



TITLE OF POLICY

Emergency Preparedness: Active Shooter & Critical Incident Response

PURPOSE AND SCOPE

To establish the procedures to be followed in the event of a hostile intruder incident at each major clinical site of the UNC MD program.

RESPONSIBLE PARTY AND REVIEW CYCLE

The Education Committee reviews, updates, and approves the policy annually or when new major clinical site is added.

LCME REFERENCE(S)

LCME 5.7: Security, Student Safety, and Disaster Preparedness

HISTORY OF APPROVALS AND UPDATES

Approved by the Education Committee May 2023

Revised and approved by the Education Committee February 2026

POLICY

The UNC School of Medicine follows hostile intruder protocols established at each of its clinical sites and branch campuses. Protocols for each site and branch campus are developed in collaboration with their security teams. Students are informed of the policy through multiple mechanisms, including:

- Class meetings and e-mail correspondence;
- Phase, Course, and Block Orientations;
- Learning management system sites for courses and blocks;
- The website for the School of Medicine; and
- Drills at clinical sites.

Specific procedures for the following sites are included within this policy:

- UNC Healthcare (applies to UNC Hospitals (Main, Hillsborough, Rex, etc.) and Physician Network sites)
- Asheville: Mountain Area Health Education Community (MAHEC)
- Butner: Central Regional Hospital
- Charlotte: Novant Health
- Greensboro: Moses Cone Health
- Raleigh: WakeMed Health
- Wilmington: New Hanover Regional Medical Center



PROCEDURE(S):

UNC-CHAPEL HILL CAMPUS & UNC HEALTHCARE SYSTEM (includes UNC Hospitals and also applies to UNC Medical Group sites)

Campus Security has developed the following protocol that those on UNC-Chapel Hill Campus and within the UNC Healthcare system are advised to follow:

<https://emp.unc.edu/emergency-action-plan/>

ASHEVILLE: MOUNTAIN AREA HEALTH EDUCATION COMMUNITY (MAHEC)

A hostile intruder is any individual actively engaged in killing or attempting to kill people in a confined space and populated area. In most cases, hostile intruders are active shooters that use firearms, and there is no pattern or method to their victim selection. Because active shooter situations are over within 10 to 15 minutes, before law enforcement arrives at the scene, individuals must be prepared both mentally and physically to deal with an active shooter situation.

Notification and Reports:

Any MAHEC employee, contract employee, or anyone doing business on behalf of MAHEC who witnesses the threat of, or an act of, violence on MAHEC property should immediately report it to local law enforcement by dialing 911 or the local police agency if it exists.

Whenever possible, MAHEC Facilities Management should also be notified at 828-257-4411. Facilities Management will coordinate with local law enforcement, MAHEC Administration, including Risk Management, and in coordination with Administration will notify employees, patients, and visitors at each MAHEC office. Notification will include notice by phone, email, social media, websites, fire alarms, and personnel notifications.

Guidelines for Responding to an Active Shooter:

Since active shooter situations develop quickly and provide little to no warning, it is difficult to prepare for them, but developing a plan and practicing it can make a difference in saving lives until law enforcement arrives.

EVACUATE: The best option is to flee the premises and remove yourself from the shooter's path. Unfortunately, this is not always a viable option as escaping could put you in greater danger if it brings you closer to the shooter. There are a few precautions you should take if, after assessing the situation, you determine you can safely evacuate. You should:

- Call 911 if you can do so safely.
- Warn any individuals you encounter to not enter the area.
- Leave your personal belongings behind.

- Have your escape route planned in your mind.
- Resist the urge to move or evacuate wounded people.
- If possible, assist other able-bodied people in fleeing.
- Comply with all law enforcement requests.
- Keep your hands visible and your fingers spread.

