

WPV MITIGATION IS SITUATIONAL

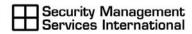
An Onsite Workplace Violence Mitigation Strategy for Hospitals Workshop

SMSI Inc. is offering a one-day workshop dedicated to the mitigation of Workplace Violence (WPV), by using the methodologies of **CPTED** (Crime Prevention Through Environmental Design) coupled with structured behavioral security awareness. *Informed security awareness programs will enlist the participation of all employees.* This workshop will be situationally driven, responsive to meet the specific and unique needs of your hospital. Therefore, the workshop will be conducted at your hospital at a date of your choosing. The determination of attendees will also be at the hospital's choosing. The C-Suite is welcome. To use a sports analogy, security is a team sport. Each security program is only as good as its weakest link. As opposed to <u>universal precautions</u>, hospital security is very much a <u>situational discipline</u>.

SMSI is uniquely aware of the potential of damage to a hospital's image, especially when a security event rises to the level of a **Sentinel Event**. Our role as forensic expert witnesses for cases involving both staff and patients continues to inform our <u>mitigation expertise</u>. To date, we have been retained in approximately 100 hospital litigations, including both employee and patient attacks. It is also important to note that hospitals employ many contracted employees (housekeepers, facility services workers, food service workers, ED doctors and others). This means that contract employees will frequently seek compensation for personal injury under the <u>hospital's liability coverage</u>.

Collectively, our SMSI team offers over 75 years of combined experience within the healthcare security environment. These experiential services include:

- Comprehensive security and loss prevention assessments for single hospitals, as well as large hospital groups.
- Hospital security system design support, including vendor interface





- The confidential sampling of employee perception using the SMSI Healthcare Likert • Scale
- The engagement of proactive support from local law enforcement jurisdictions •
- Review of efficacy of the employee background checking protocols •
- Ongoing security management support •
- Development of site specific security awareness programs •

Because Security is a Situational Discipline, it makes sense that mitigation preparedness training should be localized. When it comes to security, one size does not fit all. Therefore, this offering will be localized to the needs of your hospital by the inclusion of a site-specific CAP Index Crimecast Report. The implications of CAP Index data will be factored into our presentation and will begiven to the hospital.



Finally, what separates us from most of our competitors is that we are all CPPs (Certified Protection Professionals). Two of our team members are Certified CPTED Practitioners. It is important to understand that CPTED is one of the most costeffective security strategies. We urge you to google CPTED to learn more. CPTED (Crime Prevention Through Environmental Design). CPTED is an effective security methodology that acknowledges the important role of perception and its impact on the efficacy of every security program. CPTED has the potential to increase the deterrent value of every security program with very little added cost. Even NFPA 730 supports CPTED in its Guide for Premises Security.

To ensure the relevance of our onsite workshop, **SMSI Inc.** will post an online one-page Likert style rating scale for your employees to respond to. The Questionnaire will be posted online, and your hospital will be provided with a unique user-name and password, available to all employees.

This **Questionnaire** will provide our team with a random sample of employee attitudes and perceptions at your hospital, thereby ensuring that our one-day presentation germane to your needs. This guestionnaire will be posted in advance of our onsite visits.

The **Likert Questionnaire** asks the respondents to reply to various statements by choosing a number on a scale of 1 to 5, from Strongly Agree to Strongly Disagree. The questionnaire also





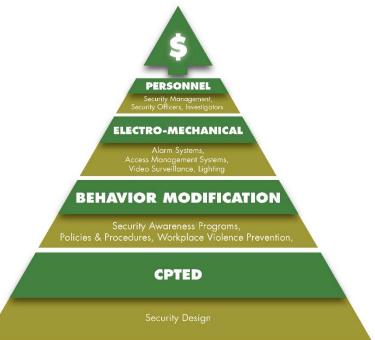
invites comments (many of which are very revealing). This **Likert Questionnaire** was developed by **Bill Nesbitt** and has been very well received and appreciated by all our clients.

To the best of our knowledge, no other firm has taken this approach. We have been using this Questionnaire for about seven years. *A few years ago, a_client in Georgia was not only pleased with this instrument, but he had a basis of comparison. This CEO sad that he had recently commissioned a similar survey, using a vendor that specialized in these services. The client informed us that he paid over \$12,000 for a similar survey, and yet our instrument was better and more informative.* We have also found that when employees' perceptions are considered, those employees will likely support the recommended solutions.

The **Security Solution Hierarchy** provides a structured cost-efficient roadmap for the prioritization of almost every hospital security program. This is not meant to imply that all four levels are always required. However, this Hierarchy presents a cost-effective model. *Please note that CPTED, coupled with employee participation, represents the most cost effective first*

step. The Hierarchy is structured to encourage the less costly remedies first. The application of all four levels may or may not be justified. However, in practice, we frequently find this hierarchy turned upside down, especially when the first option is to hire security officers. We believe **CPTED** should be the first option because of cost efficiency.

The essence of the program offered for consideration herein, will focus on the first two levels, CPTED and Behavior Modification. Behavior modification is applicable to all staff, as well as would be perpetrators, volunteers, and even patients.



SMSI, Inc. SECURITY SOLUTION HIERARCHY

Lacking the application of this

model, cost efficiency, as well as return on investment is diminished in the application electromechanical devices such as access control systems, locking systems, video surveillance, wayfinding aids, lighting, and visitor control systems and others.





Our Team of Presenters

William H. Nesbitt, CPP, Certified CPTED Practitioner

Bill is the president of SMSI Inc. He is an experienced security professional, having owned and operated his own guard company in the Midwest. He has held management positions with both ADT and Honeywell Protective Services. Bill has also been retained as a forensic security expert for a wide range of security litigations, including numerous hospital cases, covering over 30 states and Puerto Rico.

