Security Planning at Tufts

Our Journey October 2014

Presenters

- Margaret Higham MD
 - Tufts University Health Service, Medical Director

- Geoff Bartlett
 - Tufts University Public Safety, Deputy Director

Goals

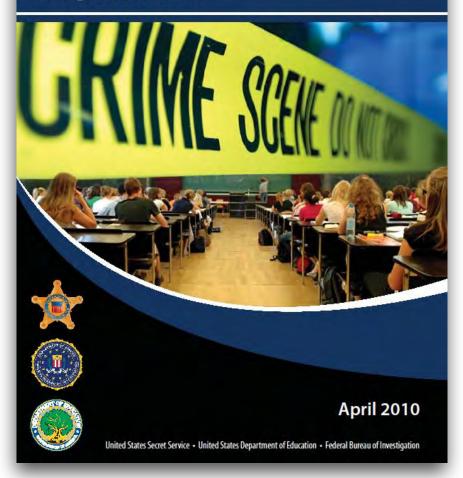
- Describe the problem of workplace safety
- Describe preparation of the work place to improve safety
- Describe different techniques and scenarios used to drill and practice for security emergencies

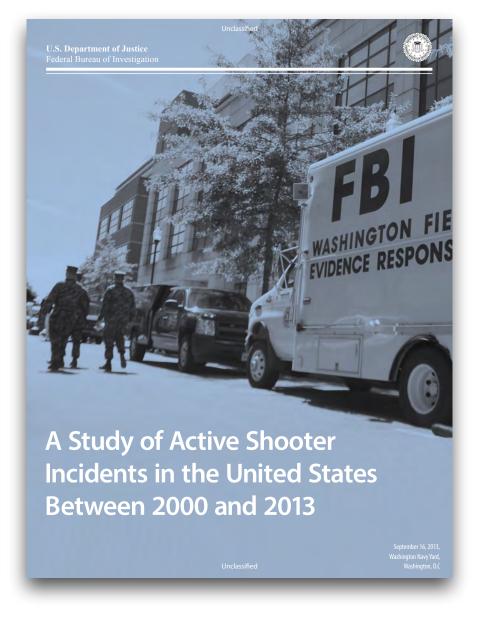
Background on Violence in Higher Education, Healthcare, and the Workplace

- Upset patients
- Disgruntled patients
- Workplace violence (between employees or partners)
- Intimate partners of patients
- Campus incident
- Police activity strays onto campus
- Drug seeking behavior

CAMPUS ATTACKS

Targeted Violence Affecting Institutions of Higher Education





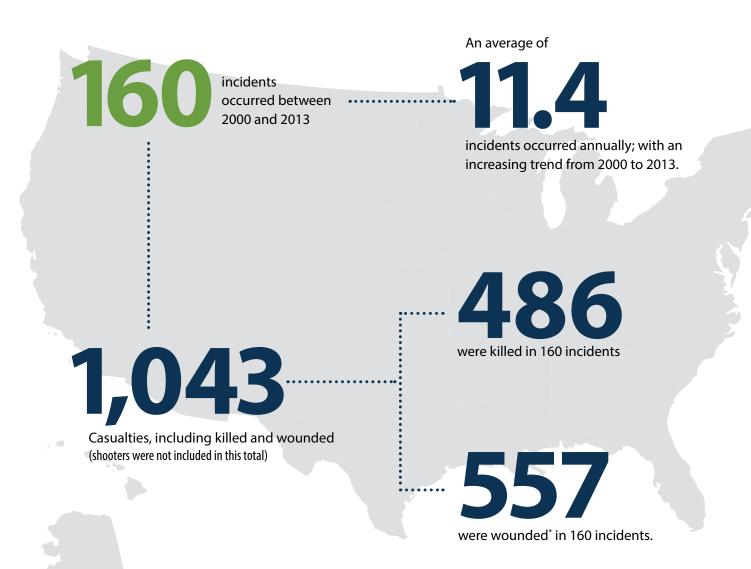
Drysdale, D., Modzeleski, W., and Simons, A. (2010). Campus Attacks: Targeted Violence Affecting Institutions of Higher Education. U.S. Secret Service, U.S. Department of Homeland Security, Office of Safe and Drug-Free Schools, U.S. Department of Education, and Federal Bureau of Investigation, U.S. Department of Justice. Washington, D.C., 2010.