HIDE: If you are unable to evacuate the path of an active shooter, your next best option is to hide, avoid detection, and wait for law enforcement to arrive. While hiding is not as effective as evacuation, it can usually keep you safe long enough until law enforcement to arrive. Hiding can be dangerous though, as it can leave you trapped if the shooter were to discover your location. To ensure your hiding spot is as safe as possible, please consider the following recommendations:

- Remain silent and still.
- Silence your phone and other electronic devices.
- If possible, lock the door to whatever room or closet you are hiding in. Do not unlock the door for anyone at any time. Tell the police that you will wait for them to retrieve a key to the room.
- Blockade the door with heavy furniture.
- Make sure you remain out of sight of the shooter's view.
- Stay away from any windows.
- If the windows are equipped with any curtains, close them.
- Remain low and attempt to find cover under furniture and other objects.
- Do not leave your hiding place until you are absolutely certain law enforcement has arrived.

FIGHT BACK: Occasionally, in active shooter situations, evacuations and hiding are not available options, and you may find yourself face-to-face with the shooter. If you find yourself in this situation, your only remaining option is to take physical action against the shooter in hopes of incapacitating them or disarming them. This should be considered an extreme last resort, but, if you decide attacking the shooter is your only option, consider the following strategies:

- Act quickly; hesitation could get you killed.
- Throw items to distract, disorient, or disarm the shooter.
- Yell and wave your arms to startle the shooter.

Working with Emergency Responders:

What to report to 911 or First Responders: Active shooter situations are extremely frantic and are often over quickly. Cooperating with law enforcement and emergency response personnel can prove critical in stopping the perpetrator and saving lives. If you are able to safely call 911, or if you safely evacuate and make contact with first responders, the information you provide is extremely important. Do your best to provide the following information:

- The number of shooters.
- Location of shooter(s).



- The number of potential victims.
- Physical description of the shooter(s), including gender, clothing, height, weight, hair color, etc.
- The amount and types of weapons used by the perpetrator(s).

When law enforcement arrives:

- Remain calm and follow instructions.
- Put down any items in your hands (i.e., bags, jackets)
- Raise hands and spread fingers.
- Keep hands visible at all times.
- Avoid quick movements toward officers such as holding on to them for safety.
- Avoid pointing, screaming, or yelling.
- Do not stop to ask officer for help or direction when evacuating.

BUTNER: CENTRAL REGIONAL HOSPITAL

Purpose: The purpose of this policy is to coordinate and provide guidelines for the implementation of an Active Intruder preparedness and response procedure for Central Regional Hospital (CRH).

Policy: It is the policy of Central Regional Hospital to provide a safe workplace for employees, patients, and visitors. In order to preserve life in the event that an active intruder threatens or appears to be actively engaged in killing or attempting to kill people at CRH, the following guidelines have been established to maximize survivability.

Background

Active intruder incidents usually develop rapidly and are very dynamic in nature. In many cases the incident terminates before all the information becomes clear, often forcing people to make decisions without having all the information needed to make a fully informed decision.

Below is some guidance on how to respond to an active intruder incident.

Reporting

It is the responsibility of each CRH employee to be alert to the possibility of violence and to report any Concerning Behaviors (see Definitions) to their supervisor or CRH Human Resources. See the CRH Workplace Violence Prevention Policy APM-W.0030 for additional information.

Threat Assessment

It is the responsibility of the CRH Human Resource department to respond appropriately to reported threats and violence in accordance with the CRH Workplace Violence Prevention Policy APM-W.0030. A threat assessment team may be formed to assess particular incidents. All incident reports shall be confidential and released only as permitted by applicable law.

Definitions:

Active Intruder: A person who appears to be actively engaged in killing or attempting to kill in or at CRH. In most cases, active intruders use a firearm(s) and display no pattern or method



for selection of their victims. In some cases, the assailant will use other weapons and/or improvised explosive devices to cause additional harm or to impede police and emergency responders.

Concerning Behavior: Behaviors observed which could raise a concern of violence. Examples of these behaviors are, but not limited to: paranoid ideas, delusional statements, changes in personality or performance, disciplinary problems on-site, depressed mood, suicidal ideation, non-specific threats of violence, increased isolation, “odd” or “bizarre” behavior, and interest in or acquisition of weapons.

