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Edition 14

Security Focus

Tiaa celebrates!

Tiaa achieves Corporate Membership of the Security Institute

Twenty five years of change since 9/11

Know the facts

Winter challenges

Advice and Support

Welcome to Edition 14 of Security Focus, our Healthcare Security Quarterly.

This edition reflects on how healthcare security continues to evolve in response to changing threats, operational demands and societal challenges. As we mark the 25th anniversary of 9/11, we look back at the transformation of healthcare security over the past quarter-century, exploring the shift from a largely reactive focus on violence, theft and safeguarding to a modern discipline encompassing protective security, behavioural threat management and organisational resilience.

Celebrating the success of becoming Corporate members of the Security Institute, our Security Advisers also achieved the latest Home Office approved qualifications in Counter Terrorism Protective Security and Preparedness.

With winter fast approaching, we also examine the seasonal challenges faced by healthcare security teams. From rough sleepers seeking shelter in hospital grounds and service areas, to increased aggression associated with winter pressures, reduced daylight, vehicle crime and severe weather, we explore the practical steps organisations can take to maintain safe and secure healthcare environments throughout the colder months.

As always, we hope these articles provide useful insights, stimulate discussion and support colleagues in meeting the challenges ahead.

Stay safe and thank you for reading.

Tiaa achieves Corporate Membership of the Security Institute

We are delighted to announce Tiaa has achieved Corporate Membership of the Security Institute, the UK's leading professional body for security practitioners. This recognition reflects our ongoing commitment to delivering high-quality security advice, maintaining professional standards, and ensuring our Security Advisers can offer the highest quality advice and support.

Corporate Membership demonstrates that Tiaa operates in alignment with recognised industry best practice and reinforces our dedication to supporting clients with trusted, professional, and forward-thinking security solutions. This achievement is an important milestone as we continue to strengthen our credentials and contribute to creating and maintaining a pro-security culture across our client organisations.





Home Office-approved Skills for Justice Level 3 Award in Counter Terrorism Protective Security and

This nationally recognised qualification equips security professionals with the knowledge and skills to assess counter terrorism risks, identify protective security measures, and support organisations in strengthening their preparedness and resilience.

All members of the Tiaa Security Advisory team have successfully completed the CTPSaP training programme and assessment process, with formal confirmation of results currently awaited from the awarding body.

Completion of this qualification pathway demonstrates Tiaa's commitment to maintaining the highest professional standards and ensuring our clients benefit from up-to-date, expert advice on protective security, organisational resilience, and emerging terrorist threats ahead of the implementation of Martyn's Law in April 2027.

25 Years of Change Since 9/11

The 25th anniversary year of 9/11 provides an opportunity to reflect on how security has evolved over the last quarter-century. For healthcare organisations, this period has seen a significant shift from traditional security concerns such as violence, theft and access control towards a more integrated approach encompassing protective security, counter terrorism, safeguarding, behavioural threat management and organisational resilience.

In parallel with changes to the wider UK threat landscape, healthcare security professionals have had to adapt to emerging risks, including terrorism, major incidents, public disorder and increasingly complex threats to staff and patients.

Then: Violence, Theft and Safeguarding (2000-2010)

At the start of the century, healthcare security was primarily concerned with:

- Protecting staff from violence and aggression.
- Reducing theft of equipment and NHS assets.
- Securing medicines and controlled drugs.
- Safeguarding vulnerable patients, newborns and maternity services.

The creation of the NHS Security Management Service by the Secretary of State in 2003 brought a coordinated national approach, introducing the mandatory roles of Local Security Management Specialists (LSMS), Security Management Directors (SMD) and large-scale conflict resolution training for frontline staff.

The Shift: Professionalisation and Prevention (2010-2020)

During the 2010s, healthcare security evolved significantly.

Rather than simply responding to incidents, security teams increasingly focused on violence prevention, environmental design and secure-by-design principles, lone worker protection, access control and visitor management, risk assessment and intelligence-led security planning.

At the same time, violence against healthcare workers became recognised as more than a security issue. It became a wellbeing concern, with growing evidence of its impact on staff retention, morale and sickness absence.

Following the evolution of the UK terrorism threat after 9/11, healthcare organisations also became more integrated into wider protective security, resilience and emergency preparedness arrangements.

Healthcare Security Today (2020-2026)

Today's healthcare security professional operates in a far more complex environment than their counterpart 25 years ago.

