PLAN #: CH:DIS:07



Children's National

Bomb / Threat / Suspicious Item

CODE WHITE

EOP Annex

September 24, 2012

Children's National Code White - Bomb / Threat / Suspicious Item Plan

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Children's National - Code White

I. Purpose

The purpose of this plan is to maintain the safety of the environment and to minimize the disruptive effects of a threat through rapid and effective response to a threatening call, threatening note or the finding of a suspicious item or bomb device.

II. Scope

This document is intended to provide a notification, activation, response and recovery plan for Children's National (*including all off-site facilities*) when a threat to the facilities or its occupants is perceived.

III. Authority

- A. The <u>CEO or Administrator-On-Call (AOC) authorizes activation</u> of this plan and instructs Communications to notify other key personnel as deemed necessary (off-sites see "c" below). The <u>CEO or AOC authorizes the "All</u> <u>Clear"</u> once notified by Security of termination of the threat.
- B. The Security Services on-site highest ranking officer is in charge of all activities associated with a bomb search, coordinating activities of all Children's National personnel available as deemed necessary. If a device is located Security will photograph the item as evidence if they can do so safely. Security will call 911 to request police bomb squad assistance. The police will determine when the "All Clear" is to be given to security, Security will then notify the CEO or AOC.
- C. For Children's National facilities located off-campus, the site manager or designee present at that location will determine the need to activate this plan, call 911 for police assistance and call the hospital operator to have them notify hospital Security and the CEO/AOC. Once police are called, they will determine when the "All Clear" should be given.

IV. Types of Threats

A. THREAT CALL - Remain calm if you receive the call. Alert another staff member of the threatening caller if possible, expediting notification to the operator at extension 2222 (off campus notify manager/designee, security, AOC and call 911). Attempt to collect information from the caller as indicated on the Bomb / Other Threat Checklist located at the end of this plan. Keep the caller on the line as long as possible. Ask him/her to repeat the message and document every word. All information should be recorded on the checklist and will be collected by Security and the police.

- B. WRITTEN THREAT When a written threat is received, avoid handling the document once you identify it as a threat letter. Leave the letter on the desk or counter and back away. Immediately wash your hands and notify those around you to clear the area. Record the names of those in the immediate area. Save all materials, including any envelope or container. Every effort must be made to preserve the physical evidence for the police, and to protect personnel from potential contaminants on the letter.
- C. SUSPICIOUS ITEM (including powder) or BOMB found <u>Do not touch the</u> <u>item</u>. <u>Do not use cell phones, radios or pagers</u>. Clear the room of personnel.

V. Receipt of a Threatening Call, Note or Finding a Suspicious Item

Remain calm. Proceed as follows:

<u>THREAT CALL</u>: Gather as much information from the caller as possible, see checklist. <u>NOTES, LETTERS</u>: Preserve physical evidence from the letter, note and/or packaging. Avoid further contact with the item, wash your hands, clear the area.

<u>SUSPICIOUS ITEM / BOMB</u>: DO NOT TOUCH suspicious item - doing so can set it off. **Report** any of the above **immediately to** Communications **STAT extension 2222 and clear the room**. (Off campus notify manager/designee, AOC and security at 202-476-2065 and call 911).

VI. Initiation of Code White

Main Hospital Campus Location:

- A. Communications, upon notification of receipt of a threatening call, note, suspicious item/powder or bomb found will immediately notify the Chief Executive Officer (CEO) during normal business hours, or the Administrator-On-Call (AOC) or Administrative Manager (AD) after normal hours, including all information obtained (either the AOC or AD, whomever can be reached first).
- B. The CEO or AOC/AD will authorize activation of this CODE WHITE Plan and order Communications to notify Security and other key personnel as deemed necessary. When the location of the threat within the building is unknown it is recommended that all personnel be informed via the coded overhead page so that all personnel can assist with rapid searching. The decision to active a silent Code White as opposed to a house-wide Code White lies with the administrative person in charge (CEO/AOC/AD).
- C. For a threat of a bomb or other device, Communications will activate the search plan as follows (do not use pagers, cell phones or radios):
 - 1. Call Security (2065), Engineering (6040) and Safety (3353).
 - 2. Overhead page house personnel by announcing three times: "Attention: Code White" if house-wide searching is authorized.

Notify by phone those areas listed in Communications as not having overhead paging service.