Blair, J. Pete, and Schweit, Katherine W. (2014). A Study of Active Shooter Incidents, 2000 - 2013. Texas State University and Federal Bureau of Investigation, U.S. Department of Justice, Washington D.C. 2014.

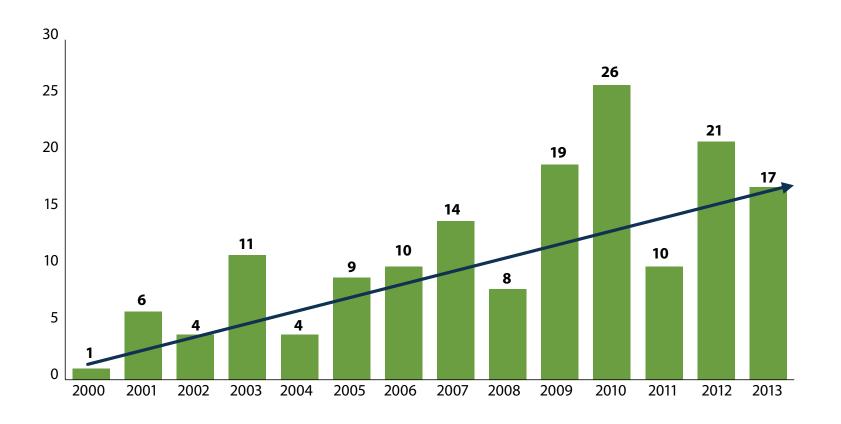
Consensus Definition

An Active Shooter is an individual actively engaged in killing or attempting to kill people in a confined and populated area.

