Effective: 30 November 2016

Access Control Procedure

1. Guiding Principles

As part of the WA Country Health Service (WACHS) security risk management process, the responsible person is, in consultation with employees, to ensure that:

- all reasonably foreseeable security risks associated with access to workplaces, are identified, assessed and eliminated where reasonably practicable or
- the risks associated with access to workplaces are effectively controlled.

In general, effective access control involves:

- appropriate securing of perimeters, including doors and windows
- appropriately controlling access to the land on which the facility is situated i.e. roads, fences, traffic and pedestrian access and traffic flow
- providing safe access, especially after hours and during emergencies
- controlling access to vulnerable areas
- · clear facility signage
- appropriate staff identification systems that allow employees to be identified.

If an upgrade to a facility is planned, the specifications contained in the <u>Australasian</u> Health Facilities Guidelines (AFHG), Part C – Design for Access, Mobility, OHS and <u>Security (2010)</u> is to be adopted.

2. Procedure

The type and level of access controls for WACHS facilities will depend on the risk of unauthorised entry, including break and enter, and the risks to people and property such unauthorised entry may pose.

The risk of unauthorised entry may be determined by the nature of the items stored on the premises, for example, medication, cash, confidential information and the nature of work performed at the premises such as cash handling, syringe dispensing service, emergency and mental health services.

A risk management approach to controlling access to facilities is recommended when determining the nature and level of access controls required in accordance with the WACHS <u>Risk Management Policy</u> 2012.

To apply the risk management approach to access control, the responsible person is to consider the following strategies, adapted from the AHFG.

2.1 Design Issues

This procedure is supported by the <u>WACHS Video Surveillance Policy</u> and the <u>WACHS Key Control Guideline</u>. Combined, these documents form part of a defensive strategy known as Crime Prevention through Environmental Design (CPTED) (see Part C of the AHFG, section 4, for more detail on this concept).

2.2 Doors – Single Entry Point

- Perimeter doors are to be locked and access restricted to a single point of entry after hours, at a time specified by the responsible person.
- Any after-hours public entry points are to be access controlled i.e. airlocks where possible, and fitted with surveillance and intercoms to allow screening of persons presenting at the door.
- The facility is to remain locked until a time specified by the responsible person.
- Those employees requiring after-hours access are to enter through a point designated by the responsible person, and
- · Access to the building is not to override the Disability Access Inclusion Plan (DAIP).

2.3 Doors - Perimeter

- All external openings to the facility are to remain locked at all times to prevent unauthorised access. (See WA Health <u>Protection and Response to a Chemical</u>, <u>Biological</u>, <u>Radiological and Nuclear Incident</u>.)
- A risk assessment may indicate a need for perimeter doors to be alarmed back to a monitoring station to prevent unauthorised access.
- Any after-hours public entry and delivery points are to be access controlled and fitted with surveillance and intercoms to allow screening of persons presenting at the door.
- Glazing in doors and panels beside doors must be impact resistant and not shatter when force is applied.
- All designated fire exit doors (required exits) are to be capable of being opened with a single handed movement and must meet the requirements of the Building Code of Australia and AS4145.2-2008/Amat 1-1996 Locksets - Mechanical locksets for doors in buildings e.g. lever action handles, and
- Keys and other locking systems, for example swipe and proximity cards and digital locks, must be managed according to the requirements of the WACHS <u>Key</u> Control Guideline.

2.4 Windows

Due to security risks, all external openable windows are to be regulated by the use of a key operated lock managed by employees. In addition and where determined by risk assessment, such windows are to be fitted with intruder protection, which might consist of:

- reinforcing windows with a security film to resist unauthorized entry
- the fitting of a screen or grille or
- laminated glass.

2.5 Signs

- Signs are the first line of defence against unauthorised access as they identify those areas where people are not permitted to enter.
- Areas where access is restricted to staff only are to be clearly delineated.
- Restricted access areas are to contain signage requiring employees to wear identification badges and be supported by procedures requiring staff to seek confirmation of the identity of any unidentified persons in the area.

2.6 CCTV

- After hours secure entry points are to be fitted with CCTV and a means of two way communications with persons outside the facility. (See the WACHS <u>Video</u> Surveillance Policy for more detail).
- The CCTV systems are to be capable of capturing quality images that can be readily retrieved.

