

These are the loss figures for the months from July 1971 through July 1972 for the following buildings:

- Children's Rehabilitation
- Variety Club Heart
- Powell Hall
- Diehl Hall
- Owre Hall
- Jackson Hall
- Lyon Hall
- Millard Hall
- Masonic Hospital
- Mayo Hospital

July 71	\$2122.00	January 72	\$674.00
August 71	\$974.00	February 72	\$328.00
September 71	\$1207.00	March 72	\$1083.00
October 71	\$1664.00	April 72	\$513.00
November	\$301.00	May 72	\$874.00
December 71	#46.00	June 72	\$2864.00
		July 72	\$3014.00

TOTAL \$15,664.00



August 28, 1972

Mr. Leroy Resnick
Building 31, Room B1 - C08
National Institutes of Health
Bethesda, Maryland 20014

RE: HEW Security System -
University of Minnesota

Dear Mr. Resnick:

As indicated in our phone conversation on August 22, 1972, we have considered the possibility of developing a total University of Minnesota Health Sciences Security System.

We are enclosing the following pertinent information:

- A) A map indicating the dispersement of our buildings. Approximately 1,200,000 square feet.
- B) 1971 - 72 property loss figures.
- C) Existing security system - from University Hospital standpoint.

All of the buildings involved are open twenty-four hours daily, under loose security.

We would appreciate any information and recommendations you may have to use as a guideline in developing a total University of Minnesota Health Sciences Security System.

Sincerely,



Paul J. Maupin
Health Sciences Planning Coordinator

PJM:nbw



INTRODUCTION

In response to arrangements made with Wesley A. Pomeroy, Director of Safety and Development, a security survey was conducted into general building security provisions and alarm systems' capabilities on the University of Minnesota Twin Cities Campus.

As was apparent, it was impossible to do a security survey on each of the 302 buildings. Selected buildings, where critical problems have developed, were given priority. These selected buildings and suggested recommendations are set forth in the following sections of this report.

MAYO HOSPITAL COMPLEX

The Mayo Hospital complex consists of the Mayo Hospital, the Variety Club-Heart, Children's, Veterans of Foreign War-Cancer Research, Masonic, and Student Health Service Wings. The entire complex has 825 beds with room for 48 more beds in the Health Service Wing being constructed. Plans for expansion have been developed and their construction will be in the near future. The entire complex is joined by underground connecting tunnels. The tunnels are so constructed that one can enter any of the wings and walk into any of the other wings or Mayo Hospital. The doors leading into all of the hospitals are open so that anyone desiring entrance can use them.

At present there are three police officers assigned to the hospital complex. One officer reports at 7 A.M. and is on duty until 3 P.M. His main function is one of traffic control, checking parking lots and meters for violations, and keeping the outpatient entrance to the hospital clear of illegal parking. One police officer reports for duty at 6 P.M. and remains until 2 A.M. One police officer reports at 9 P.M. and works to 5 A.M. These officers are used in checking doors and general foot patrols of the complex. This in effect has a police officer on duty in the interior of the complex from 6 P.M. until 5 A.M. If anything should occur on hours when they are not available, a call is made to the police board at the U.M.P.D. Headquarters.

/During

During the survey I talked with Mr. Kenneth J. Schneider, Assistant Director of the hospital complex and current Chairman of the Hospital Committee of Security and Fire. Mr. Schneider was very unhappy with current security arrangements and said that present planning, although not firm, was to hire a Director of Security and recruit their own security personnel. Mr. Schneider said that the hospital was now being charged with four and one-half men per day.

There are two pharmacies within the complex where medicines are dispensed. Both pharmacies are handling sizeable amounts of narcotics. The Student Health Service Pharmacy closes at 5:30 P.M. During its closed hours an attempted break-in through the rear exposed windows was made. This was solved partially by the erection of a six-foot fence making it nearly impossible for entry onto a roof which leads to the window into the pharmacy. The narcotics are kept in a locked two-drawer cabinet. A planned entry alarm is to be attached to the doors which will alert the alarm console in the Communications Center at the U.H.P.D. when the doors are open. This alarm is still being connected and will be functioning in the near future. An attempted robbery was made at the Mayo Hospital Pharmacy and several upgraded security systems were installed. The rear door leading into the pharmacy was replaced with a steel door in addition to the Best Lock system, plus a new button-type combination lock was also utilized. A bank teller type of window with bullet resistant glass and sliding drawer were installed to guard against

future armed robberies. A panic-button type alarm switch was installed near this window connected by telephone wires to the console to the Communications Center.

