

# South Texas HFMA Conference

“Hospital Security and Active Shooter Situations.”

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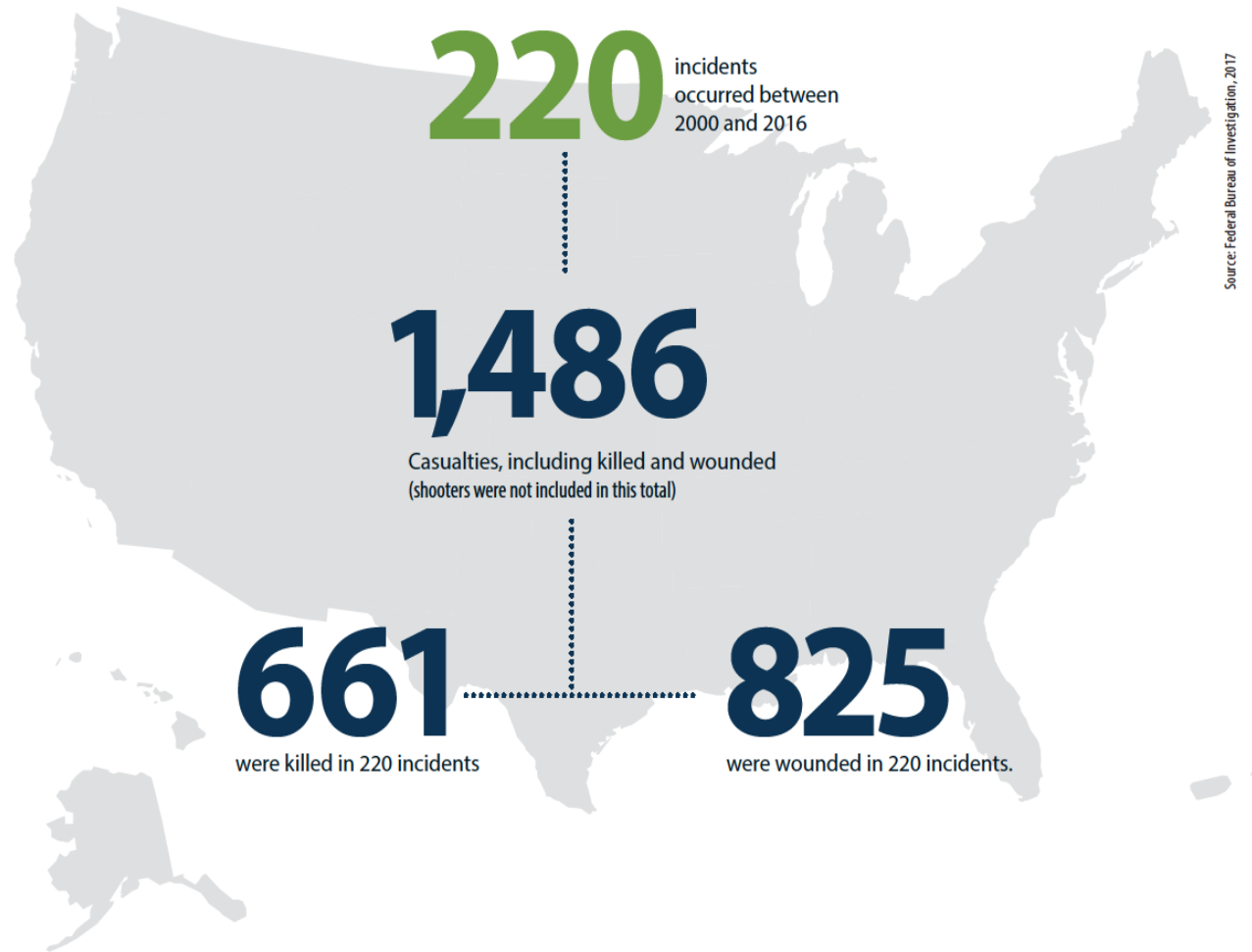


