

# Incident Planning Guide: Explosive Incident

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## Definition

This Incident Planning Guide is intended to address all types of explosive incidents whether they occur at a hospital due to an intentional act (e.g., bomb or bomb threat) or unintentional event (e.g., propane tank or hazardous materials explosion). Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

On Sunday morning, a voicemail message is left on the phone of your hospital Chief of Security. The caller is male and upset about having received a parking citation while visiting his dying mother in the intensive care unit. He says that he knows “how to get even” with the hospital and “you’d better be ready for fireworks.” On Monday morning, a bomb threat is received at your hospital’s security office and evaluated as credible in consultation with local law enforcement. Staff are alerted, building and grounds search procedures are activated in partnership with local law enforcement. Appointments, elective procedures, deliveries, and visiting hours are suspended as a precaution ordered by law enforcement. Shortly thereafter a hospital groundskeeper finds what appears to be a pipe bomb adjacent to the oxygen storage tanks and calls the security office. Law enforcement is notified and they immediately send their Explosive Ordinance Disposal Unit which quickly renders the device safe and your hospital begins to return to normal operations. However, around midday a second threat is received and the Hospital Command Center and search procedure remain activated to determine if any additional devices or suspicious items are on campus. Meanwhile, hospital security has identified several potential suspects based on previous information and have provided these details to law enforcement. No further devices or suspicious items are found. Areas of the hospital, including patient care units that were evacuated to safe zones now return to pre-incident status. Appointments, procedures and deliveries are rescheduled, but there is a backlog due to the incident. There is a need for behavioral health counseling for patients, staff, and visitors impacted by the incident.

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## Does your Emergency Management Program address the following issues?

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### Mitigation

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1.	Does your hospital address the threat and impact of an explosive incident (e.g., bomb, propane explosion, chemical incident, etc.) in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators, and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital address the concepts of “target hardening” through the emergency management committee, safety committee, or Security department? Issues may include: <input type="checkbox"/> Relocation of trashcans, mailboxes, delivery boxes, and other closed collection systems away from entry points <input type="checkbox"/> Use of barriers and other devices to exclude potential vehicle impacts to buildings. <input type="checkbox"/> Installation of metal detectors at entry points <input type="checkbox"/> Posting of signage on the hospital's firearms policy <input type="checkbox"/> Removal of shrubbery, trees, planter boxes, newspaper boxes, and other similar enclosures in proximity of doors and windows
4.	Does your hospital identify all potential entry and exit points of the hospital and contain this information in a single document or file for rapid access?
5.	Does your hospital have panic and automated door intrusion alarms installed in all buildings? Are the alarms routinely tested?
6.	Does your hospital have appropriate high security entry and traffic points fortified with shatterproof glass, secured doors, and cameras?
7.	Does your hospital have and enforce a staff photo identification badge policy and procedure? Are visiting healthcare providers (residents, students) provided with photo identification?
8.	Does your hospital have a visitor policy that provides visible identification and tracking of all visitors, vendors, and others who may be on site?
9.	Does your hospital maintain hazardous materials, including isotopes, in a safe and secure area of the hospital? Is the inventory routinely checked?
10.	Does your hospital maintain potentially explosive and combustible materials (e.g., oxygen, propane, acetylene) in a safe and secure environment? Are the sites routinely observed? Is there a policy or procedure in place if materials are tampered with or missing?
11.	Does your hospital have closed circuit television (CCTV) or video cameras and surveillance recording capabilities (digital or tape) in the hospital and on the campus?
12.	Does your hospital have deployable equipment to restrict access to pedestrian and vehicle traffic?

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**Preparedness**

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1.	<p>Does your hospital have an Explosive Incident Plan that includes:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Initial actions: Recognize, Avoid, Isolate, Notify (RAIN)?</li><li><input type="checkbox"/> Bomb threat call policy and checklist?</li><li><input type="checkbox"/> Reporting policy?</li><li><input type="checkbox"/> Search procedures for personnel?</li><li><input type="checkbox"/> Internal and external notification procedures?</li><li><input type="checkbox"/> Hazardous and explosive materials inventory?</li><li><input type="checkbox"/> Search grids?</li><li><input type="checkbox"/> Hospital and campus floor plans, maps, and evacuation routes?</li><li><input type="checkbox"/> Alternate communications technology?</li><li><input type="checkbox"/> Procedures for immediate, controlled, and planned evacuation or shelter-in-place of the hospital?</li><li><input type="checkbox"/> Restriction of movement?</li><li><input type="checkbox"/> Restriction of pedestrian and vehicle movement on campus?</li><li><input type="checkbox"/> A procedure to evaluate and activate emergency department diversion?</li></ul>
2.	<p>Does your hospital exercise the Explosive Incident Plan yearly and revise it as needed?</p>
3.	<p>Does your hospital provide annual training for staff in the Explosive Incident Plan, including the use and location of bomb threat phone call documentation forms?</p>
4.	<p>Does your hospital train staff on recognition of suspicious packages or items, including initial response safety and notification procedures?</p>
5.	<p>Does your hospital train staff in the recognition of suspicious persons and threatening behavior, to include initial safety and notification procedures?</p>
6.	<p>Does your hospital have policies and procedures to search the campus for suspicious items, including:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Identifying, assigning, and training of staff or contractors to conduct and report searches across all areas of your hospital and campus?</li><li><input type="checkbox"/> All common areas, both internal and external?</li><li><input type="checkbox"/> Tracking systems to ensure all areas have been searched?</li><li><input type="checkbox"/> Initial actions to deny entry and notify hospital security or law enforcement?</li></ul>
7.	<p>Does your hospital engage local law enforcement and explosive ordinance disposal (i.e., bomb squad) personnel in development of the Explosive Incident Plan, including:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Search procedures?</li><li><input type="checkbox"/> Phone call procedures and checklist?</li><li><input type="checkbox"/> Communication procedures, including alternate systems if radios must be turned off?</li><li><input type="checkbox"/> Perimeter considerations?</li><li><input type="checkbox"/> Staging areas?</li><li><input type="checkbox"/> Locations of hazardous materials?</li><li><input type="checkbox"/> Rapid access to surveillance data?</li><li><input type="checkbox"/> Rapid access to deployable equipment to restrict access?</li><li><input type="checkbox"/> Augmentation of hospital security and law enforcement services?</li></ul>

