i. Outline – Code Silver Lockdown

**CODE SILVER LOCKDOWN**

(Lockdown for an Active Shooter/Dangerous Weapon Situation)

If There Is Potential for an Active Shooter/Dangerous Weapon Situation

All Staff in the Vicinity of the Active Shooter/Dangerous Weapon Situation - Refer to Page 11

- **RUN** – Leave the area, removing patients and visitors, if possible. Do not take any belongings
- **HIDE** – If you cannot leave, take cover and hide in a room. Lock or barricade yourself in
  - When safe, dial 4444 or use Vocera to provide notification of the emergency – **Be as quiet as possible** - state area and/or room number clearly. Provide details of situation
- **FIGHT** – As a last resort, take action against the active shooter. Do not attempt to confront the active shooter if you have the option to evacuate or hide

Security Operations Centre

- Announce **Code Silver Lockdown (location)** over radio
- Contact Director of Protection Services
- Monitor CCTV and document the movements and actions of the active shooter

Refer to Page 15

Director of Protection Services / Delegate

- Establish the Incident Command Centre
- Receive status report / discuss initial action plan
- Consult with Senior Administration and Police

Refer to Page 19

Security

- **Do not respond to the incident site**
- Await direction from the Incident Commander

Refer to Page 15

Upon Hearing a Code Silver Lockdown Announcement

All Staff

- Cease duties and take cover. Close, lock and barricade doors
- Await instructions over the PA system
- **Do not approach the area**
- **Do not call Switchboard unless it is urgent**

Refer to Page 11

December 2017
i. Outline – Code Silver Lockdown

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1.0 General Overview

1.1 Rationale
The purpose of the Code Silver Lockdown procedure is to ensure the safety of staff, patients and visitors during an active shooter/dangerous weapon situation at the hospital. The announcement of a Code Silver Lockdown (location) will indicate to staff that an active shooter/dangerous weapon situation exists in the identified location. Staff will use the following guidelines and options to respond to the emergency.

1.2 Active shooter/dangerous weapon Definition
For the purposes of this code an active shooter/dangerous weapon situation is an individual engaged in killing or attempting to kill people in a confined and populated area.

The term “active killer” is also applicable to this type of situation, when a firearm is not used in the commission of the violence but a dangerous weapon is involved. However, in most cases of mass killings, firearms are used and there may be no pattern or method to the selection of victims. Active shooter/dangerous weapon situations are unpredictable and evolve quickly. Typically, the immediate deployment of law enforcement is required to stop the shooter and mitigate harm to victims. Because active shooter/dangerous weapon situations often are over within 10 – 15 minutes, before law enforcement arrives on the scene, individuals must be prepared mentally and physically to deal with an active shooter/dangerous weapon situation.

1.3 Recognizing Potential Workplace Violence
An active shooter/dangerous weapon in your workplace may be a current or former employee, or an acquaintance of a current or former employee. Intuitive managers and co-workers may notice characteristics of potentially violent behaviour in an employee. Employees should inform their supervisor or the Protection Services department (4142) of the potential for workplace violence due to direct knowledge, reasonable suspicion, observable warning signs or direct threat.

In addition to worker related active shooter/dangerous weapon situations, the nature of the hospital environment presents the possibility of active shooter/dangerous weapon situations arising from the public or patients; either in the form of patient family member visitors or ex-patients who return to the hospital to carry out violence.

1.4 Indicators of Potential Violence by a Person
People typically do not just snap but display indicators of potentially violent behaviour over time. If these behaviours are recognized, they often can be managed and treated. Historically, many attackers have had no prior violent criminal history.