Threat: The expression of intent to cause physical or mental distress or harm. An expression constitutes a threat without regard to whether the party communicating the threat has the present ability to carry it out and without regard to whether the expression is contingent, conditional, or future

Procedures:

Immediate Response to an Incident: First and foremost, maintaining personal safety should be the primary consideration when dealing with an active intruder situation. The procedures noted below are to be used as reference and should be considered in the context of the specific situation facing the employee.

Notifying Others and Maintaining Personal Safety:

- All staff, upon witnessing/learning of an active intruder incident, should determine if they should RUN-HIDE-FIGHT. Staff may decide to use any combination of RUN-HIDE- FIGHT depending on the situation.
- If a staff person is in the presence of and caring for patients, then the staff person should decide the best RUN-HIDE-FIGHT option for themselves and their patients.
- When safe and possible, staff will call 55 (from a CRH phone) and report the incident. In the event the 55 call does not connect or if the staff person is using a non-CRH phone, dial 911 to report the incident.
- Active intruder incidents can be extremely fluid, with the intruder’s location moving throughout the event. Staff should do their best to keep the switchboard (dialing 55) or the police (dialing 911) informed of the intruder’s location so that staff can be warned of a moving threat via overhead page and the responding officers will have the most accurate information available to help them neutralize the threat.
- The hospital operator/Screening and Admission Unit (SAU) staff member, upon witnessing/learning of an active intruder incident, will immediately make the following announcement three times:

“Security Incident – Active Intruder – (building or area)”

The announcement will be repeated every five minutes until the incident is over and may change if there is a change in the intruder’s location (if it is safe/feasible for the announcer to do so).

- After the initial announcement, the hospital operator/SAU staff will then dial 911, report the incident, and provide available information that will include, but not necessarily be limited to:
 - Number and description of intruder(s)
 - Location of intruder(s), multiple calls to report any location changes
 - Description of weapon(s)
 - Number of victims

RUN-HIDE-FIGHT Guidance: Staff may decide to use any combination of RUN-HIDE-FIGHT depending on the situation.

RUN

- Have an escape route and plan in mind.
- Leave your belongings behind.
- Keep your hands visible.
- Evacuate quickly and quietly, as not to attract the attention of the intruder.
- If it is possible, help others while escaping, but do not allow it to slow you down.

HIDE

- Hide in an area out of the active intruder
- Lock/barricade the door and turn out lights if possible.
- Block entry to your hiding place and lock the doors.
- Remain quiet and remember to silent cell/VOIP phones and pagers.
- Identify possible weapons to FIGHT the intruder if necessary.

FIGHT

- As a last resort and only when your life is in imminent danger.
- Attempt to incapacitate the active intruder utilizing any means necessary.

Interactions with Butner Public Safety/Law Enforcement: Law enforcements primary purpose is to engage and stop the active intruder. They will be carrying weapons and not be stopping to assist victims. Follow the general rules below when encountering Butner Public Safety or another law enforcement officer.

- Do exactly as you are told, comply without objection.
- Empty and raise your hands and avoid rushing towards the officers.
- Remain quiet and calm. Avoid shouting, pointing, screaming, or yelling.
- Don't stop and ask the officers for directions or evacuation points.
- If the officers keep moving, proceed in the direction from which they came until you are safely out of harm's way.
- Fully cooperate with BPS/Law enforcement.

All Clear:

Once Butner Public Safety has neutralized the intruder and all threats to safety have been removed, hospital leadership will instruct the switchboard to give an "All Clear" overhead page.

Actions after the active intruder threat has been neutralized:



- Provide lifesaving care to the injured.
- Establish CRH Incident Management Team and Hospital Command Center (HCC).
- Account for all patients, staff, and visitors. Supervisors should complete a Ward/Area Status Report (ICS-209) form and fax/deliver to the CRH HCC. This form can be found on the Safety & Health Home Page, at the following location: Staff Portal/ Departments/ Safety & Health. This form can also be found in fire extinguisher cabinets throughout the hospital.

