

## Treat All Bomb Threats as Credible

Although history tells us that most bomb threats in the United States are hoaxes, often the work of malicious pranksters, hospital employees must take all threats seriously.

A bomb threat of any sort—no matter how ridiculous or unconvincing—is a crime. Most bomb threats are made by telephone and fall into two categories:

- Threats made when no bomb has actually been planted. These hoaxes may not be merely malicious but designed to disrupt, to test reactions, or to divert attention from other issues.
- Threats that warn of a genuine device. The warning may be an attempt to avoid casualties, but it also enables the perpetrator to blame others if there are casualties.

In hospitals, where evacuation is difficult, it is especially important for staff to immediately report any threat they receive or overhear. Hospitals need as much time as they can get to investigate the threat and take steps to protect life and health.

In 2002, the Medical Center received two bomb threats in six months. Both were treated as credible threats and involved extensive response from law enforcement and university personnel. In 2002, Kentucky State Police had the only bomb squad in the state. Since that time, both UK and metro police have formed bomb squads that include explosive detection dogs. In addition, the Hospital has conducted both table-top and full-scale exercises to practice bomb threat response.

It's important to remember, however, that response begins with the employee who receives the bomb threat. That's why every hospital employee must be familiar with the bomb threat response protocol outlined on the following page.



## JCAHO to devote more attention to fire safety

In the last issue, *Briefings on Hospital Safety* reported that JCAHO surveyors will spend more time inspecting the facility and reviewing life safety issues than in the past.

The renewed emphasis comes on the heels of a report published by the Government Accountability Office (GAO) that cited numerous examples of Life Safety Code (LSC) deficiencies missed by JCAHO during hospital surveys.

Although JCAHO has voiced its disagreement with the GAO's findings, it has vowed to take steps to ensure a comprehensive inspection of the built environment and hospital compliance with LSC.

## Hospital Corridors Must Be Clear

It's a little known fact: UK Hospital does have a policy that requires that corridors remain clear at all times. The Kentucky Building Code and the Life Safety Code (LSC) require that hospitals maintain a minimum unobstructed width of 8 feet in all exit corridors. To this end, corridors cannot be used as temporary or permanent storage areas.

In fact, corridors cannot be used for any purpose other than travel, except with special approval. The reason is simple: If a corridor is obstructed, the hospital must implement interim life safety measures (ILSM). To obtain approval for special uses, the service director must submit a letter to the Hospital Safety Officer outlining the proposed use and duration.

Medical gas cylinders, flammable or combustible materials, chemicals, radioactive materials, or items that create a general safety hazard to the public cannot be stored in hospital corridors under any circumstances.

# Bomb Threat Response Guide

## If you receive any type of bomb threat:

- Call 911 immediately. This will connect you with University of Kentucky Police. *If you receive a telephone bomb threat, place the 911 call from another telephone.*
- Provide all requested information.
- Following directions below for specific type of threat, report immediately to Medical Center Security, H105.

## Additional Instructions Based on Type of Threat:

### Written Bomb Threat

Save all related materials (letter, envelope, packaging materials). Do not handle them.

### Email Bomb Threat

- Print the threatening email.
- Save the email message.

### Suspicious Package

- Do not touch package.
- Without causing undue alarm, clear area.
- Secure area by closing doors and posting a “Do Not Enter” sign. Lock area, if possible.

Note: If package is in a corridor, call Security, 3-6156, and request assistance in securing area.

### Telephone Call

- Remain calm.
- If possible, signal a co-worker or other to call 911 while the caller is still on the telephone.
- Keep the caller on the line as long as possible.
- Ask the caller to repeat the message.
- Record every word spoken, if possible.
- At least, document the following.
  - Location of bomb and time set to explode.
  - Gender and estimated age and race or nationality of caller.
  - Any distinguished voice characteristics (accent, speech impediments, voice quality).
  - Background noises (car motors, music, voices, phone line noises).
- If the caller does not give specific information, ask for it.
- Ask caller his relationship to them Hospital, Medical Center, or University. (i.e., Do you work here? Have you been a patient here?)

