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| **POLICY TITLE: Code SILVER---Lockdown/Limited Access** | |
| **Department: Interdisciplinary** | **Policy Number: IDP C-01-k** |
| **History of Review/Revision Dates:**  **09/08, 09/10** | **Effective Date: 06/30/2012** |



**SCOPE:**

This policy applies to all units/departments in the Penrose St. Francis System that would have the need to activate a Code SILVER.

**PURPOSE:**

Regardless of the nature of the lockdown or whether it is a total, controlled or emergency lockdown, the broad objective is always the same. A lockdown should be used to ensure the safety and security of staff, patients, public, property and assets. .

**STATEMENT OF POLICY:**

Code Silver will alert appropriate personnel to lock down the facility or Emergency Department in the event of an internal and/or external disaster or when hospital authorities determine it is necessary to secure a specific area during any off-campus or on-campus violence related activity (i.e. multiple stabbings, etc.)

**PROCEDURE:**

1. Secure Facility/Visitors
   1. The hospital perimeter should be secured by locking and /or barricading all entrances and exits. Hospital procedures may require certain doors remain unlocked to allow emergency responders in and out of the building.
   2. Visitors should be directed to a specified area where they will likely be required to remain until the lockdown has been lifted.

1. Notify Authorities
2. Hospital staff should IMMEDIATELY contact local emergency responders, including the police and/or fire departments, in the event of a lockdown
3. Ambulances should be re-directed to another facility or given the proper location for patient drop-off during the lockdown.
4. Staff
5. Staff will well-trailed in the policy and procedures for a hospital lockdown
6. The hospital staff will remain calm and professional during the lockdown, in order to keep visitor and patients calm.
7. Total Lockdown:
   1. This is the highest level of facility and perimeter security.
   2. During a total lockdown, ALL perimeter doors are secured and no one is allowed to enter or exit the facility.
   3. The only movement that occurs within the facility during this time is mission essential movement or to escape imminent danger.
   4. Security personnel and designees appointed by the Incident Commander, Senior Administration, Administrator on Call, or Nursing Supervisor will be assigned to key entrance/exit points.
8. Controlled Lockdown:
9. This is the medium level of facility and perimeter security.
10. During a controlled lockdown, ALL perimeter doors are secured with the exception of ONE designated entry/exit point.
11. Security personnel and designees appointed by the Incident Commander, Senior Administration, Administrator on Call, or Nursing Supervisor will be assigned to key entrance/exit points.
12. Emergency Department Lockdown:
    1. This type of lockdown is used to regulate entry/exit to the Emergency Department only.
    2. All doors leading to the Emergency Department will be secured.
    3. Security personnel and designees appointed by the Incident Commander, Senior Administration, Administrator on Call, Nursing Supervisor, or Emergency Department Charge Nurse will be assigned to this area.
    4. The Senior Administrator on location, Incident Commander, Administrator on Call, Nursing Supervisor or Emergency Room Charge Nurse would decide when to lockdown the Emergency Department.

**REFERENCES AND SOURCES OF EVIDENCE:**

Colling, R.L., & York, T.W. (2010). Hospital and Healthcare Security (5th ed.). Boston, MA: Elsevier.

Hospital Administration. (n.d.). *Is it illegal to lock down a public building*. Retrieved from <http://www.hbpphosp.com/5/is-it-illegal-to-lock-down-a-public-building>

Hospital Lockdown: A framework for NHSSotland Strategic Guidance for NHSScotland.

Version 1: June (2010). Health Facilities Scotland, a Division of NHS National Services

Scotland

Sheehan, K. (2009, October 24). Procedure and Policy for Hospital Lockdown. Retrieved from

<http://www.ehow.com/facts_5565992_procedure-policy-hospital-lockdown.html>

**POLICY VIOLATION**

Any Centura associate who fails to abide by this policy may be subject to disciplinary action, including termination.