# Active Shooter

## DHS active shooter definition

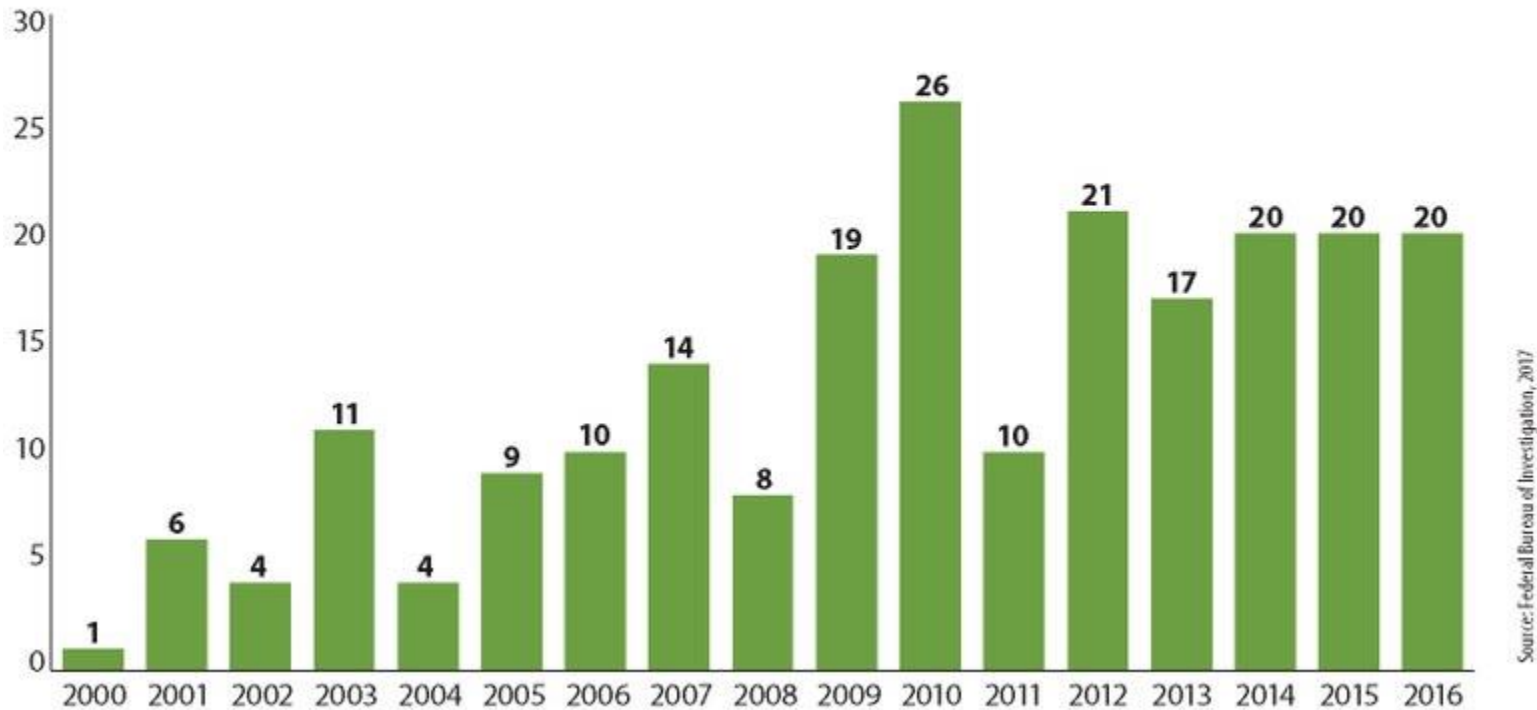
The United States Department of **Homeland Security** defines the **active shooter** as "an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, **active shooters** use firearm(s) and there is *no pattern or method to their selection of victims.*"