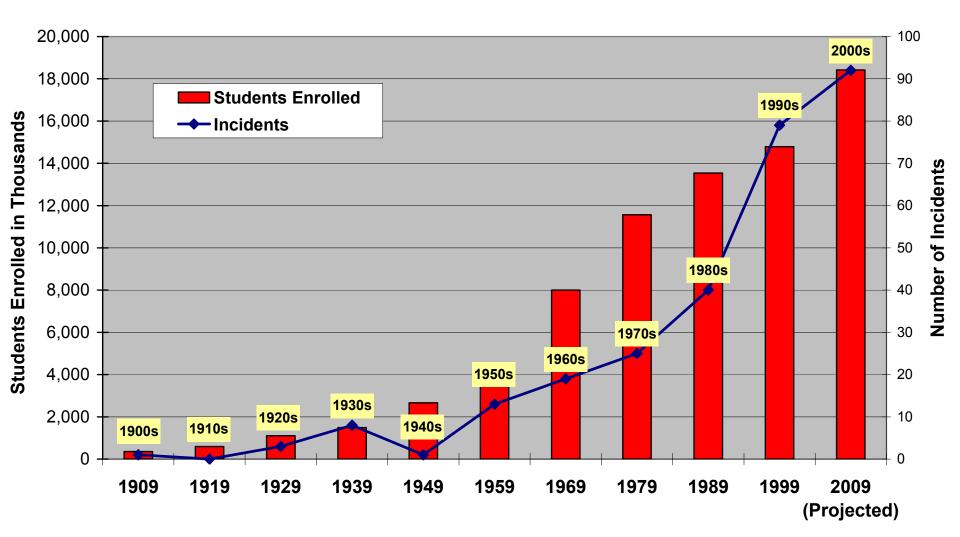
2000-2013

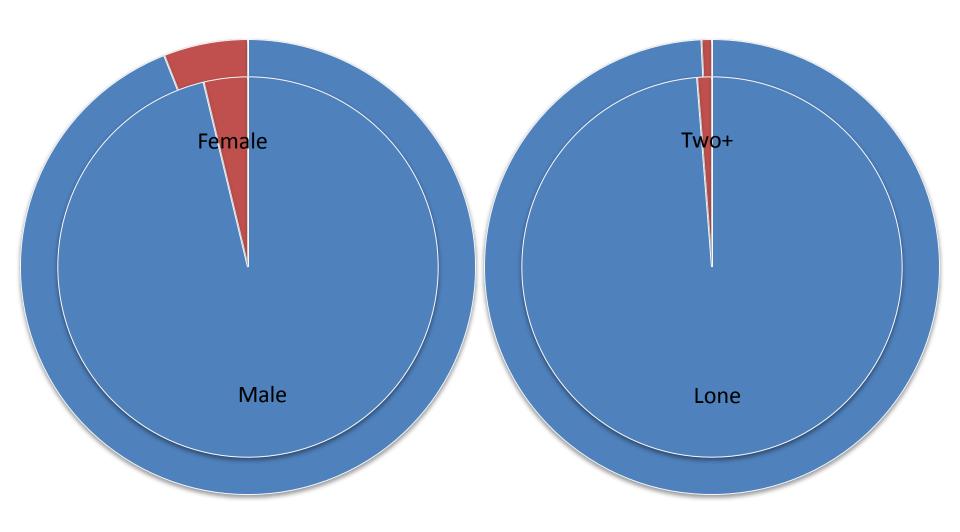


Frequency of Active Shooter Events by Year



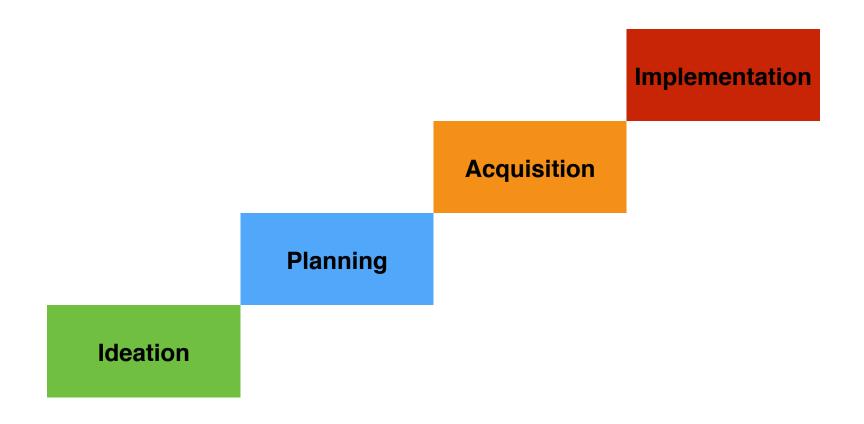
Student Enrollment and Number of Incidents of Directed Assaults Reported, 1909-2009 (n = 281)*



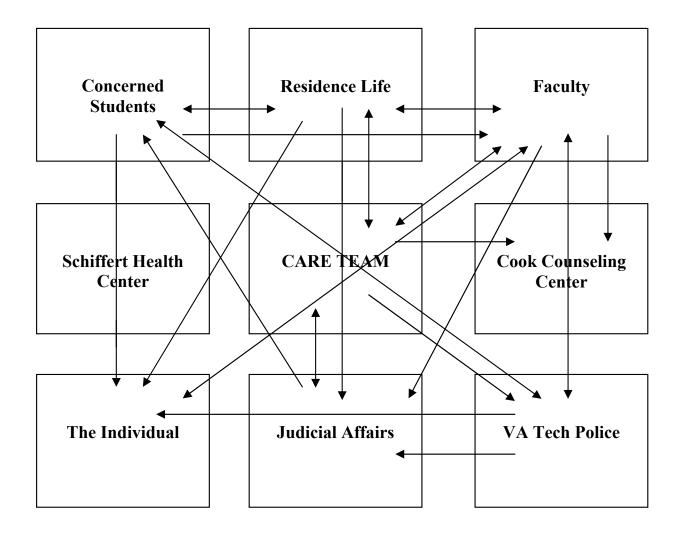




Prevention of School Attacks in the United States. U.S. Secret Service, U.S. Department of Education. Washington, D.C., 2002.



The escalation of attack-related behaviors "The pathway to violence"



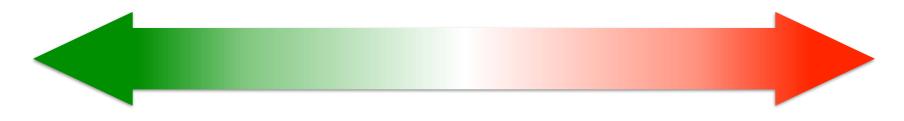


A safe place to learn, work, and live.

