

**STATEMENT:** Workplace violence is a serious threat for all healthcare facilities (HCFs) and requires proactive steps to be taken to prevent and mitigate risks associated with violence. A situation involving a person who has or is threatening to use a firearm, and may be moving from one location to another on campus, requires a specific response.

**INTENT:**

- a. A multidisciplinary team should be appointed by the HCF to designate, in writing, its plan for responding to an active shooter on campus in coordination with local law enforcement.
- b. Communication procedures should be established that includes the creation of a specific announcement (emergency code or plain language) and procedure to institute a response to an active shooter situation.
- c. The HCF should have a real-time campus-wide notification system to alert staff to the threat of an active shooter. Using multiple modes of notification intended to more or less immediately reach all persons inside the facility and on its grounds is preferred. These may include overhead pages, text (SMS) messaging, digital displays, e-mails, intercoms, call boxes, pop-up messages, or other notification methods. Consideration should be given to simultaneously notifying employees and staff members who may be in the process of returning to the HCF.
- d. The multidisciplinary team should assess each department and identify potential safe rooms to which staff, patients and even visitors can retreat in the event of an immediate threat of danger.
- e. Employees and staff should be educated on recognizing the danger signs, and how to report on and respond to an active shooter. Specific procedures should be established for the initial response of staff and others in the immediate vicinity of an active shooter. Actions may include:
  - 1) Leave the area if possible; safely evacuate as many patients, visitors and staff as practical
  - 2) Call emergency phone number (911 or other)
  - 3) Seek cover and protection
  - 4) If unable to leave, hide self and others from view of shooter (under desks, behind closed doors, etc.)
  - 5) Silence all personal communication devices
  - 6) Barricade shooter from entry; lock doors, place furniture in front and take actions that will slow shooter
  - 7) Use any means possible to take offensive against shooter if serious injury or death would otherwise be imminent
- f. Activation of the active shooter response plan should include immediate notification to law enforcement. Ongoing communication should be maintained and may include:
  - 1) All information on the incident including description and background of the suspect(s)
  - 2) A description of weapons used
  - 3) Information on any victims or hostages
  - 4) Location(s) impacted by the event and current location involved. Responding law enforcement officials should be provided facility maps, access codes, keys and other needs and requests.

- g. Activation of the active shooter response plan may include these actions:
  - 1) Establishing an incident command post and Emergency Operations Center as circumstances warrant
  - 2) Restricting access to the facility
  - 3) Rerouting or diverting incoming patients
  - 4) Disabling utilities, news and public Wi-Fi systems when appropriate, and in consultation with law enforcement guidance
  
- h. Upon conclusion of an active shooter event, the HCF should announce an “all clear” only after law enforcement has indicated the environment is safe. Additional measures may include:
  - 1) Accounting for all patients listed in the census and all staff members including regular and contract staff.
  - 2) Responding to the medical needs of victims
  - 3) Assessing damage to the building, equipment and sterile environments
  - 4) Arranging for employee assistance programs for staff members
  - 5) Providing additional security or law enforcement presence
  - 6) Debriefing, evaluating, and reviewing the incident and the effectiveness of the emergency plan and response. Change or update the response plan as needed
  
- i. Planning exercises, with law enforcement participation, should be conducted periodically. These drills may include “tabletop exercises”, and controlled walk-throughs designed to quiz and educate staff about how to respond to an active shooter situation in various areas of the HCF’s buildings and grounds. More realistic drills, if conducted, should be carefully planned to avoid alarm by those who may not be aware of a drill’s status.

**REFERENCES:**

- “Active Shooter Handbook - How to Respond”, U.S. Department of Homeland Security, et al, October 2008. Web. <[http://www.dhs.gov/xlibrary/assets/active\\_shooter\\_booklet.pdf](http://www.dhs.gov/xlibrary/assets/active_shooter_booklet.pdf)>
  
- Health & Human Services Office of the Assistant Secretary for Preparedness and Response, “Incorporating Active Shooter Incident Planning into Health Care Facility Emergency Operations Plans”. Web. <<https://www.phe.gov/preparedness/planning/Documents/active-shooter-planning-eop2014.pdf>>

**SEE ALSO:**

- IAHSS Healthcare Security Industry Guideline 04.03.03, Facility Restricted Access (Emergency Lockdown)

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