designed to limit public access to the facility. Staff entrances and thoroughfares are secured with magnetic locks. Employees are able to access the building or pass through a secured corridor using their Medical Center ID badge.

UK Hospital was in the process of designing a perimeter security system prior to September 11 2001, but the project specifications changed after the attacks. Security technology allows the Hospital to lock down the building, if necessary, in response to hazardous materials incidents or community emergencies that threaten the facility.

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requires all hospitals to have emergency lock-down procedures.

## JCAHO and the Environment of Care

# Employee Knowledge Key to Successful JCAHO Survey

When the Joint Commission for Accreditation of Healthcare Organizations (JCAHO) visits UK Hospital in August or September 2003, the surveyors will test staff knowledge of and compliance with safety.

In the JCAHO standards, occupational and environmental health and safety issues fall into seven broad categories:

- General Safety
- Security
- Emergency Management
- Medical Equipment
- Fire Prevention and Response
- Hazardous Materials and Waste
- Utilities

JCAHO surveyors always have spent time with day-shift employees—observing their work practices and asking questions—but this year the surveyors probably will spend time with employees on all three shifts. One of the things that they’re most interested in is whether employees know and comply with the organization’s safety policies and procedures.

For example, they may check Hospital entrances that are marked “Employee Only” to determine whether those doors are locked and whether employees direct those without ID badges to a public entrance or simply let them in.

“Because of the war and the increased potential for terrorism, we expect security and emergency management to be a big focus this year,” said Tomi Ross, Hospital Safety Officer. Employees are expected to know that the Hospital has adopted an “all hazards” approach to disaster response and uses the Hospital Emergency Incident Command System (HEICS) as its command and control structure. They also must know *their roles* in specific contingency plans, such as fire, evacuation, tornado, bomb threat, decontamination, and mass casualty response. In some cases, the surveyors will be looking for specific, step-by-step procedures; in others, they’ll be looking for a general knowledge. “A radiology tech may not know the specifics of the smallpox response plan, but she ought to know that the Hospital has offered the smallpox vaccine to designated employees and has formed smallpox response teams,” Ross said.

When it comes to basic safety procedures like fire response or hazardous materials spill clean up, employees must demonstrate a thorough knowledge of specific procedures. For example, a nurse or tech who knows the acronym *RACE* but doesn’t know where to take patients if the unit has to evacuate simply doesn’t have enough knowledge to protect himself or others during a fire. JCAHO surveyors are looking for a real understanding of safety procedures that are required to prevent serious injury or to save lives.

**The posters or “graffiti” that is attached to this newsletter is designed to help prepare your staff to answer general safety questions, but you must educate and train your employees far beyond what this general information tells them. Your employees must know and demonstrate a real working knowledge of safety.**

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**UK**