

Reference FOI/2019/205

Number:

From: Other

**Date:** 20 May 2019

**Subject:** Healthcare Security Management

- Q1 I am writing to you under the Freedom of Information Act 2000 to request the following information from the manager responsible for Security Management within your NHS Trust:
  - Job titles and responsibilities within the Organisation (for Benchmarking)
  - SIA licencing status
  - Professional reflection of NHS Protect ASMS/LSMS training
  - What Security Management Standards are applied within your NHS Trust
  - Whether your Trust utilise contracted or in-house staff
  - Whether your Trust utilises Criminal Justice and Immigration Act legislation (sections 119 and 120)
  - What qualifications and competencies your Security Management staff hold (anonymised)
  - Utilisation of the legacy NHS Protect Self Review Tool (SRT)
  - Responsibilities held by the LSMS/Security Manager of your Trust
  - Professional opinion of the required learning content of a Healthcare Security Management qualification.

Please provide the information in the form of completing the relevant surveys.

A1 See attached - FOI2019205 Healthcare Security Management FOI - Accredited response

Please note - Historically LHCH did have a SMD for security. Since the individual left no other Executive took over the responsibility as it is no longer required. Since the demise of NHS Protect we are no longer contractually obliged to have a Security SMD in place.

### Part 1: Healthcare Security Management (England) Research Survey (Accredited LSMSs)

This survey is solely for <u>Accredited</u> LSMSs. For Non-Accredited Healthcare Security Managers, please completed the *Healthcare Security Management (England) Research Survey (Non-accredited Healthcare Security Managers)* survey.

There are specific complimentary surveys for this operating as Healthcare Security Managements who are practicing without the accredited qualification, and also for SMDs.

Since the disbanding of NHS Protect there are a number of questions from the industry in terms of governance, training and competency.

For the research and dissertation module of my MSc, I intend to evaluate the effectiveness of NHS Protects legacy arrangements with regards to competency and governance of Security Management in the NHS in England.

Your time in this concise, 10 short question survey will be invaluable to both my research and the industry. I will make the findings of this survey available (anonymised) via the National Association for Healthcare Security (NAHS) and the FutureNHS Collaboration Platform for NHS Security Managers to refer to.

This survey captures no personal data and as such does not breach any Data Protection legislation (DPA 2018/GDPR).

This survey has been assessed and deemed appropriate in terms of ethical impact.

Anyone wishing to provide further information relevant to this survey may do so by emailing the researcher.

There are two parts to this survey.

Q1

Do you hold an Accredited Local Security Management Specialist (ASMS/LSMS) qualification?

Yes	No

Q2

Do you hold an SIA Licence?

Yes	Yes	No	No
Frontline	Non-frontline	Expired	I've never been licenced

Do you believe that the NHS Protect LSMS/ASMS training was comprehensive enough to produce competent Healthcare Security Managers?

Yes	Yes	Neutral	No	No
It was	It was effective	It covered	It did not give me the	It was wholly
comprehensive	as a foundation	some of the	competencies I	inadequate
enough to	course	aspects, but	required	
meet the		could have		
required needs		gone further		

## Q4

What standards do you as a healthcare security manager work/refer to?

Legacy NHS Protect	PD CEN/TS 16850:2015	ISO/BS	Other

## Q5

Do you, or any of your staff operate under the 'in-house' exemption of SIA licencing?

Yes	No

## Q6

Does your organisation utilise the CJIA (sections 119 and 120) legislation to remove nuisance persons from site?

Yes	No

### Q7

In your organisations security department, how many staff are in-house, and how many are contracted in?

In-house (Directly employed by the	Contracted (Not employed by the
Trust/Organisation)	Trust/Organisation)
(Number)	(Number)
5	0

Do you, as an LSMS/Security Manager, hold duties in addition to security management? (e.g FM/EPRR/H&S etc.)

