



Thank you for your interest in completing the IAHSS Foundation Crime Survey. This is a unique measure in the health care security field, providing essential information that can be used for benchmarking, budgeting and strategic planning purposes. Your participation is key to producing results that are statistically valid. This brief guide is intended to help you to prepare for and fill out the survey.

### **Who is eligible to participate in the Crime Survey?**

All U.S. hospitals are eligible to participate. The survey does *not* include outpatient facilities, urgent care clinics and other non-hospital facilities.

### **What questions are included in the survey?**

The survey asks respondents about:

- Licensed beds
- Facility square feet size
- Security staff budgeted hours
- The number of incidents that occurred on hospital grounds during the year in 10 crime categories, from murder to disorderly conduct, with each offense using the definition from the FBI's Uniform Crime Reporting (UCR) program
- Use of the Workplace Violence Typology
- Additional topics that may change from year to year. For example, in recent years, respondents have been asked about elopements, the presence of inpatient psychiatric/behavioral units, the use of threat management teams, and the use of visitor management programs. The survey included a question regarding the ease or difficulty of maintaining a full, qualified security staff.

### **What time period is covered by the survey?**

The survey requests data for incidents that occurred during the previous calendar year. So the 2026 survey – which will be distributed in Q1 2026 – will gather facility information from the January 1, 2025 to December 31, 2025.

### **How can I participate in the survey?**

While the survey is open, a link will be posted on the IAHSS Foundation website and provided via email to IAHSS members that goes to a survey form. You can also request the link [here](#).

## **How long will the survey take to complete?**

With the data in hand, it will likely take 5-10 minutes to complete the survey. This does not include the time required to gather the data, which will vary depending on each hospital's record-keeping system.

## **What if I do not have data for some of the categories?**

Leave the response blank. Do not enter a zero in these cases, since this will be regarded as a response stating that zero such incidents occurred. While non-responses to a small number of questions generally will not disqualify the data that is provided from being used. The only required field is the **licensed beds question** which must be answered in order for the survey to be considered valid.

## **My health care system includes multiple sites. How should the data be submitted?**

Individual responses should be submitted for each facility. To ease this process, responses may be submitted on a spreadsheet – rather than through multiple submissions – using the contact information below.

## **How are the results presented?**

The published report includes aggregate data covering all qualified responses, alongside data from previous years. In some cases, notable individual data may be referenced, but only anonymously. **All responses are kept confidential and no individuals, hospitals or health care systems are named in the report.**

## **What if I have questions?**

Any questions can be directed to IAHSS Foundation at [crimesurvey@iahssf.org](mailto:crimesurvey@iahssf.org)