2.7 Staff Identification System

- The responsible person is to ensure that employees are issued with an identification badge that meets the requirements of the WACHS <u>Staff Identification</u> Procedure:
 - Serial number
 - Photograph of the holder
 - Signature of the person authorising the issue
 - Conditions of issue
 - Instructions to finder, and
 - An expiry date.
- Staff identification badges are to be worn visibly and fitted with at least a two point break away lanyard.
- WACHS approved contractors may be issued with a staff identification badge, which is to, in addition to information above, contain the word 'Contractor' in bold type at the foot of the badge.
- Employees are to be trained in how to manage any approach to an unauthorised person in a restricted area as part of violence and aggression education.

2.8 Visitor Entry

- The responsible person is to implement appropriate visitor access to the site practices.
- Any visitor seeking access to a non-patient area must be escorted to the location and supervised where appropriate.
- The responsible person is to ensure that visitors, unless they will be in the company of a responsible person at all times, are issued with an identification badge that clearly identifies them to employees as a 'visitor' unless they have been previously issued with contractor identification card.
- Employees visiting WACHS sites are not considered to be visitors for the purposes of this policy but will be required to display their staff identification card/badge.
- Visitors who have been issued an identification badge must:
 - identify themselves to the responsible person
 - state the purpose of their visit

2.9 Reporting Security Risk Events

Any security risk identified through a breach of this procedure shall be notified to the responsible person using the WACHS <u>Safety Risk Report Form</u> in accordance with the WACHS Safety Risk Reporting Procedure.

3. Definitions

ССТУ	means a closed circuit surveillance system consisting of strategically located cameras and a monitoring station	
Electronic access system	means a swipe or proximity card system that may also be part of a staff identification system	
Responsible person	in the context of this procedure means:the line managerthe person in control of the workplace where this is not the line manager	
Security risk management process	This includes any building either owned or leased by WACHS for the provision of services either clinical or administrative	
Visitor	Any person, for example, a contractor, requiring access to non-patient areas of a WACHS facility	

4. Roles and Responsibilities

Please refer to the WACHS <u>Security Risk Management Policy</u> for identification of Roles and Responsibility.

All Staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

5. Compliance

It is a requirement of the WA Health <u>Code of Conduct</u> that employees "comply with all applicable WA Health policy frameworks."

A breach of the Code may result in Improvement Action or Disciplinary Action in accordance with the WA Health <u>Misconduct Policy</u> or Breach of Discipline under Part 5 of the *Public Sector Management Act*.

WACHS staff are reminded that compliance with all policies is mandatory.

6. Evaluation

The OSH Coordinator is to present a report to the Regional Executive as required showing security-related trends reported relating to access control issues.

7. Standards

EQuIPNational Standards – Standard 15: Corporate Systems and Safety - 15.16.2, 15.7.

8. References

<u>Australasian Health Facilities Guidelines (AFHG), Part C – Design for Access, Mobility, OHS and Security (2010)</u>. HCAMC and UNSW, Sydney, NSW.

Health Reform Implementation Taskforce (2006). Policy advice to Area Chief Executives – application of National Health Facility Guidelines to WA public sector health system.

WACHS Risk Management Policy 2012.

<u>Protecting People and Property: NSW Health Policy and Guidelines for Security Risk</u> Management in Health Facilities (2013). NSW Department of Health, Sydney, NSW.

Standards Australia, (1997). <u>AS/NZ 4485.1:1997 - Security for Health Care Facilities</u> (General Requirements). Homebush, NSW.

Standards Australia (1997). <u>AS/NZ 4485.2:1997 Security for Health Care Facilities</u> (Procedures Guide). Homebush, NSW.

Standards Australia, AS/NZS ISO 31000:2009 - Risk Management. Homebush, NSW.

WACHS Disability Access Inclusion Plan

9. Related Forms

WACHS Safety Risk Report Form

10. Related Policy Documents

WACHS Key Control Guideline

WACHS Safety Risk Reporting Procedure

WACHS Security Risk Management Policy

WACHS Video Surveillance Policy

WACHS Staff Identification Procedure

11. Related Policies

WA Health <u>Protection and Response to a Chemical, Biological, Radiological and Nuclear Incident</u>

This document can be made available in alternative formats on request for a person with a disability

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