Why it’s Critical to Take a Multi-Faceted, Multi-Layered Approach to Mass Notification

By Jim Stankevich

The size, scope and inherently open nature of hospitals and healthcare facilities make them particularly challenging cases for notifying the masses of an event or incident.

Hospitals face myriad threats from inside and outside, and thus need to be able to communicate quickly, accurately and effectively when faced with a crisis. It would seem that communication today would be easier than in the past because of the use of cell phones. After all, who doesn’t have a mobile phone with them these days?

However, unlike schools and their staff, to which hospitals are often compared when reviewing security concerns, hospital personnel don’t always have or are even allowed ready access to their personal phones to receive text or voice messages, nor are many of them likely to be sitting at a desk viewing their email or viewing social media.

Instead, the bustling healthcare setting requires a multi-faceted, multi-layered network-based mass notification process so staff, patients and visitors can receive targeted, accessible information. A process like this is crucial regardless of whether there is an active shooter in the emergency department, a weather-related situation that requires action involving the whole complex and its inhabitants or a domestic dispute incident affecting specific patients, visitors or staff.

Currently many healthcare facilities are opting for text-based notification systems, which are sometimes funded by grant monies, and can work well enough if staff members have a hospital-issued phone readily available or if they are allowed to use their personal phone on the job. But some healthcare organizations don’t allow the use of personal phones being used at work, thus eliminating this major means of crisis communications.

Another traditional way of alerting personnel has been via public address announcements (PA) using a series of codes or fictional names or codes to alert them about a particular situation. Since hospitals have PA systems that reach almost every area within the facility this is still a viable way to notify those within the building of a situation. The PA may not be ideal for every emergency situation but it is used often every day and should be connected to your automated mass notification system for that should be communicated via the PA as one means of notification.

Even when healthcare facilities have mass notification protocols in place, if the messaging can’t be delivered in a timely manner, or isn’t read immediately on a
phone or email, the effectiveness is lost. Having to send messages by text or email can mean a notification that needs to be delivered quickly so staff can react accordingly is taking too long to be disseminated among the long list of employees and staff who need to receive it. And once sent, the message could sit in someone’s inbox for minutes or even hours before they have the opportunity to see it.

Thus, a multi-layered approach tied in with a network-based access control system is critical in a setting where people are constantly on the move. Along with individual texts and emails, messages that appear as a pop-up message on computer screens at nurses’ stations even when logged off and on computers and tablets used on mobile workstations within patients’ rooms can better convey a message during a crisis. Likewise, with a highly critical situation such as an active shooter, a mass notification system should be able to incorporate a public address, visual public monitors throughout the facility, SIP IP phone system, and radios used by security personnel to reach the most people in the quickest manner possible.

An effective mass notification system should also be a “two-way system,” so personnel who are in a duress situation or are seeing a crisis unfold have the ability to send an alert to get help, not just receive an alert. With some systems, the ability to send such a message can be as simple as using two keys on a computer keyboard that, when used together, constitute a panic alarm. Additionally, computer screens or phones can be set up with icons that when used, trigger a panic or notification alarm as well.

These types of alerts not only work well in that they quickly disseminate information from someone in crisis to the appropriate responders, but if that person is being confronted by an abuser or someone who is armed, it is much less obvious to press a couple of keys than it is to pick up the phone and call for help which might escalate the situation with the person listening to the call.

Additionally, highly useful mass notification schemes are being tied into access control systems and other security monitoring systems such as video surveillance, HVAC, fire and burglar alarms, and infant abduction systems to provide a holistic approach to security.

An employee in the emergency department who is dealing with a potential gang confrontation has the ability, through the push of a button, to alert security and activate video of the incident or even lockdown doors. And if an infant abduction alarm sounds, through the integrated mass notification system, security has the ability to send messages to key personnel around the facility or within the parking structure so the chances of that child being removed from the premises is greatly reduced as well as to lock specific doors and view relevant video.

Of course, a system is only effective if everyone is familiar with it and it is working properly. It is important, therefore, to make testing and supervision of the mass notification system a requirement of the product. This not only keeps it working for
when it’s desired most, but also reminds hospital staffers that they have this vital tool readily available should they need it and how to use it.

Domestic violence is a major concern for workplaces, hospitals and healthcare facilities included. Increasingly, these stakeholders are investing in mass notification systems with panic alarms as a proactive means of protecting their workers. Some even view this as an employee retention tool because it provides a level of safety and security that eases employee concerns.

Despite the overwhelming need for critical communication, many healthcare settings have yet to install a comprehensive mass notification/duress system, one that provides multiple means of reaching people when a crisis occurs. Security personnel can surely make the case that stopping just one infant abduction or quickly addressing a single incident of workplace violence through an effective, multi-layered, integrated mass notification scheme will justify this critical investment.

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