What do you need to do in an emergency?

Controlled Environments

Uncontrolled Environments



K-12

Private Business

Healthcare

Higher Education*

Commerce















READY

Controlled Environments

Uncontrolled Environments







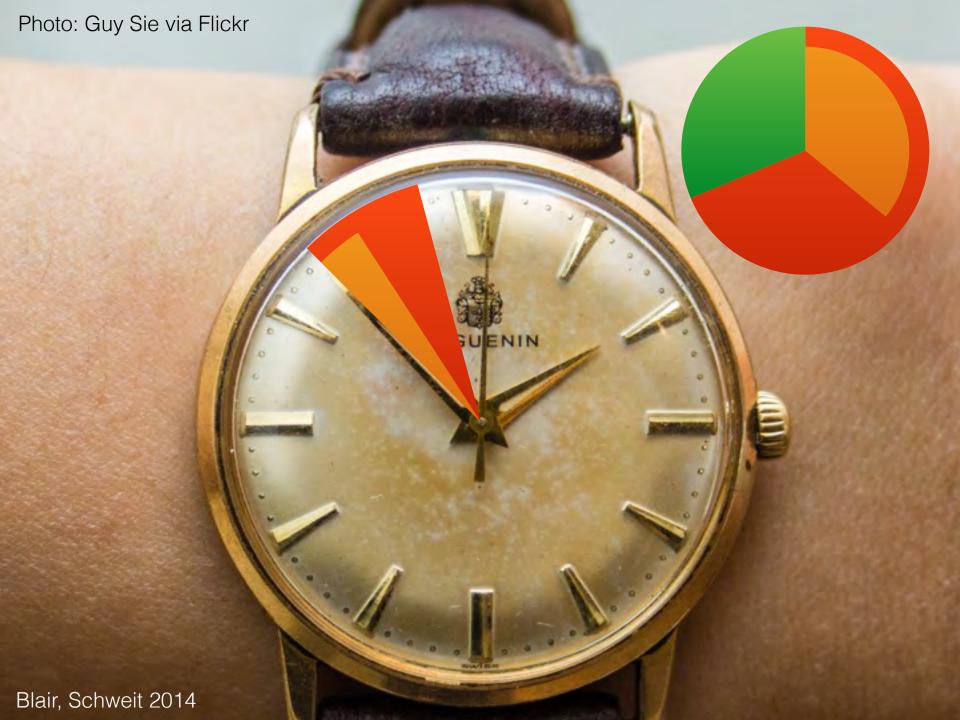


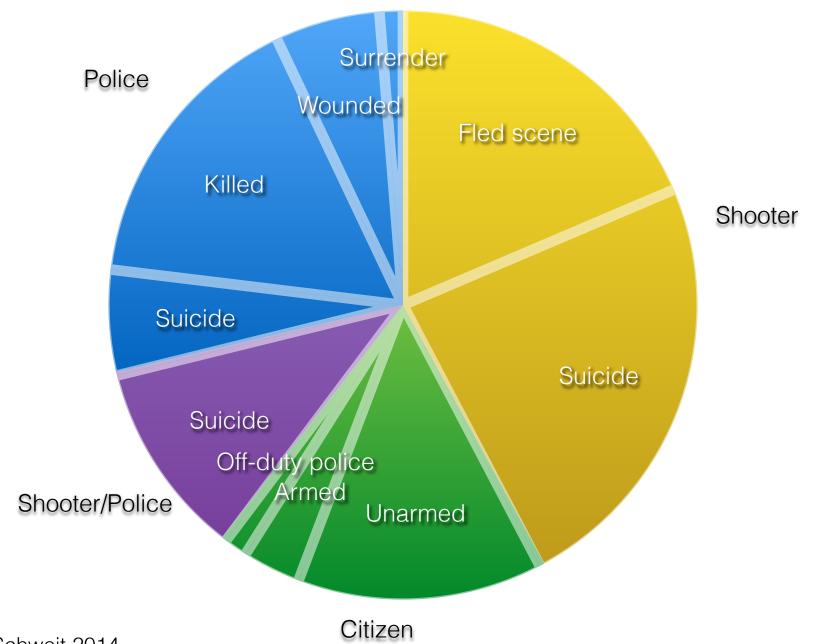














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Introduction

- Why I started thinking about Security Drills
 - 2000: Limited Emergency Plans
 - Wakefield, personal example
- Red, Blue, and Gray
 - How to apply lessons from Fire and Health emergencies to Safety emergencies
 - Dr Gray