Last reviewed by Kate McCord, CNO

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| **Approval Body: Interdisciplinary Practice Committee** | **Signature/Date:**  Katherine D McCord, RN, CNO 5/30/12 |
| **Secondary Approval Body:**  *(If applicable)* | **Signature/Date:**  J. Oram Smith, MD, CMO 6/4/12 |

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| | **AREA RESPONSIBILITIES** | | | | | | | --- | --- | --- | --- | --- | --- | | **Event** | **Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor (NOTE: ED Charge Nurse can authorize ED Lockdown)** | **Operations Center** | **Security** | **Unit Nursing / Associates** | **All PSFHS Associates** | | **Total Lockdown** | * Notify the Operations Center and Security to activate a Code Silver. * Call “911” or delegate someone to call “911” to notify local agencies * Determine if traffic access needs to be controlled. * Appoint other personnel (i.e. EVS, facilities, technicians, etc.) to assist security in controlling access/egress at key entrance/exit points. * Appoint a PSF associate to oversee the area designated as the “holding” area for outpatients and visitors. NOTE: Each person in this area will receive a nametag with the following information: clinic they were visiting and date. | * Announce overhead “Code Silver” and the applicable location (if necessary). Example: “Code Silver, Penrose Hospital” if the “Code Silver” is only for Penrose Hospital * Announce “Code Silver, All Clear” when given the direction by the Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor. | * Limit traffic access by using chains and/or barricades to limit vehicular access, if directed. * Provide a recommendation to the designated PSF leadership on which entrances/exits should be controlled. * Direct other designated individual or post Code Silver sign at the main entrance. * On duty officers are responsible for securing all lockable exits and entrances in a systematic manner | * Provide nametags to guests who are visiting in-patients. * Request visitors remain in the room with the patient until further direction has been given. * Other visitors and those patients being seen in an outpatient clinic (i.e. blood bank, etc.) will be given directions on where to congregate until further direction has been given. | * Wear nametags identifying them as associates. * Limit movement to **only** mission essential movement. |  | **AREA RESPONSIBILITIES** | | | | | | | --- | --- | --- | --- | --- | --- | | **Event** | **Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor (NOTE: ED Charge Nurse can authorize ED Lockdown)** | **Operations Center** | **Security** | **Unit Nursing / Associates** | **All PSFHS Associates** | | **Controlled Lockdown** | * Notify the Operations Center and Security to activate a Code Silver. * Call “911” or delegate someone to call “911” to notify local agencies * Determine if traffic access needs to be controlled. * Appoint other personnel (i.e. EVS, facilities, technicians, etc.) to assist security in controlling access/egress at key entrance/exit points. * Notify the applicable departments and inform them of the designated entry/exit location. This can be accomplished by notifying the Operations Center or any other method deemed appropriate (i.e. runners, telephone, etc.) * Appoint a PSF associate to oversee the area designated as the “holding” area for outpatients and visitors. NOTE: Each person in this area will receive a nametag with the following information: clinic they were visiting and date. | * Announce overhead “Code Silver, Controlled Lockdown” and the applicable location (if necessary). Example: “Code Silver, Controlled Lockdown, Penrose Hospital” if the “Code Silver” is only for Penrose Hospital. * Announce “Code Silver, Controlled Lockdown, All Clear” when given the direction by the Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor. | * Limit traffic access by using chains and/or barricades to limit vehicular access, if directed. * Provide a recommendation to the designated PSF leadership on which entrances/exits should be controlled. * Scan all patient(s) and visitor(s) belongings by utilizing the handheld metal detector and will require identification from anyone entering the designated entry point. * Activation of the handheld metal detector device will require the patient/visitor to empty the contents of the bag, pockets, package, etc. onto a table for further examination. * Direct other designated individual or post Code Silver sign at the main entrance. * On duty officers are responsible for securing all lockable exits and entrances in a systematic manner | * Provide nametags to guests who are visiting in-patients. * Request visitors remain in the room with the patient until further direction has been given. * Other visitors