# Quick Look: 220 Active Shooter Incidents in the United States Between 2000-2016



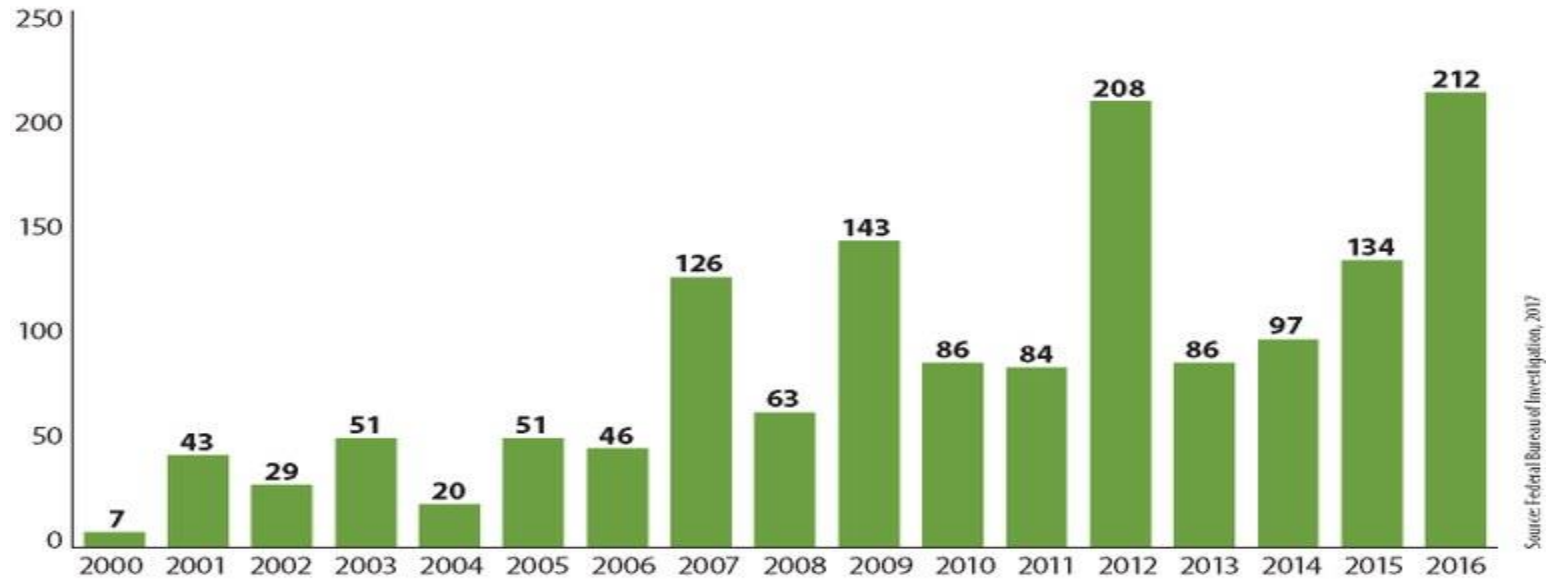
Source: Federal Bureau of Investigation, 2017

