

Aspects of combating terrorist activities in healthcare

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The keys to maintaining a terrorism-free workplace lies in the security administrator's mastering of knowing how to capture terrorist threats before they wreak havoc on the institution and its surroundings, according to the authors, who provide in this article a wealth of sources to the administrator for obtaining such mastery.

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The anxious atmosphere following that terrible September 11th morning when terrorism hit our shores, bracketed with escalating reports of workplace violence, employee discontent, and a stalled national economy, have compelled many health care security executives to reexamine their hospital's terrorism prevention strategy. In today's perilously hazardous world, reducing terrorism must always be a health care security executive's top priority. Health care institutions' have many competing protection management challenges, including but not limited to: preventing crime and related violence, safeguarding patients and visitors, catching and halting drug and alcohol abusers, and ensuring that healing is the central and only activity allowed to run rampant in their institutions. In a 2013 article: "*Terrorist Attacks Against Hospitals Case Studies*," by Prof. Boaz Ganor & Dr. Miri Halperin

Wemli (<http://www.ict.org.il/article/77>) the authors hypothesized that hospitals make excellent terrorist targets since an attack on a hospital is more anxiety-provoking than an attack on almost any other site, compounded with the stark reality that hospitals' are laboratories and repositories of chemical and biological agents, medications and poisons. Imagine if these agents end up in irresponsible or evil hands? The result could be catastrophic!

Looking even deeper into this catastrophic abyss, a 2013 article: "*Terrorism: Are U.S. Hospitals in the Crosshairs*" by Matthew Ernst (<http://conservativeread.com>) -while discussing whether hospitals are prepared for terrorists attacks, the author points to a recent study "*Challenges for UK Hospitals*" (<http://dx.doi.org>) suggesting that hospitals in the U.K. are vulnerable to terrorist attacks. Moreover, the article goes on to intimate that it is realistic to assume that U.S. hospitals have similar vulnerabilities as well. The author offers a fiction based scenario involving the Boston Marathon bombing wherein, past the explosion, all of the victims are rushed to a local hospital for

treatment and a secondary bomb explodes in the emergency room! The United States Department of Health and Human Services recently forwarded a letter this past January 2017 to officials in the public health sector warning of potential terrorist attacks, emphasizing no specific credible threats but advising caution. As terrorist tactics change, so must health care security's focus.

ABC'S OF TERRORISM DETECTION AND PREVENTION

The keys to maintaining a terrorism-free workplace lies in the security administrator's mastering of knowing how to capture terrorist threats before they wreak havoc on the institution and its surroundings.

The New Breed of Terrorist

A decade plus ago, security executives were busy preparing for mass casualty incidents caused by chemical, biological or radiological agents from outsiders infiltrating the U.S. from abroad. Today, incidents are oftentimes perpetrated by local converted combatants carrying guns and knives and vehicles--whose goal is to kill civilians in crowded

gathering habitats such as sports stadiums, theatres, restaurants, marathon sites, etc. Oftentimes, these incidents are not large-scale mass casualty incidents, but smaller community-based episodes designed to create a higher-level of fear and lower casualty number results. Fortunately to date, hospitals have not been targeted. Notwithstanding, first-responders have been targeted in the past.

Aspects of Combating Terrorism in Healthcare

As a healthcare security practitioner, it is important to stay abreast of current information and resources to help identify potential terrorists, terrorist activities and response tactics. As a matter of course, helpful information on fighting terroristic threats usually originates from federal legislation. The following is a list of resources and/or publications which are only a click away:

- The Homeland Security Act of 2002, Homeland Security Presidential Directive 5, the National Security Strategy, and the National Response Plan. This legislation provides the legal authority and practical issues for the federal

government's homeland security program. This treasure-trove of information can be found via visiting their website at <http://www.dhs.gov>. As an aside, their website offers up-to-date information and resources on terrorist activities as well as information pertaining specifically to healthcare

- On June 30, 2005, The Department of Defense issued guidelines "Strategy for Homeland Defense and Civil Support," which gives the Department of Defense the authority to secure and defend critical infrastructures and ensure their continued operation. This legislation is intended to support civil authorities to quickly recover from mass casualty attacks; and to help improve national and international security and safety management. It's important to note that hospital and healthcare critical infrastructure provisions are included in the legislation

- Federal Emergency Management Agency (FEMA) has allowed states to establish a law enforcement position designed to help coordinate public safety efforts in the prevention, prepara-

tion, and investigation for a variety of terrorist attacks. This legislation helps: Identify potential targets, offers emergency response strategies, furnishes tips on devising coordination strategies for public health organizations, and confers guidance on purchasing emergency equipment for police and fire departments. Additionally, FEMA has issued grants for security improvements within the healthcare sector

- The Center of Disease Control (CDC) has a strategic plan to address a terrorist act associated with biological or chemical agents. The plan recommends: strategies to reduce U.S. vulnerability to biological and chemical terrorism, preparedness planning, detection, surveillance, laboratory analysis, emergency response, communication systems strategies, training and research strategies to help deepen and strengthen relationships between medical and public health professionals, offers guidance in helping to build partnerships with emergency management, military, and law enforcement professionals. The CDC can be contacted at <https://www.cdc.gov>

- *"If You See Something, Say Something™"* and *"Stop the Bleed."* These programs are designed to help people protect themselves and assist victims during a terrorist attack. "Stop the Bleed", is a recent addition to the preventive programming menu. The program is designed to help train people to assist with victims of mass shootings, stabbings or other profuse bleeding incidents. "Stop the Bleed" is a nationwide campaign which helps to empower individuals to act quickly and save lives. Bystanders are trained to take simple steps to keep the injured alive until appropriate medical care arrives. This includes hospital personnel, whom may have been involved in a shooting or stabbing incident within the hospital or surrounding area. Having the ability to stop bleeding in a trauma situation helps to save lives

