

Expert Presents on Active Shooter Incidents at Campus Safety Conference

Drew Neckar of the Mayo Clinic Health System discussed effective responses to active shooters, in some cases using his own experience.

Drew Neckar was the control center operator at Gunderson Medical Center when a man entered the building with a gun



A security expert presented at the [Campus Safety conference](#) in Chicago on active shooter responses and talked about his own experience with an [active shooter](#) incident.

On July 13 Drew Neckar, the regional director of security for the Mayo Clinic Health System, explained behavioral patterns of active shooters, gave recommendations to his audience and walked through his health facility's active shooter situation.

Neckar used statistics from several studies to demonstrate patterns of active shooters. Patterns included that shooters almost always act alone, that 97 percent of shooters are male with a median age of 35 and that the most common type of active shooter is a disgruntled former employee.

Neckar's recommendations were split into three areas: early identification, weapons detection and reactions. Neckar suggested establishing threat assessment teams and improving information sharing could help with early identification. Metal detectors were mentioned as a possible method of detecting weapons, although he warned that they can be expensive and impractical. The main thing Neckar stressed when it comes to active shooter reactions was staff training. Neckar said appropriate training can limit the loss of life.

Neckar was in a position to give advice because seven years ago he had an experience dealing with an active shooter at Gunderson Medical Center in Wisconsin. As the control center operator Neckar oversaw the successful prevention of a shooting when a man was arrested and found to have a gun on the hospital's fifth floor.

The man entered the building through an unlocked employee door at 7:35 a.m. and when an employee noticed he was acting suspicious she notified Neckar, who called 911. Neckar was able to track the suspect's movements on the hospital's surveillance cameras

and tell the hospital security officers the suspect had moved to the fifth floor. There the officers confronted the suspect and asked what was in his coat. When he reached into his pocket the officers took him to the ground and Neckar listened as a nearby nurse screamed “he’s got a gun” and then an officer report “we’ve got him in custody.”

“That’s a really scary feeling,” Neckar says. “Not knowing exactly what’s happening but trying to get whatever information you can.”

Within 15 minutes Neckar was getting calls from local media, and within 20 minutes national news outlets were contacting him.

Neckar, who is responsible for the security of five Wisconsin hospitals, said he made numerous changes after the incident. All employee doors are kept locked from now on, card access has been installed and there’s an employee at every public entrance.

Despite avoiding a potential shooting, Neckar said a lot of things went wrong that day and encouraged everyone in the audience to learn from his department’s mistakes.

Access control was something the security team failed at, and when police finally responded to the incident their VHF radios stopped working within the hospital walls. Staff notification was also a problem as most hospital employees weren’t immediately aware of the details of the incident.

But overall Neckar says being alert is the best way to stay prepared for an active shooting.

“It’s just about trying to have an awareness of what’s going on around your facility,” Neckar says. “And trying to be ready before anything happens.”

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