Bill has made several presentations to hospital groups over the last 30 years. As early as 1994, Bill provided instruction at the University of Wisconsin-Milwaukee. The topic; Security Strategies & Resources. Bill passed the first CPP Exam in 1976, and continues to maintain that certification. Bill is a member of ASIS International, ASHRM, SCAHRM, ACHE & IAHSS.

Lynda L. Buel, CPP, CFE, CSC, CPTED Practitioner.

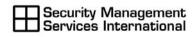
Lynda holds a BA in Criminology and Criminal Justice from The Ohio State University in Columbus, OH, and has more than 30 years of professional security management experience. Prior to joining SRMC, Lynda served in security leadership positions within the financial services and retail industries.

She has extensive experience in conducting security program reviews, vulnerability assessments, developing security related policies and procedures, conducting drills and training programs such as workplace violence prevention, and reviewing/recommending technology (access control systems, video surveillance, and alarms) for new facility/renovation projects for a broad range of clients. She serves as the "Virtual" Security Director for several organizations and is a member of the Corporate Threat Assessment Team (TAT) for a privately held organization with over 125 offices throughout the United States.

Lynda holds a Certified Protection Professional (CPP) designation from ASIS International (Arlington, VA), a Certified Fraud Examiner (CFE) designation from the Association of Certified Fraud Examiners (Austin, TX), and a Certified Security Consultant (CSC) designation from the International Association of Professional Security Consultants (San Francisco, CA). She is a Crime Prevention Through Environmental Design (CPTED) Practitioner, having received her designation through Florida Atlantic University School of Architecture.

Rose M. Miller, CPP, CHPA.

Rose is a staff consultant with SRMC. She is a graduate of Clarion University of Pennsylvania and received a Master's degree in Public Administration from the University of Oklahoma and a Master's degree in Strategic Studies from the U.S. Army War College. She has been in the security/law enforcement field for over 30 years. She is board-certified in Security Management





and is designated as a Certified Protection Professional (CPP) by ASIS International and a Certified Healthcare Protection Administrator (CHPA) by IAHSS International.

Rose's professional experience includes a 27-year career as an Army officer, retiring as a Colonel. During her career as a Military Police officer, she led military police and government civilian police in organizations ranging in size from 45 to 600 personnel. She has been responsible for law enforcement, criminal investigations, anti-terrorism, and security for multiple military facilities throughout the United States and in Germany, South Korea, and Afghanistan. She is a combat veteran of Operation Enduring Freedom in Afghanistan where she served as the Commander of a Brigade Task Force of over 600 personnel and as the Chief of Police for all U.S. Armed Forces in Afghanistan. Her last assignment on active duty was as the Chief of Police and Chief of Security, Force Protection, and Law Enforcement for the U.S. Army Material Command, a four-star general command of over 55,000 personnel. While on active duty, she received numerous awards, including the Bronze Star and the Distinguished Service Medals.

Rose joined MedStar Washington Hospital Center in Washington, DC in 2011, serving as the Director of Protective Services for a 926-bed Adult Level I Trauma hospital and its associated facilities. Along with her responsibilities for all security and police functions, she oversaw both parking and transportation services, each a multi-million dollar a year contract operation. During her tenure, she developed an unarmed police force and successfully teamed them with the hospital's armed police officers, implemented an automated secure visitor management system, reduced vulnerabilities and enhanced both security, patient and visitor satisfaction. In 2011, she was recognized by the Clarion University of Pennsylvania Alumni Foundation with the Distinguished Achievement Award and, in 2014, she was recognized by the Women's Security Council as one of seven top Women of the Year in the security industry

Summary

This one-day program is intended to take advantage of existing assets and strengths. It encourages the application of **CPTED** principals and other behavioral modification techniques. The goal is to leverage the hospitals existing strengths. Even if upgrades are under consideration, this program is a logical prelude. This one-day presentation will be modified to meet the individual and specific needs of each client hospital.

Clearly, there will be variations from one hospital to another, predicated on **CAP Index** data. There will be differentials between rural, urban and suburban hospitals. There be differentiated cultural variations to be taken into consideration. There will be variations between Level-1 trauma centers and lower levels of emergency services. These differentials, and others, will result in a program that meets the differentiated needs of each of our clients.





The qualifications of our team, and our diversity of experience, is second to none. We have provided in-depth security assessments for 500+ bed urban hospitals, as well as 36 bed rural facilities.

This educational offering given the potential seriousness of security failure is very cost beneficial. Typically, hospitals will send one or two managers to attend a national WPV Seminar located in a major urban center. This approach is practical for content pertaining to universal methodologies and solutions. However, when it comes to security, the objectives may be somewhat universal, but the application of mitigating security methodologies must be situationally determined. National seminars are aimed at upper and middle management because of cost effectiveness. The proposal herein is presented to respond to the unique needs of your hospital. This approach will also reach out to department heads and even shift leaders. Most importantly, because of the Likert Scale findings along with local CAP Index data, the oneday seminar will contain content that is site specific and responsive to the ambient threat environment.

<u>The cost of each one-day program will be situationally determined</u>. Call us, or e-mail us today with any questions you may have. We will respond with a site-specific proposal, which will include a **CAP Index Report** for your location(s), as well as our Likert Rating Scale. Remember. the chances of mitigating workplace violence are high if recognized during Stage 1, the incipient stage. We would be happy to provide a Proposal specific to your needs, including the Likert Scale Questionnaire and a CAP Index for your Hospital.

Respectfully submitted,

W.H. neotit

William H. Nesbitt, CPP Certified CPTED Practitioner Forensic Security Expert Visit Security Source Online on LinkedIn: http://www.linkedin.com/groups?gid=2068227

