UNIVERSITY OF TOLEDO HEALTH SCIENCE CAMPUS

SUBJECT: SECURITY MANAGEMENT PLAN   Procedure No. SM-08-000

PROCEDURE STATEMENT

The University of Toledo Health Science Campus (UT HSC) shall have a Security Management Plan.

PURPOSE OF PROCEDURE

To meet mandates prescribed by the Joint Commission (JC), and manage safety and security risks at the University of Toledo Medical Center (UTMC) and Health Science Campus.

SCOPE

(NOTE: Because of the importance, breadth and scope of the safety and security requirements in standard (EC.02.01.01), UT retains separate management plans for safety and security).

The Security Management Plan describes how the organization will provide and maintain a safe physical environment and manage staff activities to reduce the risk of injuries.   The Management Plan applies to the UToledo Medical Center and all associated facilities and clinics. Medical facilities have inherent safety risks associated with providing services for patients, the performance of daily activities by staff, and the physical environment in which services occur. The Safety Management Plan is designed to work in concert with the other Environment of Care Management Plans (i.e. Utility Systems, Hazardous Materials, Medical Equipment, Security Plan and Fire Safety Plan). The Safety Management Plan serves as the lead plan in establishing a safe environment for all of the listed plans to direct compliance with TJC standards. The plans are reviewed and accessed annually to determine effectiveness and continued improvement and functioning within the Environment of Care.

RESPONSIBILITY

The Security Management Plan is assigned a leader with the appropriate knowledge, skills and abilities to meet elements of performance. This individual is required to review and sign the plan annually. The hospital identifies a person(s), as designated by leadership, to coordinate the development, implementation and monitoring of the security management activities: The Office of Public Safety has been appointed by the Board of Trustees of the University of Toledo to provide hospital security services, law enforcement services and environmental health and radiation safety services for the institution. The Director of Security is responsible for the implementation of the practices described below.

The Office of Public Safety is assigned the responsibility to complete elements of the plan and ensure its continued implementation. Reports on the plan's implementation are reported to the Safety and Health Committee on a regular basis. A representative from hospital administration sits on the Safety and Health Committee. On an annual basis the assessment of the effectiveness of each individual management plan is presented to the Board of Trustees of the University of Toledo.

PROCESSES AND PROCEDURES

The hospital manages safety and <u>security</u> risks:

- <u>The hospital implements a process to identify safety and **security** risks associated with the environment of care that could affect patients, staff, and other people coming to the hospitals facilities:</u>

    1. All employees and students are provided instruction through orientation including how to contact the University Police and Hospital Security for emergency and non-emergency response and information pertaining to maintaining a safe work environment.
    2. Twenty-four-hour police and security patrols identify potential safety risks in the environment of care.

3. The Office of Public Safety meets with department directors, staff and students in security sensitive areas (Pharmacy, Emergency Department, Detox and Kobacker) to conduct risk assessments of departments and buildings which include, but not limited to:
   a. Lighting
   b. Door security
   c. Surveillance cameras
   d. Alarms (fire, intrusion, panic buttons)
   e. General safety education/best practices and any unique needs

4. The University of Toledo Police Departments maintains MOUs, training and partnerships with local, state and federal public safety agencies including but not limited to the Toledo Police Department, Toledo Fire, The Lucas County Sheriff's Office, The Ohio State Highway Patrol, The Ohio Department of Public Safety, and the Federal Bureau of Investigation.

5. The Office of Public Safety attends Organizational Leadership Team (OLT) meetings to work with all department directors to identify and resolve safety risks.

6. The University provides Interim Life Safety measures and assessments for all construction and renovations.

7. The Office of Public Safety periodically offers students, faculty, staff and in some cases the greater community educational programs and presentations on general safety and special topics such as alcohol and drug education, sexual assault prevention and surviving the active shooter or violent intruder situation.

8. An annual Hazard Vulnerability Risk Assessment (HVA) is completed specifically for security issues to identify high risk areas.

9. A weapons detection system has been installed in the entrance of the Emergency Department and is monitored 24x7.

- The hospital takes action to minimize or eliminate identified safety and **security** risks in the physical environment:

  1. The hospital security officers perform routine security checks of all areas and buildings on the Health Science Campus. In addition to identifying and addressing any security related issues, the checks provide a visible presence and serve as a crime deterrent.

  2. Hospital security provides a 24-hour presence in the Emergency Department.

  3. The University of Toledo Police Department provides 24-hour police patrols and responds to and investigates any criminal issue/incident.

  4. Police/incident reports are completed and reviewed for necessary follow-up and investigation.

  5. Follow-up measures may include security cameras, panic buttons, limiting access, card access, intrusion and motion alarms and increased patrols by university police or hospital security.

  6. A weapons detection system has been installed in the entrance of the Emergency Department and is monitored 24x7.

  7. The University of Toledo has installed 30 Flock Safety license plate-reading cameras with views of the entrances and exits of Main Campus and Health Science Campus, establishing a virtual perimeter that law enforcement officers can use to identify incoming and outgoing vehicles.