The U.M.P.D. has done a superb job in alleviating the problem at this pharmaceutical dispensary.

There have been instances of theft of typewriters and other equipment from the offices of resident doctors' suites located along the hospital corridors.

RECOMMENDATIONS:

A separate police unit of the U.M.P.D. should be assigned to the hospital complex on a 24-hour basis. This could be accomplished with the use of the existing three U.M.P.D. police officers assigned to the hospital complex with the addition of one commanding officer, either a sergeant or a lieutenant, and nine student cadets. This would mean that one U.M.P.D. policeman and three cadets would be on duty each shift.

T. V. monitoring cameras should be placed at vital entry doors and in the underground connecting tunnels. These cameras then should be connected to a monitoring console centrally located in the hospital at the police command post, where they can be viewed by a member of the hospital security force. This, in fact, would reduce the number of overall personnel needed to properly secure the hospital complex. Each T. V. camera would, in effect, replace a man at each of the vital doors.

Although the original cost may seem prohibitive, in the long run it will prove less costly in the saving of personnel. T. V. monitoring cameras and viewing monitors are now becoming more reasonable on the open market. In addition to the T. V. monitoring, one police officer and two police cadets will be patrolling in and about the hospital complex. The U.M.P.D. police officer on duty will be used to make arrests and to supervise the student cadet personnel. This, in effect, will produce a more efficient security force with a minimum of overall costs. T. V. monitoring is very effective in thefts such as typewriters, sometimes catching the thief at work. A new lock has been developed that secures typewriters, T. V. receivers and other office equipment to their desks or tables.

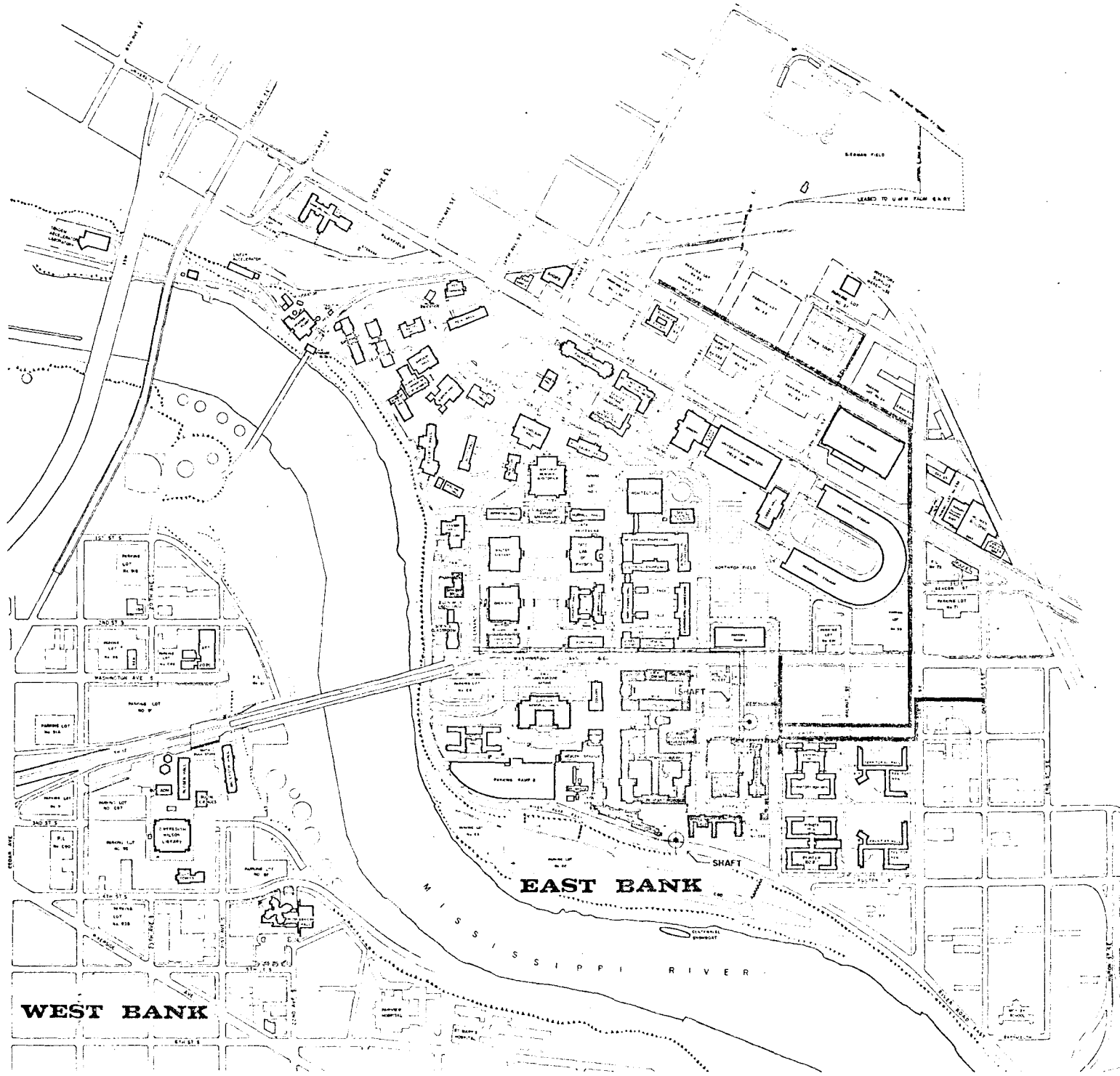
The fire alarm system will be discussed under alarms later in this report.