## Quick Look: 220 Active Shooter Incidents in the United States Between 2000 - 2016 Incidents Per Year



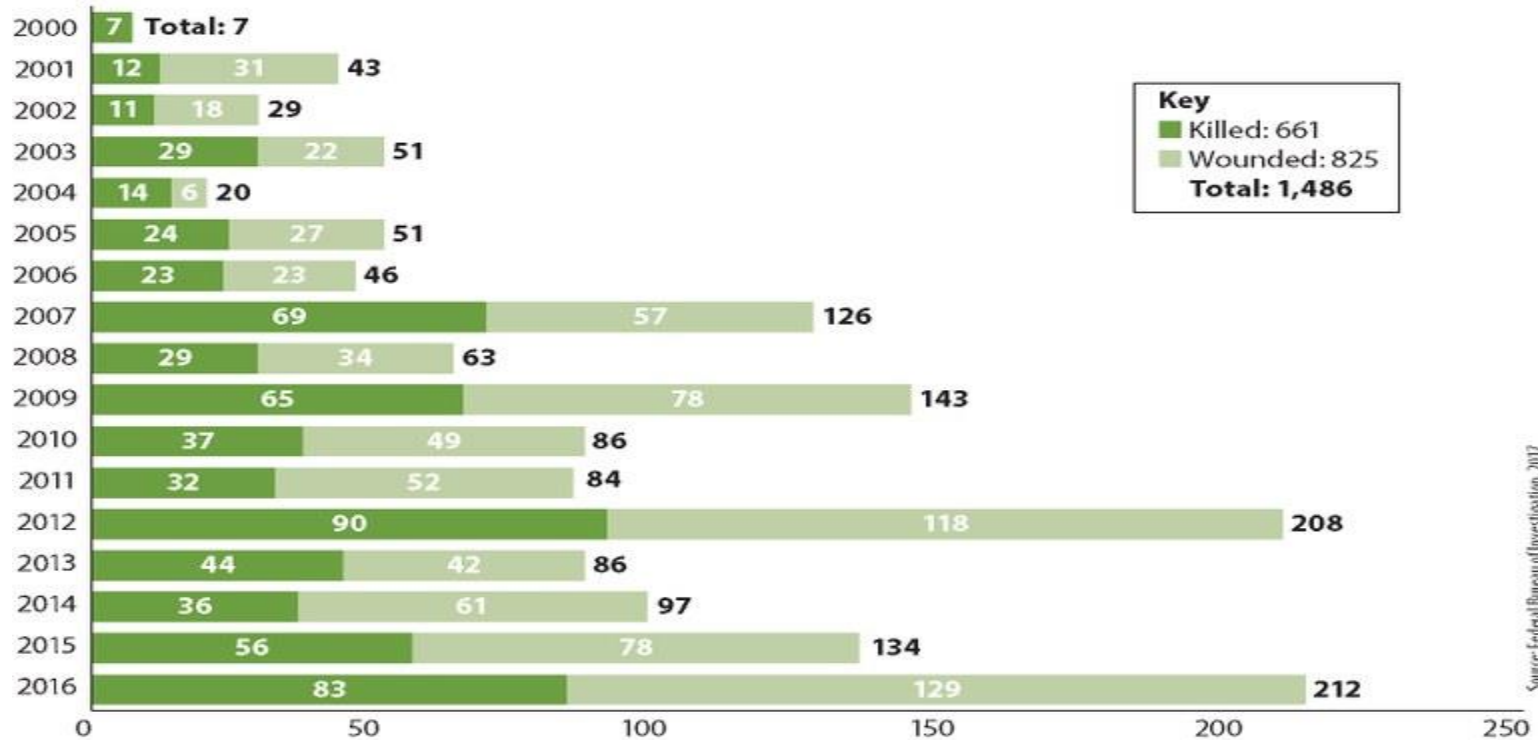
The above bar chart contains the numbers of active shooter incidents in the United States, broken down by year, from 2000 to 2016. Those yearly numbers are: 2000, one incident; 2001, six incidents; 2002, four incidents; 2003, 11 incidents; 2004, four incidents; 2005, nine incidents; 2006, 10 incidents; 2007, 14 incidents; 2008, eight incidents; 2009, 19 incidents; 2010, 26 incidents; 2011, 10 incidents; 2012, 21 incidents; 2013, 17 incidents; 2014, 20 incidents; 2015, 20 incidents; and 2016, 20 incidents. The total number of active shooter incidents during the time frame was 220.

## Quick Look: 220 Active Shooter Incidents in the United States Between 2000 - 2016 Casualties Per Year



The above bar chart contains statistics, broken down by year, of the number of casualties that resulted from active shooter incidents from 2000 to 2016. Those yearly numbers are: 2000, seven; 2001, 43; 2002, 29; 2003, 51; 2004, 20; 2005, 51; 2006, 46; 2007, 126; 2008, 63; 2009, 143; 2010, 86; 2011, 84; 2012, 208; 2013, 86; 2014, 97; 2015, 134; and 2016, 212. The total number of casualties for this time frame was 1,486.