Potential violent behaviours may include one or more of the following (this list of behaviours is not comprehensive, nor is it intended as a mechanism of diagnosing violent tendencies):
- Increased use of alcohol and/or illegal drugs
• Unexplained increase in absenteeism; vague physical complaints
• Noticeable decrease in attention to appearance and hygiene
• Depression/withdrawal
• Resistance and overreaction to changes in policy and procedures
• Repeated violations of company policies
• Increased severe mood swings
• Noticeably unstable, emotional responses
• Explosive outbursts of anger or rage without provocation
• Suicidal; comments about “putting things in order”
• Behaviour that is suspect of paranoia (e.g. “everybody is against me”)
• Increasingly talks of problems at home
• Escalation of domestic problems into the workplace; talk of severe financial problems
• Talk of previous incidents of violence
• Empathy with individuals committing violence
• Increase in unsolicited comments about firearms, other dangerous weapons and violent crimes

Additionally signs include:

History of violence

• Fascinated with incidents of workplace violence.
• Shows an extreme interest in or obsession with, weapons.
• Demonstrated violence towards inanimate objects.
• Evidence of earlier violent behaviour.

Threatening behaviour

• States intention to hurt someone (can be verbal or written).
• Holds grudges.
• Excessive behaviour (e.g. phone calls, gift giving).
• Escalating threats that appear well-planned.
• Preoccupation with violence.

Intimidating behaviour

• Argumentative or uncooperative.
• Displays unwarranted anger.
• Impulsive or easily frustrated.
• Challenges peers and authority figures.
Increase in personal stress

- An unreciprocated romantic obsession.
- Serious family or financial problems.
- Recent job loss or personal loss.

Negative personality characteristics

- Suspicious of others.
- Believes he or she is entitled to something.
- Cannot take criticism.
- Feels victimized.
- Shows a lack of concern for the safety or well-being of others.
- Blames others for his problems or mistakes.
- Low self-esteem.

Marked changes in mood or behaviour

- Extreme or bizarre behaviour.
- Irrational beliefs and ideas.
- Appears depressed or expresses hopelessness or heightened anxiety.
- Marked decline in work performance.
- Demonstrates a drastic change in belief systems.

Socially isolated

- History of negative interpersonal relationships.
- Few family or friends.
- Sees the company as a "family".
- Has an obsessive involvement with his or her job.

1.5 Medical Team Response During an Active shooter/dangerous weapon Situation

In all likelihood, it will be impossible and completely unsafe for medical teams to respond to the location of an active shooter/dangerous weapon situation until the Police arrive and/or the shooter is incapacitated. **Medical Emergency Codes will not be called for shooting victims until the incident site is secured by Police.**

1.6 Guidelines for Survival of an Active Shooter/Dangerous Weapon Situation

Quickly determine the most reasonable way to protect your own life. Remember that patients and visitors are likely to follow the lead of staff and managers during an active shooter/dangerous weapon situation.

- Be aware of your environment and any possible dangers
- Take note of the two nearest exits in any location you are in
• If you are unable to leave the incident location for whatever reason:
  • If you are in an office, stay there and secure the door
  • If you are in a hallway, get into a room and secure the door
  • Consider the difference between cover and concealment. Cover will protect from gunfire and concealment will merely hide you from the view of the shooter. Choose the best space that is available quickly.
• As a last resort and only when your life is in imminent danger, attempt to take the active shooter/dangerous weapon down. When the shooter is at close range and you cannot flee, your chance of survival is much greater if you try to incapacitate him/her.

1.7 Key Messages for Staff
Think about your area of work and the areas you travel through. If you saw a gun, heard gunshots or an overhead announcement for Code Purple Lockdown, where would you exit or hide quickly?

When you are safely hidden; call 4444 to notify Switchboard of an active shooter situation if it hasn’t already been announced. This allows Switchboard to make an overhead announcement and notify police via 911.

“Code Silver Lockdown” and the location will be announced. This warns everyone in the building. Lockdown is a universal term. Schools and daycares practice lockdown procedures routinely. If patients & visitors are familiar with the term lockdown, they will hide when they hear the announcement.

Security will keep themselves safe, and if possible, they will proceed to the entrances to assist police in responding quickly by directing them to the shortest route to the active shooter.

Do not use social media to post updates on the status of the incident. The active shooter or person with a dangerous weapon may be monitoring social media and you may inadvertently give them useful information.

