ACTIVE SHOOTER INCIDENTS IN SENIOR LIVING FACILITIES

2000-2013

Source: Federal Bureau of Investigation

- **Crown Bay Nursing & Rehabilitation** Center, Alameda, CA
- **Pinelake Health and Rehabilitation** Carthage, NC
- VA Outpatient Clinic The Villages, FL
- **Sr. Marie Lenahan Wellness Center** Darby, PA
- Pablo Davis Elder LivingCenter Detroit, MI
- Abington Manor
 South Abington, PA
- Golden West Towers Torrance, CA

An armed intruder finds his way into the facility. Now what? It can happen. It has happened. Over, and over again.

Active Shooter/Armed Intruder in the Senior Living Facility

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

Creating a state of preparedness.

Is your senior living facility ready for the unforeseen emergency: environmental, accidental or hostile? Does your **Emergency Operations Plan*** cover all it needs to cover?



Defining critical terminology and concepts specific to

an armed intruder within your senior living facility. Specifically, is the event a limited, single-target event or a broad, community-wide continuous event? It is vital for your team to understand how one type of incident can morph into another.

Reviewing a senior-living community case study and discuss the unforeseen challenges that the event can generate that could adversely affect the care and health of residents, performance of staff and operational state of your facility.

Learning how your staff can protect themselves during the commission of a hostile active event within your senior living facility 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 residents 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 residents.

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.



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