BURSAR'S OFFICES

There are three Bursar's offices: The Main Bursar's office located in Morrill Hall, the West Bank Bursar's Office and the St. Paul Bursar's Office located in Coffey Hall.

MAIN BURSAR'S OFFICE

The Main Bursar's office does primary banking for students and student loans within the campus. Monies are brought to the office from parking lots, book stores and other places where money is collected. The U.M.P.D. provides several police officers to transport these monies to the Bursar's office. When large amounts of money are being transported to the



UNIVERSITY OF MINNESOTA

**TWIN CITIES CAMPUS
EAST & WEST BANK**

LEGEND:

	ELECTRICAL FEEDERS		SANTARY SEWERS		WATER MAINS
	HEATING TUNNELS		STORM SEWERS		LAND NEEDS

0 100 200 300 400 500
SCALE IN FEET

August 29, 1972

Mr. Duane Blanchard
Health Sciences Architects
& Engineers
113 Hubbard Building
2675 University Ave
St. Paul, Minnesota 55114

RE: Unit A - Health Sciences Expansion
Locking Requirement

Dear Duane:

Mr. Ken Tideman, Health Sciences Construction Coordinator, will be the person responsible for handling the keying system for Unit A Locks.

Mr. Tideman, aided with adequate input from both architects and faculty, will propose plans for resolving this problem.

Sincerely,



Paul J. Maupin
Health Sciences Planning Coordinator

PJM:nbw
cc: Ken Tideman



health sciences architects & engineers

THE CERNY ASSOCIATES INC.
HAMMEL GREEN & ABRAHAMSON INC.
SETTER LEACH & LINDSTROM INC.

113 HUBBARD BUILDING, 2675 UNIVERSITY AVENUE
SAINT PAUL, MINNESOTA 55114

612/646-8875

August 23, 1972

RECEIVED

Mr. Paul Maupin
Health Sciences Planning Coordinator
University of Minnesota
4104 Powell Hall
Minneapolis, Minnesota 55455

AUG 24 1972

**UNIV. OF MINN.
HEALTH SCIENCE
PLANNING OFFICE**

Regarding: Unit A - Health Sciences Expansion
University of Minnesota
Locking Requirements

Dear Mr. Maupin:

The keying system for all Unit "A" locks must be determined by the University. The areas involved are as follows:

1. Finish Hardware - Section 0870
2. Metal Casework - Section 1161
3. Plastic Laminate Casework - Section 1162

It appears that someone or several individuals must be selected by the University to make these determinations. Item 1 may be somewhat separate from items 2 and 3.

The determination of the proper keying system involves University security, departmental requirements and other considerations.

We are in hopes that the appropriate contractors can work directly with the responsible parties in establishing the proper keying of the locks. We have been informed by the contractors that this effort must get underway soon.

Please advise me of your thoughts and proposed plans for resolving the keying requirements for the locks provided in the contract.

Sincerely,

HEALTH SCIENCES ARCHITECTS & ENGINEERS


Duane E. Blanchard

cc: Ken Tidemann
John Scott

November 7, 1972

Mr. Hugh Peacock
312 Morrill Hall
Mpls. Campus

Re: Proposal for the Development of
a Comprehensive Protection Program for
the University of Minnesota Health
Science Center.

