# Policy and Procedure

Department: Emergency	Section:	Subject: Code Silver - Safety
Preparedness		from Threat
Policy: 8655		Supersedes: September 28, 2016
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# **POLICY**

Code Silver is a planned response to ensure the safety of all health care workers, patients, and visitors at the hospital when an individual is in possession of a weapon and an enhanced police response is required.

Code Silver should be called if there is a threat, attempt, or active use of a weapon to cause harm, regardless of the type of weapon.

Code Silver will **not result in other hospital workers coming to assist**, as it is designed to keep people away from harm. Police will be contacted as soon as Code Silver is called.

This Policy applies to Health Care Worker (HCW), which in the context of this policy includes employees, board-appointed professional staff (e.g., physicians), students, volunteers, and any other person(s) working on the hospital grounds.

When a Code Silver is initiated, all HCWs will make every reasonable effort to protect themselves, patients, visitors, and others in their immediate area, following the procedures set out in this policy.

If a coordinate emergency response by several agencies is required, consult the Town of Espanola Emergency Plan.

#### **INITIATING A CODE SILVER**

- Any healthcare worker can initiate a Code Silver by dialing 911 (ED Incident Command
  Centre) \*\* If the Code Silver is in the ED Dial Switchboard (0) to initiate a Code Silver when
  staff observe or are told of a person who is (or persons who are)
- · Attempting to harm or injure people with any weapon; or
- Carrying a weapon on or near hospital grounds

#### INFORMATION TO INCIDENT COMMAND/SWITCHBOARD TO INCLUDE:

- Inform incident command/switchboard to initiate Code Silver
- Give as much information as possible including:
- Location of the assailant(s) (current, last known, and/or direction headed)
- Type of weapon(s)
- Description of the assailant(s)
- · Any comments or demands made by the assailant

- Information on victims and/or hostages
- Any other information you feel may be relevant

#### **CHARGE NURSE**

# WHEN YOU HEAR "CODE SILVER" OVERHEAD, INITIATE LOCK-DOWN PROCEDURES:

- Determine if any armed Police or trained law-enforcement personnel are already on-site (e.g., in Emergency Department) to assist with response
- Determine if Fire Department or EMS personnel are required
- Prepare to meet police at a pre-determined location
- Give site plan to the police (For example, Fire Safety Plan or floor plan)

# INCIDENT COMMAND/SWITCHBOARD

- If more than one person is available, work to complete all these requirements in tandem.
- Announce overhead three times "Code Silver (and specific location, if known)"
- · Call 911 and notify police.
- Advise 911 operator of all available information such as:
  - Location of incident, including current location and any affected locations
  - Description of assailant(s)
  - Type & description of weapon(s)
  - Information on hostages / victims (if any)
  - Any comments or demands made by the assailant
  - ❖ Any other information you received from the HCW who reported it
- Remain on the line to provide updates
- Follow instructions of the 911 operator
- Close, lock and, if possible, barricade the door to the Switchboard/Telecommunication room
- Notify Senior Manager/CEO

# UPON POLICE ARRIVAL: INCIDENT COMMAND OR SWITCHBOARD

- Provide a situation update to Police
- Provide Police with master keys (in ED narcotic cupboard only access if safe to do so)
- Assist Police with all requests
- Confirm attendance of persons from affected area, to determine if anyone is unaccounted for
- Take notes and document all activities
- Secure (as safety allows) specific interior and exterior doors as directed by police
- Ensure all public announcements and/or communications requested by police are made via Incident Commander or Switchboard.
- Once you have reached a safe location you will likely be held in that area by Police until the situation is under control and all witnesses have been identified and questioned. Do not leave the safe location until Police have instructed you to do so.

#### **PROCEDURE**

# HCWS WHO ARE IN THE IMMEDIATE AREA OF ASSAILANT

# 1. Remain CALM and EVACUATE.

- Do not confront a person with a weapon
- Do not attempt to remove wounded persons from the scene
- If possible, assist others to leave the area and redirect those trying to enter
- Evacuate if able and safe to proceed
- Only evacuate if you are close to an exit and can get there safely, without attracting attention
- While evacuating always keep hands visible (not to be mistaken for the shooter)
- Leave any belongings behind

#### 2. If unable to evacuate, HIDE.

- Use rooms with doors that lock
- Barricade the door with heavy furniture
- Silence your cell phone and turn off any sources of noise (e.g., radios, televisions, etc.)
- Hide behind large objects (e.g., cabinets, desks, walls, etc.)
- Remain quiet and low to the ground

# 3. **SURVIVE.**

- Fight only as a last resort and only if your life is in imminent danger
- Attempt to disrupt and/or incapacitate the assailant by: Acting as aggressively as possible against him/her, throw items and improvising weapons, yelling, commit to your actions
- If others are available, work together to distract and attack the assailant as fiercely as possible

#### ALL HCWS IN AREAS NEAR THE CODE SILVER LOCATION

# If you can leave safely, **EVACUATE**:

- Remain calm and follow Police/Security direction, if available
- Quickly leave the area, evacuating as many patients and other people as possible
- Redirect any people entering the area to evacuate through the closest exit.

Managers: Once at the meeting point, perform a headcount to determine if your team is accounted for.