1.8 Vocera Panic Alarm Function
Vocera communication devices feature a panic alarm function that can be activated by quickly “double-tapping” the Vocera button. When this is occurs, a Security Officer will use a standardized reply of “Hi (caller’s first name), is everything alright?” The caller should then indicate, whether they need assistance and their location. If it was an accidental activation, the caller should reply back indicating as such.

1.9 Response Options During an Active Shooter Situation:
1. Run (Evacuate) – If there is an accessible escape path, attempt to evacuate the location. Be sure to:
   • Have an escape route and plan in mind
   • Evacuate regardless of whether others agree to follow
   • Leave your belongings behind
• Help others escape, if possible
• Prevent others from entering an area where the active shooter/dangerous weapon may be
• Keep your hands visible
• Follow the instructions of Police Officers
• Call 4444 or use Vocera to make the emergency notification when you are safe.

2. **Hide** – If evacuation is not possible, find a place to hide where the active shooter/dangerous weapon is less likely to find you.
   • Your hiding place should:
     • Be out of the active shooter/dangerous weapon’s view
     • Provide protection if shots are fired in your direction (i.e. an office with a closed and locked door)
     • Not trap you or restrict your options for movement
   • To prevent an active shooter/dangerous weapon from entering your hiding place:
     • Lock the door
     • Blockage the door with heavy furniture
   • If the active shooter/dangerous weapon is nearby:
     • Lock the door
     • Silence your cell phone and Vocera
     • Turn off any sources of noise (e.g. radios, televisions, etc.)
     • Hide behind large objects (e.g. cabinets, desks, etc.)
     • Remain quiet
   • If evacuation and hiding are not possible:
     • Remain calm
     • Dial 4444 or 911 or use Vocera to make the emergency notification, if possible
     • If you cannot speak leave the line open and allow the dispatcher to listen

3. **Fight** (take action against the active shooter/dangerous weapon) – **As a last resort and only when your life is in imminent danger**, attempt to disrupt and/or incapacitate the active shooter/dangerous weapon by:
   • Acting as aggressively as possible against him/her
   • Throwing items and improvising weapons
   • Yelling
   • Committing to your actions
   • If others are available, work together to distract and attack the assailant as fiercely as possible
1.10 Notes Regarding the Arrival of Police
The objective of Police when they respond to an active shooter/dangerous weapon situation is to stop the active shooter/dangerous weapon as soon as possible. Officers will proceed directly to the area in which the last shots were heard.

- Police Officers may:
  - Be wearing normal uniforms or tactical gear, helmets, etc.
  - Be armed with rifles, shotguns and/or handguns
  - Use chemical irritants or incapacitating devices (e.g. pepper spray, stun grenades, Tasers, etc.) to control the situation
  - Shout commands and may push individuals to the ground for their safety

The first officers to arrive at the scene will not stop to help injured persons.

Expect rescue teams comprised of additional officers and emergency medical personnel to follow the initial officers. These rescue teams will treat and remove any injured persons. They may also call upon able-bodied individuals to assist in removing the wounded from the area.

Once you have reached a safe location you will likely be held in that area by Police until the situation is under control and all witnesses have been identified and questioned. Do not leave the safe location until Police have instructed you to do so.

1.11 How to React When Police Arrive
- Police Officers will be responding with the intent to use deadly force. Ensure you do not present yourself as a threat to them:
  - Drop any items in your hands (e.g. bags, jackets, etc.)
  - Immediately raise hands and spread fingers
  - Keep hands visible at all times
  - Remain calm and follow Officers’ instructions
  - Avoid making quick movements toward officers, such as attempting to hold on to them for safety
  - Avoid pointing, screaming and/or yelling
  - Do not stop to ask Officers for help or direction when evacuating, just proceed in the direction from which Officers are entering the area
  - The most important pieces of information to give Police are:
    - Location of the active shooter/dangerous weapon
    - Number of shooters, if more than one
    - Physical description of the shooter/s
    - Number and type of weapons held by the shooter/s
    - Number of potential victims at the location

1.12 Additional Emergencies During a Code Silver Lockdown
Should the fire alarm be activated, a Code Red will not be announced immediately.

