Incident Response Guide: Active Shooter

# Mission

To protect patients, staff, and visitors during an active shooter incident.

# Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.

Use this response guide as a checklist to ensure all tasks are addressed and completed.

# Objectives

* Ensure the safety of patients, staff, and visitors
* Notify law enforcement, staff, patients, and visitors of the threat
* Contain the scene and minimize the number of potential victims
* Coordinate the hospital response with the law enforcement incident command system
* Return to normal operations as quickly as possible

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| **Immediate Response (0 – 10 minutes)** | | | | |
| **Section** | **Officer** | **Time** | **Action** | **Initials** |
| **Command** | **Incident Commander** |  | Ensure notification of all staff, patients, and visitors of the threat using mass notification, overhead page, radios, and phones, as appropriate. |  |
|  | Notify law enforcement and provide details of the event. |  |
|  | Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status. |  |
|  | Activate the Emergency Operations Plan and Active Shooter Plan. |  |
|  | Activate the Hospital Command Center and the applicable Hospital Incident Management Team positions. Ensure the location of the Hospital Command Center (and the routes to and from it) is in an offsite location or in a secured area away from any danger posed by the shooter. |  |
|  | Establish a Liaison with law enforcement upon their arrival. |  |
|  | Establish operational periods, objectives, and a regular briefing schedule. Consider the use of the Incident Action Plan Quick Start for initial documentation of the incident. |  |
| **Public Information Officer** |  | Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander as directed. |  |
| **Liaison Officer** |  | Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, and healthcare coalition coordinator),to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the hospital. |  |
| **Safety Officer** |  | Ensure the safety of patients, families, visitors, and staff during evacuation procedures. |  |

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| **Immediate Response (0 minutes – 10 minutes)** | | | | |
| **Section** | **Branch/Unit** | **Time** | **Action** | **Initials** |
| **Operations** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks. |  |
| **Medical Care Branch Director** |  | Ensure all staff have basic information about current location of shooter, designated escape routes, and safe zones. |  |
|  | Place the emergency department on diversion. |  |
|  | Initiate the shelter-in-place of all patients who are non-ambulatory. |  |
|  | Assist in the evacuation of other personnel as directed. |  |
| **Security Branch Director** |  | Initiate external lockdown of the hospital as approved by the Incident Commander:   * Deny all entry; direct those seeking medical care to nearest hospital * Deny all exits; direct those trying to leave the hospital to a designated safe holding area * Coordinate movement within the campus with law enforcement and Incident Commander |  |
|  | Consider activation of a Law Enforcement Interface Unit Leader to coordinate activities and information with responding law enforcement. |  |
|  | Establish communications with responding law enforcement. |  |
|  | Provide law enforcement with the shooter’s description, armament, and last known location. |  |
|  | Provide law enforcement with surveillance camera footage, hospital maps, blueprints, master keys, card access, search grids, and other data as requested. |  |
|  | As directed, utilize access control system and closed circuit cameras to aid the law enforcement assault teams and internal responses (shelter-in-place or evacuations) relative to the shooter’s location. |  |
|  | Assist with the safe evacuation of patients, staff, and visitors as directed. |  |
|  | Coordinate the overall response to ensure effective communications to and from potential victims within the hospital relative to the shooter’s location, and shelter-in-place or evacuation response actions as directed. |  |
| **Planning** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks. |  |
| **Situation Unit Leader** |  | Consolidate all reports regarding the location and description of the shooter. Ensure the real time dissemination of this critical information to all parties as directed. |  |

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| **Intermediate Response (10 minutes – 2 hours)** | | | | |
| **Section** | **Officer** | **Time** | **Action** | **Initials** |
| **Command** | **Incident Commander** |  | Suspend all nonessential services. |  |
|  | Inform agency executives, Board of Directors, corporate headquarters and others as appropriate, of ongoing operations and incident status. |  |
| **Public Information Officer** |  | Designate and establish a media staging area in coordination with law enforcement and the Incident Commander. |  |
|  | Establish contact with media and inform them of the media staging area; provide briefings as directed. |  |
|  | Provide approved messages to media, patients, visitors, and staff as directed. |  |
| **Liaison Officer** |  | Notify the Department of Health Services and licensing agencies of the incident. |  |
|  | Ensure continued updates of appropriate information to community partners, local authorities, and others as directed. |  |
| **Safety Officer** |  | Complete HICS 215A to assign, direct, and ensure safety actions are adhered to and completed. |  |

