Postworkshop Learning Session: Active Attacker Exercise
Speakers

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  • PalAmerican Security

• Katie Subbotina, MDEM
  • Director, Global Risk Consulting
  • Paladin Risk Solutions
Active Attacker Exercise

Training Date: December 8, 2021

Rural Health Workshop

Presenters
Anjanette Hebert
Katie Subbotina
Agenda

- Establish risk relevance
- Type of events
- Response basics
- Plan considerations
Active Attacker Definition

Active Shooter

- Someone who is actively engaged in killing or attempting to kill people in a confined and populated area
- The Event is usually preplanned and the shooter prepared himself well
- The shooter most likely accepted that they may also die during the shootout
- Most events do not last long (over within 19 minutes) but cause a lot of damage

Shooting Incident

- Spontaneous, unplanned events that may involve two participants who either know or do not know each other
- Causes can include: impulsive action, extreme anger or loss of control
  Involved one or two shots from a gun
• 56% ended on the shooter’s initiative before the police arrived
• 63 incidents with the duration that could be ascertained:
  • 70% ended in 5 minutes or less
  • 36.5% ended in 2 minutes or less
  • 13% involved unarmed citizens facing the danger of the active shooter, they were able to safely and successfully disrupt the shooting
Relevant Statistics

Quick Look: 277 Active Shooter Incidents in the United States Between 2000 - 2018

Annual Incidents Per Year

Quick Look: 277 Active Shooter Incidents in the United States Between 2000 - 2018

Casualties Per Year

Incidents Per Year

Casualties Per Year
Quick Look: 277 Active Shooter Incidents in the United States Between 2000 - 2018
Casualty Breakdown Per Year

<table>
<thead>
<tr>
<th>Year</th>
<th>Killed</th>
<th>Wounded</th>
<th>Total</th>
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<tbody>
<tr>
<td>2000</td>
<td>7</td>
<td></td>
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<td>2001</td>
<td>31</td>
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<td>2004</td>
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<td>2006</td>
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<td>2008</td>
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<td>2009</td>
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<td>2010</td>
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<tr>
<td>2011</td>
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<td>2016</td>
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<td>2017</td>
<td>128</td>
<td>591</td>
<td>719</td>
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<tr>
<td>2018</td>
<td>213</td>
<td></td>
<td>213</td>
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</tbody>
</table>

Source: FBI's Active Shooter reports, 2018
Quick Look: 277 Active Shooter Incidents in the United States Between 2000 - 2018

Location Categories

- **EDUCATION**: 26.6% (57) - Schools (Pre-K to 12), 15.2% (42);
  Institutions of Higher Education, 5.4% (15).
- **COMMERCIAL**: 43.7% (121) - Malls, 3.6% (10);
  Businesses, Open to pedestrian traffic, 26.7% (74);
  Businesses, Closed to pedestrian traffic, 13.4% (37).
- **GOVERNMENT**: 9.4% (26) - Other Government Properties, 6.9% (19);
  Military, 2.5% (7).
- **OPEN SPACE**: 13.4% (37).
- **RESIDENCES**: 4.3% (12).
- **Houses of Worship**: 4.0% (11).
- **HEALTH CARE FACILITIES**: 4.3% (12).
- **OTHER LOCATION**: 0.4% (1).

Source: Federal Bureau of Investigation, 2018
Active attacker incidents are as likely to occur in both rural and urban healthcare facilities at any time.

- **Challenges:**
  - Thousands of patients every day in many different departments
    - Location of departments matter for response procedures
  - Day-time programs increase the number of people visiting the organization
  - 24 hours visitation policy
    - Geographical location of the hospital determines overall risk
  - Many entrances and exits
    - Patient access and demographics
  - Hospital infrastructure:
    - Size and age of the facility
    - Type and amount of available technology
  - Police in the ED can lead to a weapon discharge
  - Hospital / Healthcare facility location determines First Response capabilities

Active shooter incidents happen quickly without giving much time for deciding on the best response strategy.
Active attacker incidents are as likely to occur in both rural and urban healthcare facilities at any time.