Step-wise Approach

- Start simple
- One step at a time
 - Communication Systems
 - Communication Protocols
 - Staff Behavioral Skills
 - Practice
 - Mock Drills

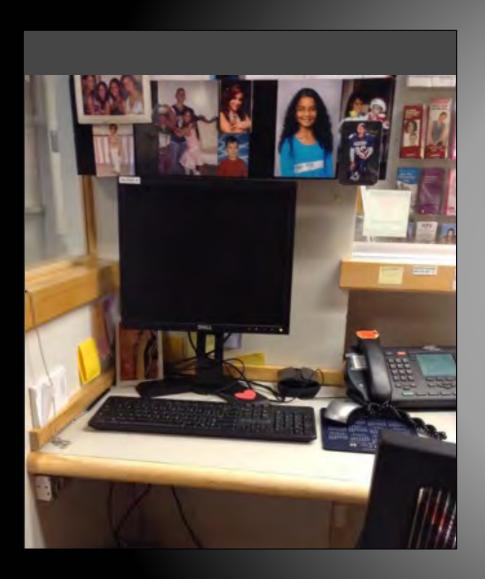
Communication Systems

- Work w Campus Security
- Communication Systems
 - Panic Buttons/Duress Alarms
 - Phones
 - Intercom System
 - Campus wide alert systems—TuftsAlert





Panic Button—Front Desk





Panic Button—Nurses Station



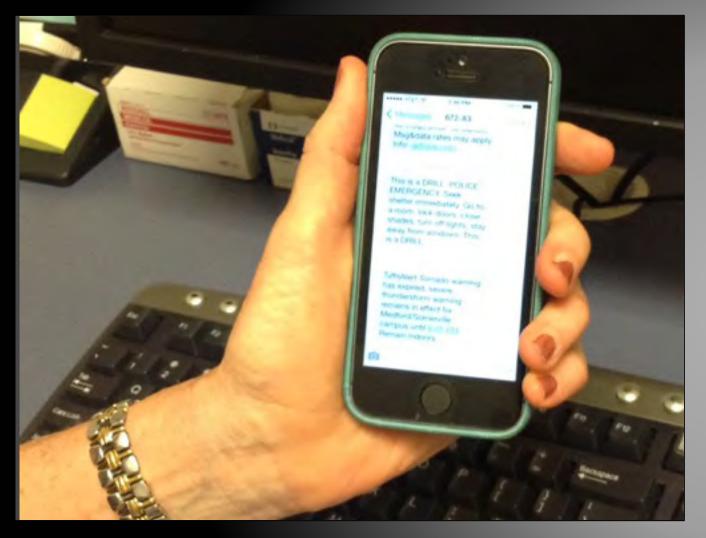


Panic Button—Laboratory



Phones in All Exam Rooms—Call for Help,
Access Intercom System





Tufts Alert System



Training Staff to Use Systems

- Practice!
- Practice!
- Practice!

Communication Protocols

- Security Situations—greater complexity
- Switching from the helper role to emergency role
- ABC's for Security Situations

The 4 Ps

- ▶ The 4 Ps
 - Protect
 - Panic Button
 - Page 5818
 - Police 66911



The 4 Ps on Every Phone in Health Service



Behavioral Skills--Shelter in Place

- A way to Protect yourself
- In your regular workplace, how can you quickly hide/be safer?
- Best place closest to your work station
- Walk through with all and identify all secure places
- Examples



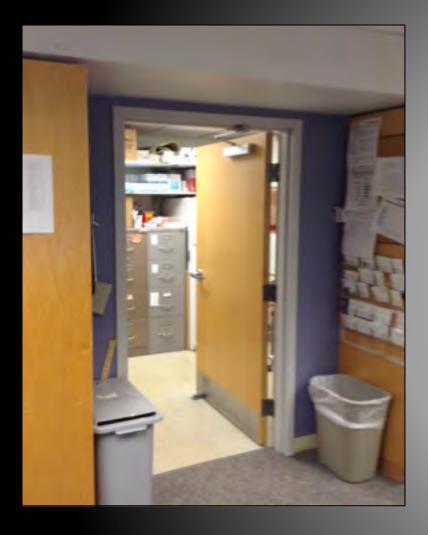


Bathrooms—Great Place to hide



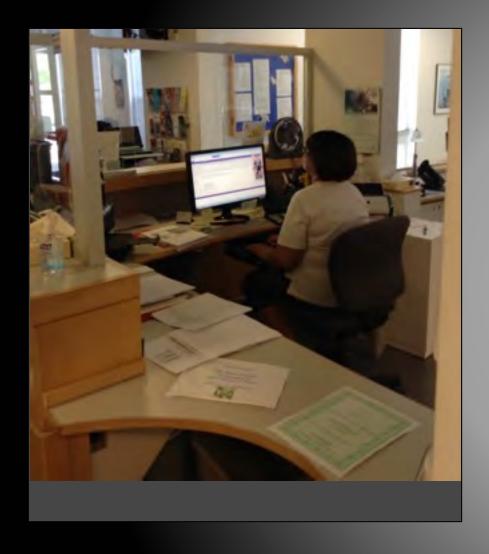


Offices with locks





Storeroom behind Nurses Station—Shelter in Place





Front Desk Receptionist—Could Hide Under Counter,





"Chart Room"—Nowhere to hide

Behavioral Skills--Mindset

- Pay attention to your instincts
- When safety is involved, need to shift from caretaker role, to taking care of yourself
- OK to have a false alarm

Front Desk Staff General Approach

- First point of contact
- Do not confront or argue
- Offer to get help—Leave the area if possible
- Remember your 4 P's

Medical Staff General Approach

- Do not ignore you instincts
- Goal is to remove self and others from danger
- Offer to go get Dr Gray
- Don't get stuck in room
- Use phone to Page Dr Gray or 911 if you can

Putting it All Together

- Practicing—the 5th PRACTICING
- Warning staff ahead of time vs surprise drill
- Emotionally charged
- Who is in "charge"
- Balance between protecting yourself, and helping others—waiting students, etc

Walk Through

- Do it slow motion, stopping to discuss
- Explain—panic buttons should be pushed,
 Police should be called
- Gives staff extra time to figure out what to so
- Do real time drill soon after

Dr Gray Scenarios

- Weapons (knives, guns)
- Narcotic Seeking
- Aggressive
- Campus Wide Alerts

Real Time Drills

- Identify an actor/actress
- Identify an observer who will take notes
- Notify any employees who need special warning
- Notify Public Safety/Police that a drill will be happening
- Let students in waiting room know a drill is happening
- Actor presents to a staff member and explains they are a mock patient—that a drill is starting.
- Then launches into scenario
- Observer or Actor stops drill when it feels complete





Mock Patient

Debriefing

- Gathers staff together in central area for debrief—
 Crucial
- Verbally walk through incident, asking staff what they did when, how they felt, what their thoughts were, give feedback
- Write up brief description
 - Highlight what went well
 - Reinforce most important lessons
 - Distribute to all staff

Mock Dr Gray

- Scenario: Active shooter in Health Service
- Timeline:
 - Perpetrator entered Business Office
 - Announcement on overhead page "Mock Dr Gray" and yelling and screaming could be heard.
 - Perpetrator left the business office and walked down the hall into the clinical area.
 - No staff visible
 - Drill was ended on overhead page but staff asked to stay in place
- Staff hidden in locked storage areas, bathrooms, under a desk
 - Many left building through side door, lab left through side door
- Police reported 3 panic buttons were pushed (lab, nurse's station appointment desk)
- Police received a cell call from the front porch, two other staff pretended to call from their cells

Debrief

- Staff felt it was useful (not too overwhelming)
- Many panic buttons pushed AND calls to the police
- Staff expressed that they were able to quickly find safety areas
- Question raised...do we put our selves first or students?

Drill with Police

- Incorporated Public Safety Response
- Videotaped and recorded communication w police
- Allows staff to see and hear themselves excellent learning tool



Review Goals

- Describe the problem of workplace safety
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Thank You!

Share what you have done to improve safety