  8. The University of Toledo utilizes a Threat Management Team to address issues related to workplace violence.

Annual crime statistics and safety policy statements are published for the campus community by the Office of Public Safety and are available on the web at http://www.utoledo.edu/depts/police/. The statistics contain specific crime information related to the Health Science Campus and other pertinent information pertaining to personnel safety.

In addition to Email, the UToledo web page, and local media the University may use one or more of the following emergency alerts/advisements to keep the campus community informed of impending situations:

1. Timely warnings - crime bulletin emails advising of serious crimes occurring on campus.

2. UT Alert - a text message and email alert system which sends "sms" messages to subscriber's cell phones and email alerts to all UToledo emails as well as an alert that pops up on active UToledo computers.

3. Indoor mass notification - a paging system utilized on the Health Science Campus for emergencies.

4. Email, the UToledo web page, and local media may be utilized to communicate emergency information.

- The hospital identifies individuals entering its facilities: All employees, staff, volunteers, venders and contractors are required to wear a UToledo photo identification badge or contracted company identification. UToledo I.D. badges are obtained from Campus Community Support Services with proper paperwork and identification (see UT Policy 3364-40-23) "Identification Badges"). Medical suppliers and pharmaceutical representatives who are routinely on campus (5 days a week) will receive an ID badge issued by Auxiliary Services. Medical suppliers or pharmaceutical representatives on campus less than 5 days per week will use the Vendor Mate system for identification and badging. Vendor Mate is administered by the Purchasing Department (see UT Policy 3364-40-23). In-Patients are required to wear wristbands that identify individuals as patients. After-hours visitors to the hospital will be credentialed and required to wear an ID tag that will affix to their clothing per policy 3364-100-85-03. All inpatient visitors will register using the visitor management system located in the main lobby of the hospital, visitors of patients being admitted through the Emergency Department may be registered in the lobby of the Emergency Department.

- The hospital controls access to and from areas it identifies as security sensitive: Preventative measures are taken in sensitive areas by adjusting the schedule of locking and unlocking areas in accordance to security concerns (see Hospital Security procedure 0022 "Designated Facility Lock/Unlock times"), creating funnel areas, installation of a card access system, monitoring intrusion alarms, routine patrols, I.D. badges and strategically located cameras recorded and intermittently monitored by hospital security and campus police. Access to campus buildings is restricted after normal business hours. In an emergency, the hospital can remotely be placed into lock down and specific areas of the hospital can also be locked-down in accordance with the Elevated Security/Lockdown policy (UT Policy SM-08-003).

- The hospital has written procedures to follow in the event of a security incident, including an infant or pediatric abduction:

When a security incident occurs, the hospital follows its identified policy and procedures. The hospital has the following Code procedures to manage emergencies:

1. Missing Child/Abducted Child: Code Adam - Procedure SM-08-002

2. Bomb Threat: Code Black – Procedure EP-08-004

3. Missing Adult Patient: Code Brown – Procedure SM-08-004

4. Violent Situation: Code Violet – Procedure EP-08-015

5. Chemical/Biological/Radioactive Incident: Code Orange – Procedure EP-08-003

6. Mass Casualty Disaster Procedure: Code Yellow – Procedure EP-08-001

7. Utility Failure: Code Copper – Procedure EP-08-014

8. Snow Emergency: Code White – Procedure EP-08-008

9. Severe Weather/Tornado: Code Gray – Procedure EP-08-002

10. Fire Response: Code Red – Procedure LS-08-001

11. Evacuation: Code Green – Procedure EP-08-005

12. Medical Emergency Response Team – Code Blue

- When a security incident occurs, the hospital follows its identified procedures: In a security incident, the response actions of the University of Toledo Police and Hospital Security along with all hospital employees are guided by Emergency Code Procedures. All employees and students are instructed through the orientation process to respond to incidents based on

best practices found in the Emergency Code Procedures. Routine drills are conducted, documented and evaluated to make sure everyone correctly follows procedure in an emergency.

- <u>The hospital conducts an annual worksite analysis related to its workplace violence prevention program. The hospital takes actions to mitigate or resolve the workplace violence safety and security risks based upon findings from the analysis:</u> The Workplace Violence Worksite Analysis is completed annually by a multidisciplinary group and reviewed by the Safety Committee. Any identified risks are mitigated through the multidisciplinary group. The Safety Committee receives a quarterly report based on calls for service to the Security and Police Departments in order to identify the highest risks and where to focus resources to provide the safest environment.

ANNUAL REPORT

The objectives, scope, performance and effectiveness of the security management program/plan will be evaluated in an annual report to Administration. Evaluation will include all areas of security management.

SUPPORTING DOCUMENTATION AND PERFORMANCE MEASURES

Other written procedures that support this management plan can be found at https://www.utoledo.edu/depts/safety/procedures/ Crime Statistics serve as the performance measure for the security management program.

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Benjamin Schoonmaker
Person Responsible

Director of Security
Title

Signature

January 23, 2025
Date