

Transition from the Traditional

Security and access control systems should be well-integrated and structured to move your facility into the future with confidence.

By Andrew Adams

RURAL AMERICA IS HOME TO baseball, Mom's apple pie and IP security cameras that are synchronized with 1,200-pound magnetic door locks, automated messaging systems and sophisticated employee badge software. So, what do baseball, apple pie and security systems all have in common?

Nothing much, other than emphasizing how traditional rural America is changing — especially in health care. Today, with a sense of heightened national security, as well as strict JCAHO and HIPAA Security regulations, the health care industry's traditional mod-

els are being challenged. Systems installed between five and ten years ago may be of little or no value today in your facility. IP surveillance and new IP access control systems are just a few of the many solutions now helping to beef up security in health care.

At the same time, Security departments are spending more and more time visiting IT departments — not because IT has all of the cool technological gadgets, but because IT is becoming a normal part of Security's workday. Five to ten years ago, cameras in health care simply recorded onto VHS tape...just in case you needed a legal review of a specific event. Of course, quite often the tapes were of such poor quality that they had to be professionally enhanced just to make out a person's face. In addition, you had to review hours upon hours of tapes unless you knew the exact time of the event. And the ability to record an event based upon some foreseeable trigger was unheard of with older, traditional systems.

The move to new systems

Admittedly, many small health care systems may not have the security personnel to staff a 24 x 7 surveillance management system. However, new systems can be configured to alert guards when particular events occur. They can even be configured to alert a second guard if the first guard is late making rounds, or has not checked in to a designated area by a certain time. Security becomes a priority in real time, not retrospective as in traditional systems.

Access control systems, IP security cameras, advanced badge software and digital video recording systems are rapidly replacing traditional security systems. Security staff must receive extensive training on how to work effectively with the new systems. Often, three or four separate cables run to each door in order to handle data traffic and power; each door is con-

trolled by a box mounted in a nearby closet. All of these control boxes are daisy-chained together. Keep in mind that the cameras, too, are completely separate and mounted on their own wiring infrastructure. Overall, what used to be basic systems supported by Maintenance or Security, are becoming more technologically advanced and supported by IT.

Hospitals should quickly re-evaluate traditional security systems and limitations. New IP-based cameras and advanced IP access control systems are now widely available and more easily integrated with existing IP infrastructures, servers and storage area networks. These new systems are simple in design and often much cheaper to support than traditional systems.

The new system may require multiple power sources and cameras to be run to each door rather than using power drawn from the Ethernet. Multi-facility health systems may even be persuaded to install multiple or duplicate systems to deal with wide area network challenges. And just imagine how many cable drops a vendor could run from a control box to a door or camera, when each sensor needs a separate data path and each control box has to be connected to other boxes on the network.

Security and access control systems should be part of a healthy HIPAA security plan. The products should be well-integrated and structured to move your facility into the future with confidence. A security audit through the eyes of technology integrator rather than a traditional security company could provide valuable insights. **HIE**

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