Dear Hugh:

Several months ago the Health Sciences Planning Committee determined that a comprehensive approach to Health Sciences security should be investigated. To our knowledge, Mr. Pomeroy's office has never appointed anyone to investigate this problem. Therefore, we are submitting for your consideration, comments and direction on how to proceed, the attached proposal submitted to us by Security Analysts.

We have investigated and searched for other consultants, but in our best professional judgement, Security Analysts appear to be the outstanding local company that could handle this awkward problem for us.

Sincerely,

Paul J. Maupin
Health Sciences Planning Coordinator

PJM:jlb



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SECURITY
ANALYSTS

October 26, 1972

Mr. Paul J. Maupin, Coordinator
Health Sciences Planning Office
4104 Powell Hall
University of Minnesota
Minneapolis, Minnesota 55455

Subject: PROPOSAL FOR THE DEVELOPMENT OF A COMPREHENSIVE
PROTECTION PROGRAM FOR THE UNIVERSITY OF MINNESOTA
HEALTH SCIENCE CENTER

Dear Mr. Maupin:

Security Analysts is pleased to submit this proposal for the development of a comprehensive protection program for the University of Minnesota Health Science Center. The purpose of the program shall be to cost effectively protect people from harm and property from loss or damage at each of the Health Science Facilities. This program is designed to provide a proper balance of social-psychological and physical protective measures for only such a program will consistently maintain an optimum level of protection. The proposed protection program utilizes the latest advances in protection systems and is based not on hardware and guards alone but upon people. It conforms to the University's standard of enlightened leadership.

CONCEPT

A truly effective protection program requires a total overview considering all threats to the operations and occupants of the Health Science Center -willful, accidental and natural. This program will provide the maximum benefit at the least cost. Traditional "security programs" often treat the symptoms of poor planning, poor controls, and minimal involvement by stressing enforcement rather than prevention and reliance on hardware rather than people.

Often the only one who feels obligated to improve "security" is the security director and frequently he is not even trained to do this well. The success of any protection program depends on the facilities' employees and their supervisors; only their efforts can vastly improve the protection of the Health Sciences' assets with minimum financial expenditures.

Our task is to establish effective physical protection measures and controls. Yet without assuring the active participation of staff members and employees, these measures would soon be ignored or circumvented. No individual or outside organization can provide "security" despite their claims. The Health

Science Center provides an excellent example of this for its facilities are open, employees and staff are continuously in motion and intermix with patients, students, and visitors. Controls must not only be written but internalized by people at the working level in order to be effective. All personnel will not respond to even the best program but if the majority does and if the controls are understood to be in the best interest of the employee and not just the University, it will have accomplished its objective.

A comprehensive protection program includes attention to personnel, procedures, physical measures, safety, and emergency planning. Theft of University and personal property is always considered a threat, however, accidents are costly too and should be part of any protection effort. Personnel at all levels must be made aware of their responsibilities in such a way that they want to help rather than resent the program. This means that supervisors at all levels must understand not only the objectives of the program but how to communicate it effectively; hence, positive motivation is a vital part of this program.

The function of the University - education, and the hospital - health care, is not served by creating repressive atmospheres nor inconveniencing personnel by restrictive protective measures. Security Analysts is most cognizant of the importance of maintaining a pleasant and productive environment having developed school protection plans for hundreds of schools as well as other numerous and diverse facilities. Therefore, we shall not "inflict" a security program on your personnel but rather emphasize the need for cooperation and communication among the staff and employees of the Health Science Center. Our objective is to establish a protection services function consistent with the objectives of a leading educational and health institution.

IMPLIMENTATION

Security Analysts proposes that this program be implimented in three increments or phases:

Phase One - Security Survey

Phase Two - Protection Planning

Phase Three - Program Implimentation

The purpose of Phase One shall be to determine the protection requirements of the Center by:

1. Accessing the threats to its function and facilities.
2. Defining the present degree of protection
 - a. Inspecting facilities
 - b. Studying operations and activities
 - c. Reviewing protective procedures and controls
3. Locating vulnerabilities and providing specific recommendations for protecting measures.
4. Priorizing action items based on cost effectiveness.

3.

