Active Shooter Preparation & Training
“It’s NOT A Shot In the Dark”

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Who We Are…

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Where we come from…
Why we took a proactive role…

• University Health Services has a high exposure profile on campus, due to the nature of our close interaction with students and patients.

• 1 year after Virginia Tech, there was still no policy or procedure in place across our campus addressing how to respond to such a crisis.
Partial List of fatal shootings on US campuses in recent years

—AUG. 1, 1966: Charles Whitman points a rifle from the observation deck of the University of Texas at Austin’s tower and begins shooting in a homicidal rampage that goes on for 96 minutes. Sixteen people are killed, 31 wounded.

—MAY 4, 1970: Four students were killed and nine wounded by National Guard troops called in to quell anti-war protests on the campus of Kent State University in Ohio.

—NOV. 1, 1991: Gang Lu, 28, a graduate student in Physics from China, reportedly upset because he was passed over for an academic honor, opens fire in two buildings on the University of Iowa campus. Five University of Iowa employees killed, including four members of the Physics Department, and two others wounded. The student fatally shoots himself.
Partial List of fatal shootings on US campuses in recent years

— AUG. 15, 1996: Fredrick Martin Davidson, 36, a graduate Engineering student at San Diego State, is defending his thesis before a faculty committee when he pulls out a handgun and kills three professors.

— APR 20, 1999: Two teenagers, Eric Harris and Dylan Klebold, open fire on their classmates at Columbine High School in Littleton, Colorado. 12 students and 1 teacher were killed before the teenagers committed suicide.
Partial List of fatal shootings on US campuses in recent years

— JAN. 16, 2002: Graduate student Peter Odighizuwa, 42, recently dismissed from Virginia's Appalachian School of Law, returns to campus and kills the dean, a professor and a student before being tackled by students. The attack also wounds three female students.

— OCT. 28, 2002: Failing University of Arizona Nursing College student and Gulf War veteran Robert Flores, 40, walks into an instructor’s office and fatally shoots her. A few minutes later, armed with five guns, he enters one of his Nursing classrooms and kills two more of his instructors before fatally shooting himself.

— MAY 9, 2003: A 62-year-old man with two handguns and a bulletproof vest fires hundreds of rounds during a seven-hour shooting spree and standoff at a Case Western Reserve University building in Cleveland. One student is killed and two others are wounded. Biswanath Halder, who authorities say was upset because he believed a student hacked into his website, is later sentenced to life in prison.
Partial List of fatal shootings on US campuses in recent years

—SEPT. 2, 2006: Douglas W. Pennington, 49, kills himself and his two sons during a visit to the campus of Shepherd University in Shepherdstown, West Virginia.

—APR. 16, 2007: Cho Seung-Hui, 23, kills 2 people in a dorm, and 30 more two hours later in a classroom building at Virginia Tech in Blacksburg, VA, then kills himself in the deadliest mass shooting in modern US history. 15 others were wounded.

—FEB 8, 2008: Latina Williams, a 23 year old nursing student, opens fire during an emergency medical technology class at Louisiana Technical College in Baton Rouge, killing Karsheika Graves and Taneshia Butler. She then kills herself.
Partial List of fatal shootings on US campuses in recent years

— FEB 14, 2008: Stephen Kazmierczak, a former graduate student at Northern Illinois University in Dekalb opens fire in a lecture hall, killing five students and wounding 17 others. He then commits suicide.
Learning Objectives

• Understand / define the term “active shooter.”

• List necessary measures that can be employed to reduce the effectiveness of an active shooter.

• Understand Law Enforcement Response.

• Understand the key components of a lockdown policy.
The Active Shooter Defined

• An armed suspect or assailant who has used deadly force on other persons and continues to do so while having unrestricted access to additional victims.

• Threat is not contained and there is immediate risk of death or injury.
Active Shooter

• Considered the greatest terrorist threat on campuses.

• You need to be informed of law enforcement response plans so you can take protective measures.
Mentality of Active Shooter

• Desire to kill without concern for their safety or threat of capture.

