The Who, Where and Why of Hospital Security

David Stallsmith

Annual Conference 2024 Building the Future of Health Together

HIMSS NORTH CAROLINA CHAPTER



Presenters



David Stallsmith Director of Product Management -ColorID **Presenter 2** Title - Organization **Presenter 3** Title - Organization **Presenter 4** Title - Organization

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Agenda

Physical Security in Healthcare Systems Physical credentials - "badges" What can we do? Live polling throughout

Learning Objectives

1 - Why the who, where and why of physical identity matters

2 - How gaps between systems that manage people in your institution can create vulnerabilities, leading to harm

3 - Ways to pre-emptively identify and prevent workplace violence

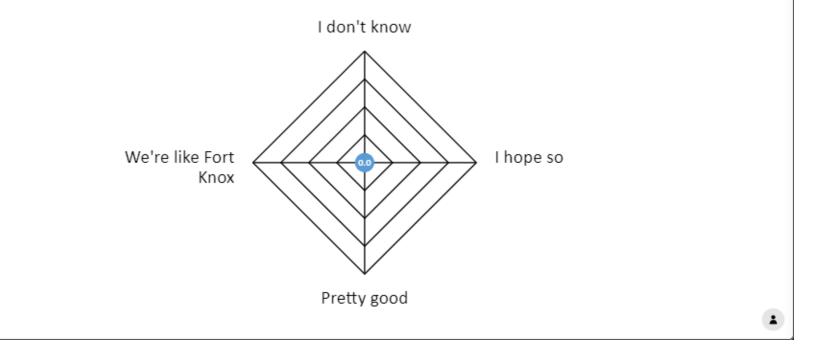
4 - How security directors at other hospitals are approaching system integrations to improve security and reduce vulnerabilities

5 - What can go wrong if identification methods and procedures are insufficient or ineffective?

POLL QUESTION

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Does your institution do a good job with security?





PHYSICAL SECURITY IN HEALTHCARE

Knowing who is in your buildings – physical presence

Medical staff

Other staff

Patients

Visitors

Contractors

PHYSICAL SECURITY IN HEALTHCARE

Why physical security is different than Information Security

A nice person can hold open a locked door Is there a plan for managing persons onsite? Everybody in the building

Who needs access, and to what?

Who needs to be tracked?

Entry/Departure

More information

By person, role, activity



SYSTEMS

Physical Access Control System (PACS)

Usually managed by camera and door people Cameras are primary focus of the PACS Control locked doors Issue badges May have visitor management system(s)

Often standalone



Everything else – HR, EHR, SSO, payroll, infant, cafeteria, gift shop, parking, narcotic management...

INTEGRATIONS

Systems need to communicate with each other

Physical Access Control Systems know a lot about people onsite

PACS often do not communicate well with other systems

Systems tend to reflect their managers' preferences

HR and other systems can identify a problem

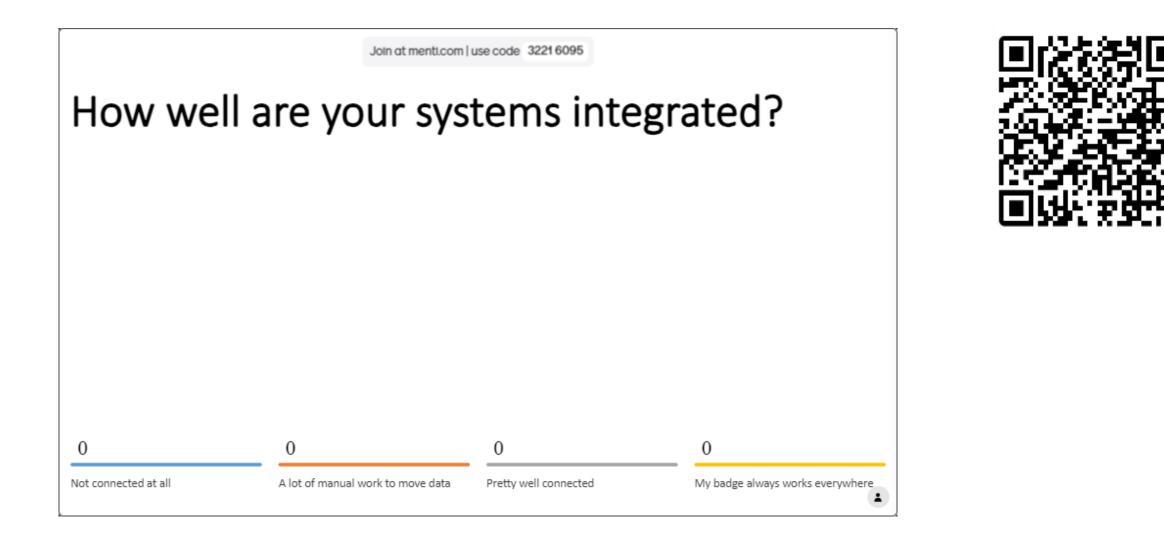
The PACS can use this information to automate identification