Violence and Abuse Remain the Primary Challenge

Despite advances in security management, violence and abuse towards healthcare workers remains a significant concern. Recent NHS data indicates that more than one in seven staff have experienced physical violence from patients, relatives or members of the public, while approximately one in four have experienced harassment, bullying or abuse. [england.nhs.uk].

As a result, the Violence Prevention and Reduction Standard sits at the heart of the NHS healthcare security strategy. [england.nhs.uk].

The Growth of Protective Security

Healthcare organisations have increasingly adopted behavioural threat assessment, protective security risk management, hostile act preparedness, body-worn video, lone worker technologies and intelligence-led security planning.

Security professionals now routinely work alongside safeguarding, emergency preparedness, estates, HR and clinical colleagues to manage a broad range of risks affecting patients, staff and visitors.



When Terrorism reached the NHS

The changing threat landscape has also demonstrated that healthcare settings are not immune from terrorism-related threats.

In November 2021, an improvised explosive device detonated in a taxi outside Liverpool Women's Hospital. The incident highlighted the vulnerability of open healthcare environments and reinforced the importance of preparedness, emergency response arrangements and strong partnerships between healthcare organisations and emergency services. [gmp.police.uk]

In January 2023, an even more direct threat emerged at St James's University Hospital in Leeds. A planned terrorist attack against the maternity unit was prevented when hospital patient Nathan Newby engaged the attacker in conversation for almost two hours, ultimately persuading him to abandon his plans and surrender to police. Newby was later awarded the George Medal for actions that the court heard prevented a potential atrocity targeting hospital staff and patients. [theguardian.com]

Together, these incidents serve as a reminder that healthcare security extends beyond crime prevention and workplace violence. It also encompasses preparedness for low-sophistication terrorist attacks, hostile acts and other emerging threats.

The Grey Space

One of the biggest changes over the last 25 years has been the blurring of traditional security boundaries. Healthcare organisations increasingly face challenges from fixated individuals with grievances, stalking and harassment, organised criminality, public protests and disorder and individuals experiencing acute mental health crises.

The COVID-19 pandemic further demonstrated how healthcare facilities can rapidly become focal points for public tension, misinformation, protests and hostility towards staff.

Looking Forward

The defining change since 9/11 has been the transformation of healthcare security from a largely reactive function into a professional discipline focused on proactively protecting people, assets and organisational resilience.

While violence, theft and disorder remain familiar challenges, today's healthcare security professional must also consider hostile acts, behavioural threats, major incidents and risks that sit within an increasingly complex grey space between security, safeguarding and resilience.

The challenge for the next decade will be maintaining healthcare's fundamental openness and accessibility while continuing to protect staff, patients and services in a constantly evolving threat environment.

Security Focus

Winter Security Challenges

Winter brings a unique set of challenges for healthcare. Alongside increased operational pressures, colder temperatures, longer nights and adverse weather can create additional security risks for staff, patients and visitors.

Seasonal Welfare Concerns

As temperatures fall, hospitals can attract vulnerable individuals seeking warmth and shelter. Staff may encounter people sleeping in bin stores, service yards, loading bays, stairwells or other sheltered areas.

Whilst these situations often require a compassionate response, they can also present significant safety risks, particularly where restricted areas are involved.

Increased Aggression and Frustration

Winter pressures can lead to longer waiting times, overcrowded departments and increased stress for patients and visitors. This increases the likelihood of verbal abuse, threatening behaviour and violence towards frontline staff.

Reduced Daylight and Personal Safety

With many staff arriving and leaving work in darkness, personal safety becomes a greater concern during the winter months. Poorly lit routes, isolated car parks and lone working arrangements can increase vulnerability.

Weather-Related Security Risks

Snow, ice and severe weather can affect more than just operations.

Staff may need to respond to restricted access routes, storm damage and power outages. Reviewing contingency plans ahead of winter can help minimise disruption when severe weather arrives.

Vehicle Crime and Opportunistic Theft

Darker mornings and evenings provide greater opportunities for opportunistic offenders.

Healthcare organisations should remain alert to thefts from vehicles, bicycle crime and unauthorised access through doors left open during cold weather. Staff awareness campaigns and targeted patrols can help reduce these risks.

Looking Forward

Winter security is about far more than responding to incidents. It requires proactive planning, visibility and partnership working to ensure healthcare environments remain safe, secure and welcoming throughout one of the most challenging periods of the year.

A successful winter strategy recognises that some of the biggest risks during the colder months are not always criminal in nature, but arise from the complex interaction between security, safety and human welfare.



If you have any security concerns, please contact Tiaa.

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