• Normally has intended victims, and will search them out.

• Accepts targets of opportunity while searching for or after finding intended targets.
Mentality of Active Shooter

- Will continue to move throughout building or area until stopped by law enforcement, suicide, or other intervention.

- This has necessitated a change in tactics by law enforcement (Immediate Action Rapid Deployment or Quick Action Deployment).
Shooters Intentions / Goals: To Kill and Injure

Losses can be mitigated with community preparedness training and response during actual event.
Considerations

- Unlike public school systems, University facilities do not feature:
  - Intercoms in classrooms / buildings
  - One centralized administrative office
  - Visitor access points (open campus)
  - Dense campus facility (large area)
  - Immediate Campus wide Emergency Notification System
Campus Mitigation

- Campus Protective Posture:
  - Early Warning / Notification System?
  - Campus training involvement?
  - Building construction?
  - Established escape routes?
  - Identification / location of safe rooms?
Facility Mitigation

- Building / departmental Lockdown Policy development:
  - Well thought out?
  - Multi-disciplinary approach?
  - Simple / understandable?
  - Practiced / rehearsed?
  - Funded AND endorsed?
Law Enforcement Mitigation
Law Enforcement Mitigation

• Campus Police Training Status:
  Campus SWAT Team?
  Campus training involvement?
  Number of officers on shift / available?

• **External Law Enforcement:**
  Collective training with Campus Police?
  Nearest station / sub-station?
  Command / Control integration?
Law Enforcement Response
Law Enforcement Response

- Law Enforcement’s mission is to locate, contain and stop the shooter.

- Once officers are at the scene and determine that violence is actually, currently occurring, they enter the building. They will not wait for a SWAT team.

- The shooter will generally not flee when law enforcement enters the building. Responding officers become “new” targets.
Law Enforcement Response

- Remember, the shooters main goal is not escape, but rather to kill as many people as possible.
Law Enforcement Response

• **Injured persons**

  • Initial responding officers will not treat the injured or begin evacuation until the threat is neutralized.

  • You may need to explain this to others in an attempt to calm them.

  • Fire / Rescue will respond as soon as it is safe to do so.
Law Enforcement Response

• Evacuation - when area is secure.
• Safety corridors will be established. This may be time consuming.
• You will be searched.
• You will be escorted out of the building by armed police officers. Follow their instructions at all times.
The Investigation

• The entire area will be treated as a crime scene. Once you evacuate, you will not be permitted to retrieve items or access the crime scene.

• After evacuation you will be taken to a holding area for medical care, interviewing, counseling, etc.
Your Response

- Your actions will influence others.
- Stay Calm.
- Render 1st Aid until help arrives.
- Assure others that you and the police are working to protect them.
Lockdown Policy

• Policy / Procedure Development Goals:
  Facility / site security
  Staff, student, visitor safety
  Proactive – NOT Reactive
  Reduce staff anxiety
  Tested and Re-tested: Effective & Efficient
Lockdown Policy

Definition:
“an emergency protocol to protect people inside your facility from a dangerous external or internal event.”
Lockdown Procedure

Enables staff, students, visitors, and patients to quickly move to multiple safe locations in the building and shelter in place until the threat has been removed or resolved.
Lockdown Framework

Immediate isolation = protected posture.

Lockable door – behind cover.

History shows that when intruders come to a locked door, they keep moving – taking the path of least resistance to locate unlocked doors or windows where they can see people inside.
Triggers

There are two types of events that might trigger a lockdown:

• An external unsafe activity, condition, or event on campus.

• An internal IMMEDIATE event or threat.
External Lockdown Event

External Events:

- Bomb Threat (not in current building)
- Bio / Chemical Hazard / Bio Terrorism
- Armed Intruder on campus OR External Shooting Event (unresolved)
External Lockdown Response

Initiated by Outside Entity: University Administration / Law Enforcement
Barrier security – secure all exterior doors immediately.
All staff, visitors, patients to move immediately away from windows.
Complete all in-progress patient care.
Shut down elevator / secure internal doors.
Move to safe areas or designated Safe Rooms.