3. Call Public Relations on-call designee Legal (4050) Patient Care Services (5012)

Non-hospital campus locations:

- A. Site Manager/designee authorizes activation of this CODE WHITE Plan and notifies appropriate site personnel, hospital Security (202-476-2065), AOC (via hospital operator at 202-476-2222) and the police via 911.
- B. For threat of a bomb or other device, Site Manager will activate the search plan by notification of all on-site personnel either with overhead paging, hard-wired phones or by verbal communication (<u>do not</u> use pagers, cell phones or radios). Refer to Code Black Annex (evacuation plan) as appropriate to the situation.

VII. Search Assignments - Personnel Responsibilities

Using area occupants to search their own areas is the best rapid search method. Department personnel are most familiar with what does or does not belong in a particular area. **DO NOT TOUCH A SUSPICIOUS ITEM IF ONE IS FOUND.**

Security coordinates search activities (*non campus sites: site manager, or police if present, will coordinate*), utilizing department personnel as needed to rapidly search the facility. Security Services (hospital campus) will perform a search of the exterior perimeter of the building and assign appropriate personnel to search the garage levels.

Areas accessible to the public should be searched first within each department. If nothing is found in public/open access areas, continue with room by room searches as deemed appropriate to the threat level per administration and/or the police. Use common sense and logic when deciding which areas to search first.

Conduct searches of areas (two-person teams whenever staffing levels permit) according to the following technique:

- 1. When entering the room to be searched, first move to various locations in the room, stand quietly with eyes closed and listen for a clockwork sounding device. If a suspicious device is located, do not touch it. Immediately report it to Security at ext 2065 (off campus report to site manager/designee).
- 2. If no suspicious ticking sound is detected, proceed to search the room beginning with the bottom third of the room (from the floor to hip height). Team members start at one side of the room and work outward scanning from the wall downward towards items resting on the floor around the wall area of the room. This search should include closets and cupboards or other items attached to the wall. Look for items that appear 'out of place' or do not belong in your normal environment.

- 3. Once the "wall search" is completed, move towards the center of the room checking all items up to hip height.
- 4. Repeat steps 2 and 3 above but search the room from hip to chin height. If no suspicious items are located, continue the process repeating steps 2 and 3 from chin to ceiling height until the entire room area has been searched.
- 5. Once the room has been searched, place a blank sticky note on the door at eye level to indicate the room has been checked. Move on to the next room.
- 6. Report in to your department on-site supervisor once all areas have been searched.
- 7. If you find a suspicious object, do not touch it. Evacuate the immediate area and call Security at 2065 (*off campus call 911*) to report the exact location and description of the object. Do not attempt to cover the object or approach it in any way. Security and/or the police will provide instructions on further evacuation should that be necessary. The police, fire hazmat, CEO/AOC/ AD or Executive Director of Safety and Emergency Management may ask facilities to isolate the air handling system for the affected area.

VIII. Evacuation and/or Bomb/Suspicious Item Removal

Follow all instructions given by the police bomb squad with regard to evacuation needs. If evacuation is necessary on the hospital campus, Administration will set up the Hospital Command Center (HCC) if it is not already activated. Follow all Administrative HCC instructions. Departments should consult the CODE BLACK (Evacuation Plan) for procedures for partial or total evacuation. Patient care areas must remain calm and reassure patients during evacuation procedures to guard against panic and confusion. Calmly proceed down the nearest stairwells as described in the evacuation plans. Once an area has been evacuated, personnel must not re-enter. Take any necessary patient care items such as medications, charts, etc., with you when you evacuate. Take patient lists and staffing rosters to ensure that you can account for all those present at the time of evacuation. Hospital Administration will announce safe relocation areas for evacuees via the overhead speaker or by verbal/written orders sent with runners as needed.

Removal of a bomb or suspicious item shall only be handled by trained police bomb squad personnel. Children's National personnel must stay clear of the area unless directed otherwise by the police.

IX. Termination of Code White (All Clear)

The all clear status (All Clear) is determined by the Police (if called) or Security if the police are not called. Security will notify the CEO/AOC of the status change. The CEO/AOC upon receiving this information is authorized to terminate the Code White and notifies Communications, who will inform those who were previously notified of activation of the plan. For an announced Code White the operator will:

- Emergency page 3 times overhead "Attention: All Clear for Code White."
- Notify by phone those hospital locations listed in Communications as not having overhead paging service.

