

Standard Intent:

Hospital security program must ensure that everyone in the hospital is protected from harm, loss, or damage to property. Staff, vendors, and others identified by the hospital, such as volunteers or contractors, are identified by badges (temporary or permanent) or other form of identification. Others, such as families or visitors in the hospital, may be identified depending on hospital policy and laws and regulations.

Restricted areas such a must be secure and monitored by security personnel and/or security access control systems.

Children, elderly adults, and other vulnerable patients unable to protect themselves or signal for help must be protected from harm. In addition, remote or isolated areas of the facility and grounds may require the use of security cameras

Security program policies and procedures must be disseminated to hospital staff to clarify their roles and responsibilities during different situations.

FMS.12 The hospital has a mechanism to deal with a bomb threat.

FMS.12.1 There is a written policy on how to deal with a bomb threat in the hospital which includes:

FMS.12.1.1 Defining the code or alert.

FMS.12.1.2 Defining the role of the person receiving threat alerts.

FMS.12.1.3 Defining the response team including the individual responsible for announcing the emergency status and contacting the local authorities.

FMS.12.1.4 Defining the duties and the responsibilities of all staff involved and their action cards.

FMS.12.1.5 The command center location.

FMS.12.1.6 Defining the steps to be taken during the bomb threat.

FMS.12.2 Staff are trained on response to bomb threat alerts.

Standard Intent:

Writing the policy and exercising its component will contribute highly in protecting the healthcare facility and its occupants during bomb threat situations. The plan should cover the requirements (12.1.1 to 12.1.6) and documented evidence of staff training on code activation should be available.