Department of Veterans Affairs
Washington DC 20420

VA HANDBOOK 0730/1
Transmittal Sheet
August 20, 2004

SECURITY AND LAW ENFORCEMENT

1. REASON FOR ISSUE: To expedite implementation of all recommendations of the Office of Inspector General's "Review of Security and Inventory Controls Over Selected Biological, Chemical, and Radioactive Agents Owned and Controlled by Department of Veterans Affairs Facilities," Report No. 02-00266-76, March 14, 2002.

2. SUMMARY OF CONTENTS/MAJOR CHANGES: VA Handbook 0730, Security and Law Enforcement, dated August 11, 2000, is revised as follows:

a. Addition made to paragraph 4f, Hazardous Chemicals.

b. Change current paragraph 4g to paragraph 4h, Training Course Records.

c. Add new paragraph 4g.

d. Add paragraph 6.e, Physical Security.

e. Appendix B, pages B-1 through B-5 have been deleted and replaced with Appendix B, pages B-1 through B-7.

3. RELATED DIRECTIVE: VA Directives 0730 and 0730/1, Security and Law Enforcement.

4. RESPONSIBLE OFFICE: The Police Service, Office of Security and Law Enforcement, is responsible for the material contained in this handbook.

5. RESCISSION: VA Handbook 0730, Appendix B dated August 11, 2000.

CERTIFIED BY:

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BY DIRECTION OF THE SECRETARY OF VETERANS AFFAIRS:

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Security and Law Enforcement

4. Basic and Specialized Training

f. **Hazardous Chemicals.** Annually, all police officers will attend VA facility training programs required by Federal and state laws and regulations that deal with hazardous materials stored on VA property. [Such training should include information about any biohazardous materials stored in, used or developed by facility clinical or research laboratories. As used in this paragraph, the term "biohazardous materials" is defined as those select agents, biological agents and toxins described in 42 CFR § 72 and 42 CFR § 73, and outlined in VHA policy in VHA Directive 2002-075. A listing of bio-hazardous select agents, biological agents and toxins is maintained by the Centers for Disease Control (CDC). An updated listing is located at http://www.bt.cdc.gov/agent/agentlist.asp]

[g. **Emergency Response Training.** All VA police officers will successfully complete annual training on emergency response topics. Such training will include: VA police response to fires or other natural disasters; VA police response to national emergencies or terrorist attacks; VA police use of personal protective equipment for first response to chemical or biological weapon attacks; and for response to other incidents involving hazardous agents. Such training should include response to thefts, accidental release, or suspicious activities that may occur within a clinical or research laboratory.]

6. Physical Security

e. **Vulnerability Assessments of Department Property**

(1) Vulnerability assessments are broad in scope. As defined by this policy, vulnerability assessments are aimed at determining the physical security posture of an entire facility or campus. The assessment is conducted to determine the facility's ability to deter threats, contain incidents, and respond or recover from a serious incident, such as attacks, weather disasters or other events. This differs from Physical Security Surveys which are limited in scope to an individual program, building or room.

(2) Police Chiefs will conduct a comprehensive vulnerability assessment of all Department properties within their jurisdiction at least once every two years. The areas to be assessed include, but are not limited to, any outpatient facilities, Vet Centers or other Department operations serviced by the VA Police unit.

(3) Vulnerability assessments should also include any facilities of VA organizations that are provided basic police services by the VA Police Unit, such as National Cemeteries and collocated VA Regional Offices.

(4) Vulnerability assessments are living documents that should be updated whenever changes are made to physical security plans or equipment. Areas to be assessed include, but are not limited to:

(a) The location and missions of facility tenant organizations, such as local or other Federal governmental entities.

(b) Missions of the local facility that may impact National security or emergency response requirements, such as contracted pharmaceutical caches.

(c) The actual or likely presence of biohazardous agents and materials in clinical or research laboratories. This includes those select agents, biological agents and toxins identified by the Centers for Disease Control (CDC) and the USDA Animal and Plant Health Inspection Service (APHIS); storage of large amounts of agricultural chemicals and fertilizers; or other similar materials that could be targeted for use by terrorists.

