



Administrative
Code: AV Workplace Health and Safety

## AV2530 – RESTRICTED ACCESS

### 1.0 PURPOSE

Emergency situations may require that an Interior Health (IH) facility immediately or progressively restrict access to the facility in order to mitigate harm to patients, Staff, and visitors and to protect property. Such situations may result from events such as a hostage incident, active deadly threat, infant abduction, external threat from the community, or a man-made or natural disaster.

### 2.0 DEFINITIONS

TERM	DEFINITION
<b>Active Deadly Threat</b>	An individual or persons actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms(s) and there is no pattern or method to their selection of victims. However, there are instances where specific individuals are targeted
<b>Facility</b>	Any IH owned or leased: acute care facility, clinic, health centre, office, and long term care facility.
<b>Hostage Situation</b>	Defined as a person being held by force by one or more individuals in a conflict, until specific terms are met
<b>Restricted Access</b>	A condition that may be initiated as a precautionary measure to limit public access to a department / facility. This may be initiated due to potential risks to Staff, patients and/or visitors.
<b>Staff</b>	All IH employees (contract and non-contract), physicians, volunteers, students, and contractors.

### 3.0 POLICY

- The goal is to restrict access to the department(s) or Facility and allow Staff to control and screen person(s) wanting access during times where there may be an enhanced risk.
- The department or Facility will act in collaboration with the RCMP and other outside agencies such as BC Ambulance and local Fire Departments in initiating Restricted Access, as required due to the nature of the concern.

### 4.0 PROCEDURES

- a. Where applicable, refer to the site specific emergency response manual for each individual Facility for information regarding roles and responsibilities of Staff members at specific sites, and the proper steps to be taken in the event of a Restricted Access.
- b. Restricting movement of individuals into, throughout, and out of the Facility during an enhanced risk can be critical to the safety of patients and Staff, and to protecting life-saving supplies, equipment and infrastructure.
- c. A review of available systems should be undertaken whenever a Restricted Access situation is developed or reviewed. The existing technological, structural or physical systems identified by the review will dictate specific capabilities available within the current framework of the Restricted Access process for each Facility.

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- d. Restricted Access protocols should consider existing physical security measures (electronic access control, traffic barriers, etc.), on-duty Staff members (security and IH Staff) and the availability of supplemental Staff from external resources.
- e. Restricted Access protocols should address the following:
  - 1) How to limit access for the entire Facility. This may be accomplished in progressive stages and may involve the Facility incident command structure
  - 2) The persons authorized to activate and deactivate Restricted Access processes
  - 3) A situational risk assessment and implementation of measures such as:
    - a) Controlling access to security sensitive areas and high risk departments
    - b) The process for identifying IH Staff and others (fire, law enforcement, public health) that require access
    - c) Communicating with on-duty and supplemental personnel
    - d) Managing internal and external communications
    - e) Establishing and maintaining perimeters and related visitor protocols
    - f) Obtaining additional security and or law enforcement staff
    - g) Establishing secure passage routes and transportation for IH Staff
    - h) Managing the internal environment during access restrictions
    - i) Reversing the restricted access and opening areas
    - j) Testing and evaluating controlled access plans during emergency exercises with other IH sites and community agencies.

**Examples of when a Restricted Access may be required include but are not limited to:**

- A victim of violent crime within the community attends the department and there is a perceived concern with credible information indicating the subject may attend the site to do further harm.
- Violent spousal / partner assault where there is concern the subject may attend the site.
- A significant hazardous materials or infectious agent incident where continued exposure to the department is a concern.
- Any other significant safety concern requiring controlled access to the department or facility upon the direction of IH Protection Services, the department manager, Police or designates.

**Restricted Access General Principles**

- Restricted Access can be initiated in response to a perceived threat, in consultation with security (where available) or departmental charge (Charge Nurse, PCC, etc.)
- Security (where available) or a responsible clinical Staff member will be tasked with ongoing communication with the RCMP and/or the Manager On-Call, with the goal of rescinding restricted access and returning to normal operations as soon as possible.
- Generally, Restricted Access will be maintained until a decision is made in consultation with RCMP, Security (where available) and/or the Manager On-Call that the Restricted Access may be lifted.

**5.0 REFERENCES**

- IAHS 04.03.03 Facility Restricted Access Guidelines

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