# If you cannot leave safely, **HIDE**:

- Remain calm
- Protect yourself and individuals in your area by quickly and quietly:
- Closing doors, locking and barricading yourself and others inside (where possible)
- Positioning people out of sight and behind large items that offer protection. (e.g., behind desks, cabinets, and away from windows)
- Silencing personal alarms, mobile phones and other electronic devices (e.g., TVs, Radios, etc.)
- Turning off monitors and screens (where possible) to reduce backlighting
- Instructing others, who can assist, to do the same with other patient rooms (i.e., visitors may assist with the patient room they are visiting)
- If able and safe to do so, call switchboard or 911 to report where occupants are hiding (911 has capacity to manage multiple calls as compared to a hospital switchboard)

- Do not use the telephone unless directly related to the Code Silver. Medical Emergency Codes will
  not be called for victims of the assailant until the incident site is secured by Police1
- Hide in place until "Code Silver, All Clear" is announced overhead
- If the assailant enters your work area, contact switchboard or 911 if it is safe to do so

#### HCWS IN OTHER LOCATIONS WITHIN THE HOSPITAL

- Do not attempt to return to your department
- Follow the instructions of the Incident Command/Manager in your current location
- Lock down all external doors and doors between areas, as per the organizational lock-down plan
- Stay where you are, protecting yourself and assisting others in your area, if possible
- Divide into small mixed groups of staff, patients, and visitors. Hide in patient rooms, meeting rooms, bathrooms, offices, etc. Wherever is available and safe to do so.
- Advise patients, visitors, and others to hide; ask them to remain calm, quiet, and to avoid using their phones, any other electronic device, or posting to social media
- Move away from exposed windows, walls, and doors. Cover interior windows if able. Lay on floor, under/behind furniture. If possible, hide against the wall that is on the same side as the door into the room. The room must appear empty
- Minimize movement within the area to essential, safety-related matters
- Silence personal alarms, mobile phones and other electronic devices
- Do not use the telephone unless directly related to the Code Silver Incident.

Managers: If safe to do, perform a headcount to determine if all team members are accounted for.

Police must approve all movement throughout the hospital, until the Code Silver has been cleared. This includes responding to other codes and patient care needs.

### **UPON ARRIVAL OF POLICE:**

Hospitals are reminded that law enforcement personnel are the primary responders and will assume control in any Code Silver response.

**Do not interfere with the Police Officers by delaying or impeding their movements:** The Police are there to stop the threat as soon as possible. Officers will proceed directly to the area the assailant was last seen or heard. The first officers at the scene will not stop to assist injured individuals.

Police Officers will be responding with the intent to use a required level of force to diffuse the situation. Ensure you do not present yourself as a threat to them:

- Drop any items in your hands (e.g., bags, jackets, etc.)
- Immediately raise hands and always keep them visible
- Remain calm and follow Officers' instructions; avoid screaming and/or yelling
- Avoid making quick movements toward Officers
- Do not attempt to grab hold of an Officer
- Do not stop to ask Officers for help or direction when evacuating: Proceed in the direction from which Officers are entering the area

#### Police Officers may:

- Be wearing normal uniforms or tactical gear, helmets, etc.
- Be armed with rifles, shotguns and/or handguns
- Use chemical irritants or incapacitating devices (e.g., pepper spray, stun grenades, tasers, etc.) to control the situation
- Shout commands and may push individuals to the ground for their safety

Rescue teams comprised of additional Officers and emergency medical personnel may follow the initial Officers when it is safe to do so. These rescue teams will treat and remove any injured persons. They may also call upon able-bodied individuals to assist in removing the wounded from the area.

Once you have reached a safe location you will likely be held in that area by Police until the situation is under control and all witnesses have been identified and questioned. Do not leave the safe location until Police have instructed you to do so.

#### INCIDENT COMMAND/SWITCHBOARD: INFORMATION TO POLICE

- Description of assailant(s)
- Type & description of weapon(s)
- Information on hostages / victims (if any)
- Any comments or demands made by the assailant
- Any other information you received from the HCW who reported it

#### SENIOR MANAGER/CEO

- Remain calm
- Notify other senior team members
- Assist police with all requests
- Assist with Incident Command if safe to do so

#### **RECOVERY PLAN and DEBRIEF**

# POLICE WILL ADVISE THE INCIDENT COMMANDER (OR DESIGNATE) WHEN IT IS SAFE TO END THE CODE SILVER.

- Once the Police have said it is safe to do so, the switchboard operator/Incident Command will announce "Code Silver, All Clear" overhead three times.
- All HCWs should return to their work area for debriefing. HCWs from the affected area should go
  to a designated meeting point.
- Announce overhead where the de-briefing will take place.
- The Organization should consider how to address any operations that may not be immediately
  available post-incident. This may occur if the affected area is secured for investigation, or if
  damage to facilities and equipment inhibits their use.
- As soon as possible, a debriefing including participation of any responding law enforcement should be conducted with all persons involved in the incident.
- An action plan will be created to resume operations, evaluate current process, and identify process improvement opportunities.
- As part of the recovery process, the hospital will consider the physical and mental health needs of all workers and patients. Support will be provided, utilizing existing and additional identified programs (e.g., Employee and Family Assistance Program, individual and group counselling, and workers compensation, as necessary.)
- Workers should speak with their supervisor regarding any specific concerns, needs, or considerations.

#### References

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