There will be a discussion with Incident Command regarding the location of alarm origin and the last known location of perpetrator and the potential for a false alarm.
Incident Command will issue instructions to Switchboard on how to manage the alarm e.g. usual response with “Code Red (location)” or no response with a “Please disregard fire alarm” overhead page. If there is to be a response, Security and/or Maintenance responders will proceed as safely as possible to the location through Incident Command/law enforcement instruction. Switchboard will provide instructions to 911 for safe location for arrival of fire services to proceed into facility.

Should other alarms sound, Maintenance will be notified by telephone/pager for management and/or discussion with Incident Commander. Should 4444 calls be received for other emergency codes, overhead pages will not be issued until the caller ID is noted, recorded and a discussion with Incident Commander as to how to proceed is conducted.

1.13 References used for information in the General Overview and job actions:

- The James B. Haggin Memorial Hospital, Dr. Earl J. Motzer: Safety Tips & Guidelines Regarding Potential Active Shooter Incidents Occurring on Healthcare Organization Campuses, September 2007
- Carmdale: Active Shooter Guide, For people with the responsibility for the safety and security of others
- University Health Systems of Eastern Carolina Policy and Procedure, Code Silver – Active Threat, July 2011
- LiveProcess: Responding to Workplace Violence, October 2011
- New York Police Department, Raymond W. Kelly Police Commissioner, Active Shooter Recommendations and Analysis for Risk Mitigation, January 2011
- Queen of the Valley Medical Center, CODE Silver Response, August 2008
- City of Houston, Texas: RUN. HIDE. FIGHT. Surviving an Active Shooter Event (Video), July 2012
2.0 Response & Recovery – All Staff

Response

2.1 Upon Realizing There is Potential for an Active Shooter/Dangerous Weapon Situation

All Staff

☐ RUN - Leave the area, removing patients and visitors, if possible
  ☐ Leave your belongings behind
  ☐ Help others escape, if possible
  ☐ Prevent others from entering an area where the active shooter/dangerous weapon may be

☐ HIDE - If you cannot evacuate, take cover and hide in a room. Lock or barricade yourself inside

☐ Dial 4444 or use Vocera to provide notification of the emergency – Be as quiet as possible - silence your cell phone and Vocera, turn off sources of noise.

☐ State area and / or room number clearly. Provide details of situation:
  ☐ Location of the active shooter/dangerous weapon
  ☐ Number of shooters, if there is more than one
  ☐ Physical description of the shooter/s
  ☐ Number and type of weapons held by the shooter/s
  ☐ Number of potential victims at the location

☐ Do not attempt to confront the active shooter/dangerous weapon if you can evacuate or hide

☐ FIGHT - Only as a last resort and only if your life is in imminent danger attempt to disrupt and/or incapacitate the active shooter/dangerous weapon by:
  ☐ Acting as aggressively as possible against him/her
  ☐ Throwing items and improvising weapons
  ☐ Yelling
  ☐ Committing to your actions
  ☐ If others are available, work together to distract and attack the assailant as fiercely as possible

2.2 Upon Arrival of Police

All Staff

☐ Remain calm and follow Officers' instructions
☐ Put down any items in your hands (e.g. bags, jackets, etc.)
☐ Immediately raise your hands and spread your fingers
☐ Keep your hands visible at all times
Avoid making quick movements toward Officers, such as attempting to hold on to them for safety.
Avoid pointing, screaming and/or yelling.
Do not stop to ask Officers for help or direction when evacuating, just proceed in the direction from which Officers are entering the area.
Once you are in a safe area, remain there until dismissed by the Police.