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| **Intermediate Response (10 minutes – 2 hours)** | | | | |
| **Section** | **Branch/Unit** | **Time** | **Action** | **Initials** |
| **Operations** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks. |  |
| **Medical Care Branch Director** |  | Continue to coordinate the evacuation of patients and personnel as directed and as needed. |  |
|  | Treat and evacuate wounded victims as directed and when deemed safe to do so. |  |
| **Infrastructure Branch Director** |  | Monitor critical systems such as medical gases, water, electricity and others as appropriate for potential disruption caused by stray gunfire penetrations. |  |
| **Security Branch Director** |  | As directed, utilize the access control system and closed circuit television to aid law enforcement in the clearing of the hospital. |  |
|  | Maintain the external lockdown of the hospital. |  |
| **Planning** | **Section Chief** |  | Establish operational periods, incident objectives and the Incident Action Plan in collaboration with the Incident Commander. |  |
|  | Begin planning for alternate care sites for evacuated patient care areas that may not be immediately available. |  |
| **Resources Unit Leader** |  | Initiate staff and equipment tracking. |  |
| **Situation Unit Leader** |  | Document victim information, witness information, and patient movement. |  |
|  | Continue to provide situation reports to all parties as requested and as needed. |  |
|  | Initiate patient and bed tracking using HICS 254. |  |
| **Logistics** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks. |  |
| **Support Branch Director** |  | Coordinate the transportation services (ambulance, air medical services, and other transportation) with the Operations Section (Medical Care Branch) and appropriate external Incident Command Post or jurisdictional authority to ensure safe patient relocation, if necessary. |  |
| **Finance/ Administration** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks. |  |
| **Time Unit Leader** |  | Track hours associated with the emergency response. |  |

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| **Extended Response (2 hours - 8 hours)** | | | | |
| **Section** | **Officer** | **Time** | **Action** | **Initials** |
| **Command** | **Incident Commander** |  | With the Public Information Officer, prepare to speak with the media, stakeholders, staff, patients, and visitors as coordinated with the field-level Incident Command Post or jurisdictional authority. |  |
| **Public Information Officer** |  | Continue media briefings and updates as directed; work within the Joint Information Center, if available. Continue to provide approved messaging to media, patients, visitors, and staff. |  |
| **Liaison Officer** |  | Ensure continued updates of appropriate information to community partners, local authorities, and others as directed. |  |
| **Safety Officer** |  | Update the Safety Plan for extended operations based on modifications in entry and exit points, visiting hours, entry onto campus, etc. |  |

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| **Extended Response (2 hours - 8 hours)** | | | | |
| **Section** | **Branch/Unit** | **Time** | **Action** | **Initials** |
| **Operations** | **Section Chief** |  | Determine the need to cancel or postpone procedures, appointments, and visiting hours based on the projected length and impact of the incident. |  |
| **Medical Care Branch Director** |  | Where approved, return evacuated patients to their respective patient care areas. |  |
|  | Arrange for the transfer of patients from displaced patient care areas to approved alternate care sites. |  |
| **Security Branch Director** |  | Modify the external lockdown of the hospital, as directed, to maintain the integrity of the crime scene, yet allow limited access. |  |
| **Patient Family Assistance Branch Director** |  | Ensure the debriefing of, and support for, families of affected patients. |  |
| **Planning** | **Section Chief** |  | Plan for the next operational period and hospital shift change, if any; hospital and campus entry and exit relative to lockdown; impact on canceled procedures and appointments, etc. Work with law enforcement to ensure continued security of hospital and ongoing operations. |  |
|  | Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure a Demobilization Plan is being readied. |  |
| **Situation Unit Leader** |  | Continue tracking the movement and disposition of patients, staff, and visitors. |  |
|  | Continue documenting the victim, witness, and patient information. |  |
| **Documentation Unit Leader** |  | Ensure complete documentation of all postponed and canceled appointments and procedures. |  |
| **Logistics** | **Support Branch Director** |  | Coordinate victim support services and establish those services in a safe zone as approved by the Incident Commander. |  |

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| **Demobilization/System Recovery (8 hours – 24 hours)** | | | | |
| **Section** | **Officer** | **Time** | **Action** | **Initials** |
| **Command** | **Incident Commander** |  | With the Public Information Officer and Joint Information System, prepare to speak with media. |  |
|  | Ensure patients, staff, and visitors have access to behavioral health services. |  |
| **Public Information Officer** |  | Develop an information release for media; work with law enforcement on details to be released; ensure the family of any wounded or deceased person is made aware prior to the media release of information. |  |
| **Liaison Officer** |  | Ensure that all impacted persons and community partners are notified of incident resolution in accordance with local policies and procedures. |  |
| **Safety Officer** |  | Provide incident documentation to the Documentation Unit Leader. |  |