(d) The proximity to VA facilities of transported or stored commercial hazardous materials, including rail, waterways, or highways; manufacturing, warehousing or processing plants; or aviation fuel storage.

(e) Assessment of facility perimeters and building envelope or barrier control systems.

(f) Assessment of the physical security of critical infrastructures, such as telecommunications, power systems, heating, ventilation and air conditioning systems, fuel storage, etc. Any needed redundancies in these systems are also appropriate topics for assessment.

(g) Assessment of threats to the safety and security of the facility. Threats to be considered:

1. Threat of criminal activity

2. Terrorist Threat, whether domestic or foreign

3. Threats relating to weapons of mass destruction

4. Threats posed by weather emergencies or other natural disasters

(5) OS&LE provides a specific vulnerability assessment format, which will be used to plan, conduct and record the results of biennial assessments. Assessment reports will be addressed to the facility Director for action.

(6) The Office of Security and Law Enforcement should be contacted and consulted when conducting or reviewing assessments, if technical assistance is necessary.

PHYSICAL SECURITY REQUIREMENTS AND OPTIONS

(X) - Applicable Requirements
(O) - Optional Measures

Location	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
Canteen Retail Store	X	O	X	X	X					X	X					X	
Canteen Storage Room	X	O	X	X	X					X	X				X	X	
Canteen Office	X	O	X	X	X		X			O	X				X	X	
Agent Cashier	X		X	X	X		X			O	X				X		
Pharmacy Drug Storage Room	X	X	X	X	X			X	X	O	X		X				X
Pharmacy Dispensing Area	X		X	X	X	X				O							
Pharmacy Manufacturing Area	X		X	X	X				X	O	X						X
Warehouse Storage / Bulk	O	X	X	X	X						X					O	
Primary Inventory (Medical Supplies)	O	X	O	O	O					O	X					O	O
Laundry Plant	O		X	O	O						X						
Central Linen Issue	O		X	X	X						X						
New Linen Storage	X		X	X	X						X						
IRM	X		X	X	X					O	X						O
Commercial Telecommunications/Data Connections &Telephone Equipment Room	X		X	X	X					O	X						O
Animal Research Facility	X		X	X	X				O	O	X					O	O
Ward & Treatment Rooms												X	X	X		O	
Medical Media Equipment Storage	X	X	X	X	X					O	X				X		
Evidence Storage	O	O	X	X	O					O	X				O	O	O
Weapon Storage/Armory	X	X	X	X	X					O	X				O	O	O
Research and Clinical Laboratories[1]	O	0	0	O	O						X	X	X				X
Radiation-High-risk[2]	O		O	O	O					O	X						0
Radiation-Low-risk[3]	O		O	O							X						
Compressed Medical Gas Storage (Including LOX Tanks)[4]	X	X	X	X						O	X						

[1]Where substances on the CDC or VA watch list are stored, maintained or produced
[2]Location or room where the total activity of a single radionuclide with a half-life of more than 3 days is more than one Curie is received or stored.
[3]Any location other than defined as “radiation high-risk” where radioactive materials and/or radiation sources are received, stored or used.
[4]Where located outside of buildings, will have an 8 ft. (minimum height) chain link perimeter fence and be well-lit during hours of darkness.

1. Requirements and Measures Defined

A - Windows. When below 12 m (40 ft.) from ground level or the roof of a lower abutment, or less than 7.5 m (25 ft.) from windows of an adjoining building, or accessible by a building ledge leading to windows of other floor rooms, security mesh screening for windows is required. Required specifications for stainless steel security mesh screening are:

1. All #304 stainless steel woven mesh 0.7 mm (.028 in.) wire diameter, with tensile strength of 15 kg/mm (800 pounds per lineal inch).

2. Mesh 12x12 per 25 mm (inch) with main and sub frames of 2.7 mm (12 gauge) carbon steel with baked enamel finish and internal key locking slide bolts.

