



DIVISION SCOPE OF SERVICE

Division: TRISTAR

Classification: ARMED SECURITY GUARD

Applicant Name:

Armed Security Guard:

Security Guard must have the equivalent qualifications and competence and function in accordance to HCA policies and state regulations, as defined by facility job description.

Definition of Care or Service:

Security Guard provides excellent customer service for the patients, visitors, and employees of the healthcare facility. They also provide a safe environment in the protection and services to healthcare patients, visitors, employees, medical staff, tenants and all other persons on the hospital campus. Armed guard consists of carrying and the use of a self-defense weapon such as a Taser or handgun.

Scope of Service may include:

- Assists to customers, employees and visitors in a courteous and professional manner.
- Makes routine and random patrols of the hospital buildings and grounds
- Maintains daily log, documenting unusual activities during shift including unlocking secured areas after business hours.
- Performs security patrols of designated areas on foot or in vehicle
- Watches for irregular or unusual conditions that may create security concerns or safety hazards.
- Investigates and prepares reports on accidents, incidents, and suspicious activities. Maintains written logs as required by the post.
- Demonstrates Clinical and Service excellence behaviors to include code of HCA Healthcare conduct core fundamentals in daily interactions with patients, families, co-workers and physicians.

Setting(s):

- HCA entities including healthcare facilities, free standing ED, Imaging Centers, HCAPS, Data Centers, Warehouses, etc.

Supervision: Chief Operating Officer, Vice President of Operations or designee

Evaluator: Hospital Director/ Manager (e.g. Facilities Mgmt, Safety & Security, Human Resources)

Tier: 2

eSAF Access Required: YES

Qualifications:

- 21 years of age
- High school diploma or GED
- No dishonorable discharge from the military
- Must be a U.S. citizen or a foreign citizen authorized to legally work in the United States
- Criminal background check - Not convicted of a crime related to violence/ moral turpitude
- Not listed on the Violent sexual offender/ predatory registry
- Required immunizations per DHP divisional requirements
- Physician behavioral psychiatric evaluation to carry a firearm indicating a “pass”, signed by a physician.



DIVISION SCOPE OF SERVICE

State Requirements:

- Kentucky: No license required
- Tennessee:
 - TN Armed Security Guard License
 - If license is pending upon primary source verification, armed guards can work as unarmed for 75 days.
- Georgia:
 - GA Armed SGE License

Experience:

- N/A

Competencies:

The Armed Security Guard will demonstrate:

- Customer service education (new hire / annual refresher)
- Use of Force/ Restraint education (new hire / annual refresher)
- Basic security principles education (new hire)
- Skill in presenting oneself as being of high quality character.
- Skill in communicating clearly and effectively in English.
- Skill in writing clear, concise, and comprehensive reports.
- Ability to remain in good physical condition to respond to daily rigors of the job.
- Passing, as determined by state licensure or > 75%, firearm training and certification (annual)
- Infection Prevention
 - Practices consistent hand hygiene
 - Uses personal protective equipment (PPE) when required
 - Required immunizations per Division requirements
 - Complies with Isolation precautions
 - Maintains sterile field

References

- Minnesota Multiphasic Personality Inventory (MMPI)
 - HR.ER.002
 - HR.ER.019
 - CSG.QS.003 – Tier 2 DHP
- GA Verification: <http://verify.sos.ga.gov/verification/>
- TN Verification: <http://verify.tn.gov/>

Document Control:

- Content updates 3/7/2018
- Previously named Security Guard – Armed
- Content updates 5/13/2020



DIVISION SCOPE OF SERVICE

Your signature confirms you will be able to comply with the Qualifications and Competencies listed within this Scope of Service and that you will confirm education via your background check.

Applicant Printed Name: _____

Signature: _____

Date: _____