**Virginia Department of Health**

**Active Shooter/Complex Attack Plan Template**



**June 2023**

**Instructions:**

This document is a template that should serve as an addition to your district/office Emergency Operations Plan (EOP). This template is intended to be a “boiler plate” document; however, it is to serve as a planning tool, in which it is imperative to include all stake holders within your respective work unit, especially law enforcement. It suggests an overall format and examples of items that may or may not be applicable to your district/office. These items should be reviewed, and then expanded, deleted or modified as necessary to fit the needs of your district, staff, and office.

# Record of Changes

This document shall be reviewed annually or as changes occur. Review dates and changes shall be documented in the table below.

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| --- | --- |
| **Date** | **Change** |
| 12/9/15 | Template  |
| 6/2/23 | Formatting changes |
| 6/2/23 | Pages 7-8, updated links |
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**Introduction:**

An **active** **shooter** is defined as "... an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearm(s) and there is no pattern or method to their selection of victims.

Active shooter situations are unpredictable and evolve quickly. Typically, the immediate deployment of law enforcement personnel and resources are required disarm the individual and secure the area. Active shooter situations are often over within 10 to 15 minutes, usually before law enforcement personnel are able to respond. Therefore, employees must be prepared, mentally and physically, to respond to an active shooter situation.

**Purpose:**

 To assist employees and contractors of the Virginia Department of Health (VDH) in responding to an active shooter /complex attack event.

## **Scope and Applicability:**

## The policies and concepts in this plan apply to the Virginia Department of Health (VDH).

## Under certain conditions, the Virginia Department of Health’s Emergency Response Plan and appropriateannexes may be activated for an incident that does not receive a Governor’s State of Emergency declaration, including, but not limited to a Public Health Emergency declared by the Commissioner of Health.

**Planning Assumptions:**

## If an active shooter/complex attack situation were to arise, this plan would be automatically activated without the formal approval of the Office Director/District Director or Commissioner of Health.

## <fill in your location [Madison, OCME, etc.]/district> will coordinate and consult with law enforcement agencies and other applicable agencies/departments (such as, jurisdiction’s Buildings and Grounds, Virginia Department of General Services) to ensure viability and elements within this plan align with appropriate polices, plans, and procedures.

## <fill your location/district> will coordinate with appropriate law enforcement agencies to ensure that staff receive the proper training and exercise the plan.

## The intent of most active shooters and those involved with complex attacks is to kill as many people as quickly as possible. Traditional law enforcement response will include the concept of “surround and contain” in order to minimize the number of victims. In order to save lives, the law enforcement agency having jurisdiction will initiate an immediate response.

## Regardless of training or directions given, each employee, visitor, and facility occupant will react and respond based on his or her own instincts. Some people may not be able to leave; others may refuse to leave. Some will find comfort in a group; others will face the challenges alone. Management and Law Enforcement should help occupants understand there is no perfect response.

## Unless otherwise directed by law enforcement or other emergency personnel, the decision to stay or leave is something best determined by each individual.

## Personal safety is the primary consideration.

## Systems have been developed to account for all personnel when it is safe to do so.

## **Polices:**

## All districts/offices should develop and maintain the necessary plans and Standard Operating Procedures (SOPs) to successfully accomplish their tasks.

## The Virginia Department of Health (VDH) Office of Emergency Preparedness shall maintain this template. Additionally, the Office of Purchasing and General Services will be responsible for an active shooter/complex attack response plan for the Madison Building as well as the following offices with their outlying subordinate work units: the Offices of EMS, the Chief Medical Examiner, Vital Records and Licensure and Certification.

In the event of an emergency, notification should be sent to the Deputy Commissioner and Director of Emergency Preparedness as soon as 1) it is safe to do so and 2) after 911 has been called. The notification should be brief but should identify the affected district/office and circumstance such as “the Madison Building is under attack.” Once safely removed, an official Event Notification should send.

## **Organization Structure:**

## The Virginia Department of Health uses the National Incident Management System (NIMS) and Incident Command Structure (ICS) in all emergency response and recovery operations. The use of these is described in more detail in Annex A: Direction and Control.

## **Concept of Operations:**

## **RUN**

## Individuals should exit the building through the safest route available and proceed to a designated assembly location(s) or an alternate vetted site. However, given the dynamic nature of an active shooter event, exiting the building and going to an evacuation site via practiced fire drill routes may put individuals at risk or may not be possible. If doing so is not possible or puts individuals at risk, employees may need to run out of the facility or away from the area under attack and move as far away as possible until they are in a safe location. These options should be clearly conveyed to employees during facility active shooter training and/or exercises.

## Despite the complexity of this situation, facility occupants and visitors at risk who can evacuate safely should do so. Recent research shows the best method to reduce loss of life in an active shooter incident is for people to immediately evacuate or be evacuated from the area where an active shooter may be located or attempting to enter.

