Transforming Personal Safety for Healthcare Workers New Strategies for Better Outcomes



Why New Strategies are Needed to Protect Healthcare Workers

Violence and aggression against healthcare and social care workers continues to rise. The consequences for healthcare providers and hospitals include higher staff turnover, an increased recruitment burden, growing pressure on services, dissatisfied service users, and a vicious cycle of heightened stress and poor outcomes.

Workplace violence is now one of the biggest threats to healthcare services. We know it impacts so many different areas."

> Eric Clay, International Association for Healthcare Security & Safety



Therefore, new strategies are needed, and we are now seeing them being introduced.

This does not mean overturning the security investments already in place, ignoring the lessons of the past, or discarding expertise built over many years. But neither does it mean repeating the same strategies without innovation and expecting better results.

It is time to redirect resources to better effect. CriticalArc's work with healthcare providers in the U.S., U.K. and Australia is demonstrating how innovative strategies, taking advantage of powerful new technologies, can transform safety and security across the healthcare sector.

In this eBook we explain what these new strategies are, and show how they are being implemented. And we demonstrate how they are already improving protection for thousands of staff in hospitals, in local clinics, and in local communities.

The Challenge: Why it is Hard to Protect Healthcare Workers?

Staff are uniquely vulnerable to violence and aggression because of the work they do. They come into close contact with members of the public – patients, family, and friends – often during the most stressful circumstances, when they are at their most vulnerable and experiencing raised levels of pain, anxiety, or frustration.

Even when healthcare services are running smoothly, these heightened emotions can trigger a fight-or-flight response that leads to violence and aggression. But when systems are under pressure, as many now are, that risk is significantly increased.



As waiting times become longer, as people become more tired and stressed, the likelihood of verbal and physical aggression grows too.

In their front-line roles, hospitals and healthcare facilities are also affected by the problems and pressures present in the wider community – factors including the physical and mental health of the general population, attitudes towards authority, and the effects of inequality and social deprivation. And medical teams must always be ready to deal with the fall-out from major incidents and emergencies – situations that can place them at additional risk.

Heightened Risk Factors

Healthcare and care workers are at increased risk as a result of the routine activities they undertake:

- Working in complex healthcare environments in situations that take them out of direct contact with colleagues - from private consulting rooms, to quiet corridors and service areas, to parking lots and building exteriors.
- Working in local neighborhood facilities, alone or in small teams, without proximity support from security staff.

- Lone working in the community, visiting patients at home, traveling between locations.
- Attending emergency incidents as first-responders.
- Working with patients who present a higher risk, for example due to intoxication, mental illness, or malicious intent.

The need to work in these situations cannot be avoided, so more robust strategies are needed to mitigate the risks.

Wherever healthcare workers face higher risks, simply because of the jobs they do, employers have a duty of care to protect them.



The Key Focus for New Strategies

Successful reform programs being undertaken by healthcare providers point the way for heads of security and policing departments looking to develop better staff protection strategies.

They show that key areas of focus should include:

- Improving responder coordination, and incident visibility; extending officers' reach across entire estates, including multi-floor buildings and complex campus facilities; removing operational blind-spots; increasing the speed and effectiveness of officers' response to incidents.
- Extending lone worker protection to all staff, not just those judged to be most at risk; allocating budgets to solutions with better pricing structures that make this affordable.



- Providing staff with ubiquitous access to 'duress' emergency call facilities; extending protection to those working in local clinics and those making home-visits.
- Introducing systems to increase collaborative working between security and clinical functions; supporting prevention and de-escalation strategies.
- Improving staff confidence that calls for help will trigger rapid response; ensuring that not only are staff safer, but that they feel safer too.
- Automating reporting functions, making it less burdensome to track violence and aggression; enabling a more proactive approach to early intervention, prevention and risk mitigation.
- Ensuring effective systems for mass communications and targeted communications.



Overcoming the Limitations of Old Technology

Wired panic alarms are still used by hospitals, particularly at known risk points and in departments where staff and patient vulnerability is high. But dedicated wireless systems can be expensive to install and maintain; they need on-site servicing to keep them working properly; and even when working they may not be as effective.

But they do not have to be replaced. They can be integrated with new technologies, and given a more useful, extended role.

In most emergency situations today, the reflex action if somebody wants help will be for them to reach for their smart phone.

Leveraging Enhanced Value from Existing Measures

In most cases healthcare providers have well-developed security and safety infrastructures built on a foundation of access control, CCTV, fixed emergency alarms, 24/7 security officer, team communications and coordination tools, and lone worker systems.

Over the years, these technologies have been refined and developed in healthcare settings so that they play a vital role. But they come with a significant upkeep burden and must be maintained and periodically modernized to remain effective.

It is common for costs to build, and for organizations to be paying for tools and systems that are not fully used. Where systems are developed and added-to over time, they tend to become more complex and inefficient, with technology siloes developing that are harder to navigate and use.

This places a burden on operators, and leaves organizations overly reliant on members of staff who know their way around the systems.