Off campus site manager/designee will inform their staff when police give the All Clear.

X. Interaction with Media and Event Management

A. Media Interaction

Public Relations will appoint one individual as spokesperson and provide all necessary speaking notes, news releases and support as necessary. Personnel must not discuss the situation with outsiders or the media, and must direct all such inquiries to Public Relations. The purpose of this provision is to provide the media with accurate information and to see that additional bomb threat calls are not precipitated by inaccurate or irresponsible statements.

- B. Event Management Assessment of Response Activity A critique of all activities occurring during the bomb threat will be held by Security and will take place as soon as possible after the All Clear is announced. Administrative staff and key personnel involved in the action plan activation should participate. A copy of the critique will be provided to the Executive Director of Safety & Emergency Management for review by the Safety & Emergency Management Committee.
- C. Event Management Stress and Crisis Counseling Family Services will provide crisis intervention and supportive counseling for affected patients and family. Children's National EAP resources and crisis counseling will provide crisis intervention and supportive counseling for personnel as appropriate.

XI. Application of Mass Casualty or Fire Plan -Response and Recovery

In the event a bomb or other device activates and produces casualties sufficient to overwhelm the response capabilities of the Emergency Department, the full Base EOP and Code Orange (mass casualty) plan will be put into effect and the appropriate announcements made.

Should a bomb or other device/release of an agent cause structural damage to any Children's National facility, follow the established protocol for assessment/initiation of the Code Orange plan. *Clinics/ROCs/non-main campus locations consult your manager or designee regarding building evacuation needs*.

In the event of a fire, follow the Fire Plan (Code Red Annex).

XII. Prevention and Mitigation Strategies

A. Prevention Strategies

Although we are unable to prevent threats from occurring, we are able to preplan for receipt of threatening calls, notes and devices to prevent confusion and panic. Personnel are trained during New Employee Orientation to report suspicious activities and objects. Personnel are also trained on the Code White Plan and how to handle a threatening caller. Personnel working in sensitive areas or whose location requires department/site specific instructions receive additional department-specific training as appropriate.

B. Mitigation Strategies

Children's National Medical Center was built with steel frame construction and followed architectural design specifications required at the time of construction. Security services conducts routine patrols of the campus facility and perimeter to identify suspicious activity and to act as a deterrent to would-be assailants. Physical plant security measures include outdoor lighting, locks on windows and doors, including access control where appropriate, and the use of closed-circuit television monitors in key areas. Good housekeeping practices are encouraged with staff, keeping trash and dumpster areas free of debris where a potential bomb could easily be concealed. Boxes set out for trash pickup should be broken down. Education of staff and drills on the Code White Plan help to mitigate the level of panic and confusion caused by threats upon personnel, training staff to respond quickly in similar situations. Facilities shutdown of an AHU may help prevent further spread of a powdered substance or biological agent in the threat/release area.

XIII. Evaluation / Appraisal of the Plan

The Code White Plan will be reviewed and evaluated for effectiveness at least every three years by the Executive Director of Safety & Emergency Management and the Safety & Emergency Management Committee. In addition, following any activation of the Code White Plan (including drills) the plan will be reviewed and its effectiveness evaluated during critique of the event to ensure that all possible actions are being taken to provide for the safety of our patients, personnel and visitors.

Approved by: <u>Safety & Emergency Management Committee</u>

Leadership Council

Kurt Newman, MD President & CEO

Review or Revision Date:

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Revised:	09/24/12

Cross Reference:

Disaster Planning Policy; Base EOP, Code Red Plan; Code Black Plan, Code Orange Plan.

The following appendices are attached as references for hospital personnel:

- XIV. Appendix A: Threatening Phone Call Checklist
- XV. Appendix B:CDC Guide Characteristics of Suspicious Packages
- XVI. Appendix C: Suspicious Package Poster US Postal Service
- XVII. Appendix D: Bomb/Threat/Suspicious Item/Powder Response Flow Chart

Appendix A: Threatening Phone Call Checklist

BOMB THREAT CHECKLIST

Try to keep the caller on the phone as long as possible. Motion for a co-worker to dial 2222 to report the call.