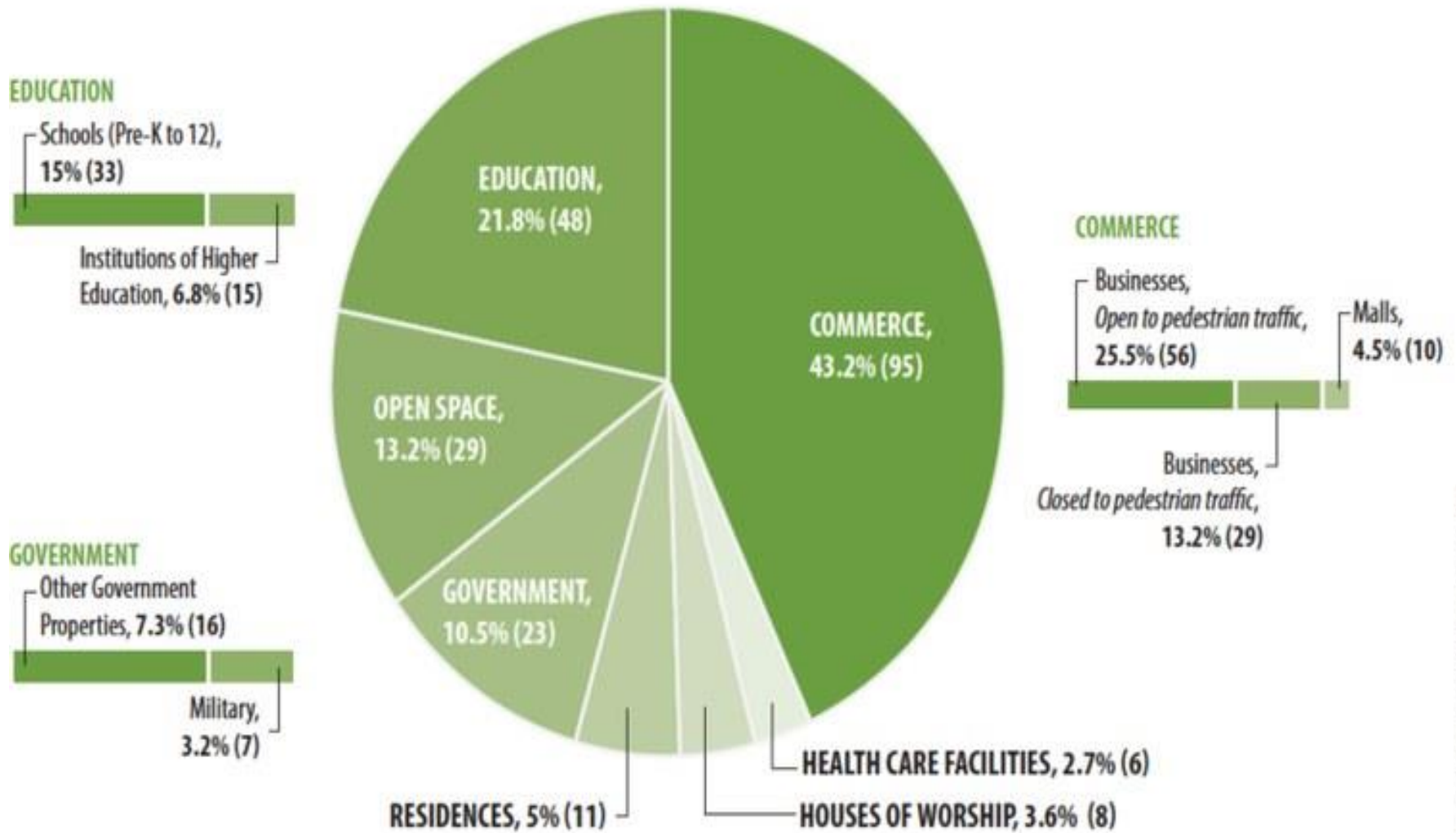
## Quick Look: 220 Active Shooter Incidents in the United States Between 2000 - 2016 Casualty Breakdown Per Year



The above stacked bar chart includes statistics on the number of killed or wounded casualties, broken down by year, after active shooting incidents in the United States between 2000 and 2016. Those numbers are: 2000, seven killed; 2001, 12 killed and 31 wounded; 2002, 11 killed and 18 wounded; 2003, 29 killed and 22 wounded; 2004, 14 killed and six wounded; 2005, 24 killed and 27 wounded; 2006, 23 killed and 23 wounded; 2007, 69 killed and 57 wounded; 2008, 29 killed and 34 wounded; 2009, 65 killed and 78 wounded; 2010, 37 killed and 49 wounded; 2011, 32 killed and 52 wounded; 2012, 90 killed and 118 wounded; 2013, 44 killed and 42 wounded; 2014, 36 killed and 61 wounded; 2015, 56 killed and 78 wounded; and 2016, 83 killed and 129 wounded. During the time frame, the total number killed was 661 and the total number wounded was 825.

# Quick Look: 220 Active Shooter Incidents in the United States Between 2000 - 2016

## Location Categories



# Active Shooter vs. Hospital Shootings

## **DHS active shooter definition**

The United States Department of **Homeland Security** defines the **active shooter** as "an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, **active shooters** use firearm(s) and there is ***no pattern or method to their selection of victims.***"

## **Hospital Related Shootings**

Established classification of workplace violence does not appear to adequately describe hospital shooting–related violence.

In fact, unlike those in education campuses, most hospital shootings have an intended specific target. Almost 75% of shooting events reported within hospitals were highly targeted (grudge, suicide, ill relative, escape attempt). Only about a fifth of all victims were employees, and few of these were physicians or nurses.