CRH HCC Post Incident Actions

- Manage requests for information and the media through the DHHS Communications Office.
- Ensure an incident debriefing is conducted.
- Assess the need for psychological support for patients and staff and their families.
- Ensure the Safety Officer documents the incident using Attachment A, submits copy to the DHHS Safety Programs Office, and maintains a record on file.

Training and Exercises:

- Active Intruder training will be conducted annually with the Annual Safety Training for all staff.
- An Active Intruder exercise will be conducted annually using the DHS Homeland Security Exercise Evaluation Program as a guide.
- The Safety Officer will document the exercise using Attachment B. The documentation will be submitted to the DHHS Safety Programs Office and maintained on file.

CHARLOTTE: NOVANT HEALTH

SCOPE / PURPOSE

To establish policy and procedure for alert notification and response to an active shooter situation in any Novant Health facility.

POLICY

The team member responsible for Public Safety at each facility should develop a response plan with the law enforcement agency having jurisdiction. In the event of an actual active shooter situation, utilizing our plain language emergency alert plan “Security Alert: Active Shooter (location last seen), escape immediate danger or shelter in place, follow team member instructions” will be overhead paged.

QUALIFIED PERSONNEL

All Novant Health team members, providers and volunteers.

EQUIPMENT

Firearms (where authorized), body armor

PROCEDURE



The procedure serves as a guideline to assist personnel in accomplishing the goals of the policy. While following these procedural guidelines personnel are expected to exercise judgment within their scope of practice and/or job responsibilities.

A. Active Shooter. The intent of most active shooters is to kill as many people as quickly as possible. Therefore, the traditional law enforcement response of “surround and contain” allows the subject to accomplish his goal. In order to save lives, the law enforcement agency having jurisdiction will initiate an immediate response. In addition, Novant Health facilities with armed Public Safety officers will respond to the active shooter event with two primary goals, assistance to responding law enforcement and engaging the shooter.

B. Hostages. Active shooters do not take hostages. Response to hostage situations will be governed by the facility’s Hostage Situation/Weapon Involved Response Plan.

C. Alert Notification. Upon discovery of an active shooter situation, or a person entering the facility with a weapon displayed, an emergency call to the law enforcement agency having jurisdiction will be placed. For facilities with on-site Public Safety departments a call will be placed to them for an immediate response and overhead paging.

D. The following overhead page will be made: “Security Alert: Active Shooter (location last seen), escape immediate danger or shelter in place, follow team member instructions.

E. Clinical Team members Response in Patient Care Areas.

- Clinical team members and support team members in patient care areas will clear hallways and corridors of patients and visitors, remain calm and calm the fears of patients and visitors.
- Team members, patients and visitors will immediately go into patient rooms, close the doors and use beds or available furniture to barricade the doors. Note: You may also use any other rooms/spaces where you can lock and/or barricade yourself and others from danger.
- Team members, patients and visitors will lock themselves in patients’ bathrooms, if possible, and remain there until rescued by responding law enforcement or Public Safety officers or an “All Clear” is paged.
- Team members, patients and visitors will stay as low to the floor as possible.
- Team members, patients and visitors will remain quiet and still.
- If you are able to leave the facility safely, then do so.
- If team members can safely call the facility’s Public Safety Department or 911 using a cell phone or landline from the area in which they are concealed they should do so, giving as much information as possible including:
 - Description of the suspect(s),
 - Number and types weapons,
 - Subject’s direction of travel, and
 - Location and condition of any known victims.

F. Non-Clinical Team members Response in Non-Clinical Areas, Providers’ Practices, Business Offices,

etc.