So, there are major gains to be made from unifying and streamlining systems. Costs can be controlled, and the workload for operators can be reduced.

But the biggest value gains are to be made from introducing force-multiplier solutions that increase the capability of existing systems and resources, that allow them to be used more effectively, and that deliver powerful new functions in addition.

University department heads, including security leaders, are thinking beyond current capacities and are challenging their teams to develop the capabilities that will enable them to take on new challenges and responsibilities.



Providing a better emergency call solution, the multi-function SafeZone platform – with its powerful user app – enables rapid, appropriate action by emergency responders and gives full context with every call.

It shows dispatchers the exact, pinpoint location of the individual needing help. In multi-floor buildings where indoor positioning is used, locations are shown, right down to individual floor and room level. And security responders will also see exactly who the person asking for help is. In an emergency, it helps to know someone's name, and whether they have particular vulnerabilities.

The Benefits of **Cross-Department Buy-In**

As well as leveraging or updating their existing technologies, security and policing departments are also looking to get better results by building support among multiple stakeholders across their organizations, from department heads to frontline workers.

There are significant gains to be made by engaging more closely with staff at every level. For example, by ensuring faster, more consistent responses to calls for support, officers are building confidence and engagement among frontline staff. It makes them feel safer, and more likely to take an interest in security, and report concerns.

And by working more closely with managers across the organization, including senior clinicians, they are embedding a safety culture within every department rather than leaving it limited to the security or policing function.

Wider stakeholder buy-in is strengthening business cases, and cross-department advocacy is helping to unlock new budgets. Existing investments, for example in IT infrastructure, are being leveraged to deliver powerful new functions and benefits.

The message that 'security is everybody's responsibility' is now being heard and acted upon.

This buy-in is being further strengthened by providing clinical teams and other departments with new tools for easier resource coordination, reporting, and communications – as well as for lone-worker safety – tools and functions which are of real value to them.

SafeZone now delivers significant new value from IT investments, leveraging Wi-Fi infrastructure rather than needing repeaters or additional physical hardware. This is a powerful value-adding benefit that IT directors really love.



Improving Staff Safety, and Delivering Multiple Benefits

CriticalArc is working with health providers in the U.S., the U.K. and Australia, supporting them in developing new strategies to impact the problem of rising violence and aggression, and finally giving organizations the opportunity to reverse the upwards trend.

At a growing number of hospitals, SafeZone unified platform is transforming the capabilities of security and policing teams, enabling them to:

- Respond immediately to calls for assistance from healthcare workers in any location, including those working at isolated local facilities, or in the community.
- Automate and speed-up incident reporting, reducing paperwork burden, ensuring compliance, and capturing more complete and accurate data around violence and aggression.
- Visualize in real-time the exact location and availability of all their assets, deployed across complex and extensive sites; distinguish between officers, first aiders, fire wardens, volunteers and other support workers available in the field.



66 We see huge potential for other department heads to use SafeZone as well, to manage and coordinate their own resources. They love this technology – if we tried to take it away from them now, they'd really complain"

> Wayne Sherratt Trust Security Manager, Kent Community Health NHS **Foundation Trust**

- Coordinate incident responses through an efficient unified interface, instead of relying on a series of radio calls and acknowledgments.
- Direct resources with command & control technology during emergency incidents and see staff respond in real-time to commands and adjust as circumstances change.
- Reduce response times to incidents. for better outcomes.
- Send targeted communications to specific groups or to those in a particular geographic area, impacted by an incident.
- Analyze and improve the deployment of officers, leveraging new operational insights to maximize impact.
- Promote multi-stakeholder engagement in security and safety, with cross-department support driven by new benefits in strategic areas including: staff recruitment and retention, facilities management, clinical resource management, and corporate communications.

Ensuring 24/7 Protection and Response

Security and policing departments can add a new layer of protection for their organizations and their people, with the option of 24/7 monitoring support now available to CriticalArc customers from global monitoring leader Chubb.

This option lets SafeZone customers access expert, back-up services to support, or when necessary replace, their own response teams. It the the assurance of accredited, outsourced response to alarm activations from a trusted service provider.

And organizations can tailor the service to match their needs, from a complete round-theclock service to failover back-up of in-house operations during peak times and out-of-hours.

The Role and Value of Local Alliances

Alliances between SafeZone organizations are growing and thriving in various cities and regions. This development is allowing organizations to extend protection to each others' users when those individuals are travelling and working between sites – whichever SafeZone customer is closest, that team provides the first response.

For example, universities with medical students can now ensure immediate on-site support for those individuals when they are working on placement in hospitals.

In this way, organizations with a mutual interest in meeting duty of care responsibilities, and improving recruitment and retention, are working together to optimize their resources and ensure the best outcomes for their people.



Take Safety to the Next Level

CriticalArc is helping security and policing leaders across the healthcare sector to transform their operations. We don't just sell a technology and service, we give our customers strategic support, practical help, and the benefit of our extensive support network with every step.

Let us be a part of your success too – get in touch to have your questions answered and to learn how SafeZone can support your institution.

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