B - Walls. Exterior walls of brick and masonry construction are acceptable. Exterior walls which are composed of wood frame and siding require an interior backing of steel security screen mesh or sheet partition. Pharmacy and Agent Cashiers perimeter walls shall be full height (floor to underside of slab above). Interior walls containing dispensing windows shall be a minimum of 100 mm (4 in.) solid concrete masonry units to ceiling height with either masonry or gypsum wallboard to underside of slab above. Bulk control substance storage vaults require perimeter walls of brick or masonry construction full height.

C - Doors and Door Locks. The locking requirements (including access-controlled egress doors) outlined in National Fire Protection Association (NFPA) Life Safety Code standard (latest edition) 101-7.2.1.5 and 7.2.1.6 must be followed.

(1) Door Construction: Doors are of 45 mm (1-3/4 in.) solid core hardwood or hollow steel construction. Dutch or half doors are unacceptable. Removable hinge pins on door exteriors must be retained with set pins or spot welded, preventing their removal.

(2) Mechanical locking systems. Where mechanical lock systems are used, installed lock sets must allow for single motion egress. The installation of a high security exit device meeting NFPA Life Safety Code standards is appropriate for this application. Glass doors or doors with glass panes must have one lock set, key operated from the interior of the protected area. If a door is not set in a steel frame, one of the two locks must be a jimmy proof rim dead lock. Doors set in steel frames must be fitted with a *mortise* lock with a deadlock pin feature. The day lock on the main door must be automatically locking, with a minimum 19 mm (3/4 in.) dead bolt and inside thumb latch. Combinations or keys to day locks will be restricted to service employees and combinations changed immediately on the termination or reassignment of an employee.

(3). Electronic (Magnetic) locking systems. Where installed, electronic locking systems will include a “request to exit” sensor and a “push to exit” manual lock release switch.

D - Other Room Access Means. Interstitial overhead areas which enable entry into a secure room from an unsecured room must be barricaded by the installation of a suitable partition in the interstitial space which prevents "up and over" access.

Ventilation grills on doors and air circulation ducts which exceed 0.06 m^2 (100 square inches) in areas must be reinforced to prevent their removal from outside the room. Other possible access means such as dumbwaiter shafts, roof or wall ventilator housings, trapdoors, etc., must be secured by appropriate means.

E - Motion Intrusion Detectors. An intrusion detection alarm system which detects entry into the room and which broadcasts a local alarm of sufficient volume to cause an illegal entrant to abandon a burglary attempt. Intrusion detector equipment which operates on the principle of narrow beam interception, door contacts, microwave, or photoelectric eye are unacceptable. Intrusion detectors must have the following essential features.

(1). An internal, automatic charging DC standby power supply and a primary AC power operations.

(2). A remote, key operated activation/deactivation switch installed outside the room and adjacent to the room entrance door frame and/or a central alarm ON-OFF control in the Police office.

(3). An automatic reset capability following an intrusion detection.

(4). A local alarm level of 80 dB (min) to 90 dB (max) within the configuration of the protected area.

(5). An integral capability for the attachment of wiring for remote alarm and intrusion indicator equipment (visual or audio). See installation note on page B-3.

(6). A low nuisance alarm susceptibility.

Installation Notes

1. A locally sounding alarm should not be installed in a room which is close to an ICU, cardiac care, or other special treatment areas where a loud alarm would have an injurious effect on patients.

2. In addition to the locally sounding alarm, remote visual and/or audio annunciators must be at a location within the facility which ensures 24 hour monitoring. These annunciators will have the capability of identifying individually protected zones.

3. In protected rooms of outpatient clinics not on facility grounds, intrusion detector alarms will be connected remotely to a commercial security alarm monitoring firm, a local police department, or a security office charged with building security. The remote alarms will be in addition to locally broadcast alarms in the protected areas.

4. Remote bulk storage warehouse facilities will have one or more local broadcasting alarms inside and outside of the protected area.