## Employees should:

* Discontinue all patient care.
* Leave immediately.
* Encourage others, including patients, coworkers, and visitors, to come with you, but don’t wait for them to follow.
* Leave belongings behind.
* Do not stop for victims.  Exit the area immediately.
* When exiting, keep hands raised and visible.
* Keep others from entering the area.
* Do not point, scream, or yell.
* Follow instructions from law enforcement officers.  Do not make sudden movements toward officers.
* Move a safe distance from the facility.
* Do not re-enter the scene until law enforcement has given an all-clear announcement.

## Call 911 when safe to do so.

## Provide the following information, if known, to law enforcement or dispatchers:

## • Location of active shooter(s)

## • Location of caller

## • Number of shooters, if more than one

## • If there is law enforcement on-site (if known)

## • Physical description of shooter(s)

## • Type and number of weapons used by shooter(s)

## • Use or threat of explosives/IEDs

## • If shooting is still occurring

## • Number of potential victims at the scene

**HIDE**

If running/evacuating is not a safe option, staff should hide in as safe a place as possible where the walls might
be thicker and have fewer windows. Likewise, for occupants that cannot run, hiding may be the only option.

In addition, occupants should do the following:

• Lock the doors and/or barricade them with heavy furniture, if possible.

• Close and lock windows and close blinds or cover windows.

• Turn off lights.

• Silence all electronic devices.

• Remain silent.

• Look for other avenues of escape.

• Identify ad-hoc weapons.

* Remain in place until given an all clear by identifiable law enforcement.

When safe to do so, use strategies to silently communicate with first responders, if possible (e.g., in rooms with exterior windows, make signs to silently signal law enforcement and emergency responders to indicate the status of the room’s occupants).

Consider these additional actions:

• Identify a safe location on each floor before an incident occurs where occupants and visitors may safely barricade themselves during an event.

• Train people in how to lock down an area and secure the unit.

**FIGHT**

If neither running nor hiding is a safe option, when confronted by the shooter and as a last resort, individuals in immediate danger should consider attempt to disrupt and/or incapacitate the active shooter by:

* Acting as aggressively as possible against him/her
* Act as a team.  Working together will increase your chances of incapacitating the shooter.
* Throwing items and improvising weapons (fire extinguishers, chairs, etc.)
* Yelling
* Committing to your actions

Confronting an active shooter should never be a requirement of any non-law enforcement personnel’s job; how each individual chooses to respond if directly confronted by an active shooter is up to him or her.

**Run, Hide, Fight for Occupants with Disabilities**

Any actions taken during activation of the plan must be as effective for individuals with disabilities as those actions provided for the other occupants of the facility. When developing or making changes to an occupant emergency plan, it is imperative the needs of individuals with access and functional needs be addressed throughout the process. Applicable laws and regulations include but are not limited to:

• The Americans with Disabilities Act of 1990;

* The Rehabilitation Act of 1973;

• EO 12196 “Occupational Safety and Health Programs for Federal Employees” 1980; and

• EO 13347 “Individuals with Disabilities in Emergency Preparedness” 2004.

As discussed earlier in this section, no one should be forced to stay or leave the premises during an active shooter situation (unless otherwise directed by law enforcement or other emergency personnel). Supervisors are ultimately responsible to ensure that members of their staff or visitors with a access and functional need are properly taken care of during all emergency incidents.

Managers and Supervisors should be trained to:

• ensure those occupants identified as requiring assistance during an evacuation or shelter-in-place (SIP) have a customized plan that includes the assistance required, the name of the person(s) volunteering to assist, accountability protocol, type of equipment required (if any), and the evacuation route from the assigned work space;

• identify any volunteer(s) willing to assist person(s) with disabilities or needing assistance; and

• ensure those occupants under their supervision with self-identified assistance needs can be accounted for during an incident.

Additionally, notifications should be made in a variety of formats so that they are accessible to those with access and functional needs. Proper planning and execution should consider:

• vibrating alerts for employees who are deaf or hard of hearing;

• employees who are blind;

• alternative notification measures;

• employees whose disabilities go beyond deafness or hard of hearing;

• including people with temporary disabilities;

• visitors;

• people with limited English proficiency;

• sign cards with text and picture based emergency messages

**Authorities and References:**

# Department of Homeland Security: Planning and Response to an Active Shooter: An Interagency Security Committee Policy and Best Practices Guide<http://www.dhs.gov/publication/isc-planning-and-response-active-shooter-guide>

**Department of Health and Human Services: Incorporating Active Shooter Incident Planning into Health Care Facility Emergency Operations Plans**<http://www.phe.gov/preparedness/planning/Documents/active-shooter-planning-eop2014.pdf>

**Department of Homeland Security: Active Shooter Preparedness**

<http://www.dhs.gov/active-shooter-preparedness>

**Department of Homeland Security: Active Shooter: How to Respond Educational Booklet**

[Active Shooter: How to Respond Booklet | CISA](https://www.cisa.gov/resources-tools/resources/active-shooter-how-respond-booklet)

**Plan Management and Maintenance:**

The plan will be reviewed and updated as follows:

* At least annually
* After an exercise of the plan which identifies that revisions or additions are needed

Revisions will be initiated upon the recommendation in an After-Action Review on an exercise or at the time of the annual review.

