

Guns in hospitals: recipe for disaster?



As part of their increased security measures, many hospitals across the United States have armed guards posted within their premises. Is this good or bad? The debate on whether armed guards belong in hospitals has been rekindled following a recent shooting incident at a St. Louis hospital.

At Barnes-Jewish Hospital, a patient forcing his way out of a treatment room suddenly pulled out two knives. When the man refused to drop the knives, he was shot dead by hospital guards, the St. Louis Post-Dispatch reported.

Officials at Barnes-Jewish declined to comment on security measures, but that hospital is the only BJC Healthcare hospital where guards are armed with guns, according to the news report. Other health systems with hospitals in the St. Louis area have armed guards, such as St. Luke's Hospital in Chesterfield.

Hospitals around the country have tightened security measures — including with armed guards — following violent incidents. In Florida, for example, a number of hospitals added armed guards and instituted bag checks after a 2016 shooting at Parrish Medical Center left a patient and her caregiver dead.

Data show that workplace violence in healthcare is common: 75% of workplace assaults reported between 2011 and 2013 occurred in healthcare settings. Despite being common, incidents of workplace violence are often unreported.

These statistics, however, aren't enough to silence those who are against employing armed guards in hospitals. They continue to oppose the practice, which they say doesn't prevent violence but can instead encourage it. In addition to the risks inherent in having weapons in a healthcare setting, just the uniforms can make patients uncomfortable, critics say.

Dave Dillon, spokesperson for the Missouri Hospital Association, told the St. Louis newspaper that "in a perfect world" security guards with handguns would not be needed, but sometimes protecting patients and staff may require measures that seemingly go against a hospital's "do no harm" mantra.

"These are hard conversations with ourselves," Dillon told the publication. "There's no line in the sand on the appropriate intervention."

Source: [FierceHealthcare](#)

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Published on : Tue, 30 Jan 2018