An important aspect of Phase One shall be to review current construction programs to provide a timely input regarding physical protection measures prior to completing new facilities and establishing new routines. The result of Phase One is a bound Security Survey containing:

- | | |
|------------------------------|----------------------------------|
| 1. Summary | 4. General Situation |
| 2. Resources to be Protected | 5. Recommendations |
| 3. Threats | 6. Priority List of Action Items |

During Phase Two, the Security Survey shall be reviewed with appropriate departments, agencies, and individuals in order to prepare a comprehensive protection plan. Included in the protection plan shall be:

1. Statement of policy on function and authority
2. Organization of the protective function
3. General policies and procedures
4. Operation plans
 - A. Normal
 - B. Emergency Condition 1 - Civil Defense Disaster
 - Emergency Condition 2 - Preparation for Disaster, imminent tornado, etc.
 - Emergency Condition 3 - Riot or Criminal Threat
5. Specific facility protection plans

The Security Survey shall also be used for planning the Health Science's Protection Program including protective personnel, procedures and budget. Specific positions and job descriptions for protection personnel will be based on the actual requirements of the Center. The priorities for protective measures including security equipment will be provided on the basis of optimum cost effectiveness. The program implementation phase will be based on the existing needs of the Health Science Center so as to maximize the immediate benefits of the Protection Program.

Phase Three will consist of assisting your personnel in the initial implementation of the Protection Plan approved by the appropriate officials, specifically assisting:

1. The Personnel Department in recruiting, screening, and training protective personnel.
2. The Procurement and Engineering Departments in the procurement and installation of protective measures.
3. The Protective Staff's initial preparation of specific operating procedures.
4. In the initial orientation of staff and University employees as to their benefits and responsibilities in supporting the Health Science's protection program.

4.

5. The protective staff in optimizing their effectiveness.

Our objective is to work out of the program as rapidly as the Health Science Center's own staff is able to effectively assume their roles. Thereafter, we will be available as required.

PROPOSED SCHEDULE

Phase One shall be completed within 240 days of contract. However, specific and immediate problems or questions shall be promptly resolved or answered.

Phase Two shall be completed in 90 days or less dependent upon the administrative processes of the University.

Phase Three shall be completed as soon as is practical.

Our proposed schedule is flexible and shall be responsive to the direction of the Health Sciences Planning Coordinator.

COST

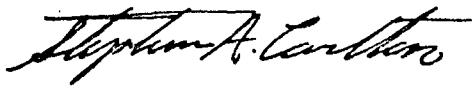
Security Analysts believes that an effective protection program need not be an expensive one. We cannot place a dollar figure on our effort to accomplish this program for the total magnitude of the project is not known. Therefore, we propose to work on an incremental basis reviewing our progress on the program frequently with the Planning Office.

Phase One is estimated not to exceed \$14,400 based on eight sixty hour per month increments. Phase Two is based on three forty hour increments. The cost of Phase Two is estimated not to exceed \$3,600. The cost of Phase Three can only be estimated upon approval of the protection plan and shall be provided as soon as appropriate information is available. Any increase would require your authorization and all time and expenses would be accounted for. We believe this to be a most equitable arrangement for all concerned.

Security Analysts looks forward to assisting the University of Minnesota Health Science Center establish a cost effective protection program. If you have any questions, please contact us.

Most sincerely,

SECURITY ANALYSTS



Stephen A. Carlton
Director

SAC:dc



UNIVERSITY OF MINNESOTA
TWIN CITIES

Health Sciences Planning Office
4103 Powell Hall
Minneapolis, Minnesota 55455
(612) 373-8981

March 7, 1973

Mr. Stephen A. Carlton, Director
Security Analysts
6800 France Avenue South
Minneapolis, Minnesota 55435

Re: Proposal for the Development of
a Comprehensive Protection Program
for the University of Minnesota
Health Science Center.

Dear Steve:

First of all, we would like to thank you for your interest and effort in preparing your proposal for the development of a Comprehensive Protection Program for the University of Minnesota Health Science Center.

Copies of your proposal were distributed to the University of Minnesota Police Department, Mr. Dave Preston, Asst. Vice President, Health Sciences, and Mr. Ken Schneider, Assistant Director of Hospitals.

An administrative decision has been made, determining that Health Sciences Security is an operational problem, and thus will fall under the direction of Mr. Dave Preston and Mr. Ken Schneider. We suggest that future communication be directed to them:

Mr. Dave Preston
Asst. Vice Pres., Health Sciences
A306 Mayo
University Hospitals

Mr. Ken J. Schneider
Assistant Director
B390 Mayo
University Hospitals

Thank you once again for researching this problem area for us.

Sincerely,

Paul J. Maupin
Health Sciences Planning Coordinator

PJM: jlb

cc: D. Preston, K. Schneider, H. Peacock, J. Brinkerhoff
M. Holland, R. Singer, R. Mulhausen