Length of time in lockdown posture: HOURS??
Internal Lockdown Event

Internal Events:
Staff have active view of intruder with weapon or explosive device.
Shots fired.
Robbery or hostage situation.
Internal Lockdown Response

Immediate response
Secure first line barrier doors
Gather patients / visitors
Quickly move to and secure Safe Rooms
Open lockdown packet
Check in (radio) with Operations Center
Maintain quiet & order; establish calm demeanor

Length of time in Lockdown posture: 20 - 30 minutes maximum
Initiation of Internal Lockdown

1) When the trigger event occurs, observing party will initiate the lockdown by broadcasting "LOCKDOWN LOCKDOWN LOCKDOWN" on 2-way radios; both on Channel 2, and again on Channel 1.

On completion, 2-way radios switched to Channel 1 and monitored.
Initiation of Lockdown

2) Observing party (or designated staff member) will call Campus Police @ “123-4567” ASAP. This may or may not be the designated “911” number; depending on the nature of the emergency, 911 may be overwhelmed (ring busy).

Report details of incident / event.
What to Report?

• Your Name & Phone Number.
• Specific Location of incident or event:
   Building Name + Room Number
• Injuries:
   Number of People Injured
   Types of injuries
• Additional details, such as…
What to Report?

- Suspect Information
  - Specific location
  - Number of suspects
  - Race and Gender
  - Clothing color and style
  - Physical features
  - Type of weapons
  - Backpack

- Do you recognize the shooter? What’s their name?
Initiation of Lockdown

3) It is essential that each staff member and Supervisor assess their local areas for threats.

IF SAFE LOCALLY, all Pods and departments will lock their 1st barrier doors immediately, and then quickly move to Safe Room.

IF NOT SAFE LOCALLY, immediately move to designated Safe Room OR seek immediate cover / protection.
Initiation of Lockdown

4) Move all staff, visitors, and patients to identified Safe Room.

Safe Room considerations:
* must be immediately accessible.
* large enough to contain functional groups of staff, visitors, and patients.
* no windows; no exterior walls.
* preferably “room within a suite” to give 2-deep barrier locking doors.
1st Floor
3rd Floor
Safe Room Shepherd

• Each Safe Room has primary and backup members designated as “Shepherds”.

• Shepherd is last person “in” Safe Room, and acts as the door gatekeeper.

• Ensure doorway access remains unobstructed.
Safe Room Shepherd
Responsibilities

- Get your flock into the Safe Room & secure the door. Silence all cell phones.
- Remove envelope from lockdown package & review the authentication code word or phrase.
- Ensure 2-way radio is present, operating, and on channel 1.
- Take headcount by name – staff, patients, visitors.
- Quietly respond to command center by 2-way radio when requested.
- Maintain calm and order.
During the Lockdown

- Ignore all door knocks or fire alarms.
- Ignore all verbal commands from outside your Safe Room unless authentication code word / phrase is delivered by authorized administrative staff.
- The authentication code word / phrase must be unique to your organization and available – ours is located in a dedicated envelope in the lockdown kit.
- A known administrative staff member will come to each Safe Room and give the authentication word or phrase and announce code clear when the danger has resolved.
Debriefing

• In an actual event, the Environment of Care committee will conduct a Health Center debriefing after release from Law Enforcement.

• **Goals**: help staff explore and manage strong emotions; take action against demeaning or aggressive attitudes, words, or behavior; monitor and settle emerging conflicts; correct misinformation; make corrective actions in the plan as needed; connect staff to available resources or support groups (NOVA, EAP, or other activities).
Drills

- Purpose: to familiarize occupants of the building with the process, signals, and lockdown procedures, and authentication for all clear when an emergency occurs.

- Authority to call drills: Director, Medical Director, Chair-EOC.

