Are You Prepared for an Active Shooter at Your Hospital?

Assessments, identifying evacuation routes, access control, communications and training staff are just some of the steps you can take so you'll be ready.

By Daniel Holden | February 21, 2013 |

According to a 2012 study by Johns Hopkins University School of Medicine, hospital-based shootings are rare, but recent attacks in Mississippi, Pennsylvania, and California—and non-hospital gun violence in places like Colorado and New York—can attest to the number of lives affected by these deadly events. With each devastating occurrence, we ask the same questions: Why did it happen; could we have been better prepared; and how do we prevent it from happening again?

While predicting such events is nearly impossible, being prepared is not. Security experts from the Department of Homeland Security, various law enforcement agencies, and the International Association of Healthcare Security and Safety (IAHSS) have noted some key recommendations to guide hospitals in preparing an Emergency Action Plan (EAP) for an active shooter event.

**Conduct an assessment.** An independent and realistic security assessment of your location can determine the facility’s possibility for an active shooter. An independent assessment can lend a new perspective to a location’s vulnerabilities.

**Identify evacuation routes.** Establish variable escape routes, including final destinations once outside, and practice evacuating each route. Multiple routes can help if the shooter is familiar with one. Avoid open spaces where possible, and locations that will trap you such as an elevator.

**Prepare a safe hiding place.** If evacuation is not possible, train staff to find a place to hide where the shooter is less likely to find them. The best location would have thick walls, few
windows, a solid door and reliable communication capabilities such as a telephone, cellular phone reception or a duress alarm button. Instruct employees to lock and block the door with heavy furniture, cover all windows, turn off all lights, silence any electronic devices, lie on the floor and remain silent.

Establish an effective access control system. Limit the number of entrances into the facility and install alarms and cameras on all doors. Consider restricting access to certain areas and educate staff to not prop doors open and to report individuals who enter without credentials.

Participate in an Active Shooter Drill on March 19

The Hospital Association of Southern California will host an Active Shooter Drill for health care professionals March 19 at the LAC + USC Medical Center, 1200 N. State Street, Los Angeles, CA 90033 (old campus). Experience a simulation of an emergency in a clinical and office setting. Hospital and community stakeholders including security, emergency room and nursing staff, human resources, risk managers, social workers and administrative personnel with an interest in minimizing the effects of workplace violence or an active shooter event are invited to attend. For more information, please contact Jamila Mayers, (213) 538-0739, jmayers@hasc.org.

Maintain facility-wide communication. Real-time communication systems are essential for warning employees, patients and law enforcement of an emergency event. Test the communication capacity regularly and review your contact list to ensure you have included everyone.

Train staff to work with law enforcement. For an effective response and to avoid mistaken identity, instruct employees to follow the instructions of law enforcement implicitly. They should not move too quickly, and keep their hands visible and empty to avoid being perceived as a threat. Remember, law enforcement’s first priority is to neutralize the situation, not to help your staff or anyone else who may be injured.

Use plain speak. To maximize response time, speak to outside response partners such as 9-1-1 operators or law enforcement in plain language. Avoid codes or jargon that only members of your hospital may understand. For example, instead of stating “We have a code silver in the ICU,” state “We have an active shooter in our Intensive Care Unit located on the third floor of our hospital’s west wing.”

Keep it simple. Make sure the plan is easy to understand and follow in an emergency. Quick, effective decisions on the safest course of action could mean the difference between life and death.

Take Action. As a last resort or if your life is in imminent danger because neither evacuating the facility nor seeking shelter is possible, disrupt and/or incapacitate the active shooter by throwing objects, using aggressive force and yelling.
**Practice.** Practice your plans, correct any deficiencies and practice again. It is extremely important for individuals to be trained so they can react appropriately if confronted with an active shooter situation. Training and education should render responses intuitive.

**Stay informed.** Draw on the expertise of both your staff and organizations such as the California Hospital Association, Hospital Association of Southern California, International Association of Healthcare Security and Safety, and American Society of Industrial Security. These organizations are sources of free and low-cost best practice materials, trainings and seminars, and practice drills. A recommended resource is the Department of Homeland Security’s *IS 907 - Active Shooter: What You Can Do.*

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**References:**


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