Physical Security Plan

Exterior

Why did you propose the lighting where you did?

I set up the lighting first, at all the main and side entrances, for safety and easily recognizable purposes, even from afar. I put lights along the exterior wall for the main building to shine down or toward areas with low visibility.

The prime example is the light where the building indents inward, next to the Emergency Department. I also place the light near the trees. I do not know how big these trees are. Therefore, I place one light near every group of two or more trees.

I also place lights in the two parking lots to assist staff and visitors with visual impairment or low light hours. I use the position of the guards and the security camera as a reference to the placement of the lights. The idea is to avoid having the light glare on the camera at night. This problem can be avoided if we place the camera a little below the light source, not directly close or at the same height.

• What factors did you consider when increasing the security of the parking design and the differences between the visitor parking garage and the staff parking lot?

The design of both parking lots creates certain blind spots; therefore, I place both cameras and lights there to both detect and deter potential vulnerabilities.

I fence off the staff parking lot and require the staff to flash their badge to get in and out. Due to the advantageous placement of the nearby guard post, the staff can rest at ease for not only the badge get checked but also the identities of the badge owner as well. Because the guard post is located where the traffic turns in and out of the hospital area, they can react a lot quicker.

The visitor parking garage is more open to the public. I place cameras at the garage's entry and exit with additional light sources. I also have another guard post across the street, near the hospital, to handle situations in the garage.

Why did you place cameras where you did?

The cameras are placed at vantage points to assist the guard and provide maximal coverage at choke points, i.e., entry and exit. I also place cameras at the blind spots and take maximum advantage of ambient light from a natural source, streetlight, and within the hospital's vicinity.

There is always at least one camera that also covers the guards and guard post position for monitoring purposes.

I also have the camera set at the rear entrance and put a fence with a slide gate. Given the placement of the rear entrance, I am assuming it is an additional passage or a cargo loading area. If it is the cargo loading area, the guard can open the gate when needed. If not, I recommend closing this gate until absolutely needed. The fewer entry points that need to be monitored, the less resource will be needed.

Lobby

• What kind of windows are required? What kind of access control security are you providing for the visitor, employee, and patient?

We will be using shatterproof glass for all windows in the lobby. We also use the badge/ID in conjunction with the camera to monitor incoming and outgoing traffic. The visitors will receive a visitor badge and have to wear them at all times. Staff will also need to have their badge visible. We can go an extra step and color code the staff uniform/scrub to match the skill level i.e. physician in blue and register nurse in maroon.

Patient ID and other government issue documents will be safely guarded in a separate location from their current bed. The patient will wear patient clothing and have identifiable tags for those with special needs who require an escort.

• What kind of information would you collect from all nonemployees to enter the hospital for security reasons?

We can always check their ID and have them confirm they are who they say they are. We can also maintain a logbook (physical or digital) to log down the time, and reason for visiting.

We can also collect their cell phone number or email if we need to contact them.

• What kind of security would you have at the door (e.g., physical, ID badges, cameras)?

I will have a metal detector or a wand. If possible and luggage scanner can be placed by the entrance as well. Any food or food-like item, comfort item, or device will be checked once they pass the front door. We also verify the ID and badge before people can approach the front desk. A well-placed camera will record all everyone passing through the door. All other internal doors will require badge access with an appropriate access level

Maternity Unit

 From a security perspective, why is the placement of the nurses' station important?

The nurse's station provides an optimal vantage point. From the nurse's station, the staff can monitor and observe both the restroom, waiting room, stairs, and elevator. These are areas of high traffic and the position of the nurse station allows minimal staff to supervise such a large area.

This is also the reason why I enhance the nurse station with dual cameras, guard post with a metal detector.

• For security reasons, why do you encourage visitors to stay in designated areas or tell them where to go (e.g., signs, maps, paths, etc.)?

Wanderer may trigger an alarm or false alert. Over time this will be understood as usual and diminish the effectiveness of all security measures in place.

How do you secure the newborns from potential abduction and accidental switching?

We will tag the baby with a geofencing RFID tag along with the typical patient tag. We can also add a QR code on the tag, which is uniquely assigned to each baby. We can also impede the baby's biometric data in the QR code on the tag. Multiple cameras tightly supervise the nursery and requires a special badge to get access.

 Would different secondary ID badges for maternity ward employees be recommended, and why?

I would strongly recommend additional ID badges for maternity ward employees. As the security map depicts, other security elements are deployed in this ward. Having one ID badge that can access and go through all security measures does not spell security at all.

Furthermore, it might be straightforward to tell who works where after a while. However, a particular group of employees that often got overlooked, like janitors, or hospital administrators, may not have always had a uniform or scrub on. Therefore, an additional maternity ID badge can provide a second authentication method and be picked out by the camera.

Security Training

• What kind of security training would you offer to employee staff, and how often would it take place? Why?

Security training for staff will be broken down by scenarios, and team will go through each scenario and train on how to react to certain security risks and levels of severity.

Some examples are Insider threat awareness, how to trigger the alarm, and reporting possible risks; staff also get trained on suspicious behaviors to recognize red flags before they happen. Security training needs to be as often as possible, so I recommend a biweekly schedule.

Would the training be different for each group? How?

The training should be different for each group due to different areas of responsibility and different access authorization levels. However, this does not mean we cannot provide town hall training for all staff members. Certain specialties will require additional training depending on what security element got deployed on their floor.

For instance, every staff member should be familiar with the process of signing in and signing out every day, and which types of patients and visitors require an escort. However, a metal detecting drill should only be done with the security officer and not the nurse. Or geofencing RFID training needs to be especially indepth for maternity ward employees.