

# ACTIVE SHOOTER INCIDENTS IN HOSPITALS

2000-2013

Source: Federal Bureau of Investigation

- **Parrish Medical Center**  
Titusville, FL
- **East Jefferson General Hospital**  
Metairie, LA
- **St. Luke's Hospital**  
San Francisco, CA
- **Florida Hospital**  
Tampa, FL
- **Brigham and Women's Hospital**  
Boston, MA
- **Renown Regional Medical Center**  
Reno, NV
- **Johns Hopkins Hospital**  
Baltimore, MD
- **Ben Taub Hospital**  
Houston TX
- **Parkwest Medical Center**  
Knoxville, TN
- **St. Vincent's Hospital**  
Birmingham, AL

*An armed intruder finds his way into a hospital.  
Now what?*

*It can happen.  
It has happened.  
Over, and over again.*

## Active Shooter/Armed Intruder in the Hospital

This critical new program from Sorensen, Wilder & Associates will aid your team in:

### Creating a state of preparedness.

Is your hospital ready for the unforeseen emergency, whether it be environmental, accidental or hostile? Does your **Emergency Operations Plan\*** cover all it needs to cover?

**Defining critical terminology and concepts** specific to armed shooter/active intruder within your hospital. Specifically, is the event a focused and limited single-target event or a broad, hospital-wide continuous event? It is vital for your team to understand how one type of incident can morph into another.

**Reviewing a healthcare case study and discuss the unforeseen** challenges that the event can generate that could adversely affect the care and health of patients, performance of staff and operational state of the hospital.

**Learning how your staff can protect themselves** during the commission of an active shooter event within the hospital by utilizing 'The 4 Outs' of the Active Shooter Safety Action Plan.

**Understanding the increased stress and anxieties** that go hand-in-hand with an armed intruder event and how to control those anxieties and stress through preparation and training.

**Understanding the critical decision making process** and the psychology behind it. Participants will learn to refine decision making skills in order to increase the likelihood of survival of staff and patients during an active shooter event.

**Learning the S.T.A.F. Protocol**, to assist in making the critical decision between personal safety and the safety of your patients.

**Remain safe and alive during an active hostile event!**



\* By November 15, 2017 The Center for Medicaid and Medicare Services (CMS) requires all Medicare and Medicaid participating providers and suppliers to have a national emergency preparedness plan for both natural and man-made disasters, and to coordinate with federal, state, tribal, regional, and local emergency preparedness systems. The ruling applies to 17 different types of health care providers and suppliers, including ambulatory surgical centers, psychiatric residential treatment facilities, hospitals and critical access hospitals ("CAHs"), long-term care ("LTC") facilities, hospices, home health agencies, community mental health centers, rural health clinics, federally qualified health centers, and end-stage renal disease facilities. For more information visit [www.cms.gov](http://www.cms.gov).

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