

ASPR TRACIE Technical Assistance Request

Request Receipt Date (by ASPR TRACIE): 18 April 2019

Response Date: 19 April 2019

Type of TA Request: Standard

Request:

The requestor asked for ASPR TRACIE-developed resources specific to healthcare active shooter incidents. He also asked if we could help gather recently published articles related to the concept of a “secure-preserve-fight” model instead of “run-hide-fight,” noting that recent incidents indicate that the majority of healthcare staff will not leave their patients in an active shooter situation.

Response:

The ASPR TRACIE Team reviewed existing Topic Collections and other ASPR TRACIE resources. Section I in this document includes resources that ASPR TRACIE developed and are relevant to active shooter incidents. Section II provides articles gathered that are related to the “run-secure-protect” model.

I. ASPR TRACIE Resources (listed alphabetically)

The ASPR TRACIE Team would first like to highlight our [Select Mass Violence Resources Page](#), which includes the ASPR TRACIE-developed resources listed below.

Select ASPR TRACIE Technical Assistance (TA) Responses

- The [Select ASPR TRACIE Technical Resources Response webpage](#) includes links to responses to requests for information and TA.
 - Refer to the [Workplace Violence and Active Shooter](#) section.

The Exchange Newsletters

ASPR TRACIE. (2016). [The Exchange, Issue 3: Preparing for and Responding to No-Notice Incidents](#). U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.

This issue of the newsletter focuses on preparing for and responding to no-notice events. **NOTE:** The article starting on page 2 titled, “Lessons Learned from the Pulse Nightclub Shooting: An Interview with Staff from Orlando Regional Medical Center” addresses activating HICS.

ASPR TRACIE. (2018). [The Exchange, Issue 7: Providing Healthcare During No-Notice Incidents](#). U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.

This issue covers the challenges associated with providing care during no-notice incidents (e.g., mass shootings). **NOTE:** HICS is addressed throughout this newsletter.

Topic Collections

- [Explosives and Mass Shooting](#)
- [Family Reunification and Support](#)
- [Fatality Management](#)
- [On-Scene Mass Casualty Triage and Trauma Care](#)
- [Workplace Violence](#)
 - More specifically, refer to the [Active Shooter/ Mass Shooting section](#).

Webinars and Tip Sheets

ASPR TRACIE. (2017). [Post-Mass Shooting Programs and Resources Overview](#).

This document contains information on and links to programs and resources available to communities affected by mass shooting/mass violence events.

ASPR TRACIE. (2018). [Healthcare Response to a No-Notice Incident: Las Vegas](#).

In this ASPR TRACIE webinar, healthcare providers who responded to the mass shooting incident in Las Vegas share their experiences and recommendations that can help others prepare for similar incidents.

ASPR TRACIE. (2018). [No-Notice Incident Tip Sheets](#).

ASPR TRACIE developed a series of tip sheets for healthcare professionals specific to no-notice incidents. **NOTE:** Refer to the No-Notice Incident Tip Sheets section of the Select Mass Violence Resources webpage.

ASPR TRACIE. (2018). [Tips for Healthcare Facilities: Assisting Families and Loved Ones after a Mass Casualty Incident](#).

This document highlights best practices and issues related to planning for, activating, and operating hospital or healthcare facility Family Information Centers (FIC)/ Family Support Centers (FSC), in collaboration with Family Reception Centers (FRC) and Family Assistance Centers (FAC).

ASPR TRACIE. (2019). [Mass Shooting/ No-Notice Incident After-Action Interview Guide: Medical Resource Requirements](#).

This list of questions was used to help ASPR TRACIE staff interview various Las Vegas hospital personnel to collect and synthesize information from their mass shooting response. Results were used to develop a suite of No-Notice Incident Tip Sheets.

II. Articles on the “Secure-Preserve-Fight” Model

Denham, C. II, Botz, G., Denham, C. III, and Adcox, W. (2019). [Effectively Responding to Active Shooters in Healthcare Facilities](#). Vanderbilt Campus Safety.

This article identifies the differences between active shooting incidents in healthcare facilities and other settings such as schools, malls, and commercial businesses. The authors also address preparedness efforts that healthcare facilities can incorporate into active shooter incident planning. A presentation is embedded in the article which features a speaker discussing the article “Active-Shooter Response at a Health Care Facility.”
NOTE: That article is also provided in this document.

Ducharme, J. (2018). [Doctors and Nurses Treat Gunshot Wounds All the Time. Now They're Preparing for Active Shootings at Their Own Hospitals](#). Time.

The author addresses the “secure, preserve, fight” model that was presented in the “Active-Shooter Response at a Health Care Facility” article. Suggestions for hospital staff regarding this new approach include: securing areas where life-saving patient care is in progress by electronically or mechanically barring entry to those zones; preserving patient lives by moving them to secure areas; and only fighting off the assailant if absolutely necessary.

Gutierrez, G. (2018). [Preparation Key to Dealing with Hospital Mass Shooting](#). Baylor College of Medicine.

The author discusses why the concept of “secure, preserve, fight” for healthcare facilities might be more realistic than the traditional “run, hide, fight” directive for those healthcare providers providing emergent, time-critical patient care.

Inaba, K., Eastman, A., Jacobs, L.M., and Mattox, K.L. (2018). [Active Shooter Response at a Health Care Facility](#). The New England Journal of Medicine. 379(6).

The authors of this article present a new strategy for healthcare professionals who are faced with an active shooter incident, and are responsible for providing essential medical care to patients who cannot run, hide, or fight. In these situations, the authors proposed the “secure, preserve, fight” model: secure the location immediately, preserve life of the patient and oneself, and fight only if necessary.

McAshan, B.R. (2018). [Trauma Physicians Offer New Hospital Response to Active Shooters](#). TMC News.

The author highlights key points of the “secure, preserve, fight” model being considered by healthcare facility staff preparing for active shooter incidents.