and those patients being seen in an outpatient clinic (i.e. blood bank, etc.) will be given directions on where to congregate until further direction has been given. | * Wear nametags identifying them as associates. NOTE: Only persons with proper identification shall be admitted to the hospital during an emergency. * Limit movement to **only** mission essential movement. |  | **AREA RESPONSIBILITIES** | | | | | | | --- | --- | --- | --- | --- | --- | | **Event** | **Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor (NOTE: ED Charge Nurse can authorize ED Lockdown)** | **Operations Center** | **Security** | **Unit Nursing / Associates** | **All PSFHS Associates** | | **Emergency Department Lockdown** | * Notify the Operations Center and Security to activate a Code Silver. * Call “911” or delegate someone to call “911” to notify local agencies * Notify the appropriate leadership (i.e. CNO, CMO, COO, etc.), Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor regarding Code Silver. NOTE: Any of these individuals can declare a “Code Silver” for the Emergency Department. * Appoint other personnel (i.e. EVS, facilities, technicians, etc.) to assist security in controlling access/egress at key entrance/exit points. * Leadership will designate an alternate location for all patients/visitors to be directed to if he/she feels the situation is so unsafe that the ED waiting room needs to be secured. | * Announce overhead “Code Silver, Emergency Department” and the applicable location (if necessary). Example: “Code Silver, Emergency Department, Penrose Hospital” if the “Code Silver” is only for Penrose Hospital. * Announce “Code Silver, Emergency Department, All Clear” when given the direction by the Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor. | * Scan all patient(s) and visitor(s) belongings by utilizing the handheld metal detector and will require identification from anyone entering the Emergency Room waiting area. * Activation of the handheld metal detector device will require the patient/visitor to empty the contents of the bag, pockets, package, etc. onto a table for further examination. * On duty officers will secure all entrance/exit locations leading to the Emergency Department * Officers and other appointed designees will remove all visitors from the ED treatment areas and will prevent any visitors from going into the treatment area unless otherwise directed. * Officers / designated individuals will secure the waiting room entrance and will direct all patients/visitors in the waiting room area to the designated location, if leadership determines this is necessary. |  | * Wear nametags identifying them as associates. Only associates with proper identification will be allowed to enter the hospital during an emergency. * Limit movement to **only** mission essential movement. NOTE: This does include associates leaving the department. The only time an associate should leave this department during a “Code Silver” is for mission essential movement. |   **AREA RESPONSIBILITIES** | | | | | |
| **Event** | **Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor** | **Operations Center** | **Security** | **Unit Nursing / Associates** | **All PSFHS Associates** |
| **Total Lockdown** | * Notify the Operations Center and Security to activate a Code Silver. * Determine if traffic access needs to be controlled. * Appoint other personnel (i.e. EVS, facilities, technicians, etc.) to assist security in controlling access/egress at key entrance/exit points. * Appoint a PSF associate to oversee the area designated as the “holding” area for outpatients and visitors. NOTE: Each person in this area will receive a nametag with the following information: clinic they were visiting and date. | * Announce overhead “Code Silver” and the applicable location (if necessary). Example: “Code Silver, Penrose Hospital” if the “Code Silver” is only for Penrose Hospital * Announce “Code Silver, All Clear” when given the direction by the Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor. | * Limit traffic access by using chains and/or barricades to limit vehicular access, if directed. * Provide a recommendation to the designated PSF leadership on which entrances/exits should be controlled. * Direct other designated individual or post Code Silver sign at the main entrance. * On duty officers are responsible for securing all lockable exits and entrances in a systematic manner | * Provide nametags to guests who are visiting in-patients. * Request visitors remain in the room with the patient until further direction has been given. * Other visitors and those patients being seen in an outpatient clinic (i.e. blood bank, etc.) will be given directions on where to congregate until further direction has been given. | * Wear nametags identifying them as associates. * Limit movement to **only** mission essential movement. |