- Team members should remain calm and calm the fears of others.
- Non-clinical team members, patients and others will immediately proceed to areas that can be locked, i. e., offices, conference rooms, bathrooms, etc.
- Team members and others will stay as low to the floor as possible, using desks, filing cabinets and other furniture as cover.
- Team members and others will remain quiet and still.
- Team members and others will remain behind locked doors until rescued by responding law enforcement or Public Safety officers or an “All Clear” is paged.
- If you are able to leave the facility safely, then do so.
- If team members can safely call 911 using a cell phone or landline from the area in which they are concealed they should do, giving as much information as possible including:
 - Description of suspects
 - Number and types of weapons
 - Subject’s direction of travel and
 - Location and condition of any known victims

GREENSBORO: MOSES CONE HEALTH

PURPOSE:

Cone Health is committed to providing a safe and secure workplace and an environment free from physical violence, threatening or harassing behavior. Situations may arise which may threaten the health systems workplace and environment, such as a hostile actor (gunman) or a hostage situation. This Operational Response Guide will provide guidance should these specific situations occur.

DEFINITION:

An Active Shooter is an individual threatening or actively using a firearm, knife or other deadly object with the intent to do bodily harm to Cone Health staff, patients, or visitors. In most cases, an active shooter uses a firearm(s) without pattern or method to select victims. Due to the rapid evolution of these events, individuals must be prepared both mentally and physically to deal with an active shooter situation on their own.

PROCEDURE:

Communication

All Staff: In the event staff members encounter an active shooter situation, they should immediately attempt to call:

- 911-Local law enforcement
- If possible and applicable, call:
 - PBX Operator
 - Security
- Staff member should not attempt to deal with the situation on their own.



PBX Operators:

Upon notification, the switchboard will immediately announce overhead and repeat three times:
*“Attention- All Personnel. Active Shooter Response (state location if known) is In Effect.
Please Secure Your Areas and Await Further Instructions.”*

PBX Operators will ensure that campus Security and SRC have been notified after paging overhead

Operators may only announce an all clear at the direction of the AC, AoC, Security Leadership, Safety, or Emergency Management. To announce an all clear, the operator will announce overhead and repeat three times:
“Active Shooter All Clear”

Protective Actions

Upon overhead announcement/notification of a Hostile Actor:

Evacuation (RUN): All staff, patients, and visitors that can safely do so should immediately exit the building via the nearest outside exit. Persons exiting the building should meet at a designated rally/meeting point other than parking lots due to the potential for secondary hazards. Ideally rally points should be outside the police perimeter.

Shelter in Place (HIDE): If evacuation is not possible, staff that remains will secure their areas by:

- Move patients so they are out of view of any windows, to include door windows.
- Secure the largest area possible by closing and locking all doors, and turn off all lights.
- If possible, barricade doors using equipment or carts.
- Perform a head count and account for all staff, patients and visitors.
- Be aware that it is a common tactic to cause confusion by activating the fire alarms during a hostile actor situation. Staff should plan to defend-in-place if they suspect a fire is genuine.
- If possible, alert the Security Department or law enforcement (911) to any suspicious activity in the area.
- Staff should remain in a secured area until law enforcement arrives to rescue or evacuate.

Take Action (FIGHT): As an absolute last resort, and only when your life is in imminent danger attempt to incapacitate the shooter. Commit to your actions and:

- Act aggressively as possible against him/her
- Throw items and improvise weapons

When Law Enforcement Arrives

Law Enforcement’s purpose is to stop the active gunman as soon as possible. Officers will proceed directly to the area in which the shots were last fired. Upon their arrival:

- Remain calm and follow officer’s instructions.
- Put down any items in your hands.
- Immediately raise hands and spread fingers.
- Keep hands visible at all times.

- Avoid making quick movements towards officers.
- Avoid pointing, screaming and/or yelling.
- Do not stop and ask officers for help or direction when evacuating, just proceed in the direction from which the officers are entering the hospital.
- Have staff ensure that their assigned waiting areas are evacuated to a safe area (interior rooms/halls away from doors and windows).

Hospital Incident Command System

If safe to do so, a Command Center may be opened in the affected hospital executive conference room or at an ad hoc location at the decision of Leadership and Emergency Management with consultation of Law Enforcement.

Cone Health will secure or send a liaison officer to work with local law enforcement to coordinate HICS.

Escalation for Affected Facilities

Refer to Code Triage Policy and Evacuation Policy

After “ALL CLEAR”

- Return patients to previous assigned rooms, if safe to do so
- Report any and all damage to SRC and to the Command Center.