- Challenges:
  - *Hours of Operations*: variable staffing levels
  - *Staffing levels*: training and response capabilities
  - *Service delivery model*: type of services provided on site
  - *Geographical location* of the clinic determines overall risk
  - *Mental Health* considerations: available community resources
  - *Prescription management*: narcotics prescription policy

Active shooter incident happen quickly without giving much time for deciding on the best response strategy.
Types of Active Attacker Events

Type 1: Criminal Intent

- No formal or legitimate connection with the workplace – the chief motive is theft
- Deadly weapon is likely used with a risk of fatal injuries to the worker
- Majority of workplace homicides are Type 1 shootings

Type 2: Customer / Patient

- The shooter maybe a patient, employee or a customer
- Violence usually occurs during working hours with the argument being longstanding
- Ex: a father is not allowed to see their child

Type 3: Worker to Worker

- Former or current employee engaged in a workplace conflict or interpersonal differences
- 7% of workplace homicides are due to Type 3 events
**Types of Attacks**

Push: walk in the hospital with guns blazing and start shooting right away
* Prevention: search everyone from the outside – unlikely to be executed
* Little time to react and if you lockdown the facility, you can prevent them from reaching high risk area – rely on technology to slow their path

Smuggling weapons: predetermined event where layout was scouted and a target identified (event or a person)
* Have means of bringing weapons in the facility

Drive by shooting:
* Security will be tasked with scene preservation and severe access control restriction
Requirement:

• Joint Commission – new Workplace Violence Requirements in the form of 3 new Elements of Performance and 2 revised Elements of Performance

Resources:
• NFPA 3000
• IAHSS Guidelines and Design Guideline
  • 02.11 – Firearms in the Healthcare Security Program
• Upcoming: IACP – Active Shooter Protocols for Private and Public partnership
Exercise Objectives

Pre-event
• Weapons policy and management

During-event
• Isolating the Threat and Identifying Safe Spaces

Post-event
• Internal and External Communications
Risk Treatment through Emergency Management

“We don’t rise to the level of our expectations; we fall to the level of our training.” - Archilochus

**Emergency Management**

**Prevention/Mitigation**
- Prevention: cannot reasonably prevent
- Mitigation: Program Establishment, Risk Treatment

**Preparedness**
- Preparedness: Cycle of Preparedness

**Response**
- Response: Information gathering; working with first responders

**Recovery**
- Recovery: Mental Health support; staffing considerations
<table>
<thead>
<tr>
<th>Prevention</th>
<th>Mitigation</th>
<th>Preparedness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures to prevent an Active Attacker</td>
<td>Measures to lower the risk of an active attacker event occurring</td>
<td>Activities to prepare for an event as per CMS requirements</td>
</tr>
<tr>
<td>Prevention can be achieved through a robust mitigation program</td>
<td>Establish a Workplace Violence program</td>
<td>Develop, train, and exercise active attacker response</td>
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<tr>
<td></td>
<td>Monitor Community Crime Statistics: establish a relationship with local law enforcement</td>
<td>Procure equipment to support response activities</td>
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<td>Establish a weapon’s policy</td>
<td>Work with first responders to coordinate response</td>
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<td>Identify means of alerting to an event</td>
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</tbody>
</table>
Active shooter incident is a dynamic event where assailant's path is difficult to predict.
During-Event

- Corporate perspective

Notification

First Responder arrival

Communication
<table>
<thead>
<tr>
<th>Immediately after</th>
<th>Patients, Staff and Visitors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Stop the bleed</td>
</tr>
<tr>
<td></td>
<td>• Accounting for safety of all staff</td>
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<td></td>
<td>• Internal notification and communication</td>
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<tr>
<td>Near Future</td>
<td>Staff and Facility Recovery</td>
</tr>
<tr>
<td></td>
<td>• Crime scene preservation – operational disruption</td>
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<tr>
<td></td>
<td>• Facility damage repair</td>
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<td></td>
<td>• Mental Health First Aid – staff turnover, stress leave, etc</td>
</tr>
<tr>
<td>Future</td>
<td>Recovery considerations</td>
</tr>
<tr>
<td></td>
<td>• Memorial considerations</td>
</tr>
<tr>
<td></td>
<td>• Ongoing Mental Health and stress leave staffing disruptions</td>
</tr>
<tr>
<td></td>
<td>• Reputational considerations</td>
</tr>
</tbody>
</table>
• During event: how will you alert of the emergency?
• After event: how and what will you communicate to stakeholders?

Internal

• During event: how will you alert of the emergency?
• After event: what messaging you will be communicating to stakeholders?

External
Emergency Preparedness Cycle
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Thank you for joining us!