

English Version

Societal and Citizen Security - Guidance for managing security in healthcare facilities

Sécurité sociétale du citoyen - Lignes directrices pour gérer la sécurité dans les établissements de santé

Schutz und Sicherheit der Bürger - Leitfaden für das Sicherheitsmanagement in Gesundheitseinrichtungen

This Technical Specification (CEN/TS) was approved by CEN on 27 July 2015 for provisional application.

The period of validity of this CEN/TS is limited initially to three years. After two years the members of CEN will be requested to submit their comments, particularly on the question whether the CEN/TS can be converted into a European Standard.

CEN members are required to announce the existence of this CEN/TS in the same way as for an EN and to make the CEN/TS available promptly at national level in an appropriate form. It is permissible to keep conflicting national standards in force (in parallel to the CEN/TS) until the final decision about the possible conversion of the CEN/TS into an EN is reached.

CEN members are the national standards bodies of Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and United Kingdom.



EUROPEAN COMMITTEE FOR STANDARDIZATION
COMITÉ EUROPÉEN DE NORMALISATION
EUROPÄISCHES KOMITEE FÜR NORMUNG

CEN-CENELEC Management Centre: Avenue Marnix 17, B-1000 Brussels

Contents	Page
European foreword.....	4
Introduction	5
1 Scope.....	6
2 Terms and definitions	6
3 General guidance.....	6
3.1 Approach.....	6
3.2 Context of the HCF security management	6
3.3 Compliance with national legislation	7
3.4 Risk management.....	7
3.5 Leadership.....	8
3.5.1 General.....	8
3.5.2 Organization of roles, responsibilities and authority.....	8
3.6 Establishment of a security management policy	9
3.7 Security Management Plan (SMP).....	9
3.8 Interfacing with other management systems	10
4 Operational guidance	10
4.1 Organization (General procedures)	10
4.1.1 Controlled areas	10
4.1.2 Access control.....	10
4.1.3 Secure storage	12
4.1.4 Facility restricted access (emergency lockdown)	12
4.1.5 Car park and vehicle control.....	13
4.2 People.....	13
4.2.1 Staff.....	13
4.2.2 Visitors	18
4.2.3 Patients	19
4.3 Facilities and technology (infrastructure and access system)	22
4.3.1 Design and construction	22
4.3.2 Physical security.....	23
4.3.3 Fences and walls.....	23
4.3.4 Closed circuit TV (CCTV).....	23
4.3.5 Identity cards.....	24
4.3.6 Technologies and alarm systems	24
4.3.7 Control rooms.....	25
4.3.8 Accommodation for patients with protective status or prisoners	25
4.3.9 Security signage	25
4.3.10 Alternative entries.....	26
4.3.11 Operating (surgery) rooms security	26
4.3.12 Emergency unit security	26
4.3.13 Burglar and intruder resistant areas.....	27
4.3.14 Personal attack alarms (Panic alarms)	28
4.3.15 Cash and other monetary processing systems	28
4.4 Security incident response	30
4.4.1 General.....	30
4.4.2 Criteria	30
4.4.3 Minimizing possibility of recurrence.....	31
4.4.4 Reports and statistics	31

4.4.5	Incident report	31
4.4.6	Interfacing with first responders and emergency management.....	31
4.4.7	Targeted violence	32
4.5	Plans for special cases.....	33
4.5.1	Child abduction	33
4.5.2	CBRN incident response	33
4.5.3	Prisoner patients	33
4.5.4	Offensive weapons and other dangerous equipment.....	33
4.5.5	Active shooter	34
4.5.6	Drug diversion and security of CBRNE substances.....	35
4.5.7	Vehicle and aircraft security	36
4.5.8	Media.....	36
5	Performance evaluation.....	37
5.1	General	37
5.2	Management review	37
6	Exercise and testing	37
	Bibliography	39

European foreword

This document (CEN/TS 16850:2015) has been prepared by Technical Committee CEN/TC 391 “Societal and Citizen Security”, the secretariat of which is held by NEN.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN [and/or CENELEC] shall not be held responsible for identifying any or all such patent rights.

According to the CEN-CENELEC Internal Regulations, the national standards organizations of the following countries are bound to announce this Technical Specification: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

Introduction

Security of healthcare facilities is very important for effective and high quality medical treatment. It is a very wide area and the primary objective of this Technical Specification (TS) is to provide all responsible persons, within healthcare facility, with guidelines on how to manage security.

This is not a management system standard. This TS is giving an opportunity to be more specific in proposed security measures, which leads to better security of healthcare facility staff, patient and other people, who are visiting such a facility. There is also an important fact that this TS is not a closed project and we are expecting further development of this document.

Management of security in healthcare facilities is a dynamic process and this TS proposes guidelines, which help responsible persons have a choice from different techniques for how to improve security.

It is important to emphasize that across the European Union there are several regulatory and legislative limitations for use of security techniques and technologies, so it is important to take these limitations into account. Use of the guidelines may vary based on the health care system in each country of the European Union.

1 Scope

This Technical Specification provides guidance for managing security in healthcare facilities. It covers the protection of people, critical processes, assets and information against security threats.

This Technical Specification applies to hospitals and places that provide healthcare services, such as - but not limited to - psychiatric clinics, homes for the elderly and institutions for the handicapped. It also applies to self-employed practicing healthcare professionals. It does not apply to occupational health and safety and fire safety.

This Technical Specification is not a management system standard. However it can be applied as part of a management system, such as with EN ISO 9001.

2 Terms and definitions

For the purposes of this document, the following terms and definitions apply.

2.1

controlled area

area which has specific controls to restrict access to authorized persons only

2.2

targeted violence

situation where an individual, individuals or group are identified at risk of violence, usually from another specific individual such as in cases involving domestic violence

Note 1 to entry: Often, the perpetrator and target are known to each other prior to an incident.

3 General guidance

3.1 Approach

Security management for a healthcare facility (HCF) should:

- be consistent with other policies;
- be documented, implemented and maintained;
- be visibly endorsed by top management;
- provide a framework which enables the specification of security management objectives and targets;
- be consistent with the organization's risk management;
- be communicated to all employees, patients and other stakeholders; and
- respect the rights of patients and visitors.

3.2 Context of the HCF security management

The HCF should determine internal and external issues that are relevant to its purpose and that affect its ability to achieve the intended level of security within the HCF.

The context should be taken into account when establishing, implementing, maintaining and continually improving the HCF security management (system).