2.3 If You Hear “Code Silver Lockdown” Announced Overhead
All Staff
Cease duties and take cover in a room. Assist patients and visitors with seeking cover, where possible and safe to do so. Close, lock and barricade doors.
Await instructions over the PA system.
Do not approach the incident area
Do not call Switchboard unless it is urgent.
Do not use social media to post updates on the status of the incident. The active shooter or person with a dangerous weapon may be monitoring social media and you may inadvertently give them useful information.

Recovery
2.4 Upon Notification That the Crisis Has Concluded
If you witnessed the active shooter/dangerous weapon situation you will need to provide a statement to the Police.
Large areas of the hospital may be designated as crime scenes and as a result could be unavailable to staff until Police are able to complete their investigation.
If the active shooter/dangerous weapon was or becomes an inpatient, complete Patient Behaviour Crisis Alert (BCA) record to activate alert in Patient’s Electronic Heath Record (in PCS) and on Teletracking System.
Post BCA stickers on patient profile, spine of patient chart and in patient’s room, as appropriate.
Those involved in the incident may take some “time out” to regain personal composure before returning to work, if necessary.
Victims may need to seek assistance for psychological distress from the Emergency Department. For applicable incidents, the Sexual Assault and Domestic Violence program may be contacted for consultation.
Participate in an incident debriefing session following the incident.
Watch for signs of critical incident stress and encourage one another to contact the Occupational Health & Infection Control Department for assistance, as needed.
3.0 Response & Recovery – Switchboard

Response

☐ If you are the person witnessing the active shooter/dangerous weapon situation respond using 9.0 – Response & Recovery – All Staff (page 11).

3.1 Upon Notification of a Code Silver Lockdown - Active Shooter/Dangerous Weapon Situation

Request the following information from the caller for Police:
Location of the Active Shooter/Dangerous Weapon:
Number of Active Shooter/Dangerous Weapons:
Description of Active Shooter/Dangerous Weapon(s):
Types and number of weapons involved:
Number of potential victims at the location:

☐ Close, lock and, if possible, barricade the door to the Switchboard room
☐ Announce Code Silver Lockdown (location) overhead
☐ When the Incident Command Centre is established you will be notified of the contact number: __________________

Monday to Friday (During normal business hours)
Notify:
☐ Police @ 911 (When speaking to Police do not use term Code Silver Lockdown. Instead say “Active Shooter”).
☐ Advise Police to meet Security at the Main Entrance off of Stuart St. The alternate meeting point, if the Main Entrance is unsafe, is the Emergency Department Entrance off of King St.
☐ Provide the information gathered in the table above
☐ The Police will require other detailed facts. Transfer them to Security Operations Centre to provide the information
☐ Security Operations Centre (4142), if not already aware
☐ President & CEO / Delegate (2341)
☐ Affected area Manager

After normal business hours, weekends and holidays
Notify:
☐ Police (911). When speaking to Police do not use term “Code Silver Lockdown”. Instead say “Active Shooter”.
☐ Advise Police to meet Security at the Main Entrance off of Stuart St. The alternate meeting point, if the Main Entrance is unsafe, is the Emergency Department Entrance off of King St.
☐ The Police will require detailed facts. Transfer them to Security Operations Centre to provide the information
☐ Security Operations Centre (4142), if not already aware
☐ Administrative Coordinator (7021)
☐ Duty Administrator

3.2 Additional Emergencies During a Code Silver Lockdown
☐ Should the fire alarm sound, do not issue overhead page for Code Red immediately. Discuss with Incident Command location of alarm origin and to determine last known location of perpetrator and potential for false alarm. Security and/or Maintenance responders will proceed as safely as possible to the location through Incident Command/law enforcement instruction
☐ Provide information to 911 that an active shooter event in is progress and that the fire department should take direction from the police.
☐ Should other alarms sound, notify Maintenance by telephone/pager for management and/or discussion with Incident Commander
☐ Should 4444 calls be received for other emergency codes, do not issue overhead page to deploy staff. Note caller ID and record. Discuss with Incident Commander as to how to proceed. Should the Incident Commander wish to issue the overhead page

Recovery
3.3 Upon Notification That the Crisis Has Concluded
☐ Announce over the public address system three times, “Code Silver Lockdown, All Clear”
☐ Resume normal duties
4.0 Response & Recovery – Protection Services

Response
4.1 Upon Realizing There is Potential for an Active Shooter/Dangerous Weapon Situation
☐ If you are the person witnessing the active shooter/dangerous weapon situation respond using 9.0 – Response & Recovery – All Staff (page 11).