| **Controlled Lockdown** | * Notify the Operations Center and Security to activate a Code Silver. * Determine if traffic access needs to be controlled. * Appoint other personnel (i.e. EVS, facilities, technicians, etc.) to assist security in controlling access/egress at key entrance/exit points. * Notify the applicable departments and inform them of the designated entry/exit location. This can be accomplished by notifying the Operations Center or any other method deemed appropriate (i.e. runners, telephone, etc.) * Appoint a PSF associate to oversee the area designated as the “holding” area for outpatients and visitors. NOTE: Each person in this area will receive a nametag with the following information: clinic they were visiting and date. | * Announce overhead “Code Silver, Controlled Lockdown” and the applicable location (if necessary). Example: “Code Silver, Controlled Lockdown, Penrose Hospital” if the “Code Silver” is only for Penrose Hospital. * Announce “Code Silver, Controlled Lockdown, All Clear” when given the direction by the Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor. | * Limit traffic access by using chains and/or barricades to limit vehicular access, if directed. * Provide a recommendation to the designated PSF leadership on which entrances/exits should be controlled. * Scan all patient(s) and visitor(s) belongings by utilizing the handheld metal detector and will require identification from anyone entering the designated entry point. * Activation of the handheld metal detector device will require the patient/visitor to empty the contents of the bag, pockets, package, etc. onto a table for further examination. * Direct other designated individual or post Code Silver sign at the main entrance. * On duty officers are responsible for securing all lockable exits and entrances in a systematic manner | * Provide nametags to guests who are visiting in-patients. * Request visitors remain in the room with the patient until further direction has been given. * Other visitors and those patients being seen in an outpatient clinic (i.e. blood bank, etc.) will be given directions on where to congregate until further direction has been given. | * Wear nametags identifying them as associates. NOTE: Only persons with proper identification shall be admitted to the hospital during an emergency. * Limit movement to **only** mission essential movement. |
| **Emergency Department Lockdown** | * Notify the Operations Center and Security to activate a Code Silver. * Notify the appropriate leadership (i.e. CNO, CMO, COO, etc.), Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor regarding Code Silver. NOTE: Any of these individuals can declare a “Code Silver” for the Emergency Department. * Appoint other personnel (i.e. EVS, facilities, technicians, etc.) to assist security in controlling access/egress at key entrance/exit points. * Leadership will designate an alternate location for all patients/visitors to be directed to if he/she feels the situation is so unsafe that the ED waiting room needs to be secured. | * Announce overhead “Code Silver, Emergency Department” and the applicable location (if necessary). Example: “Code Silver, Emergency Department, Penrose Hospital” if the “Code Silver” is only for Penrose Hospital. * Announce “Code Silver, Emergency Department, All Clear” when given the direction by the Incident Commander, Senior Administrator on Location, Administrator on Call, or Nursing Supervisor. | * Scan all patient(s) and visitor(s) belongings by utilizing the handheld metal detector and will require identification from anyone entering the Emergency Room waiting area. * Activation of the handheld metal detector device will require the patient/visitor to empty the contents of the bag, pockets, package, etc. onto a table for further examination. * On duty officers will secure all entrance/exit locations leading to the Emergency Department * Officers and other appointed designees will remove all visitors from the ED treatment areas and will prevent any visitors from going into the treatment area unless otherwise directed. * Officers / designated individuals will secure the waiting room entrance and will direct all patients/visitors in the waiting room area to the designated location, if leadership determines this is necessary. |  | * Wear nametags identifying them as associates. Only associates with proper identification will be allowed to enter the hospital during an emergency. * Limit movement to **only** mission essential movement. NOTE: This does include associates leaving the department. The only time an associate should leave this department during a “Code Silver” is for mission essential movement. |