# Resources:

# FBI Active Shooter Statistics 2000-2019:[Active Shooter Incidents 20-Year Review, 2000-2019 — FBI](https://www.fbi.gov/file-repository/active-shooter-incidents-20-year-review-2000-2019-060121.pdf/view)

# Department of Homeland Security: Planning and Response to an Active Shooter: An Interagency Security Committee Policy and Best Practices Guide<http://www.dhs.gov/publication/isc-planning-and-response-active-shooter-guide>

**Department of Health and Human Services: Incorporating Active Shooter Incident Planning into Health Care Facility Emergency Operations Plans**<http://www.phe.gov/preparedness/planning/Documents/active-shooter-planning-eop2014.pdf>

**Department of Homeland Security: Active Shooter Preparedness**

<http://www.dhs.gov/active-shooter-preparedness>

**Department of Homeland Security: Active Shooter: How to Respond Educational Booklet**

[Active Shooter: How to Respond Booklet | CISA](https://www.cisa.gov/resources-tools/resources/active-shooter-how-respond-booklet)

**Department of Homeland Security: Active Shooter: Shooter Event Quick Reference Guide**

[Active Shooter Event Quick Reference Guide | CISA](https://www.cisa.gov/resources-tools/resources/active-shooter-event-quick-reference-guide)

**Department of Homeland Security: Active Shooter: How to Respond Poster**

[Active Shooter Poster | CISA](https://www.cisa.gov/resources-tools/resources/active-shooter-poster)

**Department of Homeland Security: Active Shooter: How to Respond Pocket Card**

[Active Shooter Pocket Card | CISA](https://www.cisa.gov/resources-tools/resources/active-shooter-pocket-card)

**California Hospital Association: Planning for Active Shooter Incident**<http://www.calhospitalprepare.org/active-shooter>

**FEMA IS-907: Active Shooter: What You Can Do**

<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?code=IS-907>

**Video: Run. Hide. Fight: Surviving an Active Shooter Event. City of Houston, TX**

<https://www.youtube.com/watch?v=5VcSwejU2D0>

**Video: Surviving an Active Shooter – Developed by the LA County Sherriff’s Office**

 <https://www.youtube.com/watch?v=DFQ-oxhdFjE>

**Video of Active Shooter Exercise conducted March 2013 at Los Angeles Hospital**

<http://vimeo.com/70432491>

**Video: Options for Consideration - Active Shooter Preparedness**

<http://www.dhs.gov/video/options-consideration-active-shooter-preparedness-video>

**Personal Checklist:**

**Pre-Event - Employee:**

* Always carry and display your ID Badge.
* Take ownership of making sure your location is safe.
* Take note of the nearest exists near your office and floor.
* Beware of your environment and any possible dangers.
* Be aware of your surroundings and evacuation routes.
* Report suspicious persons to Law Enforcement immediately.
* Awareness, Preparation, Rehearsal

**Pre-Event - Management:**

* Coordinate with Law Enforcement, Buildings and Ground and Facilities (or similar agency) to conduct building security walk-through, asses existing plans, physical security measures in place, and to assist in identifying assembly areas.
	+ Assembly areas should not coincide with fire evacuation assembly areas; staff should scatter to various locations to reduce the number of persons in a concentrated location.

 **During the Event:**

* Dial 911, if possible, to alert police of the situation and your location.
* Note location of shooter(s).
* If you cannot speak, stay on the line to allow dispatch to listen.
* 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.
* Remain quiet and calm.
* Turn off any source of noise (e.g., cell phone, radio, printer)
* Hide behind large objects or furniture.
* As a last resort, attempt to take the active shooter 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.

**When Law Enforcement Arrives:**

* Follow ALL instructions given by officer(s).
* Remain calm and follow instruction.
* Put down any objects in your hands (i.e., bags, purse, jacket)
* Immediately raise hands and spread fingers.
* Keep hands visible at all times.
* Avoid making quick movements around officers.
* Avoid screaming, yelling or aggressive movements.
* Do not stop to ask officers for help, assistance, or directions when evacuation. Proceed in the direction from which the officers entered.
* Provide all relevant information to law enforcement.

**Once Evacuated:**

* Stay in the assembly area until directed it is safe to leave by law enforcement.
* Do not speak to media, unless you have permission to do so.
* Do touch or remove anything, as it is an active crime scene.
* Help account for all individuals within your floor/office.
* Coordinate with first responders to account for any occupants who were not evacuated.
* When safe to do so, an Event Notification and HAN Alert should be used to notify district/office staff and Central Office.

 [**DHS Pocket Card**](https://www.dhs.gov/xlibrary/assets/active_shooter_pocket_card.pdf)**:
(clickable link, printable card)**

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