



## **CEPAR Responds**

### **What Would Our Medical Facilities Do in the Event of a Mass Shooting or Other Mass Casualty Event?**

The Orlando mass shooting, with 49 deaths and more than 50 others injured, is the largest mass shooting in recent American history. Many victims needed urgent operations to save their lives. The receiving hospital for most of the victims was Orlando Regional Medical Center, which is located only three blocks from the epicenter. It certainly appears that the facility was prepared and responded well. We here at Johns Hopkins applaud the medical center for its outstanding response. One of the actions of the medical center was to “lock down” the facility so it could manage the acute needs of the victims and protect hospital staff. What does a lockdown mean, and what would we do here at Johns Hopkins?

#### **What is a lockdown?**

The lockdown of a facility is an emergency protocol that highly restricts access and may invoke a state of confinement. Facility access is always affected, but for security reasons, confinement may also be required. Many portals of access and egresses are literally locked, and security personnel are placed at designated access points. In addition to key law enforcement as required, only those employees with a need to be at the affected facility will be allowed in. Ambulances will generally be diverted, and visitors will not be allowed. Press and media will generally not be allowed access but may be grouped in a confined location and briefed by designated Johns Hopkins media relations staff members. For some disasters, patients may be rapidly discharged if leaving the facility is considered safe.

A lockdown doesn't always refer to the entire facility. In fact, it may be difficult in a complex such as The Johns Hopkins Hospital or Johns Hopkins Bayview Medical Center. It may be restricted to the Emergency Department, designated floors or sections of the hospital, or clinics. *In the event of an active shooter, the entire campus will be on lockdown.*

## **How does a lockdown occur?**

First, CEPAR is responsible for ensuring that all of our facilities have proper disaster and critical event plans that are appropriately exercised and in place for a variety of challenging events, including mass casualties. Indeed, each of our hospitals has such plans and protocols, and these are tested in various ways each year as required by institutional standards and regulatory agencies (i.e., the Joint Commission, the Centers for Medicare and Medicaid Services, or other regulatory agencies).

A disaster response plan for a given facility would be triggered immediately after becoming aware of a mass casualty event with the potential to receive significant numbers of patients. Hospitals affected would rapidly stand up their incident command systems, as per protocol, to direct and coordinate the response. The order for a lockdown is likely to be triggered by security or the command structure of the individual hospital. Depending on the hospital, authorities that can command a lockdown include the incident commander, hospital president, security or, for some, the administrator on call or the nurse in charge. The CEPAR incident commander may also give such an order.

Our facilities' emergency and other designated departments have protocols for disaster response that are likely to be invoked even before the hospital can formally establish an incident command. However, as part of the Emergency Department response activation, the incident commander is notified and given a situational awareness, and then opens up the hospital's incident command center.

Following an order, a lockdown can be enacted within a few minutes.

## **Who is responsible for carrying out a lockdown?**

A lockdown is the responsibility of security for the hospital perimeters. However, a lockdown inside of the hospital is based on the pre-established procedures and responsibilities within the hospital policy.

## **How is a lockdown communicated to the Johns Hopkins community?**

Johns Hopkins relies on its emergency alert system (RAVE) for disaster communication for faculty, employees and students. However, each employee must register to receive RAVE alerts. Redundant messages may also be sent after the alerts in the event that some staff members may have not enrolled in RAVE. To register, log in to my.jh.edu, hover over myProfile and then complete the information requested under Emergency Alerts.

## **How is a lockdown communicated to the public?**

Johns Hopkins has a joint information system, with elements from both Johns Hopkins Medicine and The Johns Hopkins University. During a major disaster, a joint information command (JIC) from these entities is formed. The JIC confers with incident command for the promulgation and timing of appropriate information to the public. Often, information is communicated through established media channels.

## **I'm an employee. What should I do during a lockdown?**

Stay put unless otherwise directed to do so, or if you have a specific response role. Your supervisor will receive instructions from the incident commander. If the hospital is receiving victims from an event, unless you are a member of the designated response team or are specifically asked to respond, **do not go to the Emergency Department to volunteer your services**, no matter what your medical skill level. Your presence *will be* a distraction. You may hinder the response and, in particular, the treatment of patients.

All employees and students affiliated with Johns Hopkins Medicine should take the active shooter course to know how to choose the best option (e.g., run, hide or fight) during an active shooter event.