8.	<p>Does the Explosive Incident Plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> The role of local law enforcement in hospital response?</li> <li><input type="checkbox"/> Addressing the use of a liaison role to coordinate response and recovery with law enforcement?</li> <li><input type="checkbox"/> Training and education to all staff to respond to an explosive incident?</li> <li><input type="checkbox"/> A method to rapidly notify staff and visitors of the event?</li> <li><input type="checkbox"/> Response to all areas, internal and external, and the surrounding neighborhood?</li> <li><input type="checkbox"/> Addressing employees who may have an issue with domestic violence or restraining orders?</li> <li><input type="checkbox"/> Addressing threats against patients, staff, or visitors?</li> <li><input type="checkbox"/> Coordinating communications and information sharing with law enforcement officials?</li> <li><input type="checkbox"/> Sharing information obtained from security systems with law enforcement and, if necessary, prosecutorial officials?</li> </ul>
9.	Does your hospital identify a location for an Incident Command Post external to the hospital? Has a staff person been identified and trained to assume the position of Law Enforcement Interface Unit Leader in the Operations Section Security Branch?
10.	Does your hospital have a plan to quickly deploy staff, supplies, equipment, and medications for incident response?
11.	Does your hospital have pre-incident standardized messages for communicating the risks associated with this incident and recommendations to the public and media?

**Immediate and Intermediate Response**

1.	<p>Does your hospital's Explosive Incident Plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A standardized code to notify all staff of the activation of the Explosive Incident Plan?</li> <li><input type="checkbox"/> Roles and responsibilities identified for all staff when a code is activated?</li> </ul>
2.	Does your hospital train staff in their roles and responsibilities when the code is announced? Has training been provided to visiting staff?
3.	Does your hospital train switchboard operators, administrative support staff, and clerical staff on notification procedures if a bomb threat is received?
4.	Does your hospital have policies, procedures, and documented authorization to initiate internal and external search activities for the hospital?
5.	Does your hospital have a dedicated phone line to receive search results?
6.	Does your hospital maintain contact numbers for all external authorities and is this information available in the Hospital Command Center and at the switchboard?
7.	Does your hospital have procedures to quickly obtain incident specific details (e.g., voicemail messages, witnesses, security cameras, surveillance tapes, and other data) for evidence and intelligence gathering?
8.	<p>Does your hospital have partial and complete evacuation procedures including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Identification of relocation sites?</li> <li><input type="checkbox"/> Use of evacuation assistance devices?</li> <li><input type="checkbox"/> Supplies and equipment to support clinical operations in relocated areas?</li> </ul>

	<input type="checkbox"/> Securing of patient data? <input type="checkbox"/> Securing of sensitive data (e.g., research data, billing records, etc.)? <input type="checkbox"/> Triggers for evacuation?
9.	Does your hospital train all staff, clinical and nonclinical, in: <input type="checkbox"/> Partial and complete evacuation? <input type="checkbox"/> Use of evacuation assistance devices? <input type="checkbox"/> Triggers for evacuation?
10.	Does your hospital have an evidence collection policy developed in conjunction with local law enforcement and prosecutorial authorities?
11.	Does your hospital identify safe perimeters if a suspicious device is located onsite, in proximity to explosive and combustible materials or near entry points?
12.	Does your hospital have sufficient staff to enforce perimeter security and safety? Can this staff be rapidly augmented?
13.	Does your hospital maintain contact information for all potential daily vehicle traffic (e.g., vendors, deliveries, transport vans, etc.) in the Hospital Command Center for use if restrictions are placed?
14.	Does your hospital have interoperable communications equipment in place or available for use when external partners respond to the hospital?
15.	Does your hospital have redundant communications systems and policies in place in the event that radio communications are restricted?
16.	Does your hospital use social media to disseminate information during and after the event? <input type="checkbox"/> Are all messages approved through the incident's Public Information Officer (PIO) and the Incident Commander prior to release? <input type="checkbox"/> Is information coordinated within the Joint Information Center in cooperation with local, regional, and state emergency management partners?
17.	Does your hospital have a plan to communicate the situation and provide regular updates to patients' family members, as approved by the incident's Public Information Officer (PIO) and the Incident Commander?
<b>Extended Response and System Recovery</b>	
1.	Does your hospital have policy and technology in place to notify all patients, staff, and stakeholders of the conclusion of the incident?
2.	Does your hospital have dedicated space for long term operations of outside response agencies, including law enforcement?
3.	Does your hospital have the means to relocate services if campus evacuation is extended?
4.	Does your hospital have a plan to return services to evacuated areas?
5.	Does your hospital have a policy and procedure to assess damage post incident and initiate repairs?

6.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
7.	Does your hospital use social media to monitor its image post incident and respond to inquiries and misinformation?
8.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services of local or regional resources?
9.	Does your hospital have procedures for reporting and documenting staff injuries?
10.	Does your hospital have a policy and procedure to address line-of-duty death?
11.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
12.	Does your hospital have a Business Continuity Plan for long term events?
13.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?