4.2 Upon Notification of a Code Silver Lockdown - Active Shooter/Dangerous Weapon Situation

Security Operations Centre Operator
☐ Announce Code Silver Lockdown (location) over the radio
☐ Close, lock and, if possible, barricade the door to the Security Operations Centre
☐ Switchboard will transfer the Police to you for more detailed information
☐ If you are aware that Police have not been notified call them immediately (911). Do not use the term “Code Silver Lockdown”, instead say “Active Shooter”
☐ Provide the following information to Police, if known:
  ☐ Location of the active shooter/dangerous weapon
  ☐ Number of shooters, if there is more than one
  ☐ Physical description of the shooter/s
  ☐ Number and type of weapons held by the shooter/s
  ☐ Number of potential victims at the location
☐ If you are aware that Switchboard has not been notified, call them immediately (4444) to make an overhead announcement
☐ Contact the Director of Protection Services / Delegate
☐ Transfer Police to the Incident Command Centre, once it is established
☐ Monitor CCTV (Closed Circuit Television) cameras and document the movements and actions of the active shooter/dangerous weapon
☐ Relay information about the active shooter/dangerous weapon’s current location and actions to the Incident Command Centre when requested, otherwise, keep the phone line and radio channel clear

Security Shift Supervisor
☐ Do not respond to the incident site
☐ Ensure a Security representative meets the Police at the Main Entrance off Stuart St. The alternate meeting point, if the Main Entrance is unsafe, is the Emergency Department Entrance off of King St.
☐ Return to the Security Office, if safe to do so
☐ Await direction from the Incident Commander
If you receive any pertinent information related to the active shooter inform the Incident Command Centre immediately.

In the absence of the Director of Protection Services assume role of Incident Commander within the Incident Command Centre until relieved by a higher authority (Manager, Director, President & CEO, etc.).

**Mobile Patrol Supervisor**

- **Do not respond to the incident site**
- Respond to the Hospital, only if safe to do so
- Contact the Incident Command Centre, once established, to offer assistance
- If you receive any pertinent information related to the active shooter/dangerous weapon inform the Incident Command Centre immediately

**Security Officers**

- **Do not respond to the incident site**
- Await direction from the Shift Supervisor and/or the Incident Commander
- If you receive any pertinent information related to the active shooter/dangerous weapon inform the Incident Command Centre immediately

**Recovery**

4.3 **Upon Notification That the Crisis Has Concluded**

**All Security Staff**

- If you witnessed the active shooter/dangerous weapon situation you will need to provide a statement to the Police
- Those involved in the incident may take some “time out” to regain personal composure before returning to work, if necessary
- Participate in an incident debriefing session following the incident
- Watch for signs of critical incident stress and encourage one another to contact the Occupational Health & Infection Control Department for assistance, as needed

**Security Operations Centre Operator**

- Resume normal duties

**Security Shift Supervisor**

- Initiate a team debriefing
- Ensure a comprehensive incident report is completed
- Resume normal duties
Kingston General Hospital

Code Silver Lockdown – Active Shooter Situation

Security Officers

☐ Participate in a team debriefing
☐ Resume normal duties
5.0 Response & Recovery – Incident Command Centre

Response
5.1 Incident Management System

Incident Commander
(Director of Protection Services / Delegate*)

Kingston Police Department
(Upon Arrival)

Recording Secretary

Advisory Group
Communications
Risk Management

Planning Officer
(Representative of Protection Services*)

Logistics Officer
(Representative of Protection Services*)

Operations Officer
(Manager of Security / Delegate***)

Security Officers

*"Delegate or Representative may be, but is not limited to, the Director of Protection Services, the Manager of Emergency Management, or the Manager of Security.