# Active Shooter in a Healthcare Environment

## PROMOTE AWARENESS



### ▶ New Hire Orientation

- \* Discuss Weapons Policy – 30.06 (Concealed) 30.07 (Open Carry) posted handgun signs
- \* Familiarization with hospital/department floor plans
- \* Annual Training (Internal/External Disaster Drills, Department Specific Training, Annual Refreshers)
- \* Lunch and Learn Education – Training provided by local L.E.
- \* Department in-services (*staff interaction and feedback*)
  - ▶ – RUN/HIDE/[FIGHT Video](#)

# Security Policies, Procedures and Protocols

Ask yourself... are we doing what we say?

- ▶ Are appropriate committees, management or other decision makers involved with reviewing newly created or revised policies?
- ▶ Are vendors, emergency service providers, or other internal/external resources involved with procedural changes as applicable?
- ▶ Are third party partners (contract/agency) involved with policy review as they apply with the service agreement? (what are their procedures?)
- ▶ Are appropriate references (local, state and federal) included in the policy relative to safety, security and emergency management?

Ask yourself... are our policies enforceable?



# Security Policies, Procedures and Protocols CONTINUED –

*Security Management Plan – Review Annually*

Policies – key examples such as:

Access/Key Control Management

**Active Shooter (*Current Hospital Floor Plans*)**

CCTV Surveillance

Forensic Patient

Infant Security

Lockdown Procedure (Outside Threats)

Security Weapons

Visitors Policy

Workplace Violence Prevention Program



# Security Staff Training & Competencies

## TRAINING

- ▶ Web based “on-line” Security Training
- ▶ Crisis Intervention Training
- ▶ Satori Alternative for Managing Aggression (SAMA)
- ▶ Level III Requalification Training
- ▶ Law Enforcement Partnership In-Service/Training

## COMPETENCIES *(to name a few)*

- ▶ Patient Restraint
- ▶ Use of Weapons
- ▶ Use of Force
- ▶ Baby Moses Law
- ▶ Security Officers Emergency Response
- ▶ Report Writing



# SECURITY DEPARTMENT COMMUNITY RELATIONSHIPS

## Downtown Security Network

**Comprised of the following business industries in downtown San Antonio:**

Lodging – Financial – Retail - Government (City Council Districts) - Healthcare Providers - Have for Hope (Homeless Community Center) - Centro San Antonio

San Antonio Police Department (Bike Patrol, San Antonio Fear Free Environment (SAFFE) Unit, Homeless Outreach and Positive Encounters (H.O.P.E.) Unit and Park Police

### **What is the benefit?**

Community Networking

Sharing information regarding reported events, incidents, etc.

Guest speakers on topics of safety, security, law enforcement, fraud, downtown events/projects, etc.

Opportunities to attend other community functions relative to safety and security



# SECURITY DEPARTMENT COMMUNITY RELATIONSHIPS cont-

## Security Service Agreements

- ▶ Proprietary Security Department licensed to provide security services anywhere in the State of Texas

## What is the benefit?

- ▶ Enhanced security on and in the proximity of the hospital campus (Medical Office Buildings, Clinics, Ambulatory Surgery Centers, etc.)
- ▶ Continuity of service for hospital departments that lease in Medical Office Buildings, in addition to non-hospital tenants
- ▶ Reduction of liability by providing security contract services to healthcare related services only
- ▶ Vetted through our Legal Department
- ▶ Revenue generating opportunities



# Hospital Security Response – Active Shooter

- ▶ Respond immediately to the area specified.
- ▶ Do not enter the area.
- ▶ Take a position in a concealed observation area, out of the immediate sight of the Active Shooter.
- ▶ Direct the general public away from the Security Alert, Violent Person with Weapon location.
- ▶ Assess the situation and relay all information to the Command Center and/or PBX Operator/Security Dispatcher until arrival of the local law enforcement agency.
- ▶ Maintain position observing the situation until relieved by the local law enforcement agency.
- ▶ During an active shooter situation, if the shooter is actively shooting and the shooter is visible without a hostage, eliminate the threat to protect lives. If the shooter is not visible, or is with hostage, do not attempt to eliminate the shooter.
- ▶ Follow all instructions of the local law enforcement agency.

# Staff Response to Active Shooter

- ▶ If you are not involved in the Active Shooter situation:
  - Remain in place! Do NOT report to the Active Shooter location.
  - Shut doors, windows and blinds.
  - Stay low to the ground if possible.
  - Remain calm and quiet.
  - Wait for further instructions.
  - Use caution when responding to fire alarms during an Active Shooter event, it could be a scheme to draw more people into the firing field.