F - Pharmacy Dispensing Counter. Windows and walls of pharmacy dispensing must meet the U.L. Standard 752 for Class III Ballistic Level protection. VA Architectural Standard Detail 67 B applies to pharmacy dispensing windows but the window should be set in a minimum 100 mm (4 in.) solid concrete masonry units to ceiling height with either masonry or gypsum wallboard to underside of slab above.

G - Agent Cashier Counter. Bullet resistive service windows must meet the U.L. Standard 752 for Class III Ballistic Level protection. VA Architectural Standard Detail 67 applies to cashier counter construction. Applicable also to other cash transaction facilities. The windows should be set in a minimum 100 mm (4 in.) solid concrete units to ceiling height with either masonry or gypsum wallboard to underside of slab above

H - Bulk Drug Storage Safes and Vaults. Drugs classified as scheduled I, II, or III (narcotic controlled substances under the Controlled Substance Act of 1970 must be stored in safes or vaults which conform to the following specifications:

1. Safes will be GSA class 5 security containers weighing no less than 340 kg (750 pounds).

2. Where bulk quantities or controlled substance handling requirements deem safes impractical, vaults must be used. Specifications for two types of vaults are given: Type I for outpatient clinic or center use, and type II for construction in medical centers only. The type I vault is not as formidable and permanent a structure as the type II concrete vault and, therefore, schedule I, II, and III (narcotic) controlled substances may not be stored on open shelving within the type I vault. To compensate for the lower security of type I vaults lockable steel cabinets installed within the vault must be used for schedule I, II, and III (narcotic) substances. Vault specifications are as follows:

a. Type I Vault. Enclosure constructed of steel security screen, woven mesh, 1.2 mm (.047 in.) wire diameter alloy #304 stainless steel, with tensile strength of 29 kg/mm (1,600 pounds per lineal inch). Mesh 10 x 10 per 25 mm (inch) with main frame and sub frames of 2.4 mm (13 gauge) alloy #304 steel. In rooms with dropped ceilings, the vertical frames and mesh walls must meet the actual ceiling or a security mesh ceiling installed below the false ceiling. In lieu of security mesh screening enclosures, type I vaults may be constructed of 2.4 mm (13 gauge) steel wall partition material with corner brackets welded and floor/ceiling anchors firmly set to prevent disassembly. Mesh vaults may be enclosed with drywall or paneling with appropriate ventilation openings.

b. Type II Vault. Constructed of walls, floors, and ceilings of minimum of 200 mm (8 in.) reinforced concrete or other substantial masonry, reinforced vertically and

horizontally with 13 mm (1/2 in.) steel rods tied 150 mm (6 in.) on center. Doors and day gates must meet GSA class 5 criteria. Vault ventilation and utility ports may not exceed 0.06 m^2 (100 square inches) in area.

I - Bulk Drug Storage Cabinets. Steel cabinets with adjustable shelving and built in locking devices are required for the storage of bulk supplies of schedule III, Non-Narcotic, to V controlled substances.

J - Closed Circuit TV. Security Surveillance TV camera with motion detector feature on cameras and at monitor location. Telecommunications Support Service (197) may be contacted for obtaining technical assistance.

K - Special Key Control. Room door lock keys and day lock combinations, where applicable, are Special Keys as defined in VHA Supplement, MP-3, Part I, Chapter 2, Maintenance and Operations, and are not mastered.

L - Drug Cabinets. Key locked, all steel cabinets, firmly anchored in place are required for ward, emergency room or treatment room storage of small quantities of controlled substances. Locked unit dose carts are acceptable; but must be positioned in a supervised area when not in use. Glass front drug cabinets are not acceptable for controlled substance storage. Plexiglas front cabinets 10 mm (3/8 in.) or greater in thickness, are acceptable.

M - Refrigerators. To be equipped with a built in lock mechanism or hasp with padlock when used to store controlled substances (all schedules) and other potentially dangerous drugs and when located outside a locked or attended drug storage room.

N - Medical Supply Rooms and Closets. Service key control and accountability are required.