***"Delegate” refers to the next level of appointed authority; in this case, the Security Shift Supervisor."
5.2 Upon Notification of a Code Silver Lockdown - Active Shooter/Dangerous Weapon Situation

Incident Commander – Director of Protection Services / Delegate

☐ Establish the Incident Command Centre in the Security Office
☐ Ensure Incident Command Centre is locked and secure
☐ Ensure that Switchboard personnel are aware of the location and contact number for the Incident Command Centre
☐ Key personnel may need to be contact by email or text
☐ Appoint the following positions, only if the regular assigned persons are not available

☐ Planning _______________________

☐ Logistics _______________________

☐ Operations _______________________

☐ Recording Secretary _______________________

☐ Receive status report / discuss initial action plan with required positions
☐ Receiving status report from Security Operations Centre Operator regarding the following information:
  ☐ Location of the active shooter/dangerous weapon
  ☐ Number of shooters, if there is more than one
  ☐ Physical description of the shooter/s
  ☐ Number and type of weapons held by the shooter/s
  ☐ Number of potential victims at the location
☐ Contact Emergency Department to prepare to receive casualties (if it is unaffected by the incident)
☐ Continue to gather information updates from Security Operations Centre via monitoring of CCTV cameras
☐ Prepare to receive call transfer of Police from Security Operations Centre
☐ Notify Strategy Management + Communications of the situation
☐ Contact Patient Relations, Volunteer Services and Risk Management to assist with managing family members and visitors of hostages/wounded
☐ Prepare to provide a situational report to the President & CEO / Delegate¹
☐ Be prepared to transfer command to a higher authority (e.g., Police / CEO)

¹ “Delegate” is the next level of appointed authority; in this case, the Duty Administrator, or as appointed.
Consult with Police and provide information gathered from Security Operations Centre / Security Officers
Oversight the Security response, under the direction of the Police
Conduct regular business cycles with Incident Command Centre members
Prepare to receive further calls from Switchboard operators
Determine evacuation needs and prepare to make recommendations

**Planning Officer – Representative of Protection Services**
- Initiate the recall of off-duty hospital Security personnel, as required
- Ensure the continuation of hospital Security functions in the remainder of the facility
- Prepare for the termination of the emergency and any debriefing requirements

**Logistics Officer – Representative of Protection Services**
- Provide radio communication as necessary
- Provide a copy of the floor plan of the affected area(s) for the Police
- Be prepared to provide provisions for the Incident Command Centre in the event of an extended emergency (i.e. food, etc.)

**Operations Officer – Security Shift Supervisor**
- In the absence of the Director of Protection Services, Manager of Security, Life Safety or Manager of Emergency Management, Parking & Security Operations Centre assume command of the incident until the arrival of a higher authority.
- **Do not respond to the incident site**
- Ensure a Security representative meets the Police at the Main Entrance off Stuart St. The alternate meeting point, if the Main Entrance is unsafe, is the Emergency Department Entrance off of King St.
- Return to the Security Office, if safe to do so
- Await direction from the Incident Commander
- If you receive any pertinent information related to the active shooter/dangerous weapon inform the Incident Command Centre immediately

**Advisory Group**
- Provide information and resources to the Incident Commander/Planning Officer as required

  **Risk Management Representative (refer to page 23)**
  - Discuss risk management opportunities regarding:
    - Overhead announcement
    - Internal & external messaging

Response & Recovery
Incident Command Centre
Consult with the Incident Commander and President & CEO / Delegate on risk management next steps

Public Affairs Representative (refer to page 21)
- Discuss communications options:
  - Overhead announcement
  - Internal messaging
    - Staff,
    - Patients & Visitors
  - External information releases
    - Media
    - Partner organizations
- Establish a media conference area
- Consult with the Incident Commander and President & CEO / Delegate on next steps