RALEIGH: WAKE MED HEALTH**Department Pre-event Planning**

An active shooting situation is a low portability, high impact event. It can happen very quickly, at any time, and at either the workplace and/or other public places. When you are in your workplace, management should work with staff to talk through the options should such an event happen in your department.

When you have a plan, you immediately react. In your role, you are both a survivor and a protector. A rapid response may save your life and the life of others. Know the persons in your area that may have special needs or a disability and will need assistance in such a situation.

Listed below are basic planning components.

In addition, Review the Environment of Care Continual Readiness Guide - Situational Awareness and the Continual Readiness Evacuation Guide.

Awareness - Preparedness - Rehearsal Awareness

- Take the time to gain an understanding of an active shooter event.
- Know the work environment.
- Recognize and when there is a threat. It may be subtle or it may be obvious. Accept what you see and hear. Gunshots may not sound familiar to you.

Preparedness

- Develop a survival and survivor mindset. Become a stakeholder in your personal safety and security.
- Look at the environment through a survivor’s mindset.
- Consider what you would do should an active shooter show up in your department.
- Develop a “what if” way of thinking.

Rehearsal

- Think about it and talk through with your co-workers what you would do if an active shooter should enter your department
- Note: All drills will be coordinated through Campus Police and the Emergency Service Institute. Table top drills may be conducted in departments.
- Functional drills should never be conducted in a department providing patient services.

Run- Hide – Fight Run

- Know all the potential exits from the area.
- Walk different exits on a regular basis, including taking stairwells.

Hide

- Identify the areas where you could hide in your area. It needs to be a secure room.
- Identify which doors in the area have locks.
- Identify what you could use to barricade doors.
- Identify what you could hide behind in the room.
- Identify if there are windows in the rooms and what can provide coverage, e.g. blinds or curtains.

Fight

- As a last resort and only when your life is in immediate danger, should you try to stop the active shooter.
- Know the location of the fire extinguishers. Discharging a fire extinguisher onto the active shooter is a great weapon.
- Identify items in the area that can be thrown at the shooter.

WILMINGTON: NOVANT HEALTH NEW HANOVER REGIONAL MEDICAL CENTER**I. SCOPE / PURPOSE**

To establish policy and procedure for alert notification and response to an active shooter situation in any Novant Health facility.

II. POLICY

The team member responsible for Protective Services at each facility should develop a response plan with the law enforcement agency having jurisdiction. In the event of an actual active shooter situation, utilizing our plain language emergency alert plan “Security Alert: Active Shooter (location last seen), escape immediate danger or shelter



in place, follow team member instructions” will be overhead paged.

III. QUALIFIED PERSONNEL

All Novant Health team members, providers and volunteers.

IV. EQUIPMENT

Firearms (where authorized), body armor

V. PROCEDURE

The procedure serves as a guideline to assist personnel in accomplishing the goals of the policy. While following these procedural guidelines personnel are expected to exercise judgment within their scope of practice and/or job responsibilities.

A. Active Shooter. The intent of most active shooters is to kill as many people as quickly as possible. Therefore, the traditional law enforcement response of “surround and contain” allows the subject to accomplish his goal. In order to save lives, the law enforcement agency having jurisdiction will initiate an immediate response. In addition, Novant Health facilities with armed Protective Services officers will respond to the active shooter event with two primary goals, assistance to responding law enforcement and engaging the shooter.

B. Hostages. Active shooters do not take hostages. Response to hostage situations will be governed by the facility’s Hostage Situation/Weapon Involved Response Plan.

C. Alert Notification. Upon discovery of an active shooter situation, or a person entering the facility with a weapon displayed, an emergency call to the law enforcement agency having jurisdiction will be placed. For facilities with on-site Protective Services departments a call will be placed to them for an immediate response and overhead paging.

The following overhead page will be made: “Security Alert: Active Shooter (location last seen), escape immediate danger or shelter in place, follow team member Instructions.