O - Cash Safes, Cabinets, and Lockers. For the security of cash deposits and valuables, safes, cabinets, or lockers meeting the GSA class 5 criteria should be used. The size and configuration of commercially available class 5 safes, cabinets, and lockers are optional.

P - Secure Property Storage Containers. For bulk retail merchandise, medical supplies and other items requiring off-shelf protection, steel storage cabinets with adjustable shelving are available through the Federal supply service, group 71, class 7125.

Q - Electronic Access Control Security System. For monitoring and controlling access to areas containing controlled substances, the following specifications are among those to be considered for inclusion:

1. Access Safeguard. To prevent learning codes through keypad observations or use of stolen or found access cards.

2. Time Sensitive. The ability to program access by user, by shift and day.

3. Area Sensitive. The ability to program access by door and area for each individual user.

4. Fail-Safe. The ability to maintain access security if the system goes down (i.e. bypass key).

5. Access Record/Audit Trail. The ability to provide for periodic or on demand print-out of names and time/dates of individual accessing.

6. User Coverage. The number of individual access codes that the system will accommodate.

7. Personal Identifier Number (PIN) Codes. Access control systems protecting high security areas, such as controlled substance storage, research or clinical laboratories that store, use or develop biohazardous materials, will require a PIN number to be used in addition to card readers.

8. Biometric Systems: Biometric security systems are those that use a personal measurement, such as fingerprints or retinal scans, as authentication. Biometric devices can be used in lieu of PIN systems in high security applications.

(The use of electronic access control systems may be expanded to other high security areas within the facility.)

2. Special Security Requirements- Biohazardous or Radioactive Materials in Research or Clinical Laboratories

A. Police Chiefs will conduct vulnerability assessments of any clinical or research laboratory under VA police jurisdiction. Records of the assessments will be maintained in Police administrative files (RCS-10) This includes any such laboratory in VA owned or leased space that is not located on or contiguous to the main facility campus. This also includes laboratory facilities physically located on VA owned or operated property, but that are leased to outside entities, such as universities, non-profit organizations and others.

(1) Initial assessments will be focused on determining whether materials are present that have been identified by the Centers for Disease Control (CDC) or VA as potential biohazards. Descriptions of these materials are found at Title 42 Code of Federal Regulations, Parts 73 and 1003. A listing of bio-hazardous select agents, biological agents and toxins is maintained by the Centers for Disease Control (CDC). An updated listing is located at http://www.bt.cdc.gov/agent/agentlist.asp.

(2) As part of the assessment, Chiefs will carefully review memoranda of understanding, contracts or other agreements related to the use of Department properties by non-VA entities. The document review is focused on assuring the careful

delineation of security responsibilities for the laboratory space. The intent is to ensure that VA security policies, practices or procedures are applied and followed.

B. If the initial assessment finds that such materials, or radioactive materials, are, or may be present in VA laboratories, the assessment will then be focused on determining vulnerabilities in physical security and recommended mitigation actions. Mitigation actions will be consistent with the physical security matrix in this Appendix, but more stringent measures may be adopted where necessary. In addition, that laboratory will be added to the facility annual physical security survey program, and surveyed once every twelve months.

C. When the listed materials are found, or isolated from a patient, and appear to be evidence of potential criminal activity (anthrax threats, etc.) the local VA Police unit will be contacted and an evidentiary chain of custody established. The investigating VA police officer will initiate appropriate reporting and notification actions.

D. The facility Director will ensure that security training, appropriate to facility security systems, is provided for all employees, WOC's and volunteers working in clinical or research laboratories.

3. Special Security Requirements-Storage and Control of Radioactive Materials

A. The VA Police Chief must coordinate with the Radiation Safety Officer and Radiation Safety Committee to implement procedures to preclude unauthorized removal or access to stored radioactive materials.

B. The VA Police Chief must coordinate with the Radiation Safety Officer and Radiation Safety Committee to implement procedures to control and maintain continuous surveillance of radioactive materials that are not in storage.