Recording Secretary
- Document all actions within the Incident Command Centre

Recovery
5.3 Upon Notification That the Crisis Has Concluded

Incident Commander
- Prepare for team debriefing
- Consider that large areas of the hospital may be designated as crime scenes and as a result could be unavailable to staff until Police are able to complete their investigation

Planning Officer
- Ensure that all documentation is collected for debrief preparation
- Participate in a team debriefing
- Resume normal duties

Logistics Officer
- Ensure equipment used has been returned and in proper storage
- Participate in a team debriefing
- Resume normal duties
Operations Officer
☐ Ensure that a comprehensive occurrence report is filed immediately
☐ Participate in a team debriefing
☐ Resume normal duties

Recording Secretary
☐ Document recovery actions in the Incident command Centre
☐ Participate in a team debriefing
☐ Resume normal duties
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6.0 Response & Recovery – Affected Area Manager / Delegate

Response
6.1 If You Are the Person Witnessing the Active Shooter/Dangerous Weapon Situation
☐ Immediately refer to the Response procedures for All Staff – 9.0 Person Witnessing The Hostage Situation, page 11

6.2 If You Are Not Notified of a Potential Active Shooter/Dangerous Weapon Situation
☐ Take immediate action
☐ Remain calm, professional and prepare to lead
☐ Attempt to evacuate staff, patients and visitors, to a safe location, if possible
☐ If evacuation is not possible, direct staff, patients and visitors to take shelter in available closed rooms. Instruct them to lock or barricade the doors, if possible

Recovery
6.3 Upon Notification That the Crisis Has Concluded
☐ Arrange for a debrief session with involved staff
☐ Consider that large areas of the hospital may be designated as crime scenes and as a result could be unavailable to staff until Police are able to complete their investigation
☐ In consultation with the CEO / Delegate determine the need for a Critical Incident Stress Debriefing (EFAP) 2 for involved staff
☐ Resume normal duties

2 “EFAP” is an Employee & Family Assistance Program available free of charge to staff of Kingston General Hospital through the Healthy Workplace Services department.
7.0 Response & Recovery – Emergency Department

Response

7.1 Upon Receiving the “Code Silver” Notification
Emergency Physician in Charge / Emergency Program Director / Delegates
☐ Prepare for the possible reception of casualties as a result of the incident (See “Code Orange” – “External Disaster”)

Recovery

7.2 Upon Notification That the Crisis Has Concluded
☐ Participate in a debriefing session
☐ Resume normal operations
8.0  Response & Recovery – President & CEO / Delegate

Response

8.1  If You Are the Person Witnessing the Active Shooter/Dangerous Weapon Situation
☐ Immediately refer to the Response procedures for All Staff – 9.0 Person Witnessing The Hostage Situation, page 11

8.2  Upon Notification of a Code Silver Lockdown - Active Shooter/Dangerous Weapon Situation
☐ Prepare to receive situational report / briefing from the Incident Commander
☐ Consider implementation of the Hospital Emergency Operations Centre (See EOC Implementation Plan)
☐ If recommendation is to commence further evacuation consider the following:
   ☐ Implementation of Code Green (Evacuation)
   ☐ Implementation of Crisis Communication Plan
☐ Ensure that Police directions with regard to Hospital activity are followed

Recovery

8.3  All Clear – Declaring Return to Normal Operations
☐ In consultation with Police officials, determine whether the crisis has concluded, that it is safe to resume normal operations and authorize the Switchboard to announce the “All Clear”
☐ Implement a course of action to manage a major disruption of Hospital routine
☐ Consider that large areas of the hospital may be designated as crime scenes and as a result could be unavailable to staff until Police are able to complete their investigation
☐ Arrange for a debrief session between the Incident Command Centre and the Emergency Operations Centre
☐ Arrange for a debrief session with involved staff
☐ Arrange a Critical Incident Stress Debriefing (EFAP3) for involved staff

3 “EFAP” is an Employee & Family Assistance Program available free of charge to staff of Kingston General Hospital through the Healthy Workplace Services department.
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