Yes	No
(If yes, please detail below)	

#### Q9

What relevant Security Qualifications do you hold, or are you studying for? (these may be as a practitioner (CCTV qualification) or as a manager (e.g. Foundation Degree in Security Management), please include relevant periphery qualifications such as NEBOSH, Business Continuity, MSc Healthcare Leadership & Management etc.)

Local Security Management Specialist Accreditation training NHS Protect Portsmouth University

Sport Science and Management Degree Nottingham Trent University

Fire Safety and Risk Management NEBOSH

#### Q10

Does your Organisation believe that the NHS Protect Self Review Tool (SRT) was adequate as a tool to complete a self-assessed continuous improvement framework and benchmark?

Yes	Yes	Yes it was	No	N/A: I am not
It was useful and should still be used	It was useful, but it is no longer required. It should not be revisited	useful, but would benefit from modernising	It has had its day and is irrelevant now	aware of this tool or its appropriateness

Please now move to Part Two below.

### PART 2: Healthcare Security Management (England) Research Survey (Learning Content)

For a number of years NHS Protect and the NHS SMS delivered LSMS training. This was subsequently adopted by the Security Management Professional Accreditation Board.

Using the Model of KATE to assess competence (Knowledge, Aptitude, Training and Experience), and so it is suggested that learning is an essential foundation to an individual to assume responsibilities of security management within an NHS Trust in England.

This survey looks at the broad areas, or Learning Outcomes (LOs), required to allow Healthcare Security Managers to start with a base knowledge to allow a firm foundation prior to adopting the role of Security Manager within the NHS in England in the broadest term and assuming the individual may come from outside of the health industry, or from a non-security background.

Your time in this concise, 10 short question survey will be invaluable to both my research and the industry. I will make the findings of this survey available (anonymised) via the National Association for Healthcare Security (NAHS) and the FutureNHS Collaboration Platform for NHS Security Managers to refer to.

This survey captures no personal data and as such does not breach any Data Protection legislation (DPA 2018/GDPR).

This survey has been assessed and deemed appropriate in terms of ethical impact.

Anyone wishing to provide further information relevant to this survey may do so by emailing the researcher.

Please score the following questions based on the following system:

- 3 = Essential
- 2 = Desirable
- 1 = Not required
- 0 = Irreverent

# Law and Legislation:

Response	Tick
Essential (3)	
Desirable (2)	
Not required (1)	
Irrelevant (0)	

# Q2

# Threat Assessment and Risk Management

Response	Tick
Essential (3)	
Desirable (2)	
Not required (1)	
Irrelevant (0)	

# Q3

# **Corporate Security Management**

Response	Tick
Essential (3)	
Desirable (2)	
Not required (1)	
Irrelevant (0)	

# Q4

# Healthcare Leadership and Management

Response	Tick
Essential (3)	
Desirable (2)	
Not required (1)	
Irrelevant (0)	

# Q5

# Information Security (Cyber) Management

Response	Tick
Essential (3)	
Desirable (2)	
Not required (1)	
Irrelevant (0)	

# Security Governance and Compliance

Response	Tick
Essential (3)	
Desirable (2)	
Not required (1)	
Irrelevant (0)	

## Q7

Emergency Planning, Resilience and Response (EPRR)

Response	Tick
Essential (3)	
Desirable (2)	
Not required (1)	
Irrelevant (0)	

#### Q8

Business Management (SFIs, Business Plans etc.)

Response	Tick
Essential (3)	
Desirable (2)	
Not required (1)	
Irrelevant (0)	

## Q9

What other areas does your organisation deem are essential to see on a training course, or program, to give the foundations to a new practitioner entering Healthcare Security Management, whether that be from within the healthcare environment, from outside of healthcare, from a peripheral sector (FM, Risk, H&S etc.), or coming from the frontline ranks of security?

Conflict resolution training	
RIPPA	

Finally, to quantify your response, what relevant security qualifications do you hold (if any), or are you studying for?

(these may be as a practitioner (CCTV qualification) or as a manager (e.g. Foundation Degree in Security Management), please include relevant periphery qualifications such as NEBOSH, Business Continuity, MSc Healthcare Leadership & Management etc.)

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