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| **Demobilization/System Recovery (8 hours – 24 hours)** | | | | |
| **Section** | **Branch/Unit** | **Time** | **Action** | **Initials** |
| **Operations** | **Section Chief** |  | Oversee the restoration of normal operations. |  |
| **Medical Care Branch Director** |  | Reschedule canceled surgeries, procedures, and outpatient appointments. |  |
|  | Repatriate transferred patients, if applicable. |  |
|  | Arrange for the transfer of patients from alternate care sites back to reopened patient care areas. |  |
| **Infrastructure Branch Director** |  | Repair or replace any systems damaged by stray gunfire penetrations. |  |
| **Security Branch Director** |  | Demobilize the hospital lockdown as directed. |  |
| **Patient Family Assistance Branch Director** |  | Plan for the safe and confidential reunification of incident victims with family members. |  |
| **Planning** | **Section Chief** |  | Conduct debriefings and hotwash with:   * Command Staff and section personnel * Administrative personnel * All staff * All volunteers * First responders |  |
|  | Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including:   * Summary of the incident * Summary of actions taken * Actions that went well * Actions that could be improved * Recommendations for future response actions |  |
| **Situation Unit Leader** |  | Provide incident documentation to the Documentation Unit Leader. |  |
| **Documentation Unit Leader** |  | Ensure that all documentation produced during the response and recovery is correlated and available for after action review. |  |
|  | Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies. |  |
| **Demobilization Unit Leader** |  | Identify issues and necessary actions to return to normal operations, ensuring all cancellations and postponements are included. |  |
|  | Complete the Demobilization Plan and distribute it as per policy. |  |
| **Logistics** | **Section Chief** |  | Inventory all Hospital Command Center and hospital supplies and replenish them as necessary, appropriate, and available. |  |
| **Support Branch Director** |  | Ensure the debriefing of affected personnel. |  |
|  | Plan for the safe and confidential reunification of staff victims with family members. |  |
|  | Ensure behavioral health services are made available to staff. |  |
| **Finance/ Administration** | **Section Chief** |  | Compile final response and recovery costs and expenditure summary and submit to the Incident Commander. |  |
| **Compensation / Claims Unit Leader** |  | Provide a summary of incident’s projected costs due to modification in operations. |  |

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| **Documents and Tools** |
| **Emergency Operations Plan, including:**   * Active Shooter Plan * Shelter-in-Place Plan * Evacuation Plan * Lockdown Plan * Employee Health monitoring and treatment Plan * Patient, staff, and equipment tracking procedures * Business Continuity Plan * Behavioral Health Support Plan * Alternate Care Site Plan * Security Plan * Fatality Management Plan * Emergency Patient Registration Plan * Risk Communication Plan * Interoperable Communications Plan * Demobilization Plan |
| **Forms, including:**   * HICS Incident Action Plan (IAP) Quick Start * HICS 200 – Incident Action Plan (IAP) Cover Sheet * HICS 201 – Incident Briefing * HICS 202 – Incident Objectives * HICS 203 – Organization Assignment List * HICS 205A – Communications List * HICS 214 – Activity Log * HICS 215A – Incident Action Plan (IAP) Safety Analysis * HICS 221 – Demobilization Checklist * HICS 251 – Facility System Status Report * HICS 253 – Volunteer Registration * HICS 254 – Disaster Victim/Patient Tracking * HICS 255 – Master Patient Evacuation Tracking |
| Job Action Sheets |
| Security Access Control System |
| Security Closed Circuit Television (CCTV) System |
| Hospital and campus floor plans, maps, and blueprints |
| Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication |

Hospital Incident Management Team Activation: Active Shooter

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| **Position** | **Immediate** | **Intermediate** | **Extended** | **Recovery** |
| **Incident Commander** | X | X | X | X |
| Public Information Officer | X | X | X | X |
| Liaison Officer | X | X | X | X |
| Safety Officer | X | X | X | X |
|  | | | | |
| **Operations Section Chief** | X | X | X | X |
| Medical Care Branch Director | X | X | X | X |
| Infrastructure Branch Director |  | X | X | X |
| Security Branch Director | X | X | X | X |
| Patient Family Assistance Branch Dir. |  |  | X | X |
|  | | | | |
| **Planning Section Chief** | X | X | X | X |
| Resources Unit Leader |  | X | X | X |
| Situation Unit Leader | X | X | X | X |
| Documentation Unit Leader |  |  | X | X |
| Demobilization Unit Leader |  |  |  | X |
|  | | | | |
| **Logistics Section Chief** |  | X | X | X |
| Support Branch Director |  | X | X | X |
|  | | | | |
| **Finance /Administration Section Chief** |  | X | X | X |
| Time Unit Leader |  | X | X | X |
| Compensation/Claims Unit Leader |  |  |  | X |