Through cameras and badge use

Badges are often the single point of integration between systems



POLL QUESTOIN



BADGES

Look at this list again:

HR, EHR, SSO, payroll, infant, cafeteria, gift shop, parking, narcotic management... Badges provide access to all these and more

Badges are often the single point of integration between systems

RF chip, barcode, mag stripe, visual information



BADGE MANAGEMENT

Who gets an ID badge?

Badge issuance

Onsite or remote p	photo capture
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Security of badge production and issuance process

Identity verification

Travel to obtain a badge

Once a badge is issued, the badge and person are trusted



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Are your badges secure?

No	
I think so	
Everything works pretty well	
My badge and credentials always work everywhere	
Strongly disagree	Strongly agree



Encrypted card data

ID number

High frequency – 13.56 MHz (NFC, contactless smart card, MIFARE, iCLASS)

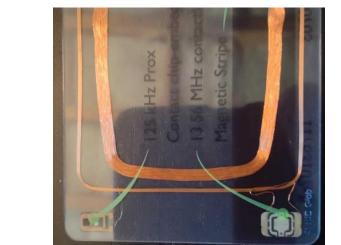
BADGE SECURITY

Bar codes

Mag stripes

Radio frequency chips

Prox – 125 KHz (prox, proxy, Wiegand)





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CARD READER SECURITY

Prox readers

At doors

SSO

High frequency readers

Often more secure than prox

More difficult than prox to use with multiple systems

Reader to system connections

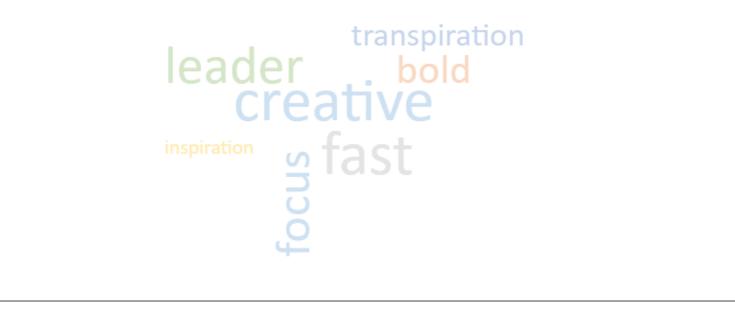
Real vulnerabilities





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What can go wrong with an insecure badge?





HOW TO IMPROVE OUR PHYSICAL SECURITY?

Physical Security needs updates and upgrades, just like digital security

Deferred maintenance has been the strategy

Security is like insurance – don't want to pay for it until you need it

Physical Security Systems need to be connected to other systems

Badges are used throughout the institution, with many systems

Communication leading to action is crucial

People - department to department

System to system

Get everyone together for discussion and planning

LAST QUESTION



Questions



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Abstract

Who is in your hospital, where they are and why they are there are questions that physical access systems seek to answer and manage through assigning roles, policies and permissions.

Getting these right can help prevent workplace violence, secure assets and persons, and support contact tracing. However, access control systems do not always communicate well with infant security systems, visitor management, badging and other systems that are crucial to securing a healthcare institution. The spaces between independent systems can create vulnerabilities for physical security.

Bring your ideas, stories and questions to our open forum discussion, which can include ways to improve new hire satisfaction and inclusivity in the badging process, manage visitors and patients, prevent spread of infection, and automate communications between hospital systems so identity data and the people it represents can get where it needs to go, and fast.