# Staff Response to Active Shooter con't

- ▶ If you are involved in the active shooter situation:
  - Remain calm & quiet.
  - Do not do anything to provoke the shooter.
  - Try to warn others to take immediate shelter (patients, associates, visitors, etc.)
  - If possible, proceed to a room that can be locked or barricaded.
    - Turn off light or sound sources.
    - Close blinds to windows and doors.
    - Block windows and doors with furniture, file cabinets, etc.

# Staff Response to Active Shooter con't

- ▶ Silence cell phones.
- ▶ Turn off radios and other devices that emit sound or light.
- ▶ Keep out of sight.
- ▶ Take cover - behind walls, on the floor or under your desk.
- ▶ If you can do so safely, quietly call the hospital emergency phone number or 911
  - Provide information regarding the situation, including if shots were fired, a description of shooter, the last known location of shooter, any victims and the number of victims, any suspicious devices and their location(s).



# Staff Response to Active Shooter con't

- ▶ Avoid actions that would endanger yourself. Do NOT try to be a "HERO!"



- ▶ Do not respond to voice commands until you can identify with certainty that they are being issued by a law enforcement official or hospital security (the shooter may be trying to lure you from safety).
- ▶ Wait patiently until a uniformed Police Officer provides an "ALL CLEAR" signal.

# Active Shooter – If You Are The Hostage

**HOSTAGE** - a person being held forcibly against their will, with or without a weapon and /or being used as a shield by the perpetrator.

- ▶ Remain calm and avoid drastic actions.
- ▶ The initial 45 minutes are the most critical.
- ▶ Be alert and follow instructions.
- ▶ Don't speak unless spoken to and then only when necessary.
- ▶ Avoid arguments or appearing hostile.
- ▶ Treat captor with respect.
- ▶ Expect the unexpected.



# Active Shooter – If You Are The Hostage con't.

- ▶ If medications, first aid, or restroom privileges are needed by anyone, say so.
- ▶ Be observant, you may be released or able to escape. You can help others with your observations.
- ▶ Be prepared to speak with law enforcement personnel on the phone.
- ▶ Do **exactly** what the officers instruct.



# What to Expect From Responding Police Officers


The objectives of responding police officers are:

- ▶ Immediately engage or contain the Active Shooter in order to stop life threatening behavior.
- ▶ Identify threats such as improvised explosive devices.
- ▶ Identify victims to facilitate medical care, interviews and counseling.
- ▶ Investigation.



# What to Expect From Responding Police Officers – con't

Police officers responding to an active shooter or hostage situation are trained to proceed immediately to the area in which shots were last heard in order to stop the shooting as quickly as possible. The first responding officers may be in teams;

- ▶ They may be dressed in normal patrol uniforms, or they may be wearing external ballistic vests and Kevlar helmets or other tactical gear
  - ▶ The officers may be armed with rifles, shotguns or handguns
  - ▶ Do exactly as the officers instruct. The first responding officers will be focused on stopping the active shooter and creating a safe environment for medical assistance to be brought in to aid the injured
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# What to Expect From Responding Police Officers – Hostage Situation con't

- ▶ Police officers responding to a hostage situation are trained to proceed immediately to the area and initiate negotiations with the assailant(s).
- ▶ Do exactly as the officers instruct.
- ▶ The police officers goal is to end the hostage situation through negotiations, or if deemed necessary, stopping the assailant from injuring or killing the hostage(s) to create a safe environment for medical assistance to be brought in to aid the injured.





# RUN/HIDE/FIGHT

If a safe path is available, **RUN**:

- ▶ Do not hesitate to get out
- ▶ Leave your belongings
- ▶ Prevent others from entering the area
- ▶ Call 911 when you are safe



# RUN/HIDE/FIGHT

If you can't get out safely, **HIDE:**

- ▶ Stay out of Shooter's view and be quiet
- ▶ Silence you phone, radio or any other electronic devices
- ▶ Lock/barricade doors
- ▶ Call 911 if it is safe to do so



# RUN/HIDE/FIGHT

AS A LAST RESORT, **FIGHT:**

- ▶ Fight with all-out commitment
- ▶ Be physically aggressive
- ▶ Use improvised weapons
- ▶ Fight to incapacitate the shooter



**QUESTIONS ?**

**THANK YOU!!!**