D. Clinical Team members Response in Patient Care Areas.

1. Clinical team members and support team members in patient care areas will clear hallways and corridors of patients and visitors, remain calm and calm the fears of patients and visitors.
2. Team members, patients and visitors will immediately go into patient rooms, close the doors and use beds or available furniture to barricade the doors. Note: You may also use any other rooms/spaces where you can lock and/or barricade yourself and others from danger. If a patient room door opens outward, the bathroom can be used for barricade instead of the room door.

3. Team members, patients and visitors will lock themselves in patients' bathrooms, if possible, and remain there until rescued by responding law enforcement or Protective Services officers or an "All Clear" is paged. *Note: If a team member would like assurance that the event is all clear, they may call the PSOC or 911 to confirm that officers are indeed attempting to rescue them from their barricaded position.
4. Team members, patients and visitors will stay as low to the floor as possible.
5. Team members, patients and visitors will remain quiet and still.
6. If you are able to leave the facility safely, then do so.
7. If team members can safely call the facility's Protective Services Department or 911 using a cell phone or landline from the area in which they are concealed they should do so, giving as much information as possible including:
 - a. Description of the suspect(s),
 - b. Number and types of weapons,
 - c. Subject's direction of travel, and
 - d. Location and condition of any known victims.

E. Non-Clinical Team members Response in Non-Clinical Areas, Providers' Practices, Business Offices, etc.

1. Team members should remain calm and calm the fears of others.
2. Non-clinical team members, patients and others will immediately proceed to areas that can be locked, i. e., offices, conference rooms, bathrooms, etc. *Note: When possible, Team members should refrain from attempting to barricade within a room that has a door that opens outward, as this could allow an assailant access to the room.
3. Team members and others will stay as low to the floor as possible, using desks, filing cabinets and other furniture as cover.
4. Team members and others will remain quiet and still.
5. Team members and others will remain behind locked doors until rescued by responding law enforcement or Protective Services officers or an "All Clear" is paged. *Note: If a team member would like assurance that the event is all clear, they may call the PSOC or 911 to confirm that officers are indeed attempting to rescue them from their barricaded position.
6. If you are able to leave the facility safely, then do so.
7. If team members can safely call 911 using a cell phone or landline from the area in which they are concealed they should do so, giving as much information as possible including:
 - a. Description of the suspect(s),
 - b. Number and types of weapons,
 - c. Subject's direction of travel, and
 - d. Location and condition of any known victims.

F. Law Enforcement Response. By definition, an active shooter situation cannot be negotiated or peacefully resolved. Accordingly, responding law enforcement



officers will have the following priorities:

1. Locate, isolate, and engage the shooter.
2. Treat and evacuate the injured.
3. Establish containment with inner and outer perimeters.
4. Safety sweep for unknown hazards.
5. Complete evacuation.
6. Process the crime scene.

G. Facility Response. The leader responsible for Protective Services at every Novant Health Acute Care facility will develop and coordinate a specific active shooter response with the local law enforcement agency having jurisdiction. Each should include the law enforcement agency's response plan and any available Protective Services assistance and support to law enforcement. All team members will receive initial training and Annual Mandatory Education.

1. Whenever possible, the facility's Protective Services team members will attend a Rapid Deployment Course conducted by and/or with law enforcement officers from the law enforcement agency having jurisdiction, to facilitate a coordinated response to an active shooter.
2. The role of the Protective Services team members will be to respond to the active shooter and/or guide the responding law enforcement agency's contact team to the active shooter's location. In this role, a Protective Services Officer will normally serve as a liaison to the responding law enforcement personnel. Each facility should designate a 24-hour point of contact for arriving law enforcement officers. Protective Services Officers performing this role should be equipped with body armor.
3. The leader responsible for Protective Services of a facility having armed Officers, or Officers with authorized access to firearms, will ensure that any internal armed response is planned and closely coordinated with the law enforcement agency having jurisdiction. Responding Protective Services personnel in civilian clothing should wear visible identification or clothing to help identify them to responding law enforcement agencies.