Exact time of call: _____Date: _____ Caller ID number (if displayed): Exact words of caller: QUESTIONS TO ASK: When is bomb going to explode? Where is the bomb? What does it look like? What kind of bomb is it? What will cause it to explode? Did you place the bomb? Why? Where are you calling from? What is your address? _____ What is your name? CALLER'S VOICE (circle)
 Male
 Female
 Race______
 Young
 Old
 Middle Aged

 Calm
 Nasal
 Angry
 Broken
 Stressed
 Excited
 Disguised

 Stutter
 Slow
 Sincere
 Lisp
 Normal
 Squeaky
 Accent_____

 Slurred
 Giggling
 Rapid
 Deep
 Crying
 Loud
 Accent_____
If voice is familiar, whom did it sound like? Background noises?_____ Person receiving call: Telephone number call received at:

REPORT CALL IMMEDIATELY TO x2222 (Hospital), Off-site locations notify site manager, call 911. Refer to the Code White (Bomb Threat Plan) in the online policies section.

Source: Safety & Emergency Management Office 08/03

NOTE: Desk pad versions of this form are available through the print shop.

Appendix B:CDC Guide - Characteristics of Suspicious Packages

Characteristics of Suspicious Packages or Letters - Mail Center Security Guide

Printer Friendly | Add to MyGSA

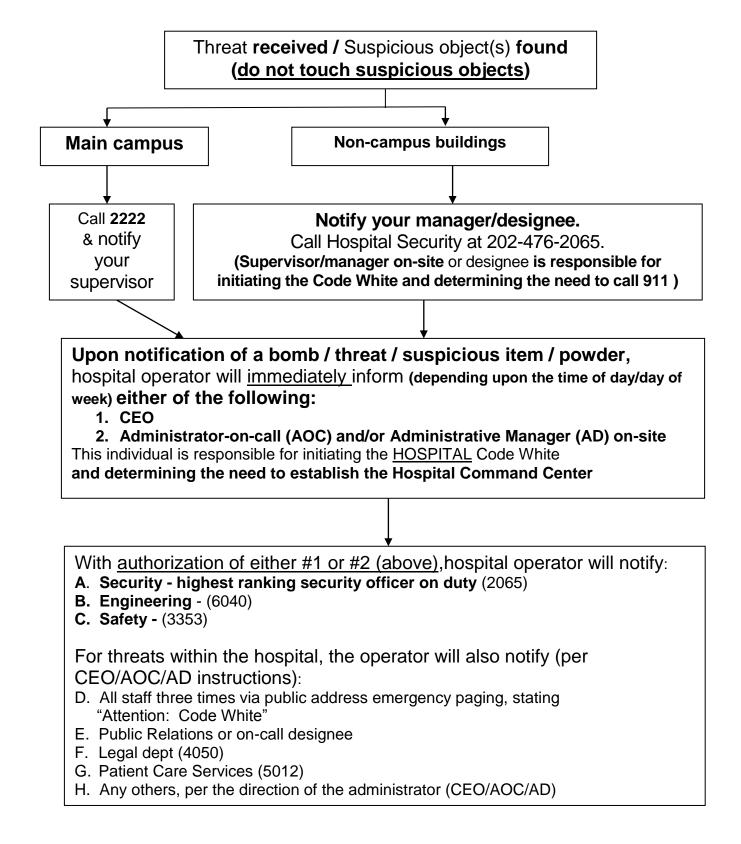
Characteristics of a suspicious package or letter can vary depending upon the type of mail your operation regularly processes.

Characteristics of suspicious packages or letters include:

- Excessive postage, no postage, or non-canceled postage
- No return address or obvious fictitious return address
- Packages that are unexpected or from someone unfamiliar to you
- Improper spelling of addressee names, titles, or locations
- Packages that are addressed to someone no longer with your organization or are otherwise outdated
- Unexpected envelopes from foreign countries
- Suspicious or threatening messages written on packages
- Postmark showing different location than return address
- Distorted handwriting or cut and paste lettering
- Unprofessionally wrapped packages or excessive use of tape, strings, etc.
- Packages marked as "Fragile Handle with Care "Rush Do Not Delay", "Personal" or "Confidential"
- Rigid, uneven, irregular, or lopsided packages
- Packages that are discolored, oily, or have an unusual odor or ticking sound
- Packages that have any powdery substance on the outside
- Packages with soft spots, bulges, or excessive weight
- Protruding wires or aluminum foil
- Visual distractions

Appendix C: Suspicious Package Poster - US Postal Service





Appendix D: Bomb/Threat/Suspicious Item/Powder Response Flow Chart