- The Nationwide Suspicious Activity Reporting (SAR) Initiative is a joint collaborative effort by the U.S. Department of Homeland Security; Federal Bureau of Investigation, state, and local law enforcement. This initiative gives law enforcement a tool to help

prevent terrorism by establishing a nationwide capacity for gathering, documenting, processing, analyzing, and sharing information on potential terrorism. The overall intent of this initiative is to encourage entities to connect, plan, train, report and become "Security Advocates". Most importantly, this program applies to hospitals as well ensuring that care-giving facilities of all types are better prepared to protect and serve their residential, industrial and institutional constituencies

- The United State Department of Health and Human Services (HHS) Critical Infrastructure Program has a list of resources designed to prepare public health facilities for a terrorist threat. HHS ASPR, the Technical Resources, Assistance Center, and Information Exchange (TRACIE) was created to meet the information and technical assistance needs of healthcare coalitions, healthcare entities, healthcare providers, emergency managers, public health practitioners, and others working in disaster medicine, healthcare system preparedness, and public health emergency preparedness. ASPR-TRACIE topic collections on Ex-

plosives and Mass Shooting and Workplace Violence Resources to promote the "If you see something, say something" campaign training personnel to recognize and reporting suspicious behavior in the healthcare setting. The department of health and Human Services can be contacted at <https://www.hhs.gov>

- Healthcare and Public Health Sector Coordinating Council offers Guidance on Active Shooter Planning and Response in a Healthcare Setting. This document was developed by the Healthcare and Public Health Sector Coordinating Council (HPH SCC) to provide specific guidance to healthcare providers, incorporating the unique aspects of the healthcare setting, such as special considerations for operating rooms, neonatal units, and medical gases and resources for coordinating medical and behavioral health responses after the incident. The Healthcare and Public Health Sector Coordinating Council can be contacted at <https://dhs.gov/healthcare> and public health sector coordinating council

- Incorporating Active Shooter

Incident Planning into Health Care Facility Emergency Operations Plans. This document is produced by HHS-ASPR, Department of Justice (DOJ), and FEMA encourages healthcare facilities to consider how to better prepare for an active shooter incident in their emergency operations plan. The document is geared toward emergency planners, disaster committees, executive leadership, and others. Information sharing, coordination with law enforcement, and psychological first aid information is provided. Further information can be found at https://fbi.gov/filerespository/active_shooter_planning_healthcarefacilities.

RANSOMWARE ATTACKS

A new attack strategy not seen before in the healthcare environment involves attacks to IT infrastructures. Recently the Hollywood Presbyterian Medical Center was the unfortunate victim of a \$3.4 million ransomware data hostage cabal. Relatedly, since 2016, at least six U.S. Hospitals have been hit with similar attacks. The “WannaCry” ransomware virus targeted approximately 300,000 machines in 150 coun-

tries which first turned-up on radar screens when 48 U.K. hospitals were infected by the virus shutting down IT systems and restricting access to medical records, tests, and other related procedures. With respect to the healthcare sector, older computers and outdated software is the main contributor to the spread of the ransomware virus within hospitals.

A 2016 report by Joesph Cotton “*NHS Hospitals are running thousands of computers on unsupported windows XP*” (https://motherboard.vice.com/en_us/article/jpgb3y/nhs-hospitals-are-running...) found that many U.K. hospitals ran outdated software potentially putting patient data and other sensitive information at risk. The article goes on to mention that according to Freedom of Information Act requests, plenty of English hospitals haven’t yet switched to a more up-to-date operating system. It’s most important that Hospitals become more vigilant and begin to realize that healthcare related hardware (MRI machines, ventilators, and some types of microscopes), are actually computers. Similar to laptops, these machines

contain software components that manufactures are responsible for supporting. Oftentimes however, manufactures only offer software support for defined periods--as such older components become vulnerable to attack. Outdated server software and PCs set up to run specific applications need to have regular software updates and system upgrades as required.

A NEW POTENTIAL THREAT

Amid the immigration battle raging in Washington D.C., a new twist is developing in the healthcare sector involving the need to recruit foreign healthcare professionals from abroad. In a July 17, 2017 Blog by the Dallas-Fort Worth Hospital Council: "Recruiting Foreign Healthcare Professionals: Lessons Learned" <https://dfwhc.org/recruiting-foreign>: speaks to an increasing demand for healthcare professionals in the U.S. including: physicians, nurses, therapists, and other professionals--who are NOT U.S. citizens or permanent residents. Close scrutiny should be undertaken when choosing to hire a healthcare professional from abroad and appropriate back-

ground checks should always be conducted.

A Final Word

Collectively, the security-related issues outlined herein, should be a siren call to healthcare security executives that the terrorism protection-management express train is leaving the station, and it's time for all to climb aboard. In today's perilous world, we hope that healthcare institutions are well prepared to treat the multitude in the event of a terrorist attack. Hundreds of articles and countless directives from governmental and non-governmental entities are pouring in from all sectors of the world speaking to disaster management. But the central question is whether healthcare institutions are really prepared should they actually become targets of either a man-made or natural catastrophe? Over the past few years many authors have written dozens and dozens of articles on disaster management and preparedness; including the authors of this article¹. Each and every publication helps to continually shine a bright spotlight on the ultimate prize, safe and secure hospitals.

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