- All persons in building must take part in a drill.
Responsibility of Administration

• Full charge of organizing and conducting drills in the Health Center.

• Capability and familiarity to secure all building exits in a lock down event.

• Establish and operate incident command center.
Unsecured Areas

• If you find yourself trapped in an open area, immediately seek protection.

• Put a physical barrier between you and the suspect. Consider “concealment” (can’t be seen) versus “cover” (protection).

• Consider your options:
  Escape or shelter in place.
Lock Down Packet Contents

• 1 large zip lock bag
• 1 pen
• 1 flashlight
• Cover sheet – UCF Health Center Lockdown
• Signage – Health Center is under Lockdown
• Lock Down Policy
• Lock Down Checklist / Attendance Forms
• Health Center Phone List
Lock Down Packet Contents

- Green & Red Paper (to be used to identify injury state of building to outside law enforcement observation). Only in Admin (3rd Floor) and IT (2nd Floor) with exterior window placement.
- Envelope with “all clear” code phrase / codeword.
- List of staff member cell numbers.
- List of Administration staff who can give “all clear”.
Have you seen S.P.O.C.??
Suspicious Person On Campus

No!! Not me!!
Suspicious Person on Campus.
DUH!!

What is Suspicious?
Anything that seems out of the ordinary... Trust your gut!

How do I report suspicious behavior?
- Emergency? 407-823-5555 or 9-1-1

What to remember if you see S.P.O.C.?
- What did they look like?
  Ex. Clothing? Physical Features?
  (Identifying marks)
- Where were they located?
- What made them suspicious?

Warning!!!
NEVER CONFRONT S.P.O.C.
Train…and train some more

• In April 2008, the UCF Police Dept conducted a “near” off campus training exercise for 1st responding groups of officers to an “active shooter” scenario.
• Full instrumentation – video and military grade laser engagement system / monitors.
• Empty 2 story multi-roomed office building.
• Armed shooter roaming building, targeting individuals and targets of opportunity.
• Faculty, Staff, and students played the victim roles.
Health Center Training

• Lockdown Training for Staff – 4 Sessions (mandatory attendance) April 2008

• 3x Tabletop Sessions (May-June 2008)

• Active Shooter Drill – July 18, 2008

• Next Drill – Summer 2009
Active Shooter Drill

- Health Center closed for 2 hours for staff meeting.
- Upper Administration & Campus Police advised of drill.
- Many staff members experienced unexpected levels of anxiety.
- From start to finish (all clear) approximately 12-15 minutes.
- Outdoor signage + personnel at entrances.
- Full after action review / debriefing.
Drill – Lessons Learned

• No time to lock stairwell / external doors.
• Size of some Safe Rooms too small.
• Pathways / escape routes found not secure.
• Safe Room packets / procedures too “noisy” and flashlight problems.
• Safe Rooms were not quiet.
• Some Pod doors found unsecured.
• Police cancelled participation at last minute.
• Staff requesting additional training & drills.
• Policy / Plan requires revision(s).
Summary

• Active Shooter – take a leadership role.
• Follow Lockdown protocol – triggers, notify, report, secure, shelter, safeguard, authenticate all-clear.
• Calm, reassure, and quiet others; treat injured until aid arrives.
• Law enforcement will respond; their mission is to neutralize the threat.
• Evacuation – follow Law Enforcement commands.
• Follow up - medical care, interview, counseling.
• Drill – evaluate, refine, practice, repeat.
Our EOC Committee

- Sr. Nurse – Chair
- Information Technology Manager
- Medical Director
- Pharmacy Manager
- Building Manager
- Senior Appointments Staff
- Office Manager
- Provider
- Patient Advocate
- Wellness – Sr. Training Specialist
Closing Comments

• We cannot predict the origin of the next threat.

• Assailants in some recent incidents across the country were not students or employees.

• Victims are often unaware they were targets, until attacked.

• There are no “Cookie Cutter” plans – each building and campus is unique.
Questions